Eurobodalla Family Day Care Policies Procedures and Guidelines
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INTRODUCTION
All Children and Family Services Staff and Educators are required to be aware of and follow the outlined procedures and practices at all times. This document is reviewed regularly to reflect changing community needs, legislation, theory and practice. If at any time you have suggestions for change - these are most welcome and should be forwarded to the Senior Coordinator who will then raise them in the appropriate forum.

FAMILY DAY CARE
Family Day Care provides quality care for children aged birth to 12 years of age in the homes of Family Day Educators. A Family Day Care Service provides education and care through a network of registered Family Day Educators, who are organised and supported by a professional Co-ordination Unit.

Family Day Care provides a safe, secure and stimulating home environment for children, with education and care being provided for small groups of children in the Educator’s home. Family Day Care provides the opportunity for children to develop a close relationship with an Educator.

Family Day Care operates within the Eurobodalla Local Government Area, which encompasses the areas between South Durras in the north, and Akolele in the south. Eurobodalla Shire Council is responsible for the operation of the Eurobodalla Family Day Care Service.
ACCOUNTABILITY STRUCTURE OF EUROBODALLA FAMILY DAY CARE

All Staff in Eurobodalla Family Day Care are accountable to the following people:

- Senior Co-ordinator Children’s Services– Eurobodalla Shire Council
- Director of Community Development– Eurobodalla Shire Council
- General Manager – Eurobodalla Shire Council

COMMONWEALTH GOVERNMENT
FUNDING AND GOVERNANCE
Child Care Benefit- CENTRELINK
Operational Funding- DEEWR
National Quality Framework- ACECQA
National Regulations
National Standards
Learning Frameworks

STATE GOVERNMENT
LICENCING AND QUALITY RATING
Dept of Education and Communities (DEC)
- Provider and Service approvals
- Compliance
- Assessment and rating for quality

APPROVED SERVICE OPERATOR
Eurobodalla Shire Council
General Manager

COORDINATION UNIT STAFF
Nominated Supervisor
FDC Co-ordinators
Administration Staff

EDUCATORS
Recruits/Supports
Organises care
Develop close partnership

PARENTS & CHILDREN
Administers Childcare

EMPLOYED
FAMILY DAY CARE PHILOSOPHY

RATIONALE:
Eurobodalla Shire Council is committed to supporting the provision of services which address the care, support and education of children in Eurobodalla Shire. Children’s Services provided by Council is supported to continue to effectively meet the needs of children and their Educators in the Eurobodalla Shire.

Children’s Services are committed to providing quality programs that support children’s development and learning in nurturing and positive environments. Family Day Care provides many opportunities for children to develop a sense of belonging, allow a sense of being a child, and positively embrace and encourage children’s sense of becoming confident and active individuals in their world.

Children’s Services practices will be guided by The National Quality Framework through abiding by the National Regulation and Standards and the use of the Educational Frameworks for children 0-12 years.

AIM:
Family Day Care in the Eurobodalla Shire will provide quality home based education and care that is recognised, respected and valued by our professional colleagues and the broader community as a leader in education and care service.

To achieve this Eurobodalla Family Day Care:

- Will develop and maintain respectful relationships with family members and support families in their parenting role through the sharing of ideas and celebration of diversity.

- Will collaborate with local groups and services in the community by participating in network meetings and through the delivery of the Baby Welcoming Bags.

- Co-ordination Unit Staff will support all Educators to enable them to provide quality care in a home environment which is safe, caring and fosters the individual development of each unique child.
• Staff and Educators work as collaborators with children to foster their learning and development through establishing environments that provoke their desire to investigate and explore both their social and physical worlds.

• Play will be encouraged as a way of enhancing children’s’ life skills which include social, emotional, physical and cognitive development.

• Through intentional teaching experiences, issues such as bias, cultural identity, indigenous Australians, health and safety will be explored through sensitive and responsive relationships with children that focus on equity.

• Will evaluate, reflect and gain feedback on programs and practices from Children, Families, Staff, Educators and the Community to provide continuous improvement.

• Will provide positive leadership through respectful and honest relationships where all Staff and Educators can take an active role in mentoring others to achieve the agreed goals for the service.
EUROBODALLA SHIRE COUNCIL’S CHILDREN’S SERVICES POLICY

Policy title: Children's Services

Reason for policy: To play a major role within the community in supporting the provision of services which address the care, support and education of children in the Eurobodalla Shire.

To ensure that Children’s Services provided by Council continue to effectively meet the needs of children and their Educators in the Eurobodalla Shire.

Introduction: Local Government is well positioned to perform a range of important functions in the provision and stewardship of children’s services. Eurobodalla Shire Council has had a strong and influential role in the planning, development, provision and support of children’s and family services over a long period.

Policy Details: Eurobodalla Shire Council endorses the following Policy Framework, which acknowledges that:

- Children’s best interests are the primary consideration in the provision of services;
- Children have the right to care and education for individual development and participation in society;
- High quality children’s services and education is an investment which develops and enhances the social, spiritual and economic wellbeing of the entire community;
- Community participation in decisions about services for families and children is essential for the development of responsive services that meet local needs.

Eurobodalla Shire Council is committed to ensuring the availability of a range of responsive and quality children’s services to the
community by provision of land, buildings and office space, employment of staff, application of government funds, providing financial advice and participating in management of individual services.

**Policy Outcomes:** Eurobodalla Shire Council establishes this policy to:

- Strengthen, support and promote the provision of affordable quality childcare;
- Ensure services are staffed by skilled and suitably qualified workers;
- Ensure continued accessibility of children’s services to all potential users, including children with special needs, low income families, families from diverse cultural backgrounds and Torres Strait Islander and Aboriginal families.
- Ensure continuous quality improvement of Council provided childcare services;
- Identify options open to Council for future development of additional children’s services;
- Continue to extend support to families;
- Acknowledge Eurobodalla Shire Council’s support of children’s services.

**References:**

- Investing in the Early Years - a National Early Childhood Development Strategy, Council of Australian Governments
- The Early years Learning Framework - belonging being and becoming; Department of Education, Employment and Workplace Relations, 2009
- UN Conventions on the Rights of the Child.
EDUCATIONAL PROGRAM AND PRACTICE
PROGRAMMING FOR DEVELOPMENT AND EDUCATION

AIMS:
- To ensure that children’s individual developmental needs are met in a caring, stimulating and supportive environment that extends their interests.
- To ensure that families feel informed and included in this part of their child’s experience in childcare.
- To assist children in the transition to other early childhood programs or to school.
- To provide quality programs for children which meet with The National Quality Framework for Education and Care Services.

STATEMENT:
The approved provider and nominated supervisor of an education and care service are responsible for ensuring that a suitable program based on an approved learning framework is delivered to all children. Parents, children, educators and co-ordination staff will work in partnership to plan for children’s development and learning in a nurturing and supportive environment. Programs and observations will reflect the educators’ philosophy, Family Day Cares’ broad organisational goals and the needs of families.

Critical reflection and careful planning increase the value of children’s time in education and care by ensuring that the educational program and practice responds to children’s interests and scaffolds their learning.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 168 and 323
Education and Care Services National Regulations 2011 (Clause 73,74,75,76)

KEY RESOURCES:
Guide to the Education and Care Services National Law 2010 and the Education and Care Services National Regulations 2011 (ACECQA)
National Quality Standards 2011 (ACECQA) – Quality Area 1
Guide to the National Quality Framework 2011 (ACECQA)
Guide to the National Quality Standard 2011 (ACECQA)
Childcare Service Handbook 2011-2012 (DEEWR)
Belonging, Being & Becoming: The Early Years Learning Framework for Australia (DEEWR 2011)
My Time, Our Place: Framework for School Age Care in Australia (DEEWR 2012)
PROCEDURES:

PROGRAM PLANNING AND DOCUMENTATION

Educators will:

- Offer a balance of indoor and outdoor experiences each day;
- Provide and evaluate a written educational program that contributes to the following outcomes for each child:
  - The child will have a strong sense of identity
  - The child will be connected with and contribute to his or her world
  - The child will have a strong sense of wellbeing
  - The child will be a confident and involved learner
  - The child will be an effective communicator
- Allow children to freely select experiences;
- Ensure the individual children’s interests; strengths & needs are taken into account;
- Ensure the program of activities is flexible and allows opportunity to build on children’s discoveries or spontaneous interest throughout the day;
- Outings are planned to engage children’s learning;
- Maintain a balance of home based activities with outings planned to enhance learning opportunities;
- Maintain up-to-date skills in planning children’s activities and knowledge of children’s development through ongoing training;
- Promote positive interactions with children which treat children with dignity and respect;
- Provide opportunities for school aged children that complement their school experiences as well as their individual interests and home experiences;
- Provide adequate and sufficient equipment to support the program of activities taking into account the age, number and interests of children;
- Ensure children’s planned experiences are child focused and are based on observation of children’s needs, interests and responses to previous experiences;
Seek and include information from parents to assist in the planning of activities for each child;

- Regularly talk to parents about their child’s activities whilst in Family Day Care;
- Document each child’s involvement in the program through regular observations;
- Document the evaluation and assessment of each child’s developmental needs, interests, experiences and participation in the program;
- Document a quarterly assessment of each child’s progress against the outcomes of The Learning Framework. (Being Belonging Becoming or My Time Our Place)

- Ensure the following information is given to a child’s parents when requested:
  - The content and operation of the educational program as it relates to that child.
  - Information about that child’s participation in the program.
  - A copy of assessments or evaluations in relation to that child.

**CDO and Educational Leader will:**
- Ensure Educators are working towards the learning outcomes with each child;
- Assist the Educator with EYLF reflective practice;
- Deliver information, resources and Professional Development which will assist an Educator with Education and Care Practices;
- Ensure all Educators are delivering an Education and Care program that address the child’s needs;
- Ensure the Educator is involving the holistic child in the programming and planning process;
- Ensure the Educator is participating in the programming cycle – Observing, Planning, Programming, Reflection and Forward Planning;
- Be available to discuss a child’s development with Educators and /or families.

**INFORMATION SHARING**

**Families will:**
- On initial contact with the service, families will be requested to provide information relevant to the successful inclusion of their child into the service, (e.g. cultural background, abilities, needs and language);
Ensure confidentiality is observed;

Provide the Educator and/or Co-ordination Unit staff with as much relevant information about the child as possible to support the Educator in meeting the child’s needs.

**Co-ordination Unit Staff and Educators will:**

- Ensure that sharing of information will remain a vital component of each child’s program and will maintain a positive focus;
- Ensure confidentiality is observed; *(see Confidentiality Policy).*
- Obtain written permission from parents to share information relating to their children, family and situation to external organisations or persons, if required;
- Share information relevant to a child and/or family if required for the placement, ongoing support or development of the child;
- Respond to families and children in an unbiased and consistent manner;
- Utilise parent knowledge as well as the resources provided by professional and community organisations to ensure the program is culturally relevant;
- Develop and maintain written programs of activities which meet regulatory and Quality Assurance requirements. These are to be displayed at all times and kept for 12 months.

**TRAINING & RESOURCES**

**Co-ordination Unit Staff will:**

- Provide training opportunities for staff and Educators to ensure developmentally appropriate programs are administered within the service for all children;
- Access support services to resource and support Educators in the provision of developmentally and culturally appropriate programs for children with additional needs;
- Ensure that children and their families are supported in their individual cultural identity, home language and religious beliefs.

**Educators will:**

- Attend training;
- Maintain knowledge of current trends in planning and children’s learning and development.

**TRANSITION TO OTHER EARLY CHILDHOOD PROGRAMS**
Co-ordination Unit Staff will:

Make available to families on request:

- Contact details of other early childhood programs including long day care, pre-school, Outside of School Hours Care, playsessions, early childhood centres, and early intervention services.
- Information regarding choice of quality care (booklets, newsletter information or articles).

Co-ordination Unit Staff and Educators will:

- Support a family’s decision to utilise other early childhood services.

TRANSITION TO SCHOOL

Co-ordination Unit Staff and Educators will:

- Annually provide training and/or information opportunities on school readiness to parents and Educators;
- Promote the importance of school orientation programs;
- Promote to parents the importance of developing resilience in children as a preparation for school and accompanying routines;
- Ensure that the family of a child identified with additional needs is offered support by referral to the local Department of Education Early Intervention School Transition Officer or other relevant support services prior to school entry.

Educators will:

Develop activities and experiences, which prepare children for school entry by:

- Encouraging interactions with peers in games and activities;
- Encouraging the development of language and literacy skills in conversations, by reading books, drawing and writing and other literacy type activities;
- Developing simple routines;
- Encouraging self-help skills (e.g.: dressing, toileting, eating, looking after belongings, hand washing).

Reviewed: January 2012
Next Review: January 2014
PRESCHOOL PROGRAM FOR CHILDREN THE YEAR BEFORE SCHOOL

AIMS:

- To ensure that families are informed about the importance of preschool programs for children prior to starting school.
- To assist children in the transition to other early childhood programs or to school.
- Support families to access preschool programs.

STATEMENT:
A preschool program is a structured, play-based early childhood education program. Eurobodalla Shire Council is committed to the aspiration that children have access to the support, care and education throughout early childhood that equips them for life and learning, delivered in a way that actively engages families and communities, and meets the workforce participation needs of parents.

LEGISLATION AND RESOURCES:

Education and Care Services National Regulations (2011)

COAG – National Partnership on Early Childhood Education

PROCEDURES:

Educators and Co-ordination Unit staff will:

- Provide families with information on school readiness.
- Provide families with contact details on the local preschools and preschool programs available in long day care centres.
- Discuss with families their individual needs around preschool education and access.
- Liaise with other Early Childhood services about vacancies.
LOCAL PRESCHOOLS AND LONG DAY CARE CENTRES

Batemans Bay Pre-School - ph: (02) 4472 4490
Mundarra Preschool - ph: (02) 4474 5299
Mogo Preschool - ph: (02) 4474 5299
Moruya Preschool – ph: (02) 4474 2431
Narooma Preschool – ph: (02) 4476 2494
Little Yuin Aboriginal Preschool - ph: (02)4473 7396
Busy Bodies Pre-School - ph: (02) 4472 8318
The Learning Tree Surfside - ph: (02) 4472 8816
Nippersville Child Care & Pre-School Centre - ph: (02) 4472 5949
Northside Early Learning Centre - ph: (02) 4472 9936
Surf Beach Child Care Centre - ph: (02) 4471 1764
Nature's Nest Community Childcare Centre -ph: (02) 4474 5746
Premier Early Learning Centre – ph: (02) 4474 3173
Broulee Long Day Care Centre - ph: (02) 4471 5133
Tuross Child Care Centre - ph: (02) 4473 9190
Northside Moruya – ph: (02) 4474 4278
Dalmeny Preschool and Long Day Care Centre - ph: (02) 4476 7111
Octopus’ Garden Preschool & Long Day Care Centre – ph: (02) 4476 3700

Reviewed: April 2012

Next Review: April 2014
CHILDREN’S HEALTH
ADMINISTRATION OF MEDICATION POLICY

AIM:
To ensure all medications are administered in a safe and accountable manner according to the National Law and Regulation.

STATEMENT:
Family Day Care acknowledges administering medication should be considered a high risk practice. Authority must be obtained from a family or legal guardian named on the Child enrolment record before Educators administer any medication (prescribed or non-prescribed). Families place a high level of trust and responsibility on Educators when they are administering medication to children, or observing older children self-administer.

This section refers to the general requirements regarding administration of medication by child care workers to children in their care and to the administration of non-invasive medications such as oral and topical (skin) medications.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 Clause 92, 93,94,95,96
Poisons and Therapeutic Goods Act 1996 Act 1966 No 31(NSW)
Public Health Act 2010 No 127 (NSW)
Work Health and Safety Act 2011(NSW)
Work Health and Safety Regulation 2011 NSW)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

Staying Healthy in Child Care - Preventing infectious diseases in child care 5th Edition - 2011
PROCEDURES:

Co-ordination Unit Staff will:

- Provide the families with relevant information about health management policies and practices when starting and regularly after that through newsletters;
- Provide resources and information to Educators and families on health matters when required;
- Provide forms for Educators to record relevant health and medication details;
- Support families and Educators when dealing with health management matters;
- Safely store confidential health and medical details on children until they reach the age of 24 years.
- Keep up to date on current health management practices.
- Request families to update their child enrolment forms annually to ensure current medical authorisations

Educators will:

- Ensure medication is administered to a child only from its original packaging;
- Ensure medication is only administered to a child enrolled in the service with the written permission of the child’s family or legal guardian using the Medication Authority Form. These forms are to be forwarded to the Co-ordination Unit for storage once a child finishes with an Educator;
- Ensure the written instructions of the family are consistent with the instruction on the medication or as prescribed by a doctor;
- In the case of an emergency verbal permission can be given to an Educator by a parent or person named in the child’s enrolment record as authorised to consent to administration of medication; or if this permission cannot be readily obtained a registered medical practitioner or an emergency service;
- Store medical information in a safe and secure place;
- Maintain confidentiality in regard to a child’s medical condition;
- Ensure the administration of homeopathic, naturopathic, over-the-counter or non-prescribed medications (including cold preparations, and paracetamol) also meet minimum legislative requirements and guidelines. This includes the provision of a signed Medical
Authority Form by the family, written instructions and dosage on the medication or from the health professional that dispensed the medication. Educators are not to give unidentified medication or medication to a child where the instructions are not clear to the Educator e.g. in an unfamiliar language to the Educator;

- Keep families informed of service requirements on the administering of medications;
- Comply to the management plans of children with chronic health problems, such as asthma, epilepsy, diabetes, severe allergy or anaphylaxis;
- Ensure medications are stored correctly and securely away from access by children;
- Discuss any concerns about administering medication with families and if necessary Co-ordination Unit staff;
- Medication may be administered to a child without an authorisation in the case of an anaphylaxis or asthma emergency. In this case the Educator will ensure the parent of the child and/or emergency services are notified as soon as practicable.

It is the responsibility of the family to:

- Ensure all Child enrolment forms are at the Co-ordination Unit with current authorisations;
- Provide a summary of the child’s health, medications, allergies, doctor’s name, address and phone number, and a Health Management Plan approved by a Doctor, if available, to the Co-ordination Unit staff and Educator prior to starting care and ongoing as required;
- Keep the Educator up to date with any changes to a child’s medical condition or Health Management Plan;
- Provide medication in its original packaging;
- Complete the Medical Authority Form authorising the Educator to administer medication to their child, on a daily basis as required;
- Request the Educator to administer only the recommended dosage on the original medication package;
- Seek a doctor’s certificate for a child if requested by the Educator;
- If giving permission for a preschool age child to self-administer medication ensure this is stated on the medication form in the method section
Practices for self-administration of medication:
A child over pre-school age may self-administer medication under the following circumstances:

- Written authorisation is provided by the person with the authority to consent to the administration of medication on the child enrolment form.
- Medication is to be provided to the Educator for safe storage, and they will provide it to the child when required.
- Following practices outlined in the Dealing with Medical Conditions Policy including Anaphylaxis and allergies, asthma and diabetes.
- Self-administration of medication for children over pre-school age will be supervised by the Educator.

Reviewed: April 2012

To be reviewed: May 2014
INFECTION DISEASES POLICY

AIM:
To ensure Educators, Co-ordination Unit staff and parents are informed about infectious diseases that are common in early childhood settings. To ensure all relevant stakeholders are familiar with the procedures to reduce the spread of such infection in Family Day Care.

STATEMENT:
Children are often infectious before symptoms appear. Therefore, it is important for Educators to operate their business with good hygienic practices at all times. It is also important that Educators and staff act appropriately and with sensitivity when dealing with an infectious child and their family.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Public Health Act 2010 No 127 (NSW)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

PROCEDURES:
There are 4 steps to the spread of infections:
1. The person with the infection spreads germs into their environment.
2. The germ must survive in the environment.
3. The germ is then passed to another person.
4. The next person becomes infected.

“Infectious illnesses may be due to viruses, bacteria, protozoa or fungi. All of these organisms are too small to see with the naked eye. These germs can survive on the hands and objects, for example, toys, door handles and bench tops. The length of time a germ can survive on a surface depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing with detergent and water is a very effective way of removing germs.”

Germs can be transmitted through the air, through contact with faeces and then contact with mouths, direct contact with skin and contact with other body secretions. (e.g. runny noses, blood).

**The three most important ways of preventing the spread of infectious disease:**

- Effective hand washing
- Exclusion of sick children and staff; and
- Immunisation

Recommended practices in the service guidelines on these procedures may assist Educators in ensuring children, Educators, staff and families are kept free from infection.

**Co-ordination Unit Staff will:**

- Provide information and resources to Educators on how to prevent the transmission of infectious diseases.
- Model safe hygienic practices to Educators and children where possible.
- Ensure PALS implements practices that aim to prevent the spread of infectious diseases.
- Report any occurrence of an immune preventable disease to the Department of Health Infectious Diseases Unit - Goulburn.
- Discuss immunisation requirements and schedule with families at the time of enrolment.

**Educators will:**

- Implement good hygiene practices that aim to prevent the spread of infectious diseases;
- Ensure that they protect themselves from infections that are vaccine preventable or contracted due to poor hygiene practices;
• Seek advice on health matters including immunisation;
• Seek advice on screening for:

- Rubella, chicken pox and particularly CMV for all female Educators of child bearing age.
- Some other illnesses that may affect the unborn child include Listerois, toxoplasmosis, erythema, infectosum (also called Parvovirus or slapped cheek syndrome).

• Exclude children from care that are sick or infectious;
• Request families to update immunisation records regularly.

Note- It is recommended that Educators who are pregnant consult their doctor to seek advice on which immunisation or screening is appropriate for them.

It is the responsibility of parents to:

• Not send infectious or sick children into care.
• Seek advice on immunisation of their child from a medical practitioner
• Provide Eurobodalla Family Day Care with up to date information on their child/ren’s immunisation status. (preferably as immunisation occurs)
• Promptly pick up a sick or infectious child that becomes ill whilst in care
• Seek a Doctor’s Certificate if required by the Educator before returning to care.
• Notify the Co-ordination Unit if their child has been diagnosed with an immune preventable disease e.g. whooping cough, measles or rubella.

Reviewed: November 2011

To be reviewed: May 2013
**IMMUNISATION**

**AIM:**
To ensure families provide documented evidence of the immunisation status of their child upon enrolling at the Service and as further vaccination updates occur, to recognise that immunisation is the family's right of choice. It also aims to provide clear guidelines for families with non-immunised and homoeopathically-immunised children in the event of a vaccine-preventable disease at the Service, and highlight the roles of staff, Educators, families and the Department of Health in the successful implementation of this procedure.

**RELEVANT LEGISLATION:**
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Public Health Act 2010 No 127 (NSW)

**KEY RESOURCES:**
National Quality Standards 2011 (ACECQA) – Quality Area 2

**PROCEDURE:**
Health professionals strongly urge the vaccination of all individuals to protect themselves and the wider community from serious and sometimes fatal vaccine-preventable diseases.

In a Children's Services setting, children are more likely to be exposed to a larger number of germs than in the home setting. Similarly, Educators appear to be at a greater risk of some infections than other occupational groups.

Children and Family Services play a vital role in maintaining up to date information regarding the immunisation status of all children enrolled in Eurobodalla Family Day Care. Under the *Public
Health (Amendment) Act 2010 parents of all children enrolling in Children and Family Services are required to provide documented evidence of their child's immunisation status.

A child's immunisation status may be considered by the Family Assistance Office in determining eligibility for CCB.

If translation is required, this can be arranged either by contacting local doctors or by using an Interpreter Service. (see Co-ordination Unit staff for assistance)

**Responsibilities of Educators:**

- Refer parents to the immunisation procedure and Department of Health Guidelines for immunisation and communicable diseases as required.
- The National Health and Medical Research Council recommends immunisation against Hepatitis A as well as current Tetanus and Diphtheria for all childcare workers, especially those working with children under two years. Educators are encouraged to seek their Doctor's opinion regarding immunisation for Hepatitis A and Hepatitis B.
- Immunisation remains the personal choice of every Educator.
- It is recommended that female Educators undertake a screening for rubella immunity at the commencement of their employment and seek their Doctor's advice regarding CMV screening if planning a pregnancy.
- Ensure that an immunisation register is maintained for each child enrolled at the Service.

**Responsibilities of the Co-ordination Unit:**

- Ensure that families provide the appropriate documentation upon enrolment and that this is sighted and a copy is kept by the Service. The 'Blue Book' (NSW Department of Health personal record book) is the preferred documentation for immunised children. Families of non-immunised and homoeopathically-immunised children will be required to indicate this on their individual immunisation register.
- Notify the local Public Health Unit whenever a child, Educator or person normally residing at the Educators home, has a confirmed vaccine preventable disease.
• When directed by the Public Health Unit, exclude children and/or Educator who are non-immunised or homoeopathically-immunised, for the duration of any vaccine preventable outbreak.
• Provide any excluded child's family with details of the recommended exclusion period and the conditions for re-entry to the Service. All children who are excluded are required to pay full fees.
• Notify other parents whenever a confirmed vaccine preventable disease occurs in an enrolled child and provide them with information regarding signs and symptoms to be alert for.
• Ensure information about immunisation and vaccine preventable diseases is available to families regularly or upon request.
• Maintain suitable immunisation information for Service and family reference.
• Provide a family who is transferring to another Educator with a copy of the register upon request.

Responsibilities of the Family:

• Provide the Service with relevant documentation regarding the child’s immunisation status upon enrolment.
• Ensure that their child’s immunisation status is up to date.
• Notify the Educator as soon as possible whenever their child has a confirmed vaccine-preventable disease.
• Accept the NSW Department of Health exclusion periods for children with communicable diseases and the Service conditions of re-entry when their child is excluded.
• Ensure that the child is collected promptly from the Service should they exhibit signs or symptoms of a communicable disease.

Communicable Diseases
Communicable Diseases are preventable by vaccine, such as those specified in the “Blue Book”, including Hepatitis, Polio, Measles, Mumps, Rubella, Hib (Haemophilus influenza), and Meningitis. An “outbreak” is considered to be one or more cases.

Review: January 2012

Next Review: January 2014
<table>
<thead>
<tr>
<th>AGE</th>
<th>DISEASE</th>
<th>VACCINE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILDHOOD VACCINES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Birth (Maternity units)</td>
<td>Hepatitis B</td>
<td>H-B-VAX II (babies before 8 days of age)</td>
</tr>
<tr>
<td>2 months (all vaccines may be given as early as 6 weeks)</td>
<td>Diphtheria, Tetanus, Pertussis Haemophilus influenzae type B (Hib)</td>
<td>INFANRIX HEXA PREVENAR 13 ROTARIX</td>
</tr>
<tr>
<td></td>
<td>Hepatitis B</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pneumococcal</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rotavirus</td>
<td></td>
</tr>
<tr>
<td>4 months</td>
<td>Diphtheria, Tetanus, Pertussis Haemophilus influenzae type B (Hib)</td>
<td>INFANRIX HEXA PREVENAR 13 ROTARIX</td>
</tr>
<tr>
<td></td>
<td>Hepatitis B</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pneumococcal</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rotavirus</td>
<td></td>
</tr>
<tr>
<td>6 months</td>
<td>Diphtheria, Tetanus, Pertussis Haemophilus influenzae type B (Hib)</td>
<td>INFANRIX HEXA PREVENAR 13</td>
</tr>
<tr>
<td></td>
<td>Hepatitis B</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pneumococcal</td>
<td></td>
</tr>
<tr>
<td>12 months*</td>
<td>Measles, Mumps, Rubella Haemophilus influenzae type B (Hib) Meningococcal C</td>
<td>PRIORIX HIBERIX MENINGITEC</td>
</tr>
<tr>
<td>Age</td>
<td>Vaccine Information</td>
<td>Brand(s)</td>
</tr>
<tr>
<td>--------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>18 months</td>
<td>Varicella (Chicken pox)</td>
<td>VARILRIX</td>
</tr>
<tr>
<td>4 years*</td>
<td>Diphtheria, Tetanus, Pertussis, Polio, Measles, Mumps, Rubella</td>
<td>INFANRIX-IPV, PRIORIX</td>
</tr>
<tr>
<td>(all vaccines may be given as early as 3½ years)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADOLESCENT VACCINES (School-Based Program)

<table>
<thead>
<tr>
<th>Age</th>
<th>Vaccine Information</th>
<th>Brand(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 years</td>
<td>Human Papillomavirus (female only)</td>
<td>GARDASIL</td>
</tr>
<tr>
<td></td>
<td>Hepatitis B (catch-up only)</td>
<td>H-B VAX II</td>
</tr>
<tr>
<td></td>
<td>Varicella (catch-up only)</td>
<td>VARILRIX</td>
</tr>
<tr>
<td></td>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>BOOSTRIX</td>
</tr>
<tr>
<td>15 years</td>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>BOOSTRIX</td>
</tr>
<tr>
<td>(in 2011 and 2012 only)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADULT VACCINES

<table>
<thead>
<tr>
<th>Age</th>
<th>Vaccine Information</th>
<th>Brand(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All - 6 months and over</td>
<td>Influenza</td>
<td>INFLUENZA</td>
</tr>
<tr>
<td>(with medical conditions predisposing to severe influenza**)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Aboriginal - 15 years and over

Pregnant women

65 years and over

<table>
<thead>
<tr>
<th>Age</th>
<th>Vaccine Information</th>
<th>Brand(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All – 65 years and over</td>
<td>Pneumococcal</td>
<td>PNEUMOVAX 23</td>
</tr>
</tbody>
</table>

Aboriginal – 50 years and over

Aboriginal – 15-49 years with medical risk factors***
EXCLUSION GUIDELINE

EXCLUSION OF SICK CHILDREN GUIDELINES

AIM:
To reduce the spread of infectious disease.

STATEMENT:
The less contact there is between people who have an infectious disease and people who are at risk of catching the disease, the less chance the disease has of spreading. Excluding sick children, educators and other staff is an effective way to limit the spread of infection in education and care services.

KEY RESOURCES:

By excluding one sick person, you can protect many other people from becoming ill

The need for exclusion and the length of time a person is excluded depends on:

- How easily the infection can spread,
- How long the person is likely to be infectious,
- How well the infected person can perform effective hygiene practices,
- How severe the disease can be.

The exclusion procedure:
1. Identify the symptoms of a sick child and contact the parent as soon as possible
2. Diagnose the illness – a medical opinion may be needed (e.g. in cases of a rash where it may be suspected measles or hand, foot and mouth disease) otherwise the Educator’s/staff member’s opinion is sufficient (e.g. in cases of diarrhoea or fever);
3. Decide if the condition requires exclusion and refer to Recommended Minimum Period of exclusion on attached list;
4. Decide when the child may return to the care environment. A doctor’s certificate may be requested.
If an Educator or a member of the Educator’s family needs to be excluded due to illness, the Educator will need to close their childcare service until such time that the risk of infection to children and their families has gone.

Non immunised children will be excluded from care during outbreaks of some infectious diseases, even if they are well. These diseases include diphtheria, whooping cough, polio, measles, mumps, and rubella.

Reviewed: January 2012

To be reviewed: March 2013
<table>
<thead>
<tr>
<th>Condition</th>
<th>Exclusion of case</th>
<th>Exclusion of contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amoebiasis</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>(Entamoeba histolytica)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campylobacter</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>if affecting 2 or more people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Candidiasis</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>See ‘Thrush’</td>
</tr>
<tr>
<td>Chickenpox (varicella)</td>
<td>Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in unimmunised children, and less in immunised children</td>
<td>Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection as they are at high risk for developing severe disease. Otherwise, not excluded</td>
</tr>
<tr>
<td>Cytomegalovirus infection (CMV)</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Cryptosporidium infection</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>(No organism identified)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>if affecting 2 or more people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria</td>
<td>Exclude until medical certificate of recovery is received after at least 2 negative throat swabs, the first swab not less than 24 hours after finishing a course of antibiotics, followed by another swab 48 hours later</td>
<td>Exclude contacts that live in the same house until cleared to return by a public health unit</td>
</tr>
<tr>
<td>German measles</td>
<td></td>
<td>See ‘Rubella’</td>
</tr>
<tr>
<td>Giardiasis</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Condition</td>
<td>Exclusion of case</td>
<td>Exclusion of contacts</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Glandular fever (mononucleosis, EBV infection)</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Hand, foot and mouth disease</td>
<td>Exclude until all blisters have dried</td>
<td>Not excluded</td>
</tr>
<tr>
<td><em>Haemophilus influenzae</em> type b (Hib)</td>
<td>Exclude until the person has received appropriate antibiotic treatment for at least 4 days</td>
<td>Not excluded. Contact a public health unit for specialist advice</td>
</tr>
<tr>
<td>Head lice (pediculosis)</td>
<td>Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice</td>
<td>Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Herpes simplex (cold sores, fever blisters)</td>
<td>Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Human immunodeficiency virus (HIV)</td>
<td>Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Condition</td>
<td>Exclusion Criteria</td>
<td>Immunisation Status</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Hydatid disease</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Impetigo</td>
<td>See ‘School sores’</td>
<td></td>
</tr>
<tr>
<td>Influenza and influenza-like illnesses</td>
<td>Exclude until well</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Legionellosis</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Leprosy</td>
<td>Exclude until approval to return has been given by a public health unit</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Measles</td>
<td>Exclude for 4 days after the onset of the rash</td>
<td>Immunised and immune contacts are not excluded</td>
</tr>
<tr>
<td></td>
<td></td>
<td>For non-immunised contacts, contact a public health unit for specialist advice.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>All immune compromised children should be excluded until 14 days after the first day of appearance of rash in the last case.</td>
</tr>
<tr>
<td>Meningitis (bacterial)</td>
<td>Exclude until person is well and has received appropriate antibiotics</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Meningitis (viral)</td>
<td>Exclude until person is well</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Meningococcal infection</td>
<td>Exclude until appropriate antibiotic treatment has been completed</td>
<td>Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case</td>
</tr>
<tr>
<td>Molluscum contagiosum</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Mumps</td>
<td>Exclude for 9 days or until swelling goes down (whichever is sooner)</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Norovirus</td>
<td>Exclude until there has not been a loose bowel motion or vomiting for 48 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Pertussis</td>
<td>See ‘Whooping cough’</td>
<td></td>
</tr>
<tr>
<td>Condition</td>
<td>Exclusion of case</td>
<td>Exclusion of contacts</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Pneumococcal disease</td>
<td>Exclude until person is well</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Respiratory syncytial virus (RSV)</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Ringworm/tinea</td>
<td>Exclude until the day after starting appropriate antifungal treatment</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Roseola</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Ross River virus</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Rotavirus infection</td>
<td>Exclude until there has not been a loose bowel motion or vomiting for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Rubella (German measles)</td>
<td>Exclude until fully recovered or for at least 4 days after the onset of the rash</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Salmonella infection</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Scabies</td>
<td>Exclude until the day after starting appropriate treatment</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Scarlet fever</td>
<td>See “Streptococcal sore throat”</td>
<td>Not excluded</td>
</tr>
<tr>
<td>School sores (impetigo)</td>
<td>Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Shigellosis</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Streptococcal sore throat</td>
<td>Exclude until the person has received antibiotic treatment for at least 24 hours and feels well</td>
<td>Not excluded</td>
</tr>
<tr>
<td>(including scarlet fever)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thrush (candidiasis)</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Toxoplasmosis</td>
<td>Not excluded</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Tuberculosis (TB)</td>
<td>Exclude until medical certificate is produced from the appropriate health authority</td>
<td>Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics</td>
</tr>
<tr>
<td>Disease</td>
<td>Exclusion Requirement</td>
<td>Not Excluded Unless Considered Necessary by Public Health Authorities</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Typhoid, paratyphoid</td>
<td>Exclude until medical certificate is produced from a public health unit.</td>
<td>Contact a public health unit for specialist advice about excluding contacts and screening</td>
</tr>
<tr>
<td>Varicella</td>
<td>See 'Chickenpox'</td>
<td></td>
</tr>
<tr>
<td>Viral gastroenteritis (viral diarrhoea)</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours</td>
<td>Not excluded</td>
</tr>
<tr>
<td>Warts</td>
<td>Not excluded</td>
<td></td>
</tr>
<tr>
<td>Whooping cough (pertussis)</td>
<td>Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing</td>
<td>Contact a public health unit for specialist advice about excluding non-vaccinated contacts, or antibiotics</td>
</tr>
<tr>
<td>Worms</td>
<td>Exclude if diarrhoea is present</td>
<td>Not excluded</td>
</tr>
</tbody>
</table>

The definition of ‘contacts’ will vary according to the disease—refer to the specific fact sheet for more information.

Some diseases—such as pertussis, typhoid, tuberculosis, meningococcal disease and hepatitis A—can cause concern among parents and sometimes interest from the media. Education and care services should consult their local public health unit, because they can provide support and education in the event of a concerning disease.

**REVIEWED: MAY 2012**
**NEXT REVIEW: MAY 2014.**
UNWELL CHILD

AIM:
To provide guidelines and advice for Educators to manage the unwell child and ensure sick or injured children are cared for in an appropriate caring manner.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Public Health Act 2010 No 127 (NSW)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

PROCEDURE:

- If a child exhibits signs or symptoms of being unwell, the following action will be taken:
- Comfort the unwell child and provide a safe and comfortable space for them until the child is collected.
- Contact parent/authorised person and inform them of their child's condition.
- A checklist of an unwell child (checklist following) may be completed and a copy provided for the parent/authorised person.
- The Educator will inform the person collecting the child of any relevant current illnesses in the Service and the conditions of re-entry to the Service.
- When a child arrives at the Service and does not appear well enough to be in attendance, the Educator will discuss with the parent/authorised person their options.
- Educators are unable to administer Panadol. *It is important for Educators to know of any medication administered to children prior to commencing at the service each day.*
When a child has a high temperature (i.e. 38 °C and over):

- Record temperature and time on Unwell Child Checklist (following).
- Remove excess clothing and lay the child down in a cool place. Cool the child with a tepid wet cloth and to prevent dehydration encourage the child to drink cool water often.
- Contact parent/authorised person to collect the child and ensure child is collected within the hour.
- Continually monitor the child's condition checking the child's temperature every 10 minutes. Record temperature and time taken and write this on the Unwell Child Checklist.
- Continue to cool the child, as above, check and record temperature every 5 minutes. The Educator is to stay with the child until parent/authorised person arrives. Ensure the child is well hydrated.
- If temperature reaches 40 degrees C and no contact has been made with the parent/authorised person to collect the child, call for an ambulance.

When a child has diarrhoea:

- After a loose bowel motion use the Unwell Child Checklist.
- Monitor the child and after two or more loose bowel motions, contact the parent and ask them to collect the child.
- The child should be separated from the other children where the Educator can maintain adequate supervision.
- The child can return to the Service only once all diarrhoea has ceased for a period of 24 hours.

When a child is vomiting:

- Use the Unwell Child Checklist to assess if the child has any other symptoms.
- If the child appears unwell and has one case of vomiting, contact the parent and ask them to collect the child.
- The child should be separated from the other children where the Educator can maintain adequate supervision.
- The child can return to the Service only once all vomiting has ceased for a period of 24 hours.

**Sprains and breaks and other physical injuries:**
If a child has a sprain, broken bone or has had surgery, the Service requires a medical certificate providing clearance to attend or procedures to ensure the child's safe inclusion into the Service.

**Long Term Health Conditions:**
If a child has a long-term health condition, the Service must have an action plan that has been developed with the consulting doctor and other health professionals. This plan is to be signed by the parent and the child's doctor.

**REVIEWED: SEPTEMBER 2011**

**NEXT REVIEW: SEPTEMBER 2013**
Unwell Child Checklist

Child's Name:__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

Date:______________________________________________________________

__________________________________________________________

__________________________________________________________

You have been asked to collect your child from the Service today as he/she has been displaying the following symptoms:

<table>
<thead>
<tr>
<th>Symptom</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe, persistent or prolonged coughing</td>
<td></td>
</tr>
<tr>
<td>Difficult or rapid breathing</td>
<td></td>
</tr>
<tr>
<td>Eye/nose discharge</td>
<td></td>
</tr>
<tr>
<td>Unusual spots or rash</td>
<td></td>
</tr>
<tr>
<td>Frequent scratching of the scalp or skin</td>
<td></td>
</tr>
<tr>
<td>Lost interest in playing, was listless</td>
<td></td>
</tr>
<tr>
<td>Was abnormally quiet and inactive</td>
<td></td>
</tr>
<tr>
<td>Was crying readily and could not be comforted</td>
<td></td>
</tr>
<tr>
<td>Headache, stiff neck</td>
<td></td>
</tr>
<tr>
<td>Loss of appetite</td>
<td></td>
</tr>
<tr>
<td>Sore throat or difficulty in swallowing</td>
<td></td>
</tr>
</tbody>
</table>
Was irritable when disturbed

Was difficult to wake

Feverish appearance

Felt cold and looked pale

Had a high temperature i.e. above 38 degrees (recorded every 10 minutes)

[Time:     Temp:     °C] [Time:     Temp:     °C] [Time:     Temp:     °C]

Vomited on occasions

Had occasions of diarrhoea

Had symptoms of a possible infectious disease

Other

Treatment given

As you are aware, it is very important that unwell children are cared for quickly, and that appropriate action is taken to prevent the spread of infection.

**When can your child return to the Service?**

- If your child has been sent home due to vomiting or diarrhoea, they can return to the Service only once all vomiting or diarrhoea have ceased. To keep cross-infection to a minimum, it is recommended that the child not return for 24 hours.
- If your child has commenced on a course of antibiotics, they cannot return to the Service for at least 24 hours so that the medication has time to take effect.
- If your child has been sent home with symptoms of an infectious disease recognised by the Public Health Unit, exclusion periods must be adhered to (please refer to the Eurobodalla Family Day Care Parent Book for further information). On their return, a doctor’s certificate is required as clearance.

**Please note:** If your child returns to the Service (with or without a medical certificate) and your Educator identifies that your child still appears to be unwell, it is the responsibility of the Educator to once again send your child home.
Please consider your Educator and other children and do not send your child to the Service when they are unwell.

Parent Signature: ____________________________________________
__________________________
__________________________

Educator Signature: _________________________________________
__________________________
__________________________
MEDICAL CONDITIONS POLICY INCLUDING ASTHMA, ANAPHYLAXIS AND DIABETES

AIM:
To ensure Educators facilitate the safe, effective care and health management of children who have a medical condition that requires specific care practices.

STATEMENT:
Family Day Care recognises the need to ensure that children with specific diagnosed medical conditions have their medical requirements met whilst in childcare. This is an important part of childcare delivery to ensure the whole needs of the child are catered for. An individual’s specific medical needs often require the Educator to address the needs of the child under instruction of a medical/Health Management Plan, authorised by a medical/health professional. Staff and educators will work with families to minimise the risk of exposure of children to foods, and other substances, which may trigger severe allergy or anaphylaxis in children. Staff and Educators will ensure that any medical conditions that they are notified of are managed appropriately.

RELEVANT LEGISLATION:
Education and Care Services National Regulations 2011
Education and Care Services National Law 2010
Work, Health & Safety Bill 2011

RESOURCES:
National Quality Standards 2011 (ACECQA)

PROCEDURES:

Co-ordination Unit Staff and Family Day Care Educators will:

- During the enrolment process seek information about any specific health care need, allergy or relevant medical condition that a child may have. This information will then be communicated verbally and in writing (Current Medical Management Plan) to the Educator and Educational Leader if necessary;
- Encourage ongoing communication with families in regards to medical status of children;
- Conduct a risk assessment of the service to reduce the likelihood of exposure to relevant allergens;
- Advise parents of any identified risks;
- Develop a risk minimisation plan for times that the child is in the child care setting, in consultation with families, educators and staff. This will nominate where the medication is to be kept and outline strategies for minimising the identified risks;
- Where a child has been diagnosed as at risk of anaphylaxis, a notice stating this must be displayed at the service;
- Ensure that at all times Educators and staff working with children have current training in asthma and anaphylaxis management;
- Children with specific health care needs, allergies or relevant medical conditions cannot be left with the Educator without necessary medication;
- Display emergency contact phone numbers by the telephone;
- In the situation where a child who has not been diagnosed as having a medical condition but appears to be suffering from a medical condition staff and educators will:
  - Call an ambulance 000
• Commence First Aid measures
• Contact parents
• If parents cannot be contacted then contact emergency contacts
• Contact the Co-ordination Unit

If a child self-administers medication ensure the correct procedure is followed i.e. _Practices for self-administration of medication_.

A child _over pre-school_ age may self-administer medication under the following circumstances:

• Written authorisation is provided by the person with the authority to consent to the administration of medication on the child enrolment form.
• Medication is to be provided to the Educator for safe storage, and they will provide it to the child when required.
• Following practices outlined in the Dealing with Medical Conditions Policy including anaphylaxis and allergies, asthma and diabetes.
• Self-administration of medication for children over pre-school age will be supervised by the Educator.
• Develop a communication plan for staff members, educators and parents to ensure the child’s medical management plan and location of the child’s medication is clearly communicated to Co-ordination Unit staff volunteers and students visiting the service.

**GUIDELINES FOR CHILDREN AT RISK OF ANAPHYLAXIS:**

• Parents of a child at risk of anaphylaxis have been provided with a copy of the services “Dealing with Medical Conditions Policy” including severe allergy and anaphylaxis, asthma and diabetes.
• Ensure that no child that requires an EpiPen is left at the service without an EpiPen. EpiPen must be kept in an easy identifiable place and that it is within the storage and use by date as required by manufacturer.
• EpiPen is stored in an insulated container in a location easily accessible to adults, inaccessible to children and away from direct sources of heat. Other medication that is
used to counteract anaphylaxis signs and symptoms needs to be stored as per
manufacturer’s instructions.

- Ensure an anaphylaxis action plan is filled out with the family in conjunction with a
medical practitioner. Once completed this should be displayed in a prominent position.
Parents will need to notify the Educator if there are changes and provide an updated
and signed action plan.
- The service’s emergency action plan for the management of anaphylaxis is in place and
all staff/educators (where applicable) understand the plan.
- Parent/guardian’s current contact details are available.
- Information regarding any other medications or medical conditions (e.g. asthma) is
available to staff.
- Some common triggers of Anaphylaxis include food, bites and stings, medication and
other (including latex).

In relation to the child at risk from food related allergies:

- This child should only eat food that been specifically prepared for him/her usually by the
parent. Where the Educator is preparing food for the child, ensure that it has been
prepared according to the parent’s instructions.
- All food for this child should be checked and approved by the child’s parent/guardian.
Bottles, other drinks and lunch boxes, including any treats, provided by
parents/guardians should be clearly labelled with the child’s name.
- There should be no trading or sharing of food, food utensils and containers with this
child.
- In some circumstances it may be appropriate that a highly allergic child does not sit at
the same table when others consume food or drink containing or potentially containing
the allergen. However, children with allergies should not be separated from all children
and should be socially included in all activities.
- When a risk child is allergic to milk, ensure non-allergic babies are held when they drink
formula/milk.
In relation to other practices at the service:

- Ensure tables, bench tops and high chairs are washed down after eating.
- Ensure hand washing for all children upon arrival at the service, before and after eating.
- Restrict use of food and food containers, boxes and packaging in crafts, cooking and science experiments, depending on the allergies of particular children.
- Staff should discuss the use of foods in such activities (such as cooking) with parents/guardians.
- All staff are trained about measures necessary to prevent cross contamination between foods during the handling, preparation and serving of food – such as careful cleaning of food preparation areas and utensils.
- Where other parents/guardians send food to the Educators home for their own child, they will be informed not to send food containing specified allergens or ingredients as determined by the educator and Parent /guardian of child with the allergy.

In relation to the child at risk from bite and sting allergies:

- Staff and Educators carry out risk assessment of play spaces to minimise exposure to known triggers.
- Children will be supervised at all times.

MANAGING CHILDREN WITH ASTHMA GUIDELINES:
To facilitate effective care for a child with asthma, staff & educators will:

- Ensure families provide updated information on the child’s health, medications, allergies, their doctor’s name, address and phone number, emergency contact names and phone numbers and an Asthma First Aid Plan Or Management Plan approved by their doctor, on enrolment and prior to the child starting in the service, or when the child is diagnosed, or when changes to their asthma/treatment occurs.
- Ensure appropriate Medication Forms are signed.
- Be aware of aspects of the indoor environment that may be triggers for asthma in children, which include: dust mites, gardens/pollen, mould, chemicals, animals, air
pollution, bush fires, colds and flu, diet/food, emotions, exercise, heating/air conditioning, medications, stress, weather/thunderstorms.

- Reduce exposure of children to indoor allergens by:
  - regularly vacuuming and shampooing carpets, rugs and upholstered furniture and washing fluffy toys;
  - regularly cleaning bedclothes;
  - treating and preventing growth of mould (when using chemical sprays such as pesticides and cleaning agents, spray when children are not present in the immediate vicinity);
  - controlling pest infestations;
  - minimising having pets indoors and ensure they are in a clean and healthy condition; and
  - using dust resistant mattress and pillow covers.

In any case where a child is having an acute asthma attack the following steps should be followed:

- Administer first aid or medical treatment according to either:
  - Emergency Asthma First Aid Plan,
  - the child’s Asthma First Aid or Medical Management Plan, or,
  - A doctor’s instructions.
- Dial 000 or 112 for an Ambulance and notify the families in accordance with the Regulation and guidelines on emergency procedures.
- Staff/Educators must inform the Co-ordination Unit if they administer first aid.

MANAGING CHILDREN WITH A KNOWN MEDICAL CONDITION i.e. Diabetes
To facilitate effective care for a child with any known medical condition staff & educators should:

- Ensure families provide information on the child’s health, medications, medical condition, allergies, their doctor’s name, address, phone number, emergency contact names and phone numbers, and First Aid Plan or Emergency Medical Plan approved by their doctor, on enrolment and prior to the child commencing care, or when the child is diagnosed, or when changes to their condition/treatment occurs.
• Ensure regulations and policies are adhered to when administering medication and treatment in emergencies, and written consent has been given.

• A written Management Plan for the known Medical Condition following enrolment and prior to the child commencing care which should include:
  • signs & symptoms to be aware of,
  • any specific monitoring required,
  • any specific medication/treatment required,
  • what meals and snacks are required including food content, amount and timing,
  • what activities and exercise the child can or cannot do, and
  • Whether the child is able to go on excursions and what provisions are required.

• A Current First Aid or Medical Management Plan following enrolment and prior to the child commencing care should include:
  • what symptoms and signs to look for,
  • What action to take, including emergency contacts for the child’s doctor and family, or what first aid to give.

• In an emergency involving a child with any known medical condition dial 000 or 112 for an ambulance and notify the family in accordance with the Regulation and guidelines on emergency procedures, and administer first aid or emergency medical aid according to the child’s First Aid or Emergency Medical Plan, or a doctor’s instructions.

For further information on specific medical conditions contact Westmead Children’s Hospital at: www.chw.edu.au.

In any case where a child is having a suspected diabetic episode the following steps should be followed:

• Administer first aid or medical treatment according to either:
• First Aid training,
• the child’s Diabetic First Aid or Medical Management Plan, or,
• A doctor’s instructions.
- Dial 000 or 112 for an Ambulance and notify the families in accordance with the Regulation and guidelines on emergency procedures.
- Educators must inform the Co-ordination Unit if they administer first aid.

**Families are required to:**

- Complete medication forms to allow the Educator to administer medication accordingly.
- Provide the Educator with:
  - A current copy of the child’s medical Management Plan and Co-ordination Unit. Including the doctors name, address and phone number in case of emergency
- Work with the educator to ensure a risk minimisation plan is developed
- Develop a communication plan with the Educator

**Reviewed: January 2012**

**To be reviewed: March 2014**
HEALTH

AIM:
To ensure the health and hygiene practices Educators use have regard to current community standards and are in accordance with relevant government guidelines.

STATEMENT:
Eurobodalla Shire Council acknowledges the importance of good health and hygiene practices to ensure the safety and wellbeing of children and their families, and Educators and their families. It is important to promote children’s health by encouraging and assisting Educators to adopt effective health and safety practices, maintain, promote and manage health concerns and health emergencies. The health and safety of the environment at the Educator’s home for children in their care, for Educators and for the Educator’s family is paramount to minimise risks to all.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Work Health and Safety Regulation 2011 (NSW)
Work Health and Safety Act 2011 (NSW)
Public Health Act 2010 No 127

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2
Staying Healthy in Child Care - Preventing infectious diseases in child care 5th Edition - 2011
www.nhmrc.gov.au
PROCEDURES:

The Co-ordination unit will:

- Develop and maintain procedures and policies to ensure that Educators and families are informed and aware of good health and hygiene practices. These are based on current and up to date information which is regularly sourced from Staying Healthy in Childcare. Procedures will be developed in relation to:-
  - Exclusion (of sick children) including general rules for infection control
  - Dental health
  - Hand washing
  - Nappy changing
  - Toileting
  - Bathing
  - Infant sleeping and reduction of SIDS
  - Cleaning
  - Food handling and storage
  - Handling Body Fluids

The Co-ordination Unit Staff will:

- Support Educators and families to ensure compliance with the policy;
- Provide current information on health and hygiene practices which reflects current research, best practice and advice from relevant health authorities;
- Implement and role model appropriate hygienic and healthy practices.

Educators will:

- Promote and role model good health and hygiene practices;
- Actively support children to learn hygiene practices including hand washing, coughing, dental hygiene and ear care;
- Keep up to date with current practices and implement service procedures;
Seek advice from the Co-ordination Unit staff or Department of Health if unsure of appropriate action when dealing with a situation with a sick/infectious child or family member;

Respect the management practices of a family for a child with specific conditions/illnesses;

Treat a child’s health status professionally and confidentially;

Follow the recommendations listed on a child’s individual health plan

Inform the Co-ordination Unit if the Educator’s good health status changes e.g. illness or hospitalisation, birth of a child etc.

Close their childcare business when the Educator or other family member is ill or infectious. This may require a Doctor’s certificate before reopening the childcare business;

Involve children in developing and implementing guidelines.

It is the responsibility of the family to:

Support the Educator to comply with health and hygiene practices and guidelines;

Keep sick or infectious children out of the care environment;

Provide a Doctor’s Certificate if requested by the Educator;

Support the Educator to comply with health and hygiene practices and pick up their children promptly if requested to do so by the Educator, when their child becomes unwell in care;

Keep the Educator informed on health management plans for their child if required e.g. asthma, diabetes, epilepsy and anaphylaxis.

Reviewed: January 2012

To be reviewed: March 2014
HYGIENE – CLEANING AND INFECTION CONTROL

AIM:
This procedure aims to provide guidelines to promote a safe and hygienic environment for children, staff, Educators and families. By following the procedure below you will be ensuring preventative measures taken will minimise the spread and risks of infectious diseases and provide model hygiene practices.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2
Public Health Act 1991 2010 No127
Work Health & Safety Act 2011(NSW)
Work Health & Safety Regulation 2011 (NSW)
Staying Healthy in Education and Care Services – Preventing infectious diseases in child care 5th
Edition - 2011
- www.nhmrc.gov.au

PROCEDURE:
Washing- THERE IS NO IDEAL DISINFECTANT

Washing germs away:
Routine cleaning with detergent and water, followed by rinsing and drying, is the most useful method for removing germs from surfaces. Detergents help to loosen the germs so that they can be rinsed away with clean water. Mechanical cleaning (scrubbing the surface) physically
reduces the number of germs on the surface, just as hand hygiene using soap and water reduces the number of germs on the hands. Washing with a soap solution cleans away all surface soiling and removes faeces, vomit, mucous, blood and secretions. Thorough cleaning reduces surface contamination to such a degree that healthy children are not at risk of contracting disease.

Educators will:

- Make up fresh detergent and water solution daily or preferably as needed.
- Avoid using spray bottles (because there is a tendency to ‘top-up’ the solution instead of making fresh solutions and therefore dilutions of topped-up solutions are never correct. This also means that bottles are cleaned less often and there is a higher risk of germs growing in the stale detergent.
- Immerse a cloth, wring it out, and then clean the area with a rubbing action.
- Use colour coded clothes or paper towel
- All surfaces and equipment should be dried thoroughly before re using

CLEANING EQUIPMENT

Appropriate cleaning equipment:

- Includes mops with detachable heads (so they can be laundered in a washing machine using hot water), disposable cloths or cloths that can be laundered and vacuum cleaners fitted with HEPA (high-efficiency particulate air) filters to reduce dust dispersion. Ensure that cleaning equipment is well maintained, cleaned and stored so it can dry between uses.
- It can be useful to have colour-coded cloths or sponges for each area (e.g. blue in the bathroom, yellow in the kitchen) so it is easier to keep them separate. Wear utility gloves when cleaning and hang them outside to dry. Wash your hands after removing the gloves.

All surfaces that are touched frequently, especially taps, hand basin, door knobs, and refrigerator handles, as well as toys, should be washed regularly at least once per week.
Bed linen/mattress:
If Educator supplies bed linen it is to be washed each week. Wash mattress covers and linen if each child does not get the same mattress cover every day. Each child is to have new sheets each week and no child is to share bed linen. Blankets should be laundered regularly (e.g. at least twice during winter). At the end of each quarter, all mattresses and cots are to be cleaned thoroughly.

Blood and Body Fluids:
- Avoid direct contact with the fluid by wearing gloves
- Contain the fluid by placing absorbent paper towels around the edges of the spill, mop up as much as possible with absorbent paper towels, discard into a sealed plastic bag and dispose.
- Clean up the contaminated surfaces with neutral detergent and water.
- Dry or ventilate the area, discard all gloves and disposable materials into a sealed plastic bag and dispose.
- Any contaminated clothing, cloths or cleaning implements should be cleaned with neutral detergent and water. If washing by hand remember to wear gloves.
- For spills onto carpet or upholstered furniture, follow the above procedure including shampooing the area with an industrial carpet cleaner as soon as possible.
- Prevent sharing of combs, brushes, toothbrushes, bottles, dummies, towels, facecloths, handkerchiefs and tissues.
- Avoid kissing children on the mouth.
- Rinse with cold water if blood or body fluids are splashed into eyes, nose or mouth.

Children's bathrooms:
- Children's toilets and basins should be cleaned by Educators each day.
- The use of potties is not recommended. However, if being used they must be emptied and cleaned after each use. Don’t use hand sink, to wash potty.

Dress up clothes:
- Dress up clothes, e.g. hats and clothing are to be washed quarterly or after a major outbreak of a contagious illness.
• Dress up items should also be inspected regularly for mending.

**Equipment:**

• Children's equipment is to be cleaned on a regular ongoing basis.
• Objects that children may have placed in their mouths are to be placed in a basket after use for daily cleaning.
• Toys for 2 to 12 years old are to be cleaned, at a minimum, on a quarterly basis. Equipment should be washed in hot soapy water and air dried.

**Furniture:**

• Tables and chairs are to be washed daily with soap solution and paper towel, after activities and before/after eating. Chairs are to be scrubbed thoroughly with detergent solution on a quarterly basis (bicarbonate of soda can also be used).
• Wash floors daily. Sweeping will not remove all food scraps and spillages. Use detergent and water to wash floors, low shelves, door knobs and other surfaces often touched by children.

*Note:* Soap and water coupled with 'elbow grease' is the preferred cleaning agent. Where disinfectants are used, these must be correctly diluted following manufacturers' instructions. Wear gloves when handling disinfectants, as disinfectants are a common cause of dermatitis.

**Disinfectants:**
Disinfectants (also known as sanitisers) are usually only necessary if a surface cannot be properly cleaned with detergent and water, or if a surface is known to have been contaminated with potentially infectious material.

**Clean first, then disinfect:**
Disinfectants (sanitisers) cannot kill germs if the surface is not clean. It is more important to make sure that all surfaces have been cleaned with detergent and warm water than to use a disinfectant.

**To kill germs, any disinfectant must:**

• have enough time to kill the germs (as per the manufacturer’s instructions)
be used at the right concentration
be applied to a clean, dry surface
Be effective against those particular germs.

Reviewed: January 2012
To be reviewed: March 2013

OFFICE RESOURCES:

- Cleaning poster
- Cleaning checklist
- Pest and vermin record
FOOD, NUTRITION AND DIETARY REQUIREMENTS

AIM:
To ensure all children in care with Eurobodalla Family Day Care are offered a nutritious and appropriate diet that has been stored and prepared in a safe and hygienic manner.

STATEMENT:
Family Day Care recognises the early year of a child’s life is a critical period for their healthy development and growth. During this time, both physical and intellectual development is largely dependent upon adequate nutritional intake. Eating is also a source of enjoyment and it is important that Educators and staff do not become so concerned about nutrition and manners that they lose sight of children’s enjoyment of food. Many of the eating habits and attitudes to food developed in childhood continue throughout life.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 78, 79 & 80)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2
NSW Food Authority under the Food Act 2003 No 43
Caring for Children Food, Nutrition and Fun Activities
Dietary Guidelines for Children and Adolescents in Australia (National Health and Medical Research Council)
The Healthy Eating and physical activity guidelines for Early Childhood (Get Up and Grow resources 2009)
NSW Department of Health - Munch and Move
PROCEDURES

Co-ordination Unit Staff will:

- Provide information and resources to Educators and families on nutrition, food preparation and storage.
- Encourage families to provide adequate and nutritious meals for their children in care.
- Provide advice and support to Educators and families on matters relating to food and nutrition.
- Encourage and support all Educators and staff to attend relevant conferences and forums.
- Include nutrition Professional Development and a food safety component into new Educators induction.
- Provide nutrition and food safety Professional Development on a regular basis.
- Collect and record relevant information about individual special dietary requirements of children (i.e. allergies, cultural, etc) if required.
- Regularly provide Educators and families with nutrition guidelines based on the service Nutrition Policy.

Educators will:

- Provide each child with food and drinks provided by the family, unless other arrangements are made.
- Hold a Food Handling Certificate if they are providing food to children as part of their service. If food is provided as part of the business a menu must be developed and displayed.
- If supplying meals, develop and display a suitable menu outlining what children will be eating in the service.
- Handle and store food as per the recommendation of Guideline: Food Handling and Storage.
- Provide information to children and families that outline good nutrition practices.
- Understand the eating habits and nutritional needs of each child.
- Encourage and support children to develop independence in eating.
- Facilitate meal times that are positive, relaxed and social.
- Respect the requests of families relating to dietary, religious or cultural beliefs.
• Encourage children to try different types and textures of foods.
• Offering appropriate amount of food.
• Offer meals and snacks of regular and predictable intervals.
• Ensure children consume food and beverages in a hygienic manner 2.1.4

When preparing meals and snacks Educators will:

• Clean tables that are to be used for the meal.
• Wash and dry hands before preparing or serving foods. If you are interrupted to care for another child while preparing food or spoon-feeding an infant, be sure to wash and dry your hands again before you continue.
• Check that all children’s hands are washed before they eat or drink.
• Teach children to turn away from food when they cough or sneeze, and then to wash and dry their hands.
• If children are serving themselves from the same container, they must be supervised and utensils used to prevent children from touching food that other children will eat. This will assist to maintain food safety while also encouraging children to develop independence and self-help skills.
• Use a separate spoon for each baby you feed.
• Ensure children remain seated while eating.

It is the responsibility of the family to:

• Communicate current dietary requirements of their children and notify their Educator immediately of any changes.
• Provide nutritious and appropriate food/drinks if supplying meals for the child.
• Notify the Educator if any special dietary requirements are required and provide a written management plan to Educator for any allergies. E.g. (Diabetic, anaphylaxis, etc).
• Keep lunchboxes and drink bottles clean and hygienic.

It is the responsibility of all:

• Encourage and support breastfeeding.
• Choose water as a drink.
• Eat more fruit and vegetables.
• Choose healthier snacks.
- Get active each day.
- Turn off the television and computer and get active.

REVIEWED: JANUARY 2012

TO BE REVIEWED: MARCH 2014
NUTRITION INFORMATION SHEETS:

How much food is needed for an Infant in Family Day Care:
This fact sheet explains how much nutritious drink or food a parent needs to provide an Educator if their infant is in Family Day Care. If the infant does have an allergy or is intolerant to certain food see section 4, fact sheets 3 and 4.

Handling and Labelling Food:
Please label any food containers with the child’s name. If leaving a bottle with breast milk or infant formula, also include the bottle’s contents and the date the contents have been prepared. For preparation and transporting tips see section 6, fact sheets 1, 2 and 3.

BIRTH TO ABOUT 6 MONTHS

Drink
Send at least half the usual amount of breast milk or infant formula that the infant consumes in 24 hours. Preferably, provide the milk in 120ml bottles, as a Educator will feed an infant on demand, and the smaller bottle reduces the possibility of wasted milk.

BY 6 MONTHS

Drink
Send at least 450ml of breast milk or infant formula.

Food
Send at least 2 tablespoons each of one fruit and one vegetable. Also, send a packet of rice cereal. As the infant becomes used to eating solids, more food may need to be provided.

Fact Sheet 1 (Section 1) – Good Food in Family Day Care Kit (Continued)

FROM 6 MONTHS TO 12 MONTHS

Drink
Send at least 450ml of breast milk or infant formula. An infant can learn to drink from a cup at around 9 months, so once an infant reaches this age, or earlier at an infant’s Educator’s suggestion, a cup should be provided.

**Food**
An infant will vary in the amount they eat a day. An infant’s Educator will let the infant’s parent know when to provide more food for their infant.

**Plus**
- 2 tablespoons of fresh or frozen vegetables
- 2 tablespoons of a food that contains iron (e.g. meat, fish, chicken, lentils, baked beans, any other legume – peanut butter, tofu)
- 2 “child serves” of bread, breakfast cereal, noodles, pasta or rice (Note that a “child serve” equals either 1 slice of bread or 2 to 3 tablespoons of breakfast cereal, noodles, pasta or rice).

**How much food is needed for a Child in Family Day Care:**
This fact sheet explains how much food and drink a parent needs to provide an Educator for a child in Family Day Care for 8 hours or more. If a child has special needs such as an allergy or intolerance to certain food, see section 4 sheets 3 and 4.

A child who is in Family Day Care for 8 hours a day needs lunch, drinks and a morning and an afternoon snack. If a child is in care longer than 8 hours they may need more food. Note that a child’s appetite varies from day to day, so don’t expect them to eat everything supplied to them every day.

**What about a child on a vegetarian or vegan diet:**
A vegetarian diet is not just a diet without meat. A child on a vegetarian diet needs to eat iron rich meat alternatives like legumes, nuts* or tofu.
A vegan diet does not contain fish, chicken, eggs or dairy food. A child on a vegan diet needs to eat iron rich alternatives like legumes, nuts* or tofu. They also need to have calcium (e.g. soy drink with added 100mg calcium per 100ml drink) and take a vitamin B12 supplement.

**What food a child needs for a day in family day care**
Create the lunch, drinks and morning and afternoon snacks for a child for 8 hours from the nutrition requirements listed below. (Adapted from *Caring for Children, Food Nutrition and Fun Activities*).

**Bread & Cereal**
A child needs at least 2 ‘child serves” of bread, cereal, noodles, pasta or rice. A “child serve” is 1 slice of bread, or half cup of breakfast cereal, cooked rice or cooked pasta. Bread and cereal are important for energy. Try including some high fibre bread varieties like wholemeal or multi-grain.

**Dairy or dairy alternatives**
For calcium and energy, a child needs 3 “child serves” of full cream dairy product foods. A “child serve” of dairy food is: 1 slice (20g) cheese, half cup milk or half cup soy drink with added 100mg calcium per 100ml drink or one third cup or half a small drink with added 100mg calcium per 100ml of drink, or one third or half a small tub of yoghurt. For more information, see section 2, fact sheet.

**Vegetables**
For vitamins and fibre, a child needs 1 “child serve” of vegetables or salad. A “child serve” is half a cup.

**Meat or Meat Alternatives**
For protein and energy, a child needs 1 “child serve” of meat or meat alternatives. A “child serve” is: 1/3 cup (45g) of cheese, chicken, fish, legumes (e.g. baked beans, chickpeas, kidney beans) meat, nut* pastes (e.g. peanut butter), tofu or 1 egg.

**Fruit**
Fruit provides vitamins and fibre, a child needs 1 “child serve”. A “child serve” is one small piece of fruit, a snack pack of canned fruit or a small handful of dried nuts.
The food should also include:-

**Iron**
A child needs at least 1 “child serve” of iron rich food a day such as red meat, or 2 “child serves” of food with lesser amounts of iron such as chicken, fish, pork, dried fruit, legumes (e.g. baked beans, chickpeas, kidney beans, lentils), nut pastes (e.g. peanut butter) tofu and wholemeal bread.

**Vitamin C**
If providing a vegetarian meal, include a fruit or vegetable high in vitamin C for a child to eat at the same meal (e.g. kiwi fruit, capsicum, diluted orange juice, orange, tomatoes). Iron from food such as dried nuts*, legumes, nut pastes (e.g. peanut butter), tofu and wholemeal bread is not easily absorbed by the body. Absorption is improved if a food high in vitamin C is taken at the same meal.

*Peanut allergies tend to be severe. A parent who has a child with a peanut allergy must inform their child’s Educator and their Family Care Service of this allergy.*

*From: Fact Sheet 1 (Section 2) – Good Food in Family Day Care Kit*
DENTAL CARE

AIM:
To practice and promote Dental Care amongst children, families and staff and to reduce the incidence of dental cavities in young children, and facilitate the prevention and management of dental trauma in children.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2
Public Health Act 1991 2010 No127
Australian Dental Association
www.adansw.com.au

DENTAL HEALTH INFORMATION FOR BABIES/YOUNG CHILDREN

Avoid the use of:
- Bottles containing sweetened milk, fruit juices, cordials or soft drinks.
- Pacifiers dipped in sweet substances (e.g. honey, jam)
- Bottles as pacifiers or using a bottle containing anything other than water to help a child fall asleep.

Young babies who require bottles prior to sleeping are to be individually nursed whenever possible. Providing babies with bottles while in beds and cots increases the likelihood of potential risks to the child and therefore is not allowed.
PROCEDURE

Co-ordination unit Staff will:

- Provide resources and training for Educators on dental health practices for children;
- Record on enrolment the name, address and phone number of each child’s dentist if applicable and have a contact number for an after-hours emergency dentist or dental clinic at the service.

Educators will:

- Record on enrolment the name, address and phone number of each child’s dentist if applicable and have a contact number for an after-hours emergency dentist or dental clinic at the service.
- Encourage families to provide healthy foods for their children whilst in care.
- Avoid the use of:
  1. sweetened milk, fruit juices, cordials or soft drinks for the children in care
  2. sugary snacks or lollies
  3. pacifiers dipped in sweet substances
  4. nursing bottles containing anything other than water to help a child fall asleep.
- Offer water to drink in preference to fruit juice or soft drink.
- Encourage milk drinks at meal times to help reduce caries.
- Encourage healthy snacks such as vegetables, cheese, yoghurt, fruit or plain pasta (Educators should be aware of and avoid foods that are choking hazards to young children).
- Encourage cheese as a meal or snack or at least after one meal as this reduces the harmful effects of acid on the teeth.
- For children who are old enough encourage them to rinse their mouth with water after each meal or to brush their teeth.
- Report any sign of dental health problems to families e.g. swelling gums, problems with chewing, accidents or injury to teeth or gums.
- Have information available for parents’ about healthy teeth or a list of useful contacts to provide to families.
Families will be encouraged to:

- Provide Healthy food for their child/ren in care
- Promote good dental health practices with their child

Dental Accidents/Incidents

Educators will:

- Manage as an emergency, inform the parents/family and complete an Accident/Incident Report Form.
- Not reinsert the tooth back into the socket.
- Gently rinse the tooth or tooth fragments in clean milk or clean water to remove blood and place in a clean container or wrap in cling wrap to give to the parent or dentist.
- Place a firm pad of gauze over the socket and have the child bite gently on the gauze.
- Seek dental advice as soon as possible and ensure the tooth/tooth fragments are taken to the dentist with the child within 30 minutes.
- Report incident to Coordination unit within 3hrs.

If the tooth has been in contact with dirt or soil, advise the family that tetanus prophylaxis may be required and advise them to consult with both their dentist and doctor.

Reviewed: January 2012

To be reviewed on or before: March 2014
NAPPY CHANGING AND TOILETING POLICY

AIM:
Educators will minimise the spread and risk of infectious diseases between children and Educators by ensuring nappy changing, and toileting is conducted with safe hygienic practices.

STATEMENT:
Many diseases are spread by faeces, urine or other body fluids. Childcare workers and children in care are at about twice the usual risk of diarrhoeal infections and increased risk of hepatitis A, due to changing and handling of soiled nappies, and assisting young children with toileting routines. Efficient changing and disposal of soiled nappies, and safe toileting and toilet training methods significantly reduces the risk and the spread of diseases transmitted by faeces and body fluids.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2
Public Health Act 1991 2010 No127
Work Health & Safety Act 2011(NSW)
Work Health & Safety Regulation 2011 (NSW)

PROCEDURE
To minimise risk and the spread of infectious diseases that are transmitted by faeces and other body fluids through changing nappies, toileting or toilet training in infants and children.
Co-ordination Unit staff will:

- Be aware of the requirements of the Education and Care Services National Regulations 2011 and the National Quality Standard in regard to nappy changing and toileting practices and facilities.
- Keep up to date with information about current hygienic practices in childcare services.
- Resource Educators on current advice from health authorities in regard to hygienic practices for nappy changing and toileting routines in childcare.
- Monitor safe hygienic practices in regard to nappy changing and toileting practices and facilities by Educators as part of the home visits conducted by service staff.
- Support the family and Educator with specific health and hygienic needs.

Educators will:

- Abide by their obligations under the Education and Care Services National Regulations 2011 and the National Quality Standard.

This includes the following requirements:

- A children’s service must have laundry arrangements.
- The premises of the children’s service must have safe, sanitary facilities for storage of soiled clothes, linen and nappies before laundering or disposal.
- Any areas, in which bottles are prepared for children under the age of 2 years, must be separate from any area in which nappy-changing facilities are provided.
- The premises of a children’s service must have toilet, hand washing and bathing facilities that are safe and appropriate to the ages of the children at the service and must have products and equipment for cleaning those facilities whenever necessary.
- Where there are children in care that wear nappies (including “pull-ups”), the Educator must provide:
  - A stable surface for changing nappies, together with a mat that has an impervious washable surface.
• Hand washing facilities for adults in the immediate vicinity of the nappy changing area.
• Sanitary facilities for the storage of soiled nappies pending laundering or disposal of the nappies.
• Adequate facilities for laundering soiled clothing or otherwise hygienically dealing with the waste.
• Facilities for the storage of clean nappies.
• Any nappy changing bench or mat must be cleaned after each use.
• Nappy changing facilities must be designed, located and maintained so as to prevent unsupervised access by children (this relates to children not being able to climb on high change tables nor access unsafe products).
• Nappy changing facilities must be separate from food preparation facilities.
• The dignity and need for privacy of each child is respected during nappy changing and toileting.
• Children are closely attended on the nappy change table (if applicable).
• Toileting „accidents” and bed wetting are managed in positive and supportive ways.
• Consultation with families on any toileting issues relating to their child.
• Sharing of information about a child’s nappy changing and toileting while in care with that child’s family.
• Support nappy changing and toileting as being relaxed and positive experiences e.g. nappy changing used as an opportunity to engage in one to one games and songs.
• Consider and accommodate the specific health and hygiene needs of older children in care giving consideration to protecting their dignity and respecting their right to privacy.

Families are encouraged to:

• Discuss toileting issues relating to their child with the Educator.
• Work in partnership with Educators and Co-ordination Unit staff to ensure toilet training with their child is addressed with consistent routines and minimal stress.
• Provide adequate nappies, wipes and spare clothing for the Educator to use.

Reviewed: January 2012

To be reviewed: March 2014
NAPPY CHANGING PROCEDURE

PROCEDURE

- Have an area specifically set aside for changing nappies.
- Check to make sure that all the supplies you need are ready.
- Get a walking child to walk to the change mat.
- Carrying a child away from your body is only necessary if there are faeces on the child and/or their clothing.
- Disposable nappies may reduce the risk of infections as disposable nappies do not “leak” as easily as cloth nappies and are able to be disposed of immediately.
- Use the following method to stop disease spreading through contact with faeces:
  - Wash your hands.
  - Place paper towel on the nappy change mat.
  - Always wear gloves when changing nappies.
  - Remove the child’s nappy and dispose of to minimise risk of cross contamination.
  - Remove any clothes with urine and/or faeces on them.
  - Clean the child’s bottom.
  - Remove the paper and dispose of to minimise risk of cross contamination.
  - Remove your gloves now, before you touch the child’s clean clothes. Remove gloves by peeling them back from your wrists, turning them inside out as you go. Do not let your skin touch the outer contaminated surface of the glove. Dispose of gloves to minimise risk of cross infection.
  - Dress the child. Wash and dry the child’s hands. Now you can hold the child close to you.
  - Take the child away from the change mat.
  - Clean the change mat with detergent and warm water at the completion of each nappy change.
  - Wash your hands.
PAPER ON THE NAPPY CHANGE MAT
Every time a child has their nappy changed, germs are put on the surface of the change area. By placing a piece of paper on the surface of the change mat many of the germs from the child are kept on the paper and do not contaminate the surface at all. The paper is removed in the middle of the nappy change, before the child’s clean clothes are put on, the paper and the germs are then put in the bin. Any paper can be used for this. Paper towel is easy to use but can be expensive, grease proof paper is another alternative.

CLEANING THE NAPPY CHANGE MAT

- Use this method to help keep the nappy change area clean.
- After each change and at the end of the day, thoroughly wash the mat well with detergent and warm water. Use paper towel for cleaning and drying the surface.
- Wash and dry your hands.

NB: On excursions clean the change mat appropriately.

Babies need to have their hands washed as well
Babies need their hand washed as often and as thoroughly as older children. If the baby is able to stand at an appropriate sized hand basin, you need to wash and dry their hands just as you would for yourself. If the baby is unable to stand at a hand basin, wash their hands with either pre-moistened face washer or wet disposable cloths, then pat dry with paper towel.

NB: A spray/squeeze bottle made up in the morning with detergent and warm water is sufficient for the day if the mat is vigorously rubbed during cleaning. The spray bottle must be clearly labelled detergent and water.

The spray/squeeze bottle must be rinsed out every evening and made fresh every morning.

Reviewed: January 2012
To be reviewed on or before: March 2014
TOILETING PROCEDURE

- Ask families to supply several changes of clothing.
- Place soiled clothes in a plastic bag, tying the top firmly, for families to take home at the end of the day.
- Help the child use the toilet.
- Help the child wash and dry their hands. Ask older children if they washed and rinsed their hands, counting slowly to 10 or singing for this length of time. Explain to the child that washing their hands and drying them properly will stop germs that might make them sick.
- Using a potty chair increases the risk of spreading disease. If the child can use a toilet this is preferable. If the child must use a potty, empty the contents into the toilet and wash the chair. Do not wash it in a sink used for washing hands.
- Wash your own hands.

Reviewed: January 2012

To be reviewed on or before: March 2014
HAND-WASHING PROCEDURE

According to Staying Healthy in Education and Care – Preventing infectious diseases in childcare

BACKGROUND
Infections can be spread by a person who shows no signs of illness. Hand washing is one of the most effective ways of preventing the spread of infection.

How to wash hands
Use the following method to make sure your hands and the children’s hands are as germ free as possible. The process of thoroughly washing and rinsing your hands should take 10-15 seconds. This can be achieved by slowly counting to 10 when you wash and then slowly counting to 10 when you rinse. This is about as long as it takes to sing “Happy Birthday” twice. Wash hands with soap and running water, preferably warm.

- Wet hands with running water.
- Use liquid soap and spread over hands.
- Rub your hands vigorously as you wash them.
- Wash your hands all over. Pay particular attention to wash the palms and backs of hands, in between fingers, under finger nails and around wrists.
- Rinse your hands thoroughly to remove all suds and germs. Thorough rinsing will help prevent dermatitis from suds.
- Turn off the tap using single use towel
- Pat dry your hands with a new single use towel.

When to wash your hands

- Before handling food, including a baby’s bottle.
- Before eating.
- Before and after changing a nappy.
- After removing gloves.
- After going to the toilet.
- After cleaning up blood, faeces or vomit.
- After wiping a nose either a child’s or your own.
- Before giving medication.
- After handling garbage.
- After coming in from outside play.
- After cleaning the nappy change area
- After assisting a child to go to the toilet

Liquid soap dispensers and disposable paper towels are the preferred option for hand washing. Alcohol based hand cleaners can have a role if proper hand washing facilities are not available e.g. on excursions. After several uses of an alcohol based hand wash cleaner you will need to wash your hands properly with liquid soap and water.

**When to wash the children’s hands**

- Before and after eating and handling food;
- After having their nappy changed. Their hands will become contaminated while they are on the change mat;
- After going to the toilet;
- After coming in from outside play;
- After touching nose secretions;
- After coming in contact with blood, faeces or vomit.

While on excursions where water may not be available, Educators must make arrangements to ensure hands are cleaned appropriately to prevent the spread of infection.

**Reviewed: January 2012**

**To be reviewed on or before: March 2014**
Children’s Safety
Eurobodalla Shire Council's Child Protection Policy

Aim:
Council is committed to creating a workplace where children are safe and protected. Eurobodalla Shire Council has an obligatory role in the community to help prevent and reduce incidents of child abuse. Council has established procedures for screening employees who provide services to children and for reporting and dealing with any child abuse allegations or conviction made against an employee.

Relevant Legislation:
The Child Protection (Offenders Registration) Amendment Act 2004
Child Protection Legislation Amendment Act 2002
Child Protection (Prohibited Employment) Act 1998,
The Commission for Children and Young People Act 1998
Ombudsman Amendment (Child Protection and Community Services) Act, 1998 Ombudsman
Act 1974

Introduction:
The Council has responsibilities relating to child protection and requirements for reporting any reportable conduct allegations/conviction made against an employee. Council is committed to establishing child-safe and friendly workplace practices to keep children and young people free from harm. This includes care in selecting staff in child-related work and establishment of systems for dealing with problems and complaints.
The NSW Ombudsman is required to oversee and monitor investigations into allegations and convictions of child abuse by employees of designated and nongovernment agencies and Public Authorities. Council comes under the category of a Public Authority and accordingly, has an obligation to inform its employees of the provisions of the child protection legislation and ensure appropriate policies and procedures are in place to give proper effect to the legislation.

Statement:
Eurobodalla Shire Council believes children have the right to be protected and is committed to creating a workplace where children are safe and protected.
The Council has legal requirements under the Child Protection Legislation Amendment Act 2003 regarding reportable allegations, reportable conduct and reportable convictions and undertakes to meet its reporting obligations. The Council will not tolerate any form of reportable conduct by employees and undertakes to take seriously and investigate all allegations of reportable conduct as required by the Act.

\textit{Child Protection – Policy Page 2}

In making this statement, Council is committed to the proper education and training of its employees in the area of child protection and making them aware of their obligations under the Act.

This policy relates to all employees of council and to outside people engaged by Council to provide services to children (including in the capacity of a volunteer).

In accordance with the Act the General Manager is considered to be the Head of Agency and has final responsibility for the implementation of the provisions of the Act including submission of investigation reports to the Ombudsman’s Office.

All staff has an obligation to immediately report allegations, incidents or convictions in relation to reportable conduct in the first instance to their Manager or the Human Resources Team Leader. The matter must then be addressed in accordance with the associated code of practice.

\textbf{Recruitment Procedures:}

Council’s recruitment procedures are to include processes to identify positions which involve employees working in child related work areas. For such positions, Council will ensure that checking procedures to identify people who are not suitable to work with children are completed prior to an offer of employment with Council. These procedures may include criminal records checks, working with children checks and/or other pre-employment screening or declarations as required by Child Protection Legislation Amendment Act 2003.

\textbf{3. Definitions:}

\textbf{3.1 Allegation}

Allegation of child abuse may take the form of a:

- Notification made without proof
- Declaration
Notification made by a party, which they undertake to prove.

It is important to note that there need not be witnesses to an actual incident, nor does the alleged incident necessarily need to have occurred in work time. The fact that an allegation has been made can be sufficient to require Council to report the matter to the Ombudsman.

For an allegation to be reported to the Ombudsman it must have the following components:

i. The person who is the subject of the allegation must be a current employee or has been an employee at the time the allegation was made and must be identifiable not necessarily by name but by other information including his/her description and work schedules.

ii. The allegation must refer to a description of behaviour that may constitute reportable conduct.

iii. The alleged victim was aged under 18 years at the time of the alleged offence or behaviour and must be identifiable as in (1) above.

3.2 Child
The legislation defines a 'child' as any person under the age of 18.

3.3 Employee
An employee includes:

i. Any employee of the Council, whether or not employed in connection with any work or activities of the Council that relates to children, and

ii. Any individual engaged by the Council to provide services to children (including in the capacity of a volunteer).

3.4 Head of Agency
In accordance with the Ombudsman Act the General Manager is considered to be the Head of Agency.
3.5 Outside People Engaged by Council
Outside People engaged by Council may include the following people who are engaged to provide services to children:

- Contractors
- Sub-contractors
- Foster Educators
- Volunteers
- Work Experience participants, and
- Student Placements

3.6 Reportable Allegation
Reportable Allegation means: an allegation of reportable conduct against a person or an allegation of misconduct that may involve reportable conduct.

3.7 Reportable Conduct
Reportable Conduct means:

i. Any sexual offence, or sexual misconduct, committed against, with or in the presence of a child (including a child pornography offence), or

ii. Any assault, ill-treatment or neglect of a child, or

iii. Any behaviour that causes psychological harm to a child, whether or not, in any case, with the consent of the child.

3.8 Reportable Conviction
A Reportable Conviction means: a conviction (including a finding of guilt without the court proceeding to a conviction), in this State or elsewhere, of an offence involving reportable conduct.
Child Protection Policy – Family Day Care

Aim:
Eurobodalla Family Day Care will implement and review procedures in accordance with the NSW Child Protection Legislation to ensure all stakeholders within the childcare service are informed of their responsibilities in Child Protection matters.

Statement:
Every child has a right to be cared for in a safe secure environment at all times. It is important that every child coming into care is kept safe, is nurtured, has their emotional and physical needs met, and has issues relating to child abuse dealt with in a sensitive and reassuring manner.

Relevant Legislation:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 clause 84
“Keep Them Safe: A shared approach to child wellbeing”, NSW Government
www.keepthem safe.nsw.gov.au
Children Legislation Amendment (Wood Inquiry Recommendations)Act 2009 No 13
Children and Young Persons (Care and Protection) Act 1998 No 57
Ombudsman’s Act 1974 Act 1974 No 68

Key Resources and Contacts:
National Quality Standards 2011 (ACECQA) – Quality Area 6, Quality Area 2

Community Services (CS)
Child Protection Helpline 13 3627 (Mandatory reporters line only)
Child Protection Helpline 132 111 (General number)
DEFINITIONS

MANDATORY REPORTERS (definition as per DOCS Website)
A “mandatory reporter” is any person who delivers health care, welfare, education, children’s services, residential services or law enforcement wholly or partly to children (aged under 16) as part of their paid work and includes any person who directly manages or supervises such work. If you are a mandatory reporter with current concerns that a child aged under 16 is at risk of harm, you are required to make a report to DOCS. This is a legal obligation, which carries a penalty if you fail to comply.

Note: Co-ordination Unit staff and the self-employed Approved Educators registered with Eurobodalla Family Day Care are Mandatory Reporters.

RISK OF SIGNIFICANT HARM
Risk of Significant Harm means that you have current concerns for the safety, welfare or wellbeing of a child or young person that are present to a significant extent of any one or more of the following circumstances:

- the child’s basic physical or psychological needs are not being met or are at risk of not being met (neglect)
- the parents or caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive necessary medical care,
- the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive an education in accordance with the Education Act, in the case of a child or young person who is required to attend school
• the child or young person has been, or is at risk of being, physically or sexually abused or ill-treated,
• the child or young person is living in a household where there have been incidents of domestic violence and, as a consequence, the child or young person is at risk of serious physical or psychological harm,
• a parent or other caregiver has behaved in such a way towards the child or young person that the child or young person has suffered or is at risk of suffering serious psychological harm,
• The child was the subject of a pre-natal report under section 25 and the birth mother of the child did not engage successfully with support services to eliminate, or minimise to the lowest level reasonably practical, the risk factors that gave rise to the report.

INVESTIGATIONS:
All aspects of a Child Protection investigation will be conducted with:

• Confidentiality
• Procedural fairness
• Natural justice.

PROCEDURES

Approved Provider Eurobodalla Shire Council:
The Approved Provider of Eurobodalla Shire Family Day Care, with the support of the Co-ordination Unit staff, if required, will:

• Undertake an internal investigation to determine appropriate action to be taken in relation to a report against an Educator or Co-ordination Unit staff member.
• Ensure a report is made of any reportable allegations to the Department of Family and Community Services, and/or Police and, in the case of an allegation against an Approved Educator or Co-ordination Unit staff member, to the Ombudsman’s Office within the specified time limit (30 days).

Note: this includes all reportable allegations or convictions against a Registered Family Day Care Educator or Co-ordination Unit member whether the incident occurred in or outside the workplace
• Provide a final report to the Ombudsman’s Office and other appropriate agencies e.g. Commission for Children and Young People, if the report is against a staff member or an Approved Educator.

**Co-ordination Unit Staff:**
In the area of child protection, the Co-ordination Unit staff will:

• Support the Approved Provider with reporting child protection matters if requested.
• Report to the Department of Family and Community Services (DOCS) where there is reasonable grounds to suspect a child is at risk of harm.
• Document all areas of concern in relation to child protection (record keeping).
• Maintain confidentiality
• Protect the well-being of the children by acting sensitively in matters of child protection.
• Support Educators, and/or parents, when a child protection incident occurs.
• Conduct investigations when required in a sensitive and respectful manner.
• Provide information to Educators and parents on the Eurobodalla Family Day Care Child Protection Policy and related information.
• Conduct themselves professionally, as a role model and in the best interests of the protection of children from harm, at all times.
• Keep informed of current Child Protection matters by attending training every 18 months
• Offer regular training on Child Protection to Educators.

**Educators will:**
In regards to Child Protection, the Registered Educators will:

• Provide the Approved Provider and the Co-ordination Unit staff with information, if required to complete Child Protection reports.
• Report to the Department of Community Services (DOCS) Mandatory Reporters helpline 13 3627 (13 DOCS) where there is reasonable grounds to suspect a child is at risk of harm.

**Note:** Educators may request the assistance of a staff member to support them in making a report to DOCS.

• Document all areas of concern in relation to Child Protection (record keeping).
• Maintain confidentiality – see Confidentiality of Records Policy 2012
• Protect the well-being of the children by acting sensitively in matters of Child Protection.
• Conduct themselves professionally and in the best interests of the protection of children from harm, at all times.
• Seek advice from the Co-ordination Unit staff or other professionals in matters relating to Child Protection if required.
• Keep informed of current Child Protection matters by attending training every 18 months.

Families:
In relation to Child Protection matters, the parents of children in care are requested to:

• Read the Child Protection Policy of the service.
• Report any concerns of a child being at risk of harm whilst in care to the Certified Supervisor or Educator or Educational Leader of the service.
• Abide by the decisions of the Authorised Supervisor or delegated staff member of the service in relation to the placement of the child into care, if requested.
• Remain confidential and respect the privacy of those involved in any incident that may occur.
• Seek support and advice from Co-ordination Unit staff if required.

REVIEWED: OCTOBER 2011

TO BE REVIEWED: OCTOBER 2013
ACCIDENT, INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

AIM:
To ensure children receive immediate and appropriate medical attention and care in the event of an illness, accident or emergency.

STATEMENT:
In the event of an accident or emergency situation occurring to a child in care in the presence of an educator, the Educator has a duty of care to take immediate action and provide appropriate services or care to those involved. The Education and Care service National Regulation states authorisation by the family for such action and treatment of a child must be made at enrolment with the service.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 85, 90, 93, 97)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

PROCEDURES:
To ensure immediate action and appropriate services and care are provided in a medical or dental emergency or accident:

Co-ordination Unit Staff will:

- Support Educators with relevant forms for collecting authority and information.
• Be familiar with the regulatory requirements in relation to dealing with emergency situations with children.
• Provide Professional Development and/or information on appropriate practices when dealing with emergency situations with a child.
• On enrolment of a child, ensure the family has given written authorisation for any Educator or staff member of the service, to seek and/or carry out emergency ambulance, medical, hospital or dental advice or treatment if required.
• Have a current First Aid qualification as described in the Regulations.
• Upon receiving notice of a serious incident involving a child attending Family Day Care where the incident results in the child receiving medical, dental or hospital treatment immediately notify the family, the Approved Provider of the service (Eurobodalla Shire Council) and the Director-General.
• Upon receiving notice of the death of a child while being provided with care, the Authorised Supervisor will immediately notify the child’s family, a police officer, the Director-General and the Approved Provider of the service.

**Educators will:**

• Take all precautions to reduce the incidence of accidents and injuries, recognise potential accidents that can occur which need to be responded to effectively, e.g. burns, convulsions, head and eye injuries, fractures, poisons, bites, stings, cuts.
• Regularly practice emergency procedures, as per regulations.
• Update and prominently display cardiopulmonary resuscitation (CPR) guides both inside & outside premises.
• Display emergency procedures and current relevant emergency telephone numbers – 000 (ambulance, police, fire brigade), hospital, Poison Information Centre, & for educators, FDC Coordination Unit & After Hours contact. Have available contact numbers of parents/guardians, doctor, pharmacy, Public Health Unit, & NSW Department of Education & Communities.
• Have a current First Aid qualification and asthma and anaphylaxis management training
• Discuss with the families of children in care, their responsibility in covering any expenses arising from emergency treatment, and their responsibility in providing adequate information on the child’s:
health
past and current medical history and any allergies
medications if relevant
recommended medical and dental provider
written action plans for medical conditions e.g. anaphylactic reactions and allergies, asthma management, haemophilia, diabetes, epilepsy, etc.

- Inform the Co-ordination Unit staff of any relevant emergency plan for a child.
- In the event of an incident, injury, trauma or illness, inform the family or emergency contact as soon as possible so that they can take over the responsibility of their child and decide on further action to take if necessary.
- Complete the incident, injury, trauma or illness form – these forms are to be sent in and stored at the Co-ordination Unit.
- Obtain parent signatures on forms and return to the office ASAP
- Inform the Co-ordination Unit staff of any injury to a child that requires medical attention Complete the Family Day Care Australia (FDCA) Incident Report Form (for insurance purposes) for any accident where third party medical advice has been required (e.g. doctor, dentist). This form needs to be returned to the Co-ordination Unit as soon as possible.
- Inform the Co-ordination Unit of any serious incident ( DEFINITION CLAUSE 12)
- In the event of the death of a child while being provided with care, the Educator will immediately call an ambulance, the child’s families and Nominated Supervisor or representative of the service.

Families are encouraged to:

- Provide up to date medical and contact information in case of an emergency.
- Seek their own health insurance if they so desire.
- Provide written emergency or health management plans if applicable to their child’s health.
- Take over the responsibility of their child as a matter of urgency if contacted by their child’s Educator to do so.
IN THE EVENT OF A SERIOUS INCIDENT, ACCIDENT, ILLNESS, INJURY OR TRAUMA

The Educator will:

- Attend to the child immediately.
- Provide appropriate first aid treatment, including medical assistance e.g. Any medical/dental treatment required should be carried out by the parents’ nominated preferred medical/dental practitioner, where possible. If necessary an ambulance is to be contacted immediately by dialling 000.
- Stay with the child until the ambulance arrives. While awaiting the ambulance, the Educator is to contact the Coordination Unit to report the accident.
- Contact the family and inform them that the child is being taken to the hospital. Educators are to ensure that they reassure the parents, and inform them regarding which hospital the child has been taken to.
- Complete a Eurobodalla Shire Council Incident Report is to be completed that day by the Educator. Copies of the incident report is to be sent to the Senior Coordinator, Children’s Services and are to be archived. *(The Senior Coordinator forwards any child incident forms related to dental accidents, head injuries or other accidents where medical attention is sought, to their insurance company).*
- Provide Parents with a copy of the incident report form to be signed as acknowledgement of being informed of the incident.

IN THE EVENT OF A MINOR INCIDENT, ACCIDENT, ILLNESS, INJURY OR TRAUMA

The Educator will:

- Attend to the child immediately.
- Provide appropriate first aid treatment.
- Complete a Eurobodalla Shire Council Incident Report is to be completed in full that day by the Educator.
- Contact Parents if the incident requires that the child be sent home for the day, or alternatively notified of the incident when they come to collect the child.
- Provide Parents with a copy of the incident report form when they come to pick up the child and are to sign a copy of this as acknowledgement of being informed of the incident.

REVIEWED: APRIL 2012
ADMINISTRATION OF FIRST AID

AIM:
To ensure all staff and Educators now their responsibilities and follow correct procedures to administer first aid in an emergency

STATEMENT:
First Aid equipment should be available to all staff, educators, children and visitors while children are being educated and cared for. This includes while on excursions. All staff and Educators must undertake First Aid, Anaphylaxis and Asthma management training.
All precautions must be taken to prevent accidents and injuries and to minimise complications. Managing accidents and emergencies requires careful planning and reduces the likelihood of major injuries and complications from injuries. “The person caring for the child assumes responsibility for acting in the best interests of the child in the event of an injury. The careful exercise of this discretion is considered part of the staff/educator’s duty of care.”

RELEVANT LEGISLATION:
Education and Care services National Regulation 2011
Education and Care services National Law 2010

KEY RESOURCES:
Guide to the Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (ACECQA).
National Quality Standards 2011 (ACECQA)

PROCEDURES
Co-ordination Unit staff will:

- Adhere to the Incident, Injury, Trauma and illness Policy in all accident situations
If required ensure a FDC staff member goes to support educator at scene of accident.
If necessary organise alternate care or collection by parents of other children at the educator’s service.
Ensure that all blood or bodily fluids are cleaned up in a safe manner.
Ensure that anyone who has come in contact with any blood or fluids washes in warm soapy water.
Report accidents/incidents to appropriate authorities as soon as possible where medical or emergency attention was sought or should have been sought for a child. These authorities include (Not necessarily in this order)
- Parents/Guardians
- ESCFDC Nominated Supervisor
- ESC Manager of Corporate and Community Outcomes or General Manager
An ambulance service.
The police.
The Department of Education & Communities made within 24 hours if it is a serious incident or death of a child.
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Educators will:

- Adhere to the Incident, Injury, Trauma and illness Policy in all accident situations.
- Reassure the other children and keep them calm, keeping them informed about what is happening, and away from the injured child.
- Ensure that the child is kept under adult supervision until the child recovers or until a parent of the child or some other responsible person takes charge of the child.
- Take immediate steps to secure urgent medical or dental treatment.
- Advise the parent or guardian if any matter concerning the child’s health arises while the child is being provided with the education and care service, Ensure the child is returned as soon as practicable to the care of a parent/guardian of the child
- Inform parent, family or other responsible person as required of the emergency.
- Ensure a fully stocked and updated first aid kit will be kept in a secure storage facility at the service. Staff/educators are to ensure that this is easily recognisable and readily accessible to all staff/educators and kept inaccessible to the children.
• Take a first aid kit will be taken on all excursions. Educators may choose to take their home first aid kit on excursions.
• **A first aid manual will also be kept at the service.**
• Keep a cold pack in the freezer or single use “chemical” cold pack for treatment of bruises and strains.

**In the case of a minor accident the educator will:**

- Assess the injury.
- Attend to the injured person and apply first aid as required.
- Ensure that disposable gloves are worn when dealing with all blood or bodily fluids and that they are cleaned up and disposed of in a safe manner.
- Record the incident and treatment given on the Accident/Injury/Illness form, how occurred, treatment given and by whom, to be signed by educator. A copy is to be given to parents/guardians.
- Obtain parent signature confirming knowledge of the accident.
- Notify the parents either by phone after the incident if seen fit or on their arrival to collect the child.

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

- Assess the injury, and decide whether the child needs to be attended to by local doctor or whether an ambulance should be called.
- If the child’s injury is serious the first priority is to get immediate medical attention. Although parents should be contacted straight away, if not possible, there should be no delay in organising proper medical treatment. Keep trying to contact the parents in the meantime.
- Contact the Coordination Unit and advise of accident as soon as possible. FDC staff will contact parents/guardians of the injured child if necessary. And provide support to Educator.
- Attend to the injured person and apply first aid as required.
- Ensure that disposable gloves are used with any contact with blood or bodily fluids.
- Stay with the child until suitable help arrives, or further treatment taken.
- Try to make the child comfortable and reassure them.
• If an ambulance is called and the child is taken to hospital a staff member/educator will accompany the child if possible.
• Record the incident and treatment given on the appropriate form.
• Obtain parent signature confirming knowledge of the accident, where necessary.

Families will:

• Provide written consent for appropriate medical, dental or hospital treatment to be carried out in the event that such actions appear to be necessary because the child has been injured, or is ill. Enrolment will be denied if consent is not provided.
• Parents will be required to supply the contact number of their preferred doctor or dentist, Medicare number and expiry date.
• Supply contact information for those authorised to act in the event that a parent cannot be contacted.

REVIEWED: APRIL 2012

TO BE REVIEWED: MAY 2014
EMERGENCY AND CRITICAL INCIDENTS

AIM:
To provide a clear outline for all staff and Educators of how to respond to an emergency and critical incidents. Emergencies and critical incidents can occur at any time, and therefore a planned and orchestrated response is the best means of ensuring the safety of all people.

STATEMENT:
Emergencies and critical incidents can vary significantly in duration. Effective emergency management involves coordinated actions that will:

- Reduce the likelihood of emergencies and critical incidents;
- Minimise the impact on students, staff and site activities; and
- Facilitate the return of the site to normal operations as soon as possible

Management of emergencies and critical incidents will involve consideration of:

- Prevention and mitigation
- Preparedness for
- Response to
- Recovery from and
- Review of emergencies and critical incidents

A critical incident may include:

- An accident
- Loss
- Death
- Natural disasters
- Violence
- Terminal illness
- Emergency situations
- Media attention
- Harassment
- Emergency First Aid
- Robbery
RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Education and Care Services National Regulations 2011 (Clause 78, 79 & 80)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

Local Police
Batemans Bay (02) 4472 0099
Bodalla (02) 4473 5244
Moruya (02) 4474 2444
Narooma (02) 4476 2044
Fire Brigade 000
Ambulance Service 000
NSW Department of Community Services Hotline 132 111

PROCEDURES:
Co-ordination Unit Staff will:

• Provide support and information to Educators on compliance requirements for emergency and evacuation procedures.
• Provide forms to assist Educators in the recording of Emergency and Evacuation practise (Educators may devise their own forms).
• Monitor the compliance on CDO visits.
• Upon receipt of the quarterly emergency practise record, will photocopy for recording purposes, and return original to Educator.
• Keep this record for 2 years.

Evacuations/Lockdown:
Evacuation/lockdown may be necessary in the event of a fire, chemical spill, bomb scare, earthquake, gas leak, siege, flood, or bush fire.
The emergency procedure should be short and simple

Educators will:

• Choose an assembly area and a backup area to be used if the assembly area is unsuitable because of circumstances.
• Display Emergency procedures in a visibly prominent area of the care environment (near exits)
• Practice Emergency evacuation/lockdown procedures with all children at least every three months.
• Evaluate the emergency evacuation/lockdown procedures
• Forward records of the evaluation of the emergency procedure to the office each quarter (January to March, April to June, July to September and October to December).
• Prepare the environment by having an organised environment to easy locate:

1. Sign-in sheets
2. Emergency contacts
3. Council phone numbers
4. Medication forms/box
5. First Aid Kit.
6. Assembly Area

The assembly area will be:
Well clear of the building and any area required for the access and operations of emergency services;
• An area which children can be moved from without going back towards the danger area;
• Not at the rear yard, unless there is a gate and an access route away from the danger;
• Escape routes to assembly areas must be kept clear of obstruction at all times; and
• The lockdown area needs to be in a suitable room inside the Service building.

Fire Equipment:
Educator’s homes must be provided with:

• Appropriately placed smoke detectors;
• A fire blanket that is kept adjacent to cooking facilities; and
• Appropriately located fire extinguishers.

NB: Equipment is required to be tested every 6 months or as directed by safety regulations.

Timing is important in terms of counselling after critical incidents:
Following is the Critical Incident Management Plan to be followed in the event of a critical incident.

REVIEW: JANUARY 2012

NEXT REVIEW: JUNE 2014
EXCURSIONS

AIM:

- To ensure that excursions are safe and meaningful experiences for both adults and children.
- To provide an opportunity for children to engage in meaningful ways with their communities.
- To plan excursions with careful consideration of the safety of children and adults.
- To only carry out excursions when full permission and documentation have been completed and obtained.
- To undertake full risk assessments of the venue, activities and transport, considering the educational value of the excursion.
- To ensure that emergency plans are in place including a plan for first aid requirements and emergency contact details.

STATEMENT:

Excursions are an integral part of Family Day Care. They provide opportunities to expand and enhance children’s experiences, explore different environments and engage with the community. Excursions also provide opportunities for Family Day Care Educators and children to gather together at playsession and special events and join together as a larger group. These larger group experiences allow children opportunities to socialise with a range of children and adults.

CONSIDERATIONS:

Education and Care Services National Regulations (2011)
Guide to the National Quality Standard 2011 (elements 2.3.1; 2.3.2; 2.3.3)
Kidsafe www.kidsafe.org.au
Work Health and Safety Act 2011

PROCEDURES:

Planning and Preparations:

All excursions will be planned in advance to:

- Have fully informed, written parental authorisation prior to an excursion;
- Have approval from the Authorised Supervisor at least 3 days prior to an excursion;
- Maximise both children’s developmental experiences and their safety;
- Reflect the age, capability and interest of the children.
All excursions will be thoroughly researched to ensure:
- Supervision is adequate so children cannot be separated from the group;
- Access to hazardous equipment and environments are minimised;
- There is adequate access to food, drink and other facilities (toilets, hand washing etc);
- Consideration is given to the mobility and supervision requirements of children with additional needs;
- That adequate sun and shade protection is available.

**When planning for all excursions Educators will:**

- Assess the requirements for the excursion;
- Conduct a risk assessment;
- Book transport and venues (if required);
- Make alternative arrangements for adverse weather conditions;
- Inform families of the details of the excursion including destination, objectives and outcomes, and what the child should bring;
- Provide parents or legal guardians with an excursion permission form to complete to authorise their child to participate on the excursion;
- Collect completed permission forms for each child attending the excursion;
- Request additional adult participation on the excursion where required;
- Arrange for a suitably equipped first aid kit (including EpiPen) and mobile phone to be taken on the excursion.

Additional factors need to be considered in the planning of excursions for children with additional needs. Where possible, our service will uphold the right for all children to access all excursions and engage in meaningful ways while on excursions.

**RISK ASSESSMENT**

**The Family Day Care Educator will:**

Ensure a risk assessment is conducted prior to any excursion to identify and assess the risk the excursion may pose to the safety, health and wellbeing of any child whilst on the excursion, and will specify how the service will manage any risks identified.

The risk assessment conducted will consider:

- Destination and duration of the excursion;
- Potential water hazards or any hazard associated with water based activities;
• Transport to and from destination;
• Number of Educators, responsible persons, and children involved;
• Supervision requirements of the excursion;
• Proposed activities;
• Items to be taken on the excursion e.g.: mobile phone, emergency contact numbers etc.

The Educator will make alternate arrangements for any children who are not attending the excursion, and ensure that any dialogue or pre-planning for the excursion does not alienate that child from social networks.

If the excursion is a regular occurrence a risk assessment will only be carried out once, provided the circumstances around the excursion have not changed in any way since the initial risk assessment was conducted.

The Approved Provider and Nominated Supervisor will:

• Advise Educators promptly of excursion approval: excursions will be approved if they meet regulatory requirements;
• Maintain an excursion register indicating the whereabouts of all Educators and children throughout the day;
• Record contact with Educators regarding the excursion approval process.

Co-ordination Unit staff will:

• Provide Educators with the form templates required to provide correct information to families and record permission for attendance;
• Support Educators in completing forms and deciding on appropriate excursion activities;
• Provide ongoing training on Work Healthy And Safety Act 2011 and risk assessments;
• Ensure the Approved Provider and Authorised Supervisor receives the required documentation to approve excursions.

AUTHORISATIONS FOR EXCURSIONS [Clause 99-102,]

All excursions will include the following information:

• The child’s name;
• The reason for the excursion;
The date of the excursion;
The proposed destination;
The method of transport or walking itinerary;
The proposed activities to be carried out during the excursion;
The proposed period of time during which the excursion is to take place;
The anticipated ratio of adults supervising to children;
The number of adults to accompany and supervise the children;
The number of children attending the excursion;
The name of the person with a current approved first aid qualification who will accompany the children on the excursion;
That a risk assessment has been prepared and is available;
An emergency contact number for the excursion.

The Family Day Care Educator will:

- Forward all risk assessments to the Co-ordination Unit for approval well prior to the planned excursion;
- Provide families with a written copy of all excursion details (as stated in Clause 102 (4) of the Regulations);
- Obtain written consent from families and check verbally that families understand what the excursion entails;
- Provide the Co-ordination Unit with a copy of the signed parent permission forms with the risk assessment well prior to the excursion. (Minimum of 5 working days)
- NOT go on routine or non-routine excursions without approval from the Authorised Supervisor and Approved Provider.

If the excursion is a regular outing, authorisation is required once in a 12 month period. All parents or legal guardians will be asked to sign permission forms for regular excursions on enrolment and at the beginning of each subsequent year.
No child will be taken on an excursion unless written permission from parents or legal guardian has been received.
Parents are to be given no less than 3 days’ notice for any excursion. Risk assessments for each excursion must be kept with your appropriate records.
Co-ordination Unit will:

- Advise Educators promptly of excursion approval: excursions will be approved if they meet regulatory requirements;
- Maintain an excursion register indicating the whereabouts of all Educators and children throughout the day;
- Maintain records provided to Eurobodalla Family Day Care in regards to excursions;
- Support Educators on the safe conduct of excursions.

Families and Volunteers:

Families will be encouraged to participate in excursions to assist in maintaining suitable child/staff ratios. If the parent needs to bring their child’s sibling because they cannot find suitable care, the siblings must be included in ratios.

If additional adults are required volunteers will be invited. Volunteers will be mature, responsible people who are aware of the hazards and responsibilities of taking a group of children out of the service.

Family members/volunteers will not to be left in sole charge of children and must be supervised by an Educator at all times.

All volunteers/family members’ details will be entered into the appropriate staff record for that day.

Transport and Traffic:

Safety of children will be considered in the choice of route and mode of transport. Our service will follow all applicable NSW road rules as well as the Kids and Traffic best practice recommendations for transporting young children safely. Every reasonable precaution will be taken to protect children from harm and any hazard likely to cause injury. Educators will ensure children obey road rules and cross roads at a crossing or lights where available. Educators will remain vigilant to ensure no child runs ahead or lags behind the group.

Safety of children must be the paramount consideration in the choice of route and mode of transport.

- Vehicles must be registered and roadworthy;
- Drivers must hold a current and appropriate licence;
- Any vehicles capable of seating up to and including 9 children used to transport children on excursions need to be fitted with child restraints approved by the Roads and Traffic Authority.- copy of approval required;
All child restraints are fastened while vehicle is in motion;
Children must NEVER be left standing alone by the side of the car or road crossing.

**Supervision:**
Supervision on excursions will ensure the safety and wellbeing of all children for the duration of the excursion, taking into account ratios and all risks and hazards likely to be encountered. The venue will be assessed as safe for all children and adults on the excursion and will be easily supervised and accessible.

**Water Hazards:**
No child under school age is to go on an excursion to a swimming pool or other water-related activity, unless it is for the sole purpose of learning water safety or learning to swim under the direct supervision of a suitably trained and qualified instructor and where ratios are one adult for each child.
Where there are water hazards (water channels, ponds etc), risk management strategies are to be identified and implemented. For example some of our local parks have water hazards after wet weather or are close to beaches, rivers or dams.

If attending one of these locations the following ratios must apply:

- 1 adult: 1 child (under 3 years)
- 1 adult: 2 children (3 to 6 years)
- 1 adult: 5 children (6 to 12 years)

**Council swimming Pool**
- 1 adult: 5 children (6 to 12 years)

No child is to swim at a beach, river or lake.

**Note:** Requirement of two adults with Senior First Aid, Bronze Medallion or equivalent and able to implement water safety procedures.

**Conducting the Excursion:**
All Educators, volunteers and children attending will be informed of excursion timetable/itinerary, special requirements, safety procedures, grouping of children and responsibilities.
A list of children on the excursion will be forwarded to the Co-ordination Unit and a copy carried by the Family Day Care Educator.
Before leaving on the excursion, a notice will be prominently displayed at the service which includes:
- Itinerary and timetable; and
- Mobile contact phone number.

Items to be taken on excursions include:

- Suitable stocked first-aid kit including EpiPen and Asthma Medication if required;
- Mobile phone;
- Children’s emergency contact numbers;
- Children’s medication, if required; and
- Other items as required e.g. sunscreen, drinking cups, jackets etc.

ON THE DAY OF THE EXCURSION:

Educators will:

- Discuss the excursion schedule, promote awareness of road and play safety and safe excursion behaviour with the children before and during the excursion;
- Carry a list of children attending the excursion and parents contact phone numbers;
- Apply sunscreen and everyone is required to wear hats if there is an outside component to the excursion;
- Remind children about toileting;
- Check the children on/off the roll.

During the Excursion:

Educators must count their children frequently to keep track of all children.
If children require toileting the Educator must ensure that no child enters a public toilet unattended by the Educator.
Before leaving the excursion site the group is to be brought together and a check made to see if all the children are present.

VISITING OTHER PEOPLE/EDUCATORS’ HOMES

When organising visits to other people’s homes, Educators must:

- Check friends, families, and neighbours home for safety before visiting with children in care;
- Be prepared to prevent accidents or not visit if the home is unsafe. Also, ensure children are completely safe and protected from risks when visiting;
- Seek permission from families to visit friends, family, neighbours and other Educators homes, with details of destination, time, date and transport;
- Check whether household cleaners and medicines are within reach anywhere in the house where children will be visiting, ensure they are not accessible;
- Check for any indoor or outdoor drowning hazards, ensure indoor and outdoor plants are safe for children and keep pets away from where children are playing;
- Ensure furniture and electrical equipment is safe, stable and without sharp edges;
- Ensure that toys and other indoor and outdoor play equipment used by visiting children are age appropriate stable and meet all safety standards;
- Ensure indoor and outdoor home, garden, fence maintenance, hygiene is adequate and balconies and stairways are not accessible to children;
- Maintain an alcohol and smoke free environment when visiting other people's homes;
- Ensure all children in care have appropriate sun protection clothing, hats, sunscreen and adequate shading if playing outdoors when visiting;
- Take First Aid Kit and emergency contacts and supervise children carefully when on visits.

**Evaluation and Discussion:**
After the excursion evaluate the outing:

- Its value to children;
- Any safety issues;
- Organisational aspects; and
- Would you do it again?
- What would you do differently? (NB: See Evaluation Form)

**Reviewed: February 2011**
**Next review: February 2013**

**ATTACHMENTS REQUIRED FOR THIS PROCEDURE:**

- Routine Excursion form and permission form
- Non Routine Excursion Form
- Risk Assessments for Excursion.

**KEY ORGANISATIONAL CONTACTS:**
Senior Co-ordinator Children’s Services (02) 4474 1280
Co-ordination Unit Staff (02) 4474 1338 (02) 4474 1213
SUN PROTECTION POLICY

AIM
Eurobodalla Family Day Care’s sun protection policy has been developed to protect all children, staff and Educators from the harmful effects of ultraviolet (UV) radiation from the sun.

STATEMENTS:
Australia has the highest rate of skin cancer in the world. Research has indicated that young children and babies have sensitive skin that places them at particular risk of sunburn and skin damage. Exposure during the first 15 years of life can greatly increase the risk of developing skin cancer in later life. Family Day Care plays a major role in minimising a child’s UV exposure, as children attend during times when UV radiation levels are highest.
Most skin cancers and related skin damage can be prevented by protecting the skin from the sun at its peak sun times e.g. between 11am-3pm during Daylight Saving (late October to late March), and between 10am-2pm the rest of the year. Whenever possible, reduce the time spent outdoors during the higher UVR levels.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
OH&S Act
The Cancer Council NSW

KEY RESOURCES
The Cancer Council NSW
153 Dowling St
Woolloomooloo NSW 2011
Phone: (02) 9334 1900
Fax: (02) 9358 1452
www.cancercouncil.com.au

SUN PROTECTION PROCEDURES ARE:
Outdoor Activities:

All adults and children will use a combination of sun protection measures whenever UV Index levels reach 3 and above. This will include:

- From October to March sun protection is required at all times. Extra sun protection is needed between 11am and 3pm and during this period outdoor activities should be minimised.
- Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.
- From April to September (excluding June and July) outdoor activity can take place at any time. However, from 10am – 2pm sun protection is required.
- In June and July, when the UV Index is mostly below 3, sun protection is not required. Extra care is needed for Services in the far west and north of NSW and for all children who have very fair skin.
- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions and play sessions.

Shade

All outdoor activities will be planned to occur in shaded areas. Play activities will be moved throughout the day to take advantage of shade patterns. 

Staff and Educators will provide and maintain adequate shade. Shade options can include a combination of portable, natural and built shade. Regular shade assessments should be conducted to monitor existing shade structures and assist in planning additional shade requirements.

Hats

Adults and children are required to wear sun safe hats that protect their face, neck and ears. A sun safe hat is a:

- Legionnaire hat
- Bucket hat with a deep crown and brim size of at least 5cm (adults 6cm)
- Broad-brimmed hat with a brim size of at least 6cm (adults 7.5cm).

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not recommended.
Children without a sun safe hat will be asked to play in an area protected from the sun or can be provided with a spare hat.

**Clothing**
When outdoors, adults and children are required to wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- Loose-fitting shirts and dresses with sleeves and collars or covered neckline
- Longer-style skirts, shorts and trousers.

Children who are not wearing sun safe clothing can be provided with spare clothing.

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

**Sunscreen**
All adults and children will apply SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every two hours. Sunscreen is stored in a cool, dry place and the use-by date monitored.

**Babies**
Babies under 12 months will not be exposed to direct sunlight and are to remain in dense shade when outside. They will wear sun safe hats and clothing, and small amounts of SPF30+ broad-spectrum water-resistant sunscreen can be applied to their exposed skin.

**Role Modelling**
Staff and Educators will act as role models by:

- Wearing sun safe hat, clothing and Australian Standard 1067 sunglasses (optional)
- Applying SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- Using and promoting shade whenever possible.

Families and visitors are encouraged to use sun protective measures when participating in and attending outdoor activities.
Information
Children and their families will learn about sun protection. Sun protection information will be regularly communicated through newsletters, meetings and notice boards. The sun protection policy (including updates) will be provided to all staff and Educators. Further information is available from the Cancer Council website www.cancercouncil.com.au/sunsmart. Parents will be informed of this sun protection policy (including hat, clothing and sunscreen requirements) and encouraged to practise Sun Smart behaviours at all times.

Review
Management and staff should regularly monitor and review the effectiveness of the sun protection policy. A sun protection policy must be submitted every two years to the Cancer Council for review to ensure continued best practice. Refer to the Cancer Council’s guidelines and website www.cancercouncil.com.au/sunsmart for further information. This Service agrees to enforce the above sun protection policy in line with the Sun Smart Family Day Care Program recommendations and to inform the Cancer Council NSW of any changes to the Service’s policy and practices.

Reviewed: November 2011
Next review: November 2013
WATER SAFETY

AIM:
To ensure all Educators, Co-ordination Unit staff and parents are informed of the procedures required by Eurobodalla Family Day Care in relation to experiences involving water and excursions where there is a water hazard.

STATEMENT:
Eurobodalla Family Day Care acknowledges the importance of safe practices around water. Water hazards and pools are a high risk to children’s safety. Supervision of the children is paramount and the adult: child ratio must be maintained and implemented to reduce the risks when near water. Water areas are popular with the public, particularly in hot weather, making it difficult to maintain close supervision of children in the crowd; therefore strict procedures have been set to ensure the safety of the children in Eurobodalla Family Day Care.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 167
Education and Care Services National Regulations 2011 Clause 116

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Swimming pools Act 1992
Kidsafe

PROCEDURES
• No child while in the care of an Educator as part of the Education and Care service is to swim in a pool at the Educators home at any time while the service is being provided
• Educators are not to take children to a public swimming pool or other persons pool for any reason
• Water troughs or containers will only be filled to a safe level. These will be emptied immediately after use
• Water play activities will be supervised at all times. If a small wading pool is being used, the Educator will stand immediately beside it
• All water holding containers must be stored to ensure they cannot refill with water
• Buckets used for cleaning will be emptied immediately
• Any water hazards i.e. ponds or fountains at the premises that could constitute a drowning hazard are securely covered or inaccessible to children.
• No child will participate in an excursion where a water hazard is not fenced appropriately unless higher ratios are maintained and discussed with the Co-ordination Unit.
• Wading pools, sprinklers, soaker hoses may be used if children are constantly in the sight of the Educator at all times. On the completion of play with wading pools etc. they must be emptied and put away each time.
• Ensure pools are fenced and gated according to the Swimming Pools Act 1992 and provide the Co-ordination Unit with a certificate of currency every two years
• Ensure any pool filters are inaccessible to children.
• Family Day Care Educators own children can have access to a swimming pool on the premises if they are 13 years or over while the Education and care Service is operating.

ADMINISTRATIVE PROCEDURES:

• An outing where there is a water hazard would be regarded as an excursion and a signed permission note from the family would be required. This needs to identify the number of children and adults attending the excursion and how the risk will be minimised.

REVIEWED: APRIL 2012

TO BE REVIEWED: APRIL 2014
TRANSPORT & ROAD SAFETY

AIM:
To ensure that all Educators are familiar with the current regulatory requirements related to vehicles and the safe transportation of children whilst in Family Day Care.

STATEMENT:
Eurobodalla Family Day Care acknowledges the importance of ensuring the safety of children when travelling. Educators need to be aware of children at all times and develop clear procedures that the children can follow, that will ensure their safety. Vehicles used by Educators need to be safe, along with the car safety equipment that may be used in the vehicles. There are also hazards relating to safety in driveways and car parks that needs to be considered in this area.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 167
Education and Care Services National Regulations 2011 (Clause 101)
Work Health and Safety Act 2011 (NSW)
Work Health and Safety Regulation 2011 (NSW)
Road Transport (Safety & Traffic Management) Act 1999
Australian Road Rules 2008 (NSW)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
“Kids and Traffic” resources available from the Early Childhood Road Safety Education Program, Macquarie University: www.kidsandtraffic.mq.edu.au
Roads and Traffic Authority www.rta.nsw.gov.au
The Co-ordination Unit will:

- Develop policies in consultation with Educators and families that will assist Educators to clarify the regulatory requirements in regard to transporting children.
- Provide resources and/or Professional Development for Educators on matters relating to road safety and the safe transporting of children.
- Keep a register of compliance/certification of car safety devices being fitted correctly into Educators’ vehicles.
- Keep a record of car registration of Educators (on the Workplace Health and Safety Audit).
- Request a copy of the Educators drivers licence if applicable.
- Discard Car Safety equipment used for borrowing when it is more than 10 years old.

Educators will:

- Ensure that they have a drivers licence appropriate to the class of vehicle before they transport children in the vehicle.
- Ensure their vehicle is registered and roadworthy before they transport children in the vehicle.
- Only use the vehicle which has an annual RTA inspection approval sighted at the office to transport Family Day Care children.
- Participate in basic training on how to move and fit car restraints themselves.
- Discuss with families the type of child restraint or position in the car their child will be travelling in.
- Inform families of the requirement for their children to be transported in a vehicle if that is part of the Educator’s childcare activities.
- Ensure that car safety equipment has been properly installed, and any modifications to their car have been certified as safe by the Authorised inspection station.
- Not use car restraints which are more than 10 years old.
- Be responsible for purchasing the correct bolt for car restraints and have its suitability authorised with a Certificate of Installation.
- Ensure all children are restrained whilst in the vehicle. Restraints must be appropriate to the age of each child.
- Ensure each child has a separate car restraint i.e. - two children must not be placed in the one seatbelt. Children must use the rear seat belts before placing the biggest child in the front seat.
- Not leave children unattended in the car for any length of time.
- Consider transport options and route when planning excursions in a risk assessment framework.
- Only use transport which is suitable and safe for all children.
- Ensure, as far as practicable, child passengers enter and exit the car by the „safety door“ (Safety door being the left hand back passenger door-door closest to kerb).
- Ensure any pets are separate from the children if taken in the car and are appropriately restrained.
- Not pass the responsibility of children to any person other than a family of the child or a person authorised by such a family to have the responsibility of the child.
- Develop handover procedures that take into consideration the safety of drop off points for children and cars if on the Educators premises e.g. driveways –considering all Work Health and Safety aspects.

**Families will:**

- Abide by the safety procedures of the Educator in relation to arrival and departure of children.
- Support the good habits of Educators and children in care in regard to car safety by always placing their child in an appropriate child restraint before driving with the child.
- Discuss what car restraint or position in the car their child will be transported in with the Educator.

**Reviewed: January 2012**

**To be reviewed: March 2013**
SLEEP AND REST POLICY

AIM:
To ensure all children have positive sleep and rest experiences and are safe while sleeping or resting as part of an Education and Care service.

POLICY STATEMENT:
Eurobodalla Family Day Care acknowledges the importance of safe sleep and rest practices for children. The service policy is based on recommendations from the recognised authority SIDS and Kids. Children need to be supervised while sleeping or resting and have positive transition times from play to sleep and rest. SIDS is the most common cause of death in babies between one month and one year of age. It is very important to stay up to date with current recommendations from SIDS and KIDS.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care services National Regulations 2011 (Clause 81)
Work Health and Safety Act 2011 (NSW)
Work Health and Safety Regulation 2011 (NSW)
National Quality Standards – Quality Area 2

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Childcare Service Handbook 2011-2012 (DEEWR)
SIDS and Kids frequently asked questions September 2011
Childcare and Children’s Health Vol 14 no2 June 2011
Staying Healthy in Childcare 5th Edition 2011

Websites:
PROCEDURES

Co-ordination Unit staff will:

- Resource Educators on safe sleeping practices
- Regularly provide families with information about safe sleeping practices
- Ensure sleep and rest practices are consistent with contemporary views about children’s health, safety, welfare that meets children’s individual needs

Educators will:

- Make reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for by the educator are met having regard to the ages, development stages and individual needs of the children
- Follow the childcare practices recommended by the SIDS and Kids Safe Sleeping Program to reduce the risk of SIDS and create a safe sleeping environment. *(The recommended SIDS and Kids Safe practices form the basis of this policy).*
- Inform parents of the recommended SIDS and Kids Safe Sleeping Policy.
- Place babies under 12 months on their backs for sleeping. Babies under 12 months should only be placed on their tummy or side to sleep if told to do so in writing by the child’s medical practitioner.
- Use only cots that comply with the requirements of Australian/New Zealand Standard 2172:2010 *Cots for household use – Safety requirements* or Australian/New Zealand Standard AS/NZS 2195:2010, *folding cots – Safety requirements*.
- Follow the manufacturer’s instructions for the assembly and use of the cot.
- Ensure that cots are regularly checked, maintained and kept in a hygienic manner.
- Ensure there is adequate number of cots, beds, stretchers or sleeping mats (together with waterproof covers) or other culturally appropriate forms of bedding for all children who sleep at the Educator’s home.
- Ensure cots, beds, stretchers, mattresses and other bedding at the Educator’s premises are arranged so as to:
  - Ensure comfortable and well ventilated areas for sleeping and resting in an area that has natural light and ventilation, and
  - Allow easy exit of any child, and
  - Allow easy access to any child, and
  - Reduce the risk of cross infection between children.
  - Ensure the safe placement of cots in their home e.g. away from windows and away from blinds and/or curtain cords.

- Place babies at the bottom of the cot to prevent them from wriggling down under bedclothes. No quilts or doonas will be used. Bedding will be firmly tucked in at the bottom to prevent them covering the baby’s head during sleep.

**Ensure that provision is made for:**

- Clean and comfortable mattresses and other bedding which is in good repair.

- All forms of bedding must be fitted with a waterproof cover. If a lounge is regularly used as resting place for a child it must have a waterproof cover.

- Bed clothing appropriate to the climate.

- Fresh linen for each child (i.e. Individual bed linen and blankets)

- Children are **not** to share the same bed at the same time.

- **No** child (except with the written consent of a family of the child) is to sleep in a room in which an adult is sleeping. (Sleeping in a room with the Educator only, may occur if care is provided Overnight. This may occur to address effective supervision and will be written in the management plan.)

- Support children moving from play to rest calmly.

- Make provision for children who do not wish to sleep or rest during the day.

- Respect cultural differences in relation to sleeping.

- Provide a comfortable quiet place for each child to sleep at any time of the day.
- Provide children that are in care overnight with a separate, comfortable bed and respect their need for privacy.
- Discuss with families children’s sleeping arrangements and respect their requirements.
- Ensure that sleeping children remain within sight and/or hearing range of the Educator and are regularly monitored.
- If a child is sleeping in a room where the Educator cannot see and/or hear them at all times an operational baby monitor will be required.
- It is recommended Educators manually record the times physical checks are made in relation to sighting the colour of children’s skin and hearing and assessing children’s breathing.
- When considering the supervision requirements of sleeping children, an assessment of each child’s circumstance and needs should be undertaken to determine any risk factors. For example, because a higher risk may be associated with small babies or children with colds or chronic lung disorders, they might require a higher level of supervision while sleeping. Sleeping children should always be within sight and/or hearing distance so that educators can assess the child’s breathing and colour of their skin to ensure their safety and wellbeing. Rooms that are very dark and have music playing may not provide adequate supervision of sleeping children.
- A management plan will need to be developed to identify and address how sight and hearing of sleeping children is managed when a sleep room is not located in the same room as the play area.
- Ensure babies and children sleep with their face uncovered.
- Ensure that for babies who are wrapped they are placed on their backs for sleeping.
- Ensure that if babies are wrapped or swaddled, only cotton or muslin will be used and the baby’s face will not be covered.
- Ensure dangling cords or string including mobiles will be moved out of the infants reach, as these may get caught around their neck.
- Remove restrictive clothing or clothing with hoods and cords around the neck.
- Ensure that restraints are used and done up correctly when a baby is placed in a pram, stroller or bouncer or any other baby/toddler equipment where restraints are fitted.

- Sit near resting children and support them by encouraging children to relax and listen to music or stories. Educators will remember that children do not need to be, patted to sleep.

- Babies and toddlers do not sleep in an adult bed. Children progress from sleeping in a cot to a bed, stretcher, mattress on floor, etc, in consultation with the parent.

- Soft sleeping places where a toddler or baby’s face may become covered such as a pillow, a tri-pillow, waterbed or beanbag are not used.

- Heaters, fans and electrical appliances should be kept well away from the cot to avoid the risk of overheating, burns or electrocution.

- Electric blankets, hot water bottles or wheat bags for babies or young children will not be used.

- Practice an emergency evacuation plan for sleeping arrangements where the sleep room and play areas are not adjacent so that a plan is established in case of fire or an intruder.

### Overnight care

- The provision of overnight care is a component of flexible delivery in Family Day Care. It is vital that Educators offering overnight care maintain a comfortable, safe environment that meets individual needs. If an Educator has a child/ren in overnight care they must:

  - Use a monitor whilst children are sleeping which will be positioned in the same room as where the Educator is sleeping.

  - Not consume alcohol or other substances that adversely affect an Educator’s ability to care for children.

  - Check on the child before they go to sleep and at any time that an Educator wakes during the night and when the Educator wakes in the morning.

  - Ensure that all parts of an Educator’s work place health and safety audit are maintained at all times.
• Ensure that only people deemed fit and proper visit the education and care service any child in the service.
• Discuss an emergency evacuation plan for night time so that a plan is established in case of fire or an intruder.
• Not allow the child/ren to attend another home (neighbours, other family members, friends) while the child is in care. All care must take place at the Educators home unless an excursion has been organised and the appropriate risk assessments carried out.
• Ensure other household members adhere to the procedure for other household members when children are in care

Families are encouraged to:
• Discuss their child’s sleeping routines with the Educator.
• Work in partnership with Educators and Co-ordination Unit staff to ensure their child has consistent routines and settles into care with minimal stress.

REVIEWED: MAY 2012
TO BE REVIEWED: MAY 2014
INFANT SLEEPING AND THE REDUCTION OF SIDS PROCEDURE

AIM:
For Educators to minimise the risk of Sudden Infant Death Syndrome (SIDS) and prevent infant sleeping accidents during overnight and daytime care in children services.

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

PROCEDURES

The Co-ordination Unit staff will:
Provide Professional Development and/or resource to Educators and families on safe sleeping practices for children.

The Educators will:

- Put baby on their back to sleep, from birth unless advised in writing to do otherwise by the infant’s medical practitioner.
- Sleep baby with face uncovered. No doona, pillow, soft toys, bumpers or lamb’s wool.
- Only place a child to sleep in a cot that, complies with the Australian and New Zealand Standard for fixed or folding cots ensure the mattress is clean, firm, well fitted and has a waterproof cover.
- Use safe bedding – remove pillows, quilts, doonas and lambskin from the cot as these may cover the baby’s face and make breathing difficult.
- Not use bean bags or water beds for sleeping toddlers or babies.
- Remove dangling cords or string from near cots as these could get caught around the babies neck.
- Keep heaters and electrical appliances well away from cots.
- Not use electric blankets, hot water bottles or wheat bags for babies or young children. A baby that becomes too hot has an increased risk of SIDS.
- Always make sure all restraints are connected when baby is in a pram, as they can become dangerous if baby becomes tangled in loose restraints.
- Remove clothing with cords before placing a child to sleep (including dummy cords).
- Ensure all equipment used by the Educator is in clean & good repair e.g. cots and strollers.

**Families are encouraged to:**

- Support the recommendations from the SIDS and Kids organisation.
- Provide a letter from a medical practitioner if it is recommended for their child to sleep in a position contrary to the SIDS recommendations.

**REVIEWED: JANUARY 2012**

**TO BE REVIEWED: MARCH 2013**
DELIVERY AND COLLECTION OF CHILDREN FROM THE SERVICE POLICY

AIM:
It is important to ensure the safety and well being of children, when the responsibility of the child is being passed to and from the Educator. Clear procedures need to be in place to ensure children only leave the premises with the correct authorisation.

STATEMENT:
The time when children are arriving and departing the Educator’s premises or a pre-arranged venue, can be hectic. It is important that families and Educators are clear when their respective responsibilities for the child start and finish. Additionally, accountability requirements for children in Commonwealth funded childcare services in Australia state that the child must be signed in and out of childcare by the person dropping off or picking up the child. Educators and families also need to be clear about the procedures for entering and leaving an Educator’s home in a safe manner e.g. doors, driveways, car parking areas.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 Clause 99
Children and Young Persons (Care and Protection) Act 1998 No 157

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

PROCEDURES

Co-ordination Unit Staff will:
• Provide Professional Development in Arrival and Departure procedures at Educator Induction training.
• Assist Educators in the development, practice and evaluation of their Handover (Arrival and Departure) Procedures.
• Promote awareness of the Arrival and Departure Procedures to families via newsletter articles.

Educators will:

• Ensure no child leaves the residence or approved family day educator venue unless:
  1. They are given into the care of a parent of the child (unless prohibited by a court order)
  2. An authorised nominee named in the child’s enrolment record
  3. A person authorised by the parent or authorised nominee named in the child’s enrolment record to collect the child
  4. Is taken on an excursion
  5. Requires medical hospital or ambulance care or treatment
  6. because of another emergency
• Develop and distribute their own handover procedure that is appropriate for each family using their childcare service.
• Ensure attendance records (timesheets) are signed by the person dropping the child off or picking the child up, at ALL locations where a handover occurs (e.g. playsession, school).
• Physically receive the child when they arrive at the Family Day Care premises.
• Ensure that arrival and departure of school age children is in accordance with the Arrival/Departure Details Form completed by the family.
• Ensure the entrance to the Educator’s premises is securely locked at all times to prevent children leaving the premises unattended and unauthorised entry of persons.
  (allow for an alternate exit in case of emergencies).
• Develop a handover procedure for when children are delivered or collected away from the Family Day Care premises e.g. Playsession. This must be discussed and documented by both family and Educator.
• Inform families of their responsibility to closely supervise children:
• On arrival to the Educator’s premises until physical handover has occurred, and
• On departure after handover from the Educator to the family, particularly if any hazards such as driveways, glass, prickly bushes, or ponds are in the entry/access route to the handover area.
• Enter the arrival and departure times and initial if a child arrives into care unattended e.g. walking to and from school etc.

Families are required to:

• Discuss and document handover procedures with the Educator.
• Complete attendance records indicating the exact time handover with the Educator occurred and initial the timesheet. Sign the timesheet at the end of the week verifying the timesheet is an accurate account of the hours used and fees paid.
• In the case of children arriving or departing the Educator home unattended by the family, discuss the arrangements with the Educator and document and sign the agreed arrangement.
• Pick-up and deliver the child at the contracted times, unless prior notice is given of a change of times.
• Provide prior notice of an alternate person picking up a child using the Authority To Collect Form.
• Ensure contact information is up to date with the Educator in case of emergency.

Reviewed: January 2012

Review on or before: March
WORK HEALTH AND SAFETY POLICY

AIM:
To ensure Educators and Co-ordination Unit staff comply with the Work Health & Safety Act 2011 (NSW) and the Work Health & Safety Regulation 2011 (NSW)

STATEMENT:
The Work Health & Safety Act 2011 (NSW) and Work Health & Safety Regulation 2011 (NSW) aims to protect the health, safety and welfare of people at work. It lays down general requirements for health, safety and welfare, which must be met at all places of work in New South Wales. The Act covers self-employed people as well as employees and employers. **Self-employed people (e.g. Family Day Care Providers)** must ensure the health and safety of people visiting or working at their places of work (their homes), who are not their employees, by not exposing them to risk.

For Educators, this includes people that come into an educator’s home on Family Day Care business e.g. the children in care, the people dropping off and picking up the children, the Co-ordination Unit staff that visit and any workers paid to do a job for the Educator (e.g. fire protection workers).

In WHS terms, risk management is the process of recognising situations that have the potential to cause harm to people or property, and doing something to prevent the hazardous situation occurring or the person being harmed.

**Risk Management** involves:
Step 1: Identify the problem, which is known as hazard identification.
Step 2: Determine how serious a problem it is, risk assessment.
Step 3: Deciding what needs to be done to solve the problem, risk elimination or control.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Work Health & Safety Act 2011 (NSW)
Work Health & Safety Regulation 2011 (NSW)
KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2, Quality Area 6
Managing the Risks in Children’s Services, Caton, S. Roche D., 1999;
Managing OHS in Children’s Services, Tarrant, S., 2002
Eurobodalla Shire Council WH&S policy
http://www.kidsafensw.org

PROCEDURES

Co-ordination Unit Staff will:
Provide information to Educators on health, hygiene and safety matters in childcare as the information is made known to staff. This may be through newsletters, fact sheets, Professional Development sessions, Educator meetings or on staff visits.
Offer Professional Development and/or resources to Educators in areas that relate to WHS.
Monitor the compliance of Approved Educators to ensure safety in their homes by checking that Educators complete a Workplace Health and Safety Audit on a regular basis and by CDO’s conducting impromptu home visits.
Review the systems and procedures relating to risk management within the service on a regular basis.
Develop policies and practices on Workplace Health and Safety matters in consultation with stakeholders of Family Day Care.

Educators will:
Comply with the Work Health & Safety Act 2011 (NSW) as a self-employed business operator.
Comply with the WHS practices that are documented in the Regulations for Family Day Care that relate to their childcare business.
Maintain a safe environment in their homes whilst conducting their business.
Develop and implement safe work practices in relation to WHS standards in the Educators home.

Remain up to date with current safety requirements for Family Day Care.

**WHS Policy** must be complied with by Approved Educators and staff at all times. A breach of policy by an Educator or staff member may result in disciplinary action.

As Educators are self employed small business operators they are responsible for the implementation, maintenance, monitoring and review of WH&S systems within their own work environment. This might include, but is not limited to:

- Accident/incident report systems.
- Food handling procedures.
- Infection control.
- Sun safety.
- Excursions.
- Road & car safety procedures.
- Glass/electrical audits.

**WHS Policy** must be complied with by Approved Educators and staff at all times. A breach of policy by an Educator or staff member may result in disciplinary action.

**Reviewed:** January 2012

**To be reviewed on or before:** January 2014
MANUAL HANDLING PROCEDURE

Manual handling means any activity requiring the use of force to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object. Injuries can include back strains or sprains to neck, shoulders, arms and knees. It also encompasses overuse injuries or injuries as a result of falling during manual handling.

It is recommended that:
Where possible, kneel down rather than bend down, in order to avoid neck and back problems. Carry children only when necessary. The recommended technique for carrying children is to place one arm under the child’s buttocks and the other arm supporting the child’s neck. Avoid carrying the child on your hip as this may strain your back. When lifting an awkward load, do so with a balanced and comfortable posture.

Store equipment at the right height and in an orderly fashion. Avoid reaching above shoulder level. It is recommended to use a step stool or ladder for handling items above shoulder level. Arrange your physical environment to facilitate easier lifting and movement. This includes furniture. It is not good practice to twist whilst lifting. Only lift items within your limitations. Ensure that you can see where you are going when lifting an object. Ensure floors are not slippery or cluttered and that lighting is adequate. Try and keep physically fit as working with children can be physically demanding. Stretching exercises before and after work is a good idea, as well as a few stretches before you lift items or children.

Reviewed: January 2012

To be reviewed on or before: March 2014
Relationships With Children
INCLUSION AND DIVERSITY

Aim:
All children and families have the right to be treated with fairness and equity and have the same opportunities for participation and decision making and to be accepted as valued members of the community. The Code of Ethics, developed by Early Childhood Australia, underpins the core values, beliefs and practices within Eurobodalla Family Day Care.

STATEMENT:
Eurobodalla Family Day Care acknowledges the need for an inclusive program and service based on children’s rights and social justice principles. That is the right to fair and equal treatment regardless of age, gender, class, ethnicity, sexuality, geographic location, languages spoken, cultural background, additional need or other circumstances. We recognise differences as well as similarities in people and respect this. Not just within our service but in promoting respect for all people in the wider community. Promote child friendly communities and are advocates for universal access to a range of high quality early childhood and school age care programs. There is a commitment to full participation of children with additional needs. Create an environment that reflects the lives of children and families using the service and the cultural diversity of the broader community including aboriginal and Torres Strait Islander communities.

KEY LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Anti Discrimination Act 1977
Disability Discrimination Act 1992 and Disability Discrimination Regulation 1996
Equal Employment Opportunity under the Anti Discrimination Act 1977
Sex Discrimination Act 1984
Racial Discrimination Act 1975 and Racial Discrimination Regulation 1987

KEY RESOURCES:
PROCCEDURES

Information sharing:
On initial contact with the service, families will be requested to provide information relevant to the successful inclusion of their child into the service, (e.g.: cultural background, abilities, needs and language).
Sharing of information will remain a vital component of each child’s program and will maintain a positive focus.
Co-ordination Unit staff, Educators and families will ensure confidentiality is observed; (see Confidentiality of Records Policy).
Written permission will be obtained from families to share information relating to their children, family and situation to external organisations or persons, if required.
Information relevant to a child and/or family may be shared between an Educator and Co-ordination Unit staff, if required for the placement, ongoing support or development of the child.

Co-ordination Unit staff will:
Support the employment of staff and the selection of Educators from a range of social and cultural backgrounds.
Ensure Professional Development is provided for staff and Educators to extend their knowledge of social justice, inclusive and anti-bias practices through Professional Development opportunities, resources and publications and discussions with peers.
Ensure Professional development to support ongoing responsiveness to children with additional needs,
Establish and maintain links with organisations that promote social justice and inclusion and /or provide specialist support or resources. Work with inclusion and support agencies to include children with additional needs.
Ensure compliance with relevant state and commonwealth legislation to provide an inclusive and discrimination free environment.
Ensure educators and coordinators have skills and expertise necessary to support inclusion of children with additional health and developmental needs.
Plans are developed to support the inclusion of children with additional needs.
Offer regular meetings and or communication between families, supervisors, coordinators and other agencies and or specialists.
There are individual support plans for children with additional needs.

**Co-ordination Unit Staff and Educators will:**

**When working with children:**
Respect the rights and dignity of each child.
Ensure all the children have a right to access all learning experiences, to equally participate in the program and to succeed as a learner.
View all children as competent with many strengths and abilities and as initiators and active social constructors of their own learning.
Support children to interact with the environment and equipment in ways that children can identify.
Help children build connections with others and with their community.
Provide experiences that are complementary to children’s home and community experiences.
Build children’s positive sense of self through identifying and responding to each child’s strengths and learning styles.
Educators create environments that are inviting and inclusive and support children’s exploration, creativity and learning.
Develop respectful and trusting relationships with children, so they can feel empowered and more open and respectful of others.
Provide access to specialised equipment and resources and access to appropriate support services as required.
Support children to identify and take action against unfairness or to other biased behaviours.
When working with families:
Show sensitivity to and respect for the range of family structures including same sex families, social values and child rearing practices evident in the service and the wider community.
Incorporate information about the family’s background in meaningful ways to help ensure families feel welcome.
Share and exchange information relevant to the child.
Respect the family’s home language and communication styles and use a range of verbal and written methods of communication.
Value multiple perspectives and empower families as decision makers about their child’s learning and wellbeing.
Work through a family centred approach acknowledging family’s best know their child.
Provide a program that responds to the individual strengths and interests of all children.

When working with children with additional needs:
Use an inclusive approach ensuring that all children, especially children with additional needs, have the same opportunities to participate in all experiences and all aspects of the program.
Seek specialised assistance/additional support to successfully include children with additional needs.
Help them achieve educational success

Maintain updated information relevant to particular disabilities, health issues delays or giftedness relevant to the children in Family Day Care.
Plan an individualised Family Service Plan in collaboration with families and other professionals/agencies, including Inclusion Support Agencies (ISA’s)
Plan experiences based on the child’s strengths, talents, likes and dislikes and family priorities for their child.
Work collaboratively with other services to support the child’s transition in to the next learning environment.
Ensure ongoing Professional Development to adapt programs resources and environments to provide successful inclusion.
Ensure strategies and processes used to support children with additional needs in their transition to school and specialist services.
An approach that develops a sense of belonging, and comfort in the service environment
Need to build a relationship where children have trust and confidence in staff and educators.
Encourage use of educational tools that reflect children and people with disabilities as active participants in the community.
Environments, routines and staffing arrangements adapted to appropriately facilitate the inclusion of children with additional needs.

**Families are encouraged to:**
Provide information to the Educator and Co-ordination Unit staff about their child’s individual likes, dislikes and needs.

**REVIEWED: JANUARY 2012**

**TO BE REVIEWED: MARCH 2013**
INTERACTIONS WITH CHILDREN POLICY

**AIM:**
To ensure interactions with children are caring, genuine, respectful and without bias.

**STATEMENT:**
Children, who experience relationships in a child care setting that are built on respect, fairness, acceptance, co-operation and empathy, and are given the opportunity to develop these qualities themselves, are enhanced by these quality interactions.

**RELEVANT LEGISLATION:**
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 155, 156)

**KEY RESOURCES:**
National Quality Standards 2011 (ACECQA) – Quality Area 5
Children and Young Person (Care and Protection) Act 1998 No 57
Ombudsman’s Act 1974 Act 1974 No 68
Belonging, Being & Becoming – The Early Years Learning Framework for Australia
My Time, Our Place – The Framework for School Age Care in Australia

**PROCEDURES**
To ensure the obligations of this policy are achieved:

**Co-ordination Unit Staff will:**
- Provide Professional Development and/or information for Educators and families on effective communication skills that help build quality, supportive relationships.
• Role model respectful and positive interactions with the children that convey to the children that they are valued as competent and capable individuals.
• Support Educators and families to encourage positive interactions.
• Communicate information about children with relevant parties in a confidential manner.
• Participate in Professional Development.
• Treat each child without bias.
• have regard to the size and composition of groups in which children are being educated and cared for by the service,
• Develop guidance strategies with educators that demonstrate respect and understanding of individual children when they strive to recognize and understand why each child behaves like they do when they do.
• Use a positive approach in guiding behaviour.
• Have caring, equitable, and responsive relationships between themselves and children.

Educators will:

• Maintain supportive relationships, positive interactions, listen to children and,
• Encourage children to express themselves and their opinions
• Allow children to undertake experiences that develop self reliance and self esteem
• Ensure the dignity and rights of each child are maintained
• Use positive guidance and encouragement toward acceptable behaviour. Take a positive approach to guiding children’s behaviour that empowers children to regulate their own behaviour and develop skills to negotiate and resolve conflicts or disagreements with others.
• Consider each child’s family and cultural values, age, physical and intellectual development and abilities
• Provide an environment that is secure and interesting with a positive atmosphere.
• Create opportunities for children to be independent and self-reliant to work through differences, learn new things and take calculated risks.
• Ensure that the routines and experiences children encounter during care are appropriate and reflect each child’s family and cultural values, age and physical and intellectual development.
• Encourage children to express themselves and develop confidence in their abilities and opinions.
• Show an interest and participate in what the child is doing, actively engaged in children’s learning and share decision making with them.
• Support children through periods of change.
• Respond to all children in a fair and consistent manner.
• Treat each child without bias regardless of their physical or intellectual ability, gender, religion, culture, family structure or economic status.
• Share information with families regularly in a constructive manner about children’s interactions in a confidential manner.
• Participate in Professional Development.
• Provide opportunities to interact and develop respectful and positive relationships with each other, staff and volunteers.

Families are encouraged to:
Develop supportive relationships with family day care staff, educators, each other and children. Respond to all children in a fair and consistent manner. Share relevant information with Educators and staff regularly. Interact with all children in the Educator’s home in an appropriate manner. Role model effective communication skills to their children.

Reviewed: January 2012

To be reviewed on or before: March 2013
SUPERVISION POLICY

AIM:
To ensure that all Educators and Co-ordination Unit staff are aware of the importance of supervision in Family Day Care in reducing the risk of harm to the children.

STATEMENT:
Eurobodalla Family Day Care is committed to complying with the Children’s Service Regulation 2010 to ensure:

- Adult /child ratios are maintained.
- Children are supervised at all times.
- Consideration is given to the design and arrangement of children’s environments to support active supervision.
- Supervision is used to reduce or prevent injury to children and adults.
- To acknowledge and understand the need for increased supervision when children are involved in high risk activities e.g. an excursion near a significant water hazard.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Work Health & Safety Act 2011 (NSW)
Work Health & Safety Regulation 2011 (NSW).

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2 (2.3.1)
http://acecqa.gov.au/home/ Australian Children’s Education & Care Authority
www.chw.edu.au The Children’s Hospital at Westmead
The Education and Care Services National Law 2010 (Section 165) states:
A Family Day Care Educator must ensure that any child be educated and cared for by the Educator as part of a Family Day Care service is adequately supervised.

In the case of attendance at Eurobodalla Family Day Care Playsession venues the following risk management plan has been put in place to allow appropriate toileting experiences for all children whilst still ensuring suitable supervision. An Educator may take a child to the toilet and leave the children to be supervised by a qualified staff member. The handover must occur to a specified staff member and families must be informed that their child might be briefly supervised by a qualified staff member at Eurobodalla Family Day Care Playsession.

Educators must supervise children at all times when eating and drinking (2.3.1).

Educators must supervise children at all times when sleeping.

The Supervision Policy is important not only for children, families and staff/Educators, but relates to every person who enters the service’s premises.
Supervision is one of the most important care giving strategies and skills required by staff/Educators to develop and master. Active supervision is a combination of listening to and watching children play, being aware of the environment and its potential risks, the weather conditions, the time of day, managing small and larger groups of children, and an understanding of child development including theories about how children play.

Procedures:
The Coordination unit staff will:

- Provide information and training during induction/orientation for new Educators
- Provide regular information about supervision strategies
- Monitor Educator’s supervision and provide support and advice.
- Model appropriate supervision skills at Playsession

Educators will:
Focus their attention to the children and child related activities
NOT perform any other duty, paid or unpaid whilst children are in care. This includes Ironing, washing, vacuuming, foster care and yard duties.
Ensure all children in care are enrolled with the Service. Educators own children are required to have an enrolment form

- Be aware of their positioning in the environment.
- Constantly scan the environment.
- Listen whilst children play.
- Be aware of potential risks in the environment.
- Set up the environment to ensure maximum supervision.
- Have knowledge of the children in care and an understanding of how the groups of children interact and play together.
- Have knowledge of the physical and intellectual development of the children in care.
- Maintain adequate supervision whilst transitioning groups of children.
- Maintain adequate supervision whilst promoting play and learning experiences.
- Encourage school aged children to be involved in setting limits.

Supervision Of Sleeping Children

The Educator will:

- Visually check sleeping children every 10-15 minutes.
- Record individual children’s sleep details
- Be especially alert to children during the first weeks in care
- Check the following for all sleeping infants and children:
  - Skin colour looks normal
  - Rise and fall of chest indicates normal breathing
  - Signs of overheating (flushed skin, hot body temperature to touch, and restlessness)
  - Regulate the room temperature, avoid excess bedding and not overwrap or overdress infants/children

Families will:

Have the opportunity to communicate with Educators and Coordination unit staff about their child’s supervision needs, development and the Educators supervision strategies.

Reviewed: January 2012
To be reviewed on or before: March 2014
GUIDING CHILDREN’S BEHAVIOUR

AIM:
To ensure children’s behaviour will be guided in a positive way.

STATEMENT:
Eurobodalla Family Day Care acknowledges that the dignity and rights of each child must be maintained at all times and for all children to learn acceptable behaviour in a positive respectful way. We acknowledge the importance of ensuring children are not subjected to any form of punishment or isolation when learning these skills.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 166
Education and Care Services National Regulations 2011 Clause 155 and 104
Children and Young People’s (Care and Protection) Act 1998 No 57
Ombudsman’s Act 1974 Act 1974 No 68

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 5
Belonging, Being & Becoming - The Early Years Learning Framework for Australia
My Time, Our Place – The Framework for School Age Care in Australia
The early Childhood Code of Ethics

The Education and Care Services National Law states
A Family Day Care Educator must not subject any child being educated and cared for by the Educator as part of a family day care service to-
(a) any form of corporal punishment; or
(b) any discipline that is unreasonable in the circumstances
Child management techniques must not include physical, verbal, or emotional punishment, including, for example, punishment that humiliates, frightens or threatens the child, and the child is not isolated for any reason other than illness, accident or a prearranged appointment with parental consent.

Clause 155 Interactions with children Educators and Co-ordination Unit staff will

Encourage children to express themselves and their opinions;

Allow the children to undertake experiences that develop self reliance and self esteem

Maintain at all times the dignity and rights of each child

Gives each child positive guidance and encouragement toward acceptable behaviour and

As regard to the family and cultural values, age, and physical and intellectual development and abilities of each child being educated and care for by the service

PROCEDURES

Co-ordination Unit Staff will:

• Provide Professional Development/information for Educators and families on positive guidance of children’s behaviour.
• Support Educators and families to encourage positive behaviours.
• Role model to Educators positive guidance of children’s behaviour.
• Model positive, socially accepted behaviours and language.
• Demonstrate appropriate reactions to children’s exploratory behaviour.
• Communicate information about children with relevant parties.
• Treat each child with respect and without bias.
• Participate in Professional Development.

Educators will:

• Participate in Professional Development on guiding children’s behaviour.
• Respect each child as an individual.
• Use positive guidance strategies that promote accepted children’s behaviour.
• Be consistent in their approach to guiding children’s behaviour.
• Reach agreements with families and staff in response to children’s challenging behaviour.
• Endeavour to understand why a child behaves a certain way.
• Be pro-active and prevent behaviour difficulties where possible.
• Be patient.
• Model positive, socially accepted behaviour and language.
• Provide an environment that supports the strategies of guiding behaviour.
• Create opportunities for children to be independent and self-reliant.
• Be objective and support children through periods of change and challenging behaviour.
• Demonstrate appropriate reactions to children’s exploratory behaviour.
• Share information with families regularly in a constructive and positive manner about children’s behaviour.

**Families are encouraged to:**

• Respond to their child/ren in a positive and consistent manner.
• Discuss approaches and work with the Educator to guiding children’s behaviour.
• Interact with all children in the Educator’s home in an appropriate manner.

Reviewed: January 2012

Next Review: March 2014
Physical Environment
ASSESSMENT OF FAMILY DAY CARE RESIDENCES AND APPROVED VENUES POLICY

AIM:
Eurobodalla Family Day Care acknowledges the importance of assessing and reassessing the suitability of Educators environments. The service will develop practices to initially assess and reassess Educators venues and to train educators in this process

STATEMENT:
The physical environment plays a critical role in keeping children safe; reducing the risk of unintentional injuries; contributing to their wellbeing, happiness, creativity and developing independence; and determining the quality of the children’s learning)

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Part 3
Education and Care Services National Regulations 2011 Clauses 116-117
Work Health & Safety Act 2011 (NSW)
Work Health & Safety Regulation 2011 (NSW)
National Quality Standard – Quality Area 2 and 6

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Frequently asked questions WORK HEALTH AND SAFETY LEGISLATION Overview of the model work health and safety (WHS) ACT
PROCEDURES

Co-ordination Unit Staff will:

- Develop a workplace Health and Safety Audit based on the requirements of the National Law and regulation to use in the assessment and re-assessment of FDC residences and approved venues.
- Develop a procedure for the completion of the WHSA by Educators on an ongoing basis. This must be completed annually.

Educators will

- Consistently conduct safety checks and monitor the maintenance of buildings and equipment
- Follow safety advice from recognised authorities and manufacturers
- Develop a schedule for cleaning toys and all equipment
- Ensure all equipment used complies with Australian Standards
- Inform the Co-ordination Unit in writing of any proposed renovations to the residence or venue (at least 2 weeks before)
- Inform the Co-ordination Unit of any changes to the residence or venue which will affect the education and care provided to the children at the service.
- Ensure premises, furniture and equipment are safe clean and well maintained
- Complete the annual WHSA
- Comply with the WHSA requirements at all times the education and care service is operating

Reviewed: January 2012

To be reviewed on or before: March 201
COMPLETION OF WORKPLACE HEALTH AND SAFETY AUDIT PROCEDURE

Background:
Workplace Safety is of high importance in Family Day Care. Under the Workplace Health & Safety Act 2011, it is the Educators responsibility to:

1. Identify hazards in the home.
2. Assess the level of risk of the hazard.
3. Eliminate or control the risk.

The Workplace Health and Safety Audit has been developed as a tool to assist Approved Educators in meeting their regulatory and Work Health and Safety responsibilities of providing a safe childcare environment.

The areas listed on the Workplace Health and Safety Audit has been identified as a possible safety risk to children if not managed appropriately.

It is the responsibility of the Educator to develop a risk management plan for any identified hazard in the Educator’s work environment and note this plan on the audit.

Educators need to also provide a floor plan of their home and outdoor play area which clearly indicates which areas will be used for the Educator’s childcare business and have accordingly had all safety matters addressed. It is important that this floor plan is updated with the Co-ordination Unit if the areas of usage change (both for insurance and regulatory purposes). Identification can be made using green zones to indicate areas of use and red zones to indicate areas not used for the operation of the business. Educators own children, not included in the childcare numbers, and other household members may enter the red zones.

Educators own school age children may enter the red zone at the Educator’s discretion. Children under 12 years must still be included in Educator ratios unless another adult is present. Access to the red zone must not be made available to the other children in care. Educator’s non-school age children remain in the green zone.

Educators and children are not to enter any area of the home which has not been designated as being used for the childcare business (red zones) during the operational hours of the business.

It is a regulatory requirement that the home environment is safe, and a Work Health and safety requirement that Educators develop a risk management plan for any identified hazards in the workplace (home environment).
Educators are encouraged to complete the form by the due dates, as non-compliance with safety requirements may necessitate a close of the Educators business until such time as an assessment of the safety of the home has been completed.

**Process:**

1. The service will distribute the Workplace Health and Safety Audit to all Educators.
2. Educators are to complete the form by ticking they are compliant and writing how compliance is met in terms of each individual Regulation or hazard. Some items may be documented N/A.
3. Workplace Health and Safety Audit to be signed off by Co-ordination Unit Staff as being complete.
4. If areas are identified as non compliant the educator must address immediately. An action plan will be developed with the Educator and the CDO. All action plans will be discussed with the CDO and Senior Coordinator.

It is recommended that the Work Health and Safety Audit be conducted by the Educator on a more regular basis by completing a daily hazard check.

**Reviewed: January 2012**

**To be reviewed on or before: March 2013**
TOBACCO, DRUG AND ALCOHOL FREE ENVIRONMENT POLICY

AIM:
To ensure all children are raised in a healthy drug free environment.

STATEMENT:
Eurobodalla Family Day Care acknowledges the importance of ensuring all children are cared for in an environment free from tobacco, drugs and alcohol.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Public Health Act 2010 No 127 (NSW)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 2

The Education and Care Services National Regulations 2011 (Clause 82 and 83) states
A family day Care Educator must ensure that children being educated and cared for by the educator as part of the service are provided with an environment which is free from the use of tobacco, illicit drugs and alcohol
And;
A Family Day Care Educator must not, while providing education and care for children as part of a family day care service consume alcohol or be affected by drugs (including prescription medication) so as to impair his or her capacity to provide education and care to the children
PROCEDURES

- Smoking, drinking and consumption of illicit drugs will not be permitted in any areas utilised by Eurobodalla Family Day Care.
- Smoking will not be permitted in any open space 10 metres from the Eurobodalla Family Day Care outdoor area or fence line.
- Staff and Educators employed by Eurobodalla Family Day Care will not smoke, drink or consume drugs in front of, or in the sight of, children in their care.
- Students, volunteers and visitors to the service will not be permitted to smoke, drink or consume drugs on the premises and will adhere to the tobacco, drug and alcohol free environment policy.
- Parents, family members or relatives of children enrolled at the service will not be permitted to smoke, drink or consume drugs on the premises and will adhere to the Smoke Free Environment Policy.
- Eurobodalla Family Day Care will actively support and provide assistance for smokers to quit smoking.

ADVOCACY

Children

- Healthy living habits will be discussed with children.

Families

- Leaflet and flyers regarding passive smoking, quitting smoking and non-smoking education will be provided to families.

Staff/Educators

- Educators and staff will be informed of education programs and be provided with information to support them in their role of working with children and families.

Management/Coordination unit staff

- Will seek advice from peak organizations regarding current research and practice.
- Employee induction procedure- new Educators/staff will be informed of the policy and procedures of Eurobodalla Family Day Care.
- Coordination Unit Staff will be positive role models and actively monitor all Family Day Care environments to ensure the safety of children.
• Procedure for non-compliance of the tobacco, drug and alcohol free environment policy and procedures by:
  • Child- parents will be informed
  • Coordination Unit Staff- official first and final warning issued, then dismissal.
  • Parent or family member- advised of policy and asked not to smoke
  • Student/volunteer advised of policy and warned that their services may be discontinued.
  • Visitor- advised of policy and warned not to smoke

Reviewed: January 2012
To be reviewed on or before: March 2014
FENCING PROCEDURE
Clause 104 of the Education and Care Services National Regulations 2011 states:
The approved provider of an education and care service must ensure that any outdoor space used by children at the education and care services premises is enclosed by a fence or barrier that is of a height and design that children preschool age and under cannot go through, over or under it.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 167
Education and Care Services National Regulations 2011 Clause 104
Work Health and Safety Act 2011 (NSW)
Work Health and Safety Regulation 2011 (NSW)
National Quality Standard – Quality Area 2

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Kidsafe

Educators will:

- Ensure a boundary fence is designed so that children are prevented from scaling or crawling under it, it is recommended that fences be a minimum height of 1200mm, and the gap under the fence be no more than 100mm. It is also recommended that there be nothing to climb onto within 1200mm from the top of the fence e.g. rubbish bins, barbeques, or wheelbarrows.
- Swimming Pools are fenced according to the Swimming Pools Act 1992. This requires a fence height to be a minimum of 1200mm, with the gap underneath to be no more than
100mm. There is also a requirement that there be a clearance of 1200mm from the top of the fence to any object that the child could climb.

- Any projections, or indentations, from the fence or gate shall not be more than 10mm (e.g. bricks that stick out) unless they are spaced at least 900mm apart and that the lower edge of any projections or indentations is at least 1100mm below the top of the fence or gate.
- Ensure If the fence has horizontal rails, rods, wires or bracings, that could be used for climbing, or if the vertical parts of the fence are more than 10mm apart, the following requirements shall apply:-
  (a) The horizontal parts shall be a minimum of 900mm apart. There shall be at least 1100mm between the bottom rail and the top of the fence or gate.
  (b) The spacing between any vertical parts of the fence, such as palings, rods, or wires, shall not exceed 100mm at any point.
- Ensure perforated materials such as chain wire having an opening of greater than 50mm shall not be used. Perforated materials which have openings less than 50mm but greater than 10mm may be used, providing the construction of the fencing meets the requirements for perforated materials (i.e. projections and indentations).
- Gates should comply with the height requirements mentioned above for fencing.
- Ensure balconies, stairs and ramps must be enclosed if a child could fall 50cm. Enclosures may be a balustrade or wall and must be:-
  (i) 1 metre in height above level floor surface,
  (ii) Constructed so that it contains no horizontal rails or footholds other than at the top and base,
  (iii) Have openings not exceeding 100mm between vertical rails and between the base of the balustrade and the floor
- Child proof barriers that are appropriate to the ages of children provided with the service must be provided at the top and bottom of stairs at the premises of a children’s service if; the height at which a child can fall reaches 50 cm for outdoor areas and 60 cm for indoor areas.

Reviewed: January 2012

To be reviewed on or before: March 2014
FIRE EQUIPMENT PROCEDURE

AIM:
To ensure the health, safety and wellbeing of children being educated and cared for by the service. Educators and Co-ordination Unit staff must have ready access to emergency equipment such as fire extinguishers, smoke and fire blankets.
Eurobodalla Family Day Care requires all Educators to have Fire Safety equipment on the premises when conducting an Education and Care service; the premises must be fitted with:
1. Appropriately located smoke detectors; and
2. A fire blanket that is kept adjacent to the cooking facilities at the premises; and
3. Appropriately located fire extinguishers

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 Clause 116
Work Health and Safety Act 2011 (NSW)
Work Health and Safety Regulation 2011 (NSW)
National Quality Standard – Quality Area 2

According to the relevant Australian Standard:
Fire Extinguisher, Fire Blankets and Smoke Detectors must be inspected before installation and every 6 months thereafter.

Monitoring procedure:
1. Within 6 months from the last check of the equipment, Educators are required to have the fire protection equipment rechecked. Documentation to this effect is required at the Co-ordination Unit.
2. The emergency evacuation procedures must be practised with all children provided with the service at least once every three months Regulations – Clause 97. Educators are to submit the Emergency Practice record to the Co-ordination Unit at the end of each quarter i.e. at the end of March, June, September and December.

Reviewed: January 2012

To be reviewed on or before: March 2014
STORAGE OF DANGEROUS SUBSTANCES AND EQUIPMENT POLICY

AIM:
To reduce the risk of harm to children, families, staff, Educators and visitors from risks associated with chemical products, medicines, other dangerous substances and dangerous equipment.

STATEMENT:
Eurobodalla Family Day Care has a duty of care to provide all persons with a safe and healthy environment. The service defines a dangerous product as any chemical, substance, material or equipment that can cause potential harm, injury or illness to a person. It is recognised the importance of Educators and Co-ordination Unit staff adhering to the Education and Care Services National Regulations 2011, the Work Health and Safety Act 2011and Work Health and Safety Regulation 2011.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 167
Education and Care Services National Regulations 2011
Work Health and Safety Act 2011(NSW)
Work Health and Safety Regulation 2011(NSW)
Pesticides Act 1999 (NSW)
National Quality Standard – Quality Area 2 Element 2.3.2

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Managing OHS in Children’s Services, Tarrant, S., 2002.
PROCEDURES
The Work Health and Safety Act 2011 states clearly that a workplace must not place people or children at risk due to hazardous substances.

Home Safety is of high importance in Family Day Care. Under the Work Health and Safety Act 2011, it is the Educator’s responsibility to:

1. Identify hazards in the home.
2. Assess the level of risk of the hazard.
3. Eliminate or control the risk.

Educators and Co-ordination Unit staff need to be aware of the Workplace Health and Safety legislation and safe storage practices relating to hazardous substances. A hazardous substance may be:

- A poison
- Medicine
- A substance that may trigger an allergic reaction e.g. dust, fumes, peanut butter.
- Petrol
- Household cleaners
- Toiletries
- Gardening chemicals e.g. fertilizers, weed killer, pesticides
- Gas.

A substance may become hazardous if it is not managed correctly. This may include the way a substance is:

- Handled
- Used
- Stored
- Transported
- Disposed of
Educators need to be aware of what hazardous substances are stored in the home environment and keep accompanying Material Safety Data Sheets.

**The Co-ordination Unit will:**

- Provide information to Educators relating to identifying hazards and assessing the levels of risk in the Educator’s home.
- Ensure the Play session venue stores any dangerous chemicals, substance and equipment in a place that is secure and inaccessible to children.
- Obtain Material Safety Data Sheets for all hazardous substances at Play session.

**Educators will:**

- Consider using the least hazardous chemical, product or equipment for the job.
- Choose chemicals or medicines with child resistant lids or caps, otherwise ensure the chemical or medicine is stored in a locked place, which is secure and inaccessible to children.
- Ensure that all dangerous substances and medications are stored in their original labelled container and not transferred to any other container.
- Follow the use, storage and first aid instructions on the label for a substance.
- Seek medical advice immediately if poisoning has occurred or call the **Poisons Information Line** on 131126, or call an ambulance, **dial 000**.
- Provide a safe environment at their home and on outings at all times.
- Complete a Daily Hazard check.
- Ensure the dangerous chemicals, substances and equipment at their home are kept in secure storage and are not accessible to children. It is the Educator’s responsibility to eliminate or manage the risk.
- Obtain Material Safety Data Sheets (MSDS) for all hazardous substances

**Reviewed: January 2012**

**To be reviewed on or before: March 2014**
PET AND OTHER ANIMALS POLICY

AIM:
To ensure the practices of the service meet the Education and Care Services National Regulations 2011 and National Quality Standards in regard to pets and other animals in Family Day Care.

STATEMENT:
Eurobodalla Family Day Care acknowledges the importance of keeping children safe at all times. While pets and other animals can prove an effective inclusion into the child’s experiences in care they are also a risk to children. A child’s safety must be maintained at all times.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 167
Education and Care Services National Regulations 2011 Clause 116
Work Health and Safety Act 2011 (NSW)
Work Health and Safety Regulation 2011 (NSW)
National Quality Standards Quality Area 2

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Kidsafe

PROCEDURES
Co-ordination Unit staff will:
• Provide Professional Development and/or resources to Educators and families on health and safety practices for pets and other animals.
• Monitor the compliance of the policy and help Educators develop risk management plans for animals
• Inform families of the service requirements and Child Care Regulations for managing pets in Family Day Care when required.

Educators will:

• Inform families of their procedures relating to pets and children in care.
• Inform families prior to a new pet coming into the home environment
• Vacuum and clean furniture and floors daily, before children arrive if pets are kept indoors.
• Ensure children and Educators wash hands immediately after handling animals. Close supervision of all children if they have access to animals.
• Develop a risk management plan completed prior to all animal experiences
• Research has indicated that dogs are a high risk with children, experiences involving dogs need to be discussed with Coordination Unit before the risk management plan is completed and the experience occurs.
• A Family Day Care Educator must ensure that any animal (including livestock) or domesticated bird that enters or is kept on the premises of the Service does not constitute a health or safety risk to children (for example, by causing an allergic response or infection or in any way having a detrimental effect on the well-being of children provided by the Service)

• Every domestic pet or farm animal is kept in an area separate to and apart from the areas used by children, unless involved in a specific activity that is directly supervised by the Educator, staff member or other adult (e.g. brushing the dog, bottle feeding a lamb, or providing food or water)

• Ensure all animals kept at the premises are clean and healthy.
• Every animal is made inaccessible to a child in care unless the child is under direct supervision.
- Any bedding, toys, litter tray, food feeding container or water container used or consumed by animals is inaccessible to children.
- All play areas are kept free from the following – animal droppings, bones, and holes dug by animals.
- Educators must ensure animals do not have access to bedding used by children, toys or play equipment used by children, food preparation areas or food prepared by the Educator, eating surfaces or utensils.
- No animal travels in a motor vehicle with a child unless the animal is restrained in the car (e.g. by a fixed barrier or harness or in a cage).

Families are encouraged to:

- Inform Educators if their child has any allergies relating to animals before commencing care. Or any fear of particular animals

Reviewed: January 2012

Next Review: March 2014
PARTNERSHIPS WITH FAMILIES & COMMUNITIES
ACCESS POLICY

AIM:
Collaborative relationships with families are fundamental to achieving quality outcomes for families. The service will ensure relevant procedures and legislative requirements relating to access of children are implemented.

STATEMENT:
When there is joint custody of a child or a situation which has created issues over access to a child, it is important for Educators and families to be able to work together to ensure the children can continue in care in a stress-free and safe environment. For this to occur, it is important to have good communication between families, Educators and Co-ordination Unit staff, and for all parties to be informed of the requirements of the Education and Care National Law 2010 and the Education and Care National Regulations 2011.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 - Clause 157

KEY RESOURCES:

PROCEDURES
Co-ordination Unit staff will:

- Maintain confidentiality for all matters relating to custody, access and court orders.
• Store copies of all relevant documents provided by families and/or Educators in a safe and secure manner respecting the individuals privacy.
• Provide advice, support and information to Educators and families on issues relating to access and custody.
• Request a copy of the relevant court order.

Educators will:

• Respect the wishes of the family that has placed that child in care with them, within legal boundaries.
• Seek advice and support from the Co-ordination Unit staff to ensure all people involved in the access/custody are treated fairly and within the regulatory requirements of the service.
• Maintain confidentiality for all matters relating to custody, access and court orders.
• Request a copy of the relevant court order.

Families will:

• Provide copies of any relevant court orders to the Educator and Co-ordination Unit (to be securely stored).
• Discuss all relevant issues with the Educator regarding who has legal access to the children.

1. In relation to a person who has been prohibited by a court order from having contact with the child, the Educator will:

• Not give that person any information concerning the child.
• Not allow that person access to the child.
• Inform the custodial family of the situation ASAP if contacted by a person prohibited by a court order from having contact with the child.
• Contact the police if necessary.
• Contact the Nominated Supervisor or representative for help and support.
• Take all reasonable precautions to ensure the safety of all the children in care and the Educator.

NB: Under no circumstances should the Educator place themselves or other children at risk.

If a child is taken against the Educator’s wishes the Educator should:
• contact the custodial parent/guardian
• contact the police
• contact the Nominated Supervisor

2. In relation to a parent/guardian where there is no court order forbidding that parent/guardian contact with a child, the Education and Care Services National Regulations 2011 states a FDC Educator must not prevent a parent of a child being educated and cared for by the Educator as part of a FDC service from entering the FDC residence or approved venue at any time that the child is being educated and cared for by the educator.

In any case the family is required to contact the Educator to make arrangements for appropriate contact times and ring the Educator before visiting. An Educator’s home is not to be used as a point of contact for access visits without approval from the Educator and Nominated Supervisor for this arrangement to proceed.

Reviewed: January 2012

Next review: March 2014
CHILD ENROLMENT

AIM:
To ensure Eurobodalla Family Day Care manages children’s enrolments in a manner that ensures the placement of a child into care is in accordance with all government legislative and regulatory requirements. Educators will provide children and families with an orientation process for their individual service.

STATEMENT:
The most successful placements of children into Family Day Care are when there is a match between the needs of the child, family expectations and the Educator’s ability and willingness to meet the individual needs of the child. It is the role of the Co-ordination Unit to implement systems and practices that allow for placements to occur in a fair and ethical manner. It is also important that placements are made as quickly as possible to ensure Educators are given every opportunity to fill a vacancy and for families to find suitable childcare.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Children and Young Persons (Care and Protection) Act 157 of 1998
DEEWR Child Care Service Handbook
Family Assistance and other Legislation Amendment (Child Care and Other Measures) Act 2011

KEY RESOURCES:

PROCEDURES
1. Priority of Access
The Australian Government has determined Priority of Access guidelines for allocating places in Children’s Services. These guidelines are set out in the following levels of priority.

**Priority 1**
A child at risk of serious abuse or neglect.

**Priority 2**
A child of a single parent who satisfies, or of parents who both satisfy the work/training/study test under section 14 of the A New Tax System (Family Assistance) Act 1999.

**Priority 3**
Any other Child.

Within each category mentioned above, the following Children are given priority:
- Children in Aboriginal or Torres Strait Islander families.
- Children in families which include a person with a disability.
- Children in families on low incomes.
- Children in families with from culturally and linguistically diverse backgrounds.
- Children in socially isolated families.
- Children of single families.

(These are not in priority order as children may fall into more than one category).

In addition to legislative Priority of Access Guidelines the Service Priority of Access Guidelines are as follows:

- Existing families that need to change Educators or have a sibling starting care.
- Families in an “emergency/at risk” situation and/or low income families may be given overall priority.
- Educators will develop an orientation process for families and children when they first enter their individual service. This will include developing a business folder for interviewing new families and settling new children into care information.

**2. Placement Register**

The Co-ordination Unit will:
Maintain a register of families requiring care i.e. Placement Register.
Provide information to families at the time of registration with the service on the procedures for placing children into Family Day Care.
Review and update the Placement Register on a regular basis.

3. Educator Vacancies
The Co-ordination Unit will:
Maintain an up to date register of Educator vacancies.
Develop and implement systems to ensure information on Educator vacancies is current.
Refer families to Educators taking into consideration the needs of the child, family and the Educator.

4. Hours of Operation
The scheme complies with the Child Care Service Handbook, and this information is related to families in a number of ways (e.g. Family Information handbook).

5. Entitlements
The Co-ordination Unit provides information to families in regard to entitlements for which they may be eligible. (I.e. Child Care Benefit, Child Care Rebate).

6. Number of Educators a family will be referred to
Where possible, families will be referred to more than one Educator, who may be able to meet their childcare requirements, to enable choice of Educator.

REVIEWED: JANUARY 2012
TO BE REVIEWED: MARCH 2014
PLACEMENT OF CHILDREN INTO CARE PROCEDURE

AIM:
To ensure the service places children into care, in accordance with the DEEWR Child Care Service Handbook, in a fair and equitable manner to all families.

The Co-ordination Unit Staff will:
1. Enter family details on the Family Day Care Placement Register in date order of receipt of registrations.
2. Facilitate placements within the service by matching care requirements such as age and number of children, hours of care, starting dates and location, with Educator vacancies.
3. Contact families as Educator vacancies become available that may suit the family’s requirements
4. Advise families that the Educator’s vacancy is being given out a couple of times to provide choice for the family and the Educator. Request families, at the time of referral, to make contact with the Educator within 24 hours.
5. Advise families that for their name to remain on the Family Day Care Placement Register they are required to contact the Co-ordination Unit monthly to confirm their continuing need for care and to ensure that the details are up to date.

Educators are required to:

- Keep the Co-ordination Unit up to date with their current vacancies.
- Advise the Co-ordination Unit of details of new families starting as soon as possible after interviewing the family.
- Obtain a copy of the child’s Registration form before the child commences.
- Confirm with families they have been contacted by the Co-ordination Unit to offer the placement.
- Contact the Co-ordination Unit to check priority of access on the Placement Register if contacted directly by a family requiring care before offering the position to the family.
- Support the Co-ordination Unit in maintaining Priority of Access Guidelines and Placement Register procedures.

Families are required to:
• Register with the service if requiring care.
• Maintain regular contact with the service whilst on the Placement Register to ensure details are current and correct.
• Contact Educators promptly after referral (within 24 hours).
• Advise the Co-ordination Unit promptly of their decision for placement after interviewing an Educator.
• All families must register with the service by completing a Family Registration Form.
• Families and Educators that have discussed a childcare place without going through the Placement Register must contact the Co-ordination Unit prior to registration, to ensure the place being offered is made in accordance with Procedure: Placement of Children in Care and DEEWR Child Care Service Handbook: Priority of Access Guidelines.

Reviewed: January 2012

To be reviewed on or before: March 2013
COLLABORATIVE PARTNERSHIPS WITH FAMILIES POLICY

AIM:
Eurobodalla Family Day Care acknowledges collaborative relationships with families are fundamental to achieving quality outcomes for children. Educators and Co-ordination Unit staff will actively and intentionally provide opportunities for families to be involved in the planning and development of the service, as well as in the activities for children.

STATEMENT:
Collaborative partnerships can be assisted and supported through the active participation of families in the service. Through casual conversation, formal surveys and other opportunities for feedback from families, the service will be able to ensure it meets the needs of families. Families need to be familiar with current practices to provide constructive feedback on improvements. This responsibility falls with both the Co-ordination Unit staff and the Educator.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) - Quality Area 6

PROCEDURES
Approved Provider Eurobodalla Shire Council will:
Ensure the Co-ordination Unit is inclusive of all stakeholders in policy development and consultation within the service.
Co-ordination Unit Staff will:
- Offer individual parent information sessions when families commence with the service.
- Communicate service news to families through regular newsletters.
- Provide opportunities to families to offer feedback and/or comments on the service.
- Invite families to be part of consultation groups and to attend Professional Development that may be relevant to families.
- Organise regular social functions that are inclusive of families e.g. BBQ at the Botanic Gardens.

Educators will:
- Make time to talk with families about their child’s care and development in Family Day Care.
- Keep families informed about the activities of the children in care through a weekly written program.
- Provide opportunities for families to become familiar with the service they provide to the children.
- Ask families for feedback on the quality of care the children are receiving and ideas for future programming/activities and procedures.
- Invite families to attend Family Day Care outings with their children e.g. children’s Christmas party.
- Respect the opinions of families in regard to the way they would like their child cared for, and if this is not practical, for the Educator to be sensitive in the way they address these differences in care requirements/provision.

Families are encouraged to:
- Provide information to their child’s Educator that will assist in the smooth transition to childcare for the child and family.
- Be involved in the activities of their child and Family Day Care when invited to participate.
- Take time to talk to their Educator about their child’s activities and progress in Family Day Care, and to be interested in the Educator’s weekly program for the children.
- Provide constructive feedback to Educators and the service about matters that can be improved in Family Day Care, either at Educator or Co-ordination Unit level.
• Read family newsletters and information forwarded from the Co-ordination Unit or from the Educator.

Reviewed: January 2012

To be reviewed on or before: March 2014
VISITOR’S REGISTER PROCEDURE

AIM:
To ensure children are safe at all times and parents are informed of people visiting the education and care service.

STATEMENT:
To ensure Educators meet the regulatory requirements of recording “visitors” to their premises whilst providing childcare.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 165-166)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)

PROCEDURES

• A FDC Educator must not leave a child or children alone with a visitor to a family day care residence or approved venue, while providing care and education to that child as part of the FDC service.
• All approved Educators who have “visitors” attend a family day care residence or approved family day care venue during hours of operation must have all the visitors sign the Visitors Register. The Visitors Register must be kept and include the following details:
  • Date
  • Name
  • Time In
  • Signature
• Definition of a visitor for the purposes of the Education and Care Services National Regulations 2011 – any person at the Educator’s premises that is not permanently living at the premises.

• Visitors include:
  • Co-ordination Unit staff – CDO visits.
  • Trades persons.
  • Other people that may come into the Educator’s premises with the family.
  • Friends that drop in during the day, including other Educators.
  • Families that are at the Educators premises for a family interview whilst children are in care.
  • People that are staying with you short-term – not permanently residing with you.

Visitors do not include:

• Families that are signing the children in and out on the timesheet.
• Educators own family, who reside with them, and permanent residents.

The Co-ordination Unit will provide forms for Educators to use for visitors to sign.

Educators may choose to use their own method of recording this information.

Visitor’s registers must be returned to the Co-ordination Unit and kept for a minimum 3 years after the record was made.

The Visitor’s register will also be completed at Playsession.

Reviewed: January 2012

Next review: January 2014
FEE POLICY

AIM:
To ensure Eurobodalla Family Day Care meets all accountability requirements in regard to payment of fees and provision of a statement of fees charged by the education and care service.

STATEMENT:
Educators are self-employed business operators who set their own fee for service. It is important that Educators operate their business accountably which is transparent to all stakeholders.

RELEVANT LEGISLATION:
Compensation and Consumer Act 2010
DEEWR Child Care Service Handbook

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Family Day Care Australia www.familydaycareaustralia.com.au

PROCEDURE
Management (Eurobodalla Shire Council) will:

- Ensure the fees set by the Co-ordination Unit are endorsed by Eurobodalla Shire Council, in line with the Council’s Operational Plan before being implemented.

Co-ordination Unit will:

- Set the Parent Administration Fee and Educator Levy each financial year based on the annual budget to ensure the required income will be received to run the service efficiently to meet legislative requirements. This will involve the Eurobodalla Shire Council Finance team.
• Keep all stakeholders informed during this fee setting process.
• Include the service fee schedule in the initial information to families.
• Explain to families the service is de-regulated.
• Provide information to Educators on developing their fee schedule.
• Not enter into discussions with Educators or families on matters relating to the value of an individual service compared to other services.
• Require Educators to take responsibility for bad debts incurred at their service.
• Require outstanding fees due to an Educator be paid before the family can be placed with another Educator.
• Process all Child Care Benefit Claims for Educators.
• Monitor accuracy of claims for Child Care benefit.
• Provide quarterly CCB statements to families.

**Educators will:**

• Adopt standard hours as 8.00 am to 6.00 pm Monday to Friday for all families using Eurobodalla Family Day Care. Any care provided outside these hours or on Public Holidays will be classified as Non-standard hours of care. Educators are not permitted to individually alter the standard hours of care that they charge families.
• Ensure individual fees are compliant with the Australian Government Handbook, service policies and software before implementing with families.
• Ensure fee schedules are given to families at the initial interview.
• Charge all families the same fee for the same service.
• Issue a receipt for all money received from the families.
• Include the service fees in all fee schedules.
• Give the Co-ordination Unit and existing families at least 4 weeks’ notice of any changes to fees.
• Not discuss nor agree to set fees in collusion with other Educators (Trade Practices Act 1974).
• Elect not to charge close relatives for care being provided if they choose. Child Care Benefit cannot be claimed for these families.
• Only provide care for children who are registered with the service.
Families are required to:

- Ensure all children being provided with care are registered with the service.
- Pay fees to the Educator at the time agreed to by the Educator and family.

Reviewed: June 2012

To be reviewed: June 2013
STAFF ARRANGEMENTS
CLOSING AND OPENING AN EXISTING FAMILY DAY CARE BUSINESS
PROCEDURE

AIM:
To ensure the Co-ordination Unit is aware of the operation of Approved Educators.

STATEMENT:
It is important that the Approved Provider of the childcare service is aware of the operations of Approved Educators. This allows the service to ensure Educators are operating within the legislative and policy requirements at all times and to ensure families are aware of changes to care requirements. The requirements for short term closure of business will be less than for those Educators closing their business for extended periods of time.

PROCEDURE
For closures less than a 2 week period:

- Educators are to notify the Co-ordination Unit, by phone or in writing of when they intend to close their business and when they intend to re-open their business.
- Educators are to notify the Co-ordination Unit if these dates change prior to reopening their childcare business.

For closures more than a 2 week period:

- Educators are to notify the Co-ordination Unit in writing (Closure of Business Form provided by the service) at least one week prior to closure (if possible), advising of closure and reopening dates.
- For any occurrence of closure where the health status of the Educator has changed e.g. illness, medical procedure or birth of a child, a doctor’s certificate may be requested by the Co-ordination Unit before the Educator can reopen their business.
- Closures of more than 12 months will result in the Educator’s name being removed from the Family Day Care Register.
- In all cases of an Educator being unavailable to provide childcare, Educators will notify families by phone or in writing of their closure period (dates) and refer them to the Co-ordination Unit for alternative care.
- In all cases when an Educator closes their service for any period of time the Educator must ensure that the Workplace Health Safety Audit will be reviewed and the premises will be compliant to this document before the Educator reopens their business.
• When the closure is for more than a 2 week period Co-ordination Unit staff will review the HSI with the Educator.

Reviewed: January 2012

To be reviewed on or before: March 2014
ADVERTISING POLICY

AIM:
To ensure the service is promoted professionally in an ethical and positive manner, and reflects the philosophy of the service.

STATEMENT:
Family Day Care Providers are self-employed childcare providers, operating their business under the approved provider Eurobodalla Shire Council.
All advertising and promotional material used to endorse any aspect of Eurobodalla Family Day Care must be professional and endorsed by the Nominated Supervisor (or representative) of the service.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Children and Young Persons (Care and Protection) Act 157 of 1998

KEY RESOURCES:
National Quality Standards 2011 (ACECQA).
Family Day Care Australia www.familydaycareaustralia.com.au

PROCEDURES

Eurobodalla Shire Council will:
Ensure the policies of the service meet the relevant legislative requirements in regard to promotion and advertising of the service.
Co-ordination Unit Staff will:

- Ensure the Advertising Policy for the service reflects the best interests of the service within the community.
- Develop advertising material for the service.
- Advertise the service regularly using a variety of media.
- Participate in promotional activities regularly.
- Support Educators to develop advertising and promotional material, if requested
- Respond to requests for media coverage for special occasions and events, in line with Eurobodalla Shire Council’s procedures.

Educators will:

- Promote the service to the wider community in a positive manner at all times.
- Ensure the EUROBODALLA FAMILY DAY CARE logo appears on all individual advertising materials developed and is not altered in any format, according to Sect 104 of the Education and Care Services National Law 2010 which states:

104 Offence to advertise education and care service without service approval

A person must not knowingly publish or cause to be published an advertisement for an education and care service unless it is an approved education and care service.

Ensure all advertising and promotional material used to promote any aspect of Eurobodalla Family Day Care is endorsed by the Nominated Supervisor (or representative) of the service.

INTERNET AND SOCIAL NETWORKING

No information or images will be used on internet or social networking sites without written permission from families to use that piece of information or image.

Families are encouraged to:
Promote Family Day Care in their community in a positive manner.
Support any Family Day Care promotional activities if available to do so.

Reviewed: January 2012

To be reviewed: March 2013
PROTECTING EDUCATORS WELLBEING PROCEDURE

It is recommended that Educators:

• Talk to staff at the Co-ordination Unit if you are feeling overwhelmed. Communicate in an open and honest way.
• Assess your own perception of the situation and try to put yourself on the “other” side, to see another point of view. Avoid being negative.
• In relation to particular stressors, seek information about the problem/issues to enable you to make better decisions about how to deal with the stressor.
• Develop a support network of others within and outside of Family Day Care, so that successes and solutions to problems may be shared. (Remember confidentiality).
• Try some stress release techniques, such as physical activity, relaxation techniques, yoga or talking to a friend about your situation. (Again be sure to maintain confidentiality at all times).
• Try to focus on the positives.
• Plan your time; this may require a change of habits. This should include time for your own relaxation and regular breaks from your business.
• Try and keep healthy, have a balanced diet and take time to exercise.
• Arrange to take breaks throughout the year to recharge
• Participate in schemes social occasions and events

Reviewed: January 2012

To be reviewed on or before: March 2013
CODE OF CONDUCT POLICY

AIM:
To ensure all stakeholders are clear about their responsibilities in relation to one another and to the families and children using the service.

Management (Eurobodalla Shire Council representatives) agree to:

- Enter into an agreement with the Australian Government to operate the service within the requirements of the Children’s Services Handbook.
- Make decisions appropriate to those of the approved provider of the service.
- Participate in Professional Development.
- Support the Co-ordination Unit staff in the operation of the service in meeting the Commonwealth and State Legislative requirements.
- Recruit and select suitable persons to operate the Eurobodalla Family Day Care Co-ordination Unit.
- Provide a safe workplace for the Co-ordination Unit staff.
- Provide support and direction to the service in strategic planning.
- Pass relevant information on to the Co-ordination Unit in a timely manner.

Co-ordination Unit Staff agree to:

- Actively promote Family Day Care to the wider community.
- Administer the Child Care Benefit claims on behalf of the families, Educators and the Family Assistance Office.
- Monitor the provision of quality childcare, including compliance with the Children (Education and Care Services National Law Application) Bill 2010 and the Education and Care Services National Regulations 2011.
- Develop and review Policies, Guidelines and Procedures through a process of consultation with all stakeholders.
- Implement anti-bias practices in the workplace and promote diversity.
- Maintain a safe workplace for people that enter the workplace.
- Communicate in a positive and respectful manner to all staff, Educators, families, children and others who interact with the Co-ordination Unit.
• Provide Professional Development and resources to Educators and families on Early Childhood matters.
• Pass relevant information on to Educators in a timely manner.
• Be trained in recognising and responding to Child Protection situations.
• Participate in Professional Development and self-improvement practices.
• Provide opportunities for feedback and improvement.
• Conduct visits to Educators.
• Provide Playsession opportunities for Educators and the children in care.

Educators agree to:

• Actively promote Family Day Care to the wider community.
• Operate as a self-employed business operator.
• Abide by the Eurobodalla Family Day Care Educator’s Agreement.
• Ensure other family and other household members are aware of their roles as per the Guideline “The Roles of Educator’s Families and other Household Members”.
• Communicate in a positive and respectful manner with families, children, Educators and staff.
• Pass relevant information on to families in a timely manner.
• Implement anti-bias practices in their childcare environment and promote diversity.
• Maintain a safe workplace.
• Encourage each child to develop their potential to gain independence and a positive self-esteem.
• Guide children towards positive and responsible behaviour.
• Be trained in responding to Child Protection situations.
• Participate in Professional Development and self-improvement practices.
• Educators who breach the Code of Conduct may be removed from the Register of Approved Educators at the discretion of the Approved Provider and/or Nominated Supervisor.

Reviewed: January 2012

To be reviewed: March 2014
ETHICAL CONDUCT POLICY

AIM:
To ensure Eurobodalla Family Day Care operates in an ethical manner at all times and uses the Early Childhood Australia (ECA) Code of Ethics to appropriately resolve Ethical Dilemmas.

STATEMENT:
The Code of Ethics, developed by ECA, underpins the core values, beliefs and practices within Eurobodalla Family Day Care. The code outlines the ethical responsibilities of Educators and staff to identify and address bias, injustice and unethical practices. Eurobodalla Family Day Care acknowledges the importance of ethical behaviour across all areas of the service.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Equal Employment Opportunity under the Anti Discrimination Act 1977
Privacy and Personal Information Protection Act 133 of 1998
Government Information (Public Access) Act 52 of 2009
Freedom of Information Amendment (Reform)Act 2010 No. 51
Ombudsman’s Act 1974 (as at 1 January 2012) Act 68 of 1974

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Early Childhood Australia Code of Ethics 2006
www.earlychildhoodaustralia.org.au
PROCEDURES

Approved Provider - Eurobodalla Shire Council will:

- Ensure policies and practices are developed in line with current Education and Care Services National Law 2010, Education and Care Services National Regulations 2011.
- National Quality Standard.
- Ensure all stakeholders are consulted in matters of policy development.
- Ensure changes within the service are explained to Educators, families and Co-ordination Unit staff prior to implementation.
- Ensure Professional Development is available to Co-ordination Unit staff.

Co-ordination Unit Staff will:

- Abide by the ECA Code of Ethics 2006.
- Develop their understanding of their obligations in following the ECA Code of Ethics.
- Regularly reflect upon their own practices in line with the ECA Code of Ethics and relevant legislation.
- Provide resources for Educators to develop their knowledge of the ECA Code of Ethics.
- Provide information to families on the Ethical Conduct Policy and the ECA Code of Ethics.

Educators will:

- Abide by the ECA Code of Ethics 2006.
- Develop their understanding of their obligations in following the ECA Code of Ethics.
- Be professional and ethical in the operation of their childcare business.
- It is the Educator’s responsibility to ensure that all claims are a true and accurate reflection of actual hours of childcare that has been provided to the children for whom they are responsible and that any inaccuracies in the hours or amounts claimed may be regarded as breaches of their obligations to Eurobodalla Family Day Care, fraud or a breach of the Education and Care Services National Law and Education and Care Services National Regulations. Penalties may also apply and the contract with you be terminated.

Families will:

- Abide by the Ethical Conduct Policy.
- Support the Educator to comply with the ECA Code of Ethics.
- View a copy of the ECA Code of Ethics by either visiting the Early Childhood Australia Website at www.earlychildhoodaustralia.org.au or by contacting the Co-ordination Unit on 69 269 367 for a copy.

Reviewed: January 2012
To be reviewed: March 2014
DETERMINING RESPONSIBLE PERSON POLICY

AIM:
To ensure a responsible person is available to all stakeholders at all times when an individual Family Day Care Education and Care service is operating.

STATEMENT:
A responsible person will be available 24 hours a day to cover when an Educator registered with Eurobodalla Family Day Care may be providing education and care to children. The process for determining the responsible person will be clear to all educators and staff and followed at all times. The details of the responsible person will be displayed.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
National Quality Standard

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)

PROCEDURES
A responsible person can be;
The Approved Provider (a person from Eurobodalla Shire Council who is in management or control of the service).

Nominated Supervisor – this is a person with a Supervisors Certificate designated by the service as the Nominated Supervisor.

Certified Supervisor – a person who has been placed in day-to-day charge of the service.

Co-ordination Unit Staff will:

- Designate a Nominated Supervisor. This appointment will be made in writing and written consent from that person will be sought.
- Ensure a Nominated supervisor is available at all times an education and care service is operating.
- Nominate certified supervisors to be responsible when the nominated supervisor is unavailable. A single nominated supervisor will be placed in charge on a daily basis. The appointment of certified supervisors will be made in writing to individuals and written consent from such people will be sought.
- Ensure Nominated Supervisors and Certified Supervisors have a clear understanding of the role of the Responsible person.
- Ensure the responsible person is appropriately skilled and qualified.
- Display the name and position of Responsible Person in charge of the service, ensuring that it is easily visible in the main foyer of a centre based service and at the Family Day Care Coordination Unit.
- Nominate an Educational Leader. This appointment will be made in writing and written consent from that person will be sought.
- Ensure the Educational Leader has a clear understanding of the role.

Reviewed: June 2012

To be reviewed: June 2014
FAMILY DAY CARE EDUCATOR REGISTER PROCEDURE

To meet the requirements of section 69 of the National Law and section 153 of the National Regulation, the following information will be kept on a register at the Co-ordination Unit for each Educator registered:

- The full name address and date of birth of the Educator
- The contact details of the Educator (including mobile) if undertaking excursions
- The address of the residence (including a statement if it is a residence)
- The date the Educator was registered with the service
- When applicable, the date that the Educator ceased to be registered with the service
- The days and hours the Educator will usually be providing education and care to children as part of the service
- Evidence of any qualifications held by the Educator and/or evidence that the Educator is actively working toward a qualification in Cert 3 in Children’s Services
- Evidence that the Educator has completed: current first aid training, current approved anaphylaxis management training and current approved emergency asthma management training
- Evidence of any other training completed by the Educator
- A contract for each child the Educator provides care for stating the child’s name, date of birth and the days and hours the Educator usually provides education and care to that child
- The full names and dates of birth of all persons aged 18 years and over who normally reside at the family day care residence
- The full names and dates of birth of all children aged under 18 years who normally reside at the residence
- A record of the identifying number of the working with children check and the date the check was received by the Co-ordination Unit.

In the case of the Educator Assistant the following additional information will be kept

- The name of the family day care educator to be assisted by the Educator assistant
PROFESSIONAL DEVELOPMENT POLICY

AIM:
To ensure Management, Co-ordination Unit staff and Educators participate in Professional Development on a regular basis.

STATEMENT:
Ongoing Professional Development for those involved in childcare services assists in ensuring that children are cared for by people who are informed and up to date with information on current practices within the Early Childhood field. Where appropriate, the service will offer opportunities to families and other children’s services within the community to attend Professional Development that is organised by the service.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 7
Belonging Being Becoming – The Early Years Learning Framework (DEEWR 2010)
My Time, Our Place – The Framework for School Age Care in Australia (2011)

PROCEDURES
Management will:
• Take opportunities for ongoing Professional Development in Family Day Care where possible.
• Ensure the policies of the service meet the Education and Care Services National Regulations 2011 in regard to Professional Development.
• Provide Professional Development opportunities for Co-ordination Unit staff as Council employees.

Co-ordination Unit Staff will:

• Take opportunities for ongoing Professional Development where possible.
• Participate in Professional Development in responding to suspected Child Protection issues, every 2 years
• Provide opportunities for all stakeholders to provide feedback relating to Professional Development requirements of the service.
• Ensure Educators are offered Professional Development opportunities that cover key business areas.
• Provide resources and information to Educators and families on childcare related areas.
• Evaluate Professional Development provided to management, staff, Educators and families for effectiveness.
• Provide an induction program for new Educators and their family members.
• Engage professionals external to the service as well as staff for the delivery of Professional Development.
• Provide Educators with relevant Professional Development records
• Support Educators in their endeavours to obtain qualifications

Educators will:

• Attend an induction program prior to commencing as an Approved Educator. Prospective Educator’s family members will be encouraged to attend.
• Annually, participate in 3 or more Professional Development opportunities to remain on the Register of Approved Educators.
• Provide evidence that Professional Development has influenced practice.
• Participate in Professional Development in responding to suspected Child Protection issues, every 2 years
• Complete a Professional Development plan annually.
• Participate in mandatory training as outlined by the Co-ordination Unit.

Families are encouraged to:

• Support the Educators in their endeavours to attend Professional Development.
• Provide feedback to the Co-ordination Unit on any future requests for Educator/family Professional Development requirements.

Requirements for First Aid

• In line with the Education and care services National Regulations 2011 it is a requirement that all Approved Family Day Care Educators and staff hold a current approved First Aid qualification and training in Asthma and Anaphylaxis management. Educators will not be allowed to operate their business without evidence of a current First Aid Certificate being provided to the Co-ordination Unit before expiry.
• Educators who do not meet the requirements for Professional Development annually may be removed from the Register of Approved Educators at the discretion of the Approved Provider and/or Nominated Supervisor.

Reviewed: January 2012

To be reviewed: March 2014
REGISTRATION OF EDUCATORS AND STAFF POLICY

AIM:
To ensure Educators and Co-ordination Unit staff are selected on merit and with regard to anti-bias practice.

STATEMENT:
Eurobodalla Shire Council, as Licensee of Eurobodalla Family Day Care, has an obligation to the community to ensure that all staff and Approved Educators are recruited in a fair and equitable manner based on merit and without bias. They must demonstrate an ability to meet and maintain the standards expected by the Federal, State and Local Governments, the service and the community in relation to the provision of quality child care.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Children and Young Persons (Care and Protection) Act 1998
The Ombudsman’s Act 1974 Act 68 of 1974
Work Health & Safety Act 2011(NSW)
Work Health & Safety Regulation 2011 (NSW).

KEY RESOURCES:
*Guide to the Education and Care Services National Law 2010 and the Education and Care Services National Regulations 2011 (ACECQA).*
*National Quality Standards 2011 (ACECQA) – Quality Area 7, Quality Area 4
Guide to the National Quality Standard 2011 (ACECQA).*
Eurobodalla Shire Council Equal Employment Opportunity Management Plan

PROCEDURES
Management will:

- Advertise and recruit Co-ordination Unit staff in line with Eurobodalla Shire Council staff recruitment procedures, to deliver the outcomes of the service.
- Staff hours and requirements will be dependent on funding levels of the service.

Co-ordination Unit Staff will:

- Advertise and conduct regular Educator recruitment and Information Sessions.
- Process Educator applications and register Approved Educators with the service in line with the Procedure: Selecting Approved Educators.
- Be consistent and fair in selecting Educators to register with the service.
- Ensure prospective Educators are aware of their requirements to gain minimum qualifications of Certificate III in Children’s Services.

Educators will:

**Be over the age of 18 years**

- Register with the service through the advertised procedure.
- Operate their childcare business as a self-employed operator once registered with the service.
- Provide evidence of current qualifications or the commitment to complete minimum qualification as required.
- Sign and abide by the Educator’s Agreement annually to remain on the Family Day Care Register.

An unsuccessful Prospective Educator can contact the Co-ordination Unit for feedback on their unsuccessful application.

**Reviewed: January 2012**

**To be reviewed on or before: March 2013**
REGISTRATION OF FAMILY DAY CARE EDUCATOR ASSISTANTS POLICY

AIM:
The Education and Care Services National Regulations 2011 provides scope for the role of the Educator Assistant to provide continuity of care for families and children.

STATEMENT:
Educator Assistants are approved with Eurobodalla Family Day Care to provide care and education in the primary educator’s home when the primary educator is unavailable for less than a four hour period.
Eurobodalla Shire Council, as the Approved Provider of Eurobodalla Family Day Care, has an obligation to the community to ensure that all Educator assistants are recruited in a fair and equitable manner based on merit and without bias. They must demonstrate an ability to meet and maintain legislative requirements, service policies procedures and guidelines in relation to the provision of quality child care.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)

PROCEDURES
DEFINITIONS
**Family Day Care Educator** - a person who is directly involved, at his or her home, in educating, supervising or caring for children for a family day care children’s service.

**Educator Assistant** - means a person registered with a family day care service to assist family day care educators.

**Circumstances when an Educator Assistant can be used; (Clause 144 Education and Care Services National Regulations 2011).**

An approved Family Day Care educator assistant may assist the family day care educator by;

1. In the absence of the family day care educator, transporting a child between the family day care residences or approved family day care venue to;
   - a school
   - another education and care service or children’s service: or
   - the child’s home.

2. Providing education and care to a child, in the absence of the family day care educator, in emergency situations, including when the educator requires urgent medical care or treatment, and

3. Providing education and care to a child, in the absence of the family day care educator to attend an appointment (other than a regular appointment) if;

   If the absence is for less than 4 hours; and

   The approved provider of the family day care service has approved that absence; and

   Notice of that absence has been given to the parents of the child

4. Providing assistance to the Educator while the educator is caring for children as part of a family day care service.

Eurobodalla Family Day Care will approve an Educator assistant role under the above circumstances, only when the family day care educator provides the written consent of a parent of each child being educated and cared for by the educator to use of the assistant in the circumstances set out above. Clause 144(3) Education and Care National Regulations.

**To be eligible to be an Educator Assistant a person must;**
• Have a minimum Certificate III in Children’s Services or working towards gaining a Certificate III in children’s services.
• Be over 18 years of age.
• Possess and maintain a current 1st Aid Certificate, undertaken approved training in Emergency Asthma Management and Anaphylaxis management.
• Have a completed Working with Children Check.
• Participate in 3 professional development opportunities throughout the year including child protection (Every 2 years).
• Sign and abide by the Educator Assistant Agreement and Educator Code of Conduct.

Educator Assistant Responsibilities

• Organise payment directly with the family day care educator they are assisting.
• Be familiar with the whereabouts in the family day care educator’s service of:
  • first aid kit
  • fire extinguisher and evacuation plan
  • emergency numbers
  • parent contact numbers
  • children’s details/special requirements
  • children’s belongings
  • equipment needed for the running of the day.
• Endeavour to carry out regular maintenance, safety and cleaning routines as needed.
• Discuss the day’s program with the family day care educator. Where possible follow the normal routine of the children’s day.
• The educator assistant must ensure that the parents complete the claim form/attendance records.
• The educator assistant is to issue a receipt for any payments collected on behalf of the Family Day Care educator.

Primary Educator’s Responsibilities
• Discuss with parents which children will be needing care and what hours they will require. (Ensure the proposed leave meets the guidelines above for the appointment of an Educator assistant).
• Contact the Co-ordination Unit to discuss the proposed appointment of the Educator Assistant.
• Contact educator assistant and tentatively book days needed. Anticipated hours and numbers of children and rate of payment should be discussed at this time.
• Obtain written consent from parents that their child can be educated and cared for by a named Educator Assistant.
• When possible, confirm with the educator assistant least one week before relief care commences, days needed, hours of care and number of children. Discuss any additional needs of children in care.
• Have parents complete the Educator Assistant Authorisation form. Form to be retained by the educator in their record file, and a copy for the office.
• Ensure the educator assistant is familiar with the whereabouts of:
  • first aid kit
  • fire extinguisher and evacuation plan
  • emergency numbers
  • parent contact numbers
  • children’s details/special requirements
  • children’s belongings
  • other equipment needed for the running of the day
• Discuss maintenance, safety and cleaning routines and provide a check list of end of day duties.
• Discuss the day’s program with the educator assistant.
• Both the family day care Educator and the educator assistant must complete separate timesheets for each child in care.
• The family day care educator is responsible for paying the Educator Assistant (this will be completed as a transfer through the timesheet).
• If the family day care educator needs to cancel the educator assistant’s care, 24 hours notice is required. If less than 24 hours notice is given the educator assistant must still be paid for the care booked.

Reviewed: January 2012  To be reviewed: March 2014
SELECTING APPROVED EDUCATORS PROCEDURE
The process used in considering the suitability of Prospective Educators includes, but will not be limited to the following:

- Must be over 18 years of age.
- Completed forms regarding suitability and ability to provide quality childcare.
- Submission of a letter of application and resume.
- Working with Children Background Check for the Prospective Educator and all household members over 18 years as required.
- A competed Certificate 3 In Children’s Services or actively be working toward this qualification.
- Contact details of two referees.
- Proof of identity and residing address.
- Current First Aid certificate and training in Anaphylaxis and Asthma management,
- A recent medical certificate from a certified practitioner stating suitability to fulfil the requirements of an Approved Educator.
- A completed Workplace Health Safety Audit of their home in conjunction with the Co-ordination Unit, ensuring an adequate standard is met for the provision of childcare.
- An obligation to participate in training regard to Child Protection Law every 2 years.
- Knowledge, experience, and/or Professional Development in childcare.
- Evidence of qualifications relevant to the Educator position.
- Attitude and commitment to the philosophy of the service.
- An ability to communicate with adults and children.
- An awareness of and sensitivity towards the diverse needs of young children and their families including a range of cultures, religions and abilities.

An application may be rejected for reasons that include, but will not be limited to the following:

- Unsatisfactory Working with Children Check of applicant or household members.
- References unavailable or unfavourable.
- Unsatisfactory Workplace Health and Safety Audit of the applicant’s home.
- Unsatisfactory medical report.
- Inability to demonstrate the capacity to supervise and care for the children adequately.
● Inability to demonstrate effective communication skills and interactions with children and adults.
● Refusal by prospective Educator to comply with an obligation within service and/or legislative requirements.
● Limited knowledge of child development and appropriate behaviour guidance.

STEPS:

1. Receive and read Educator Information Pack.
2. Attend an Individual or group information session (also available for family members.)
3. Application form, covering letter and resume submitted.
4. Educator Interview.
5. Workplace Health and Safety Audit.
6. Activity Morning.
7. Day with an Educator
8. Working with Children Background Checks conducted.
9. Medical Clearance.
10. First Aid qualifications.
11. Referee Checks.

If selected for registration, an Approved Educator Induction process will be completed.

Reviewed: January 2012

To be reviewed: March 2014
AIM:
To ensure Educators receive effective ongoing support and guidance from Co-ordination Unit staff to deliver a service which complies with current legislative and duty of care requirements.

STATEMENT:
Support and guidance will be offered to all Educators in a variety of ways, primarily via personal monthly visits at the Educators home or venue where the Educator is operating her service from (e.g. a visit to Playsession, the park etc). The coordination unit will continue to support and guide the Educator through phone contact and the delivery of written information. All forms of support and guidance will aim to promote best practice for the Educator, who will be delivering a service of excellence to their community.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)- 1.1,7.1.3
www.acecqa.gov.au
Family Day Care Australia www.familydaycareaustralia.com.au

Practices
Support visits. Stand 4, 7.1.3
Co-ordination Unit staff will:
• Ensure all staff work collaboratively and affirm, challenge, support and learn from each other to further develop their skills and to improve practice and relationships. Element 4.2.2
• Ensure all staff and Educator Interactions convey mutual respect, equity and recognition of each other’s strengths and skills. Element 4.2.3
• Be professional and respectful to the role of the Educator.
• Provide assistance and support to all Educators at all times the family care service is operational.
• Provide support for all Educators in all locations, via personal visits, phone and written information.
• Discuss any relevant Family Day Care business issues, such as completing Child Care Benefit claims (timesheets) current information.
• Ensure all staff and educators are suitably qualified for the position (law – Division 8).
• Every effort is made to keep continuity of Educators and CDO”s at the service.
• Ensure there is sufficient numbers of CDO”s to monitor and support all Educators. National Law: Section 51, 161, 163 National Regulations: Regulations 29–32.
• Monitor that legislative requirements are being adhered to and provide Educators with feedback relating to their requirements.
• Designate a suitably qualified and experienced Educational Leader.
• Support the provision of childcare to ensure quality outcomes are provided to children and their families.
• Provide resources and literature to increase the Educator’s knowledge of childcare related matters.
• Offer Professional Development opportunities for Educators to extend and development new skills.
• Develop and evaluate Educator individual staff development plans to support performance improvements. Element 7.2.2

**CDO Staff will:**

• Provide assistance and support to all Educators at all times the family care service is operational. Including at night or on the weekends, if children are using care.
• Provide support for all Educators in all locations, via personal visits, phone and written information.
Visit Educators on a regular basis in their homes and at other venues i.e. Playsession.
Balance visits between scheduled and spontaneous.
Monitor that legislative requirements are being adhered to and provide Educators with feedback relating to their requirements.
Document the home visit at the time of the visit (CDO Visit Record), giving the Educator a copy at the end of the visit.
Vary the length and time of the home visit depending on the activities of the day.
Record observations of each child observed in care. These records are in triplicate form. One to go to the family, one to the educator and one will be stored in the Co-ordination Unit.
If necessary, follow-up an issue or concern that has been raised during a visit, with the Senior Coordinator or Educator/Family Liaison Officer.
Liaise with families on child development matters if required.
Discuss children’s development and assist in the planning for each child’s progress.
Discuss and assist the Educator with their program and routines.
Provide resources and literature to increase the Educator’s knowledge of childcare related matters.
Develop and evaluate individual development plans to support performance improvements.

**The Educational Leader will: law – 169. Reg 118, 148**

- Lead the development and implementation of the Educational Programs
- Guide Educators in their planning and reflection
- Mentor colleagues in their implementation practices
- Document all support home visits, giving the Educator a copy at the end of the visit.
- Develop and evaluate individual development plans to support performance improvements relevant to the implementation of the Educational Programs.

**The Educator will:**

- Ensure all Educators work collaboratively and affirm, challenge, support and learn from others to further develop their skills and to improve practice and relationships. Element 4.2.2
- Ensure all Educator and staff Interactions convey mutual respect, equity and recognition of each other’s strengths and skills. Element 4.2.3
- Be professional and respectful of the role of the Child Development Officer and Educational Leader.
- Allow the Co-ordination Unit staff to visit in their home or other venues while providing childcare.
- Provide feedback to staff on improvements to the service.
- Sign the Educator/CDO Visit record once completed by Co-ordination Unit staff.
- Notify the families that a visit has occurred that day by the CDO i.e. offering the family the “Visit Slip” completed by the CDO.
- If necessary, follow-up an issue or concern that has been raised during a visit, with the Senior Coordinator and/or Educator/Family Liaison Officer.
- Work with The Coordination unit to evaluate and develop individual performance plans to support performance improvement. Element 7.2.2

Families are encouraged to:

- Contact the Co-ordination Unit if they wish to discuss their child’s progress.
- Provide feedback to Educators and staff on improvements to the service.

Access to Children’s Files

- Access by Families/Guardians to their own children’s files held by the service can be arranged through Eurobodalla Shire Council’s Freedom of Information procedure. Please contact the Nominated Supervisor of Family Day Care if you require more information on this process. All files are to remain within the Family Day Care Co-ordination Unit.

Access to Educator’s Files

- Access by Educators to their own file held by the service can be arranged through Eurobodalla Shire Council’s Freedom of Information procedure. Please contact the Nominated Supervisor of Family Day Care if you require more information on this process. All files are to remain within the Family Day Care Co-ordination Unit.

Reviewed: March 2012  To be reviewed: June 2014
SUPPORT VISITS PROCEDURE

Each Educator visit is planned to ensure quality outcomes for children and Educators. Visits are based on mutual respect and recognition of individual roles and responsibilities. Individual points of view will be considered.

Support visits can occur in a variety of environments including: the home, Playsession, Playsessions, parks, or another agreed venue.

Support will also be primarily offered through personal support visits. Additional support will occur by phone contact and information documentation.

Prior to visits, a Child Development Officer (CDO) will:

- Prepare themselves with information and resources required for the visit based from the CDO Educator Visit Plan Form.
- Plan to visit on an alternate day to previous visit, to endeavour to see all children in care.
- Endeavour to check the contents of the Educator’s sling and deliver to the Educator.
- If leaving from home, ring the Co-ordination Unit to identify start time and gain updates on absences, etc.
- Preplanning of visits maybe organised with the Educator, prior to the visit if the Educator requires a specific visit on a particular day to discuss such items as; issue of concern, to view a specific child, alternations to WHSA.)

During visits CDO’s will:

- Communicate respectfully with the Educator and the Educator’s family (refer to the Ethical Conduct Policy).
- Respect the Educator’s workplace.
- Introduce themselves to any visitors and outline the CDO role.
- Sign the Visitor’s Register.
- Observe childcare practices to monitor compliance with regulatory requirements i.e. NQF, Child Protection.
- Develop a professional rapport to discuss factors that are impacting on the Educator’s Service e.g. relationships with children, their families and the Educator’s own family.
- Address and document any concerns with the Educator.
Use the Eurobodalla Family Day Care Policies and Procedures to resolve issues promptly.

Comply with visiting procedures when conducting visits at other venues e.g. Playsession.

Assist Educator’s to reflect on their practise and make any necessary improvements on a regular basis.

Promote the ongoing Professional Development of the individual Educator.

Provide resources, in a variety of formats to Educators which enhance Professional Development and encourage resourcing to influence childcare practise.

Consistently implement the Guidance of Children’s Behaviour Policy. This includes discussion with Educators, families and Co-ordination Unit staff about strategies to be implemented.

Complete visit records and outline any follow up required. Educators have an opportunity to document their visit or service feedback on this record.

**CDO and Coordination Unit Forms to be completed:**

**Educator Checklist** – to be completed over a period of time. This documentation will ensure all relevant information has been received and discussed with an Educator.

**CDO Visit Form** – CDO’s will complete to give guidance for their future visits to an Educator. Develop and evaluate individual development plans to support performance improvements. Element 7.2.2

**CDO Visit Slip** – to be left for parent’s notification of CDO visit. CDO will document an observation for each individual child in care. (White page – to go to the Child’s Family, Green to go to the Educator for future planning, Yellow – to be retained by the CDO for Coordination Unit files.)

**Coordination Unit**

**Issue of Concern** – to be recorded by Coordination Unit staff when an issue arises from/with an Educator, Family or member of the public. All information is to be recorded accurately and objectively. Confidentiality must be used at all times. All information must be discussed with the Senior Coordinator and/or Educator/Family Liaison Officer. The issue of concern will then be discussed with the Educator and relevant action plan developed.

**Educators in remote locations** – Reg- 169.2.d
Coordination will:
Consider all Educators’ locations, to ensure the Family Day Care service is viable for the coordination unit to monitor and support in all situations

CDO’s will:
Prepare themselves with information and resources required for the visit based from the CDO Educator Visit Plan Form.
Plan to visit on an alternate day to previous visit, to endeavour to see all children in care.
If leaving from home, ring the Co-ordination Unit to identify start time and gain updates on absences, etc.
Preplanning of visits may be organised with the Educator. This may occur if the Educator requires a specific visit on a particular day to discuss such items as; issue of concern, to view a specific child, alternations to WHSA.)

After the visit CDO’s will:
Advise the Educator of any concerns noted on the visit.
Complete any follow up as identified on visit.
Place any returned forms or paperwork etc. in appropriate locations ASAP.
Make plans for the next visit.
Document children’s records in the appropriate file.

Standards of Excellence are encouraged through:
Ongoing Educator Professional Development.
CDO and Coordination Unit support.
Educational Leader support
Educators attending Playsession.

Reviewed: June 2012

To be reviewed: June 2014
PARTICIPATION OF VOLUNTEERS AND STUDENTS POLICY

AIM:
To ensure the rights and dignity of each child is catered for in this training environment and that procedure is followed in ensuring safe people are considered for placement.

STATEMENT:
Eurobodalla Family Day Care is committed to the training needs of students and the need to impart knowledge and experience from staff and Educators. Professional development is an important aspect of Early Childhood training. It is essential that students are provided with opportunities and resources to demonstrate their competencies, and to gain experience. It is acknowledged hosting a student is also a great opportunity for Educators to remain abreast of current Early Childhood practice.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
Children and Young Persons (Care and Protection) Act 1998
The Ombudsman’s Act 1974 Act 68 of 1974

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Keep Them Safe: A shared approach to child wellbeing”, NSW Government
Children Legislation Amendment (Wood Inquiry Recommendations Act 2009)
www.keepthemsafe.nsw.gov.au
PROCEDURES

Eurobodalla Family Day Care will offer placements to:

- High school students who wish to gain work experience as part of a high school program, where the school has initiated the work experience, identified the student’s suitability, worked with the service to arrange suitable times and provided authorisation for the student to participate.
- Students attending other registered training organisations and studying in a relevant field, such as childcare, teaching, recreation or community services where the training organisation has initiated the placement, identified the student’s suitability, worked with the nominated supervisor in relation to times and expectations and provided written authorisation for the student to participate.

Student placements are to be arranged through the HR Department of Eurobodalla Shire Council.

Co-ordination Unit Staff will:

- Provide Educators and students with appropriate paperwork to authorise the placement
- Provide students and volunteers with guidelines identifying their responsibilities, expectations and code of conduct while at the service during a work experience induction
- Ensure Students and volunteers over the age of 18 years have completed a Working with Children Check Declaration prior to commencing with the Educator
- Give support and guidance to students and volunteers where possible.
- Visit the student whilst on practicum to demonstrate the role of the Co-ordination Unit.
- Encourage students and volunteers to participate and communicate in an open and honest manner.
- Ensure that students and volunteers do not discuss children’s development or other issues with parents.
- Request that students and volunteers adhere to all areas of confidentiality.

Educators will:

- Ensure students and volunteers are never left alone or in charge of any children.
- Inform families when a student or volunteer is on placement at the service, if applicable.
- Provide ongoing constructive feedback and assessment that is fair and equitable.
• Provide students and volunteers with opportunities to learn and participate in a positive, encouraging environment.
• Liaise with EUROBODALLA FAMILY DAY CARE and other supervisory bodies regarding the placement
• Consult with their families before the placement occurs and inform them of the student Volunteers role

Students and Volunteers will

• Comply with all obligations under the NSW Child Protection Legal Framework.
• Abide by the Education and Care Services National Regulations 2011 and EUROBODALLA FAMILY DAY CARE Policies, Guidelines and Procedures while on placement.
• Take responsibility for the role that they are undertaking whilst on placement, viewing it as part of their own professional development.
• Inform the Educator early in the placement of requirements of practicum which need to be completed.
• Work with the Educator to timetable requirements
• Be responsible for completion of own assessment requirements
• Sign the visitors register whenever entering or leaving the Education and care service

Families will:

Be aware of the student/ volunteer involvement in the service and their roles and responsibilities

Reviewed: January 2012

To be reviewed: 2014
THE ROLES OF EDUCATOR’S FAMILIES AND OTHER HOUSEHOLD MEMBERS

POLICY

AIM:
It is important for all members of the Educator’s household to understand their obligations while a Family Day Care Educator’s business is operating on the premises. It is the Educator’s duty of care to protect the children and to ensure that a safe, caring and nurturing environment is provided for the children. It is also the Educator’s responsibility to ensure that everyone in the household is aware of this responsibility, and of the boundaries of responsibility of family members, visitors and residents.

STATEMENT:
When providing childcare for other people’s children, Educators and their household members need to:

- Be equitable to the Educator’s family and to the families of the children in care.
- Provide an environment that recognises and operates in a safe & respectful manner.
- Balance the needs of the Educator’s family and of the families and children in care, whilst ensuring quality care and regulatory requirements are maintained.
- Maintain confidentiality – at all times.
- Ensure that the Educator is solely responsible for the children at all times. The Educator cannot delegate this responsibility to any other household members.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011.

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)
Family Day Care Australia www.familydaycareaustralia.com.au
Belonging Being & Becoming – The Early Years Learning Framework for Australia
My Time, Our Place – Framework for School Age Care in Australia

PROCEDURES

Co-ordination Unit staff will:

- Inform Educators of roles of other household members
- Involve other household members in appropriate training

Educators will:

- Ensure household members know their responsibilities
- Ensure household members abide by the following at all times.

Each household member should:

- Treat families, children, staff and other Educators with respect.
- Assist the Educator to provide and maintain quality childcare in a safe, nurturing, and friendly environment.
- Support the Educator to participate in ongoing Professional Development.
- Support the maintenance of the home as a safe environment for children on a daily basis, to monitor compliance with Occupational Health and Safety (OH&S) Legislation.
- Adhere to the Education and Care Services National Law 2010, Education and Care Services National Regulations 2011, National Quality Standard and Service Policies and Procedures at all times when children are being educated and cared for in the service
- Maintain confidentiality about the families in care, at all times.
- Support only child appropriate TV programmes, videos, games, books and social media being accessible to children.
- Ensure visitors to the home sign the Visitor’s Register.
- Ensure a Working with Children Background Check is completed for any Adult Household Member living at the premises over 18 years of age.
• Respect the need for privacy on some occasions when the Educator is discussing issues with staff and/or families, or when a child is bathing or toileting.
• Ensure the use of non-offensive language and tone of voice at all times.
• Ensure only the Educator toilets, bathes or changes the children’s nappies.

Keeping Children Safe in Family Day Care

• Educators, household members and visitors have a responsibility to ensure children are kept safe whilst in that childcare environment. Individuals that cause harm to children are at risk of a Child Protection allegation. **Allegations made must be investigated. This is the law.**
• It is an Educator’s responsibility to support and provide family members, residents and visitors with an understanding of significant risk of harm. The Co-ordination Unit is able to assist Educators with this.

Reviewed: January 2012

To be reviewed: March 2014
NON COMPLIANCE POLICY

AIM:
As the approved provider Eurobodalla Shire Council is required by Law to ensure educators meet the requirements of the Education and Care Services National Law 2010 and the Education and Care Services National Regulations.

STATEMENT:
Eurobodalla Family Day Care will ensure the requirements of the Law and regulations are met at all times to ensure the safety and wellbeing of all children, families and community members, educators and staff. These requirements need to be met to ensure the service remains licensed and eligible for CCB.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 Clause 168
NSW Occupational Health and Safety Act 2000
NSW Occupational Health and Safety Regulations 2001

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)

PRACTICES
Co-ordination Unit staff will
• Inform and ensure that all educators understand their responsibilities in relation to regulations, National Quality Framework, EYLF / MTOP and Eurobodalla Family Day Care Policies Procedures and Guidelines.

• Provide training to inform and assist educators in their understanding of the responsibilities in relation to National Regulations, National Quality Framework, EYLF / MTOP and Eurobodalla Family Day Care Policies Procedures and Guidelines.

• Have a system in place to monitor current practice and identify areas for continued improvement.

• Identify breaches to the National Law and National Regulations and bring this to the educator’s attention.

• Follow up with any necessary action that is identified as being proportionate to the issues which arise.

• Document issues relating to noncompliance with National Law and Regulations or National Quality Standards and continue to document discussions or take notes from meetings around these issues. To develop and enforce an action plan, based on the nature and severity of the breach, outlining expectations, strategies and a time frame.

• To review and finalise any action plans put in place.

• Maintain an ongoing log of an individual educator’s noncompliance in any areas of their service delivery and communicate with the EFLO and/or Senior Coordinator about concerns over an accumulation of breaches.

• Notify the Regulatory Authority of any serious incidents or complaints which allege a breach to the legislation.

**Educator’s will:**

Abide by the following:

• Education and Care Services National Regulations 2011
• Education and Care Services National Law 2010
• Early Years Learning Framework 2010
• My Time Our Place 2011
• NSW Occupational Health and Safety Act 2000
• NSW Occupational Health and Safety Regulations 2001
• Eurobodalla Family Day Care Policies Procedures and Guidelines.
• Educator’s Agreement
• Read, attend training & ensure understanding of the requirements of the above documents and refer to them to determine appropriate practices and procedure.
• Comply with any action plan or address a noncompliance issue in the stated time frame

NONCOMPLIANCE GUIDELINES

• An Educator, depending on the nature of the breach, may be required to rectify the situation as soon as it is brought to their attention.
• An Educator, depending on the nature and severity of the breach, may be suspended until evidence has been provided to the coordination unit that any identified breaches have been rectified. An action plan, outlining expectations, strategies and a time frame will also be put in place.
• If an Educator continues to have breaches of the National Law or National Regulations, a meeting will be called with the Senior Coordinator (or delegated representative) and Approved Provider to develop strategies to support the Educator in meeting the requirements of Eurobodalla Family Day Care. An action plan will be used to identify the expectations, strategies and set specific time frames.
• If an Educator continues to receive notifications of noncompliance from the coordination unit, deregistration may occur.
• The Regulatory Authority will be notified of any serious incidents or complaints which allege a serious or notifiable breach to the legislation.

PROCEDURES:
Coordination Unit / Approved Provider role

• CDOs will document any suspected issues of noncompliance in the appropriate area on their visit record.
• These issues of non-compliance will be brought to the educator’s attention and immediate rectification will take place where necessary.
• At times a CDO may seek clarification on any suspected areas of noncompliance and follow up with the educator after the visit.
• The Nominated Supervisor or delegated representative will be informed of any issues with noncompliance that could not be rectified at the time that they were brought to the educator’s attention.
• The Nominated Supervisor or delegated representative may contact the Educator to discuss any noncompliance issues of a more serious nature.
• A time frame to address noncompliance issues may be negotiated between the educator and Nominated Supervisor or delegated representative.
• The Nominated Supervisor will document the nature of the breach and time frame within which the breach is to be rectified.
• If the Nominated Supervisor or delegated representative deems it necessary, they will communicate with the Approved Provider and an educator may be suspended.
• The Regulatory Authority will be notified of the suspension of an educator.
• Following an educator’s suspension a meeting will be held at a mutually appropriate time between the Educator, the Nominated Supervisor or delegated representative and the Approved Provider. The issues will be addressed and an appropriate course of action will be identified. This may include an action plan which identifies the noncompliance issues, the services’ expectations and appropriate strategies to reach an outcome and specific time frames to review and finalise the action plan.

**Note:** The educator may wish to have a support person attend this meeting.

It will be at the discretion of the Nominated Supervisor and the Approved provider if families enrolled with the educator are notified of noncompliance issues depending on the nature and severity of the breach or breaches.

Subsequent meetings with the educator may be required, however a timely outcome will be sought.

**Educator’s role**

• To work within the parameters of National Regulations, NQF and Policies
• To understand the requirements set out in the National Regulations and National Quality Standards and seek clarification on any areas that they are unsure.
• To understand the monitoring and enforcement actions that are prescribed under the National Law and National Regulations and carried out by the Regulatory Authority.
To understand that noncompliance in any areas of their service delivery could jeopardise their future as an educator with Eurobodalla Family Day Care.

To address any noncompliance issues immediately or fulfil requirements of an action plan in the specified time frame.

To work cooperatively with the coordination unit staff or representatives of the Approved Provider to come to a satisfactory outcome.

**Appeal by an Educator**
Refer to Grievance Policy

**Contacts**

Department of Education and Communities

Phone: 1800 619113

Email: cslicensing@dhs.nsw.gov.au

NSW State Ombudsman’s Office Level 24, 580 George Street, Sydney

Toll free 1800 451 524 or 02 9286 1000

The contact number for questions on Family Day Care’s right to appeal to Administration Decisions Tribunal is 02 9716 2100, [www.lawlink.nsw.gov.au/adt](http://www.lawlink.nsw.gov.au/adt).
LEADERSHIP AND MANAGEMENT
ACCEPTANCE AND REFUSAL OF AUTHORISATION

AIM:
Eurobodalla Family Day Care will ensure that we only act in accordance with correct authorisation as described in the Education and Care Services National Regulations, 2011.

STATEMENT:
Eurobodalla Family Day Care requires authorisation for actions such as administration of medications, collection of children, excursions and providing access to personal records. This policy outlines what constitutes a correct authorisation and what does not, and may therefore result in a refusal.

RELEVANT LEGISLATION:
Children (Education and Care Services National Law Application) Act 2010
Education and Care Services National Regulations 2011

KEY RESOURCES:
Children (Education and Care Services National Law Application) Act 2010
Education and Care Services National Regulations 2011

PROCEDURES:
The Co-ordination Unit Staff will:
Ensure documentation relating to authorisations contains:

- the name of the child enrolled in the service;
- date;
- signature of the child’s parent/guardian, or nominated contact person who is on the enrolment form;
- The original form/letter/register provided by the service.

- Apply these authorisations to the collection of children, administration of medication, excursion and access to records.
- Keep these authorisations in the enrolment record.
- Exercise the right of refusal if written or verbal authorisations do not comply.
- Waive compliance where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. The service can administer medication without authorisation in these cases, provided they contact the parent/guardian as soon as practicable after the medication has been administered.

REVIEWED: MAY 2012
NEXT REVIEW: MAY 2014
GOVERNANCE AND MANAGEMENT OF THE SERVICE POLICY

AIM:
To have effective leadership and management ensuring a high quality childcare service delivering quality outcomes for children and families.

STATEMENT:
Family Day Care Providers are self-employed childcare providers, operating their business under the approved provider Eurobodalla Shire Council. Roles within the Coordination Unit need to be defined within the requirements of Eurobodalla Shire Council, Education and Care Services National Law 2010 and Regulations, and the National Quality Standards.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 168)
Family Assistance Legislation Amendment (Child Care Management System and other measures) Regulations 2009 (SLI NO 82 OF 2009)

KEY RESOURCES:
National Quality Standard –Quality Areas 4 and 7
National Quality Standards 2011 (ACECQA).
VISION STATEMENT:
To be a professional Family Day Care service of excellence with a high profile in the early childhood field. To have a partnership with stakeholders reflected in active involvement and equality. To be continually growing and evolving.

MISSION STATEMENT:
Eurobodalla Family Day Care aims to service the children, families and Educators of our community by providing support to all stakeholders. Educators and Co-ordination Unit staff will work in partnership to provide a unique childcare service of excellence to the community, in a home based environment.

PRACTICES
Eurobodalla Shire Council (As Approved Provider) will:

- Administer the scheme,
- Employ fit and proper staff to run the Co-ordination Unit,
- Account for government funding and
- Maintain communication with state and federal government departments.

Co-ordination Unit Staff will hold the appropriate qualifications for the following positions:

- **Senior Co-ordinator/Nominated Supervisor** - Degree or Diploma in Early Childhood Education or equivalent qualification and experience in Early Childhood
- **Child Development Officer/Co-ordinator** - Degree or Diploma in Early Childhood Education or equivalent qualification and experience in Early Childhood
- **Educational Leader** - Degree or Diploma in Early Childhood Education or equivalent qualifications and experience in Early Childhood
- **Administrative Staff** - TAFE Certificate in Office Administration or equivalent.
GOVERNANCE RESPONSIBILITIES

Funding
The Department of Education, Employment & Workplace Relations funds the Co-ordination Unit using a formula that calculates the number of 'equivalent full-time children' (EFT). It is the responsibility of the Co-ordination Unit to budget for salaries, funding, training and equipment from this funding. Income is also generated from Educator and Parent administration fees.

Licensing
The NSW Department of Education and Communities is responsible for regulating the service. The scheme operates under the Education and Care Services National Law 2010 and the Education and Care services National Regulations 2011. Eurobodalla Family Day Care must also adhere to the National Quality Standard.
<table>
<thead>
<tr>
<th>Job Title</th>
<th>Roles/Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Divisional Manager Community and Development Services</td>
<td>Acts as Licensee representative to support the effective operations of the service.</td>
</tr>
<tr>
<td>Senior Coordinator of Children’s Services</td>
<td>Oversee the operations of the service. Reports to relevant government departments. Supervise and manage service staff. Oversee the monitoring and support of Educators. Maintain legislative requirements. Develop training for Educators. Supervise Child Development Officers. Lead the development of the Educational Programs in the service.</td>
</tr>
<tr>
<td>Nominated Supervisor</td>
<td></td>
</tr>
<tr>
<td>Educational Leader</td>
<td></td>
</tr>
<tr>
<td>Child Development Officers (CDO’s)</td>
<td>Support and monitor Educators to comply with legislation.</td>
</tr>
<tr>
<td></td>
<td>Placement of children into care and filling Educator vacancies. Oversee the recruitment and induction of new Educators. Liaise with Educators and families in regard to child care. Operate Play Sessions - PALS (Positive Active Learning Sessions) for Educators and children.</td>
</tr>
<tr>
<td>Administration Team</td>
<td>Support the service in administrative duties. Oversee duties of administration. Oversee processing of Educators’ Attendance Records, writing FDC’s newsletters and general correspondence.</td>
</tr>
</tbody>
</table>

Reviewed: June 2012

To be reviewed: March 2014
CONFIDENTIALITY OF RECORDS POLICY

RATIONALE:
To ensure the Approved Provider, Co-ordination Unit staff and Educators are clear about the requirements in relation to confidentiality of records of the service, or information obtained concerning:

- The children in care
- Staff and their families
- Educators and their families
- Families of the children in care or registered with the service

POLICY STATEMENT:
Family Day Care staff and Educators, through their normal work situations, are privy to personal information about each other, the children and families in care. It is of utmost importance that this information is handled with respect and kept confidential where necessary. Privacy laws legislate for the protection of individuals regarding their personal information.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 (Clause 181)

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) - Quality Area 6
PRACTICES:
Co-ordination Unit Staff and Educators are required to:

- Exercise confidentiality as a standard approach when developing and implementing policies and procedures; and
- Be sensitive to the rights of Co-ordination Unit staff, families and Educators to have information of a personal nature handled in a tactful, secure and discreet manner.
- Ensure any information is not divulged or communicated, directly or indirectly to another person unless:-
  - Educators require the information for the education and care of the child
  - Medical personnel require the information for medical treatment of the child
  - The parent of the child requests the information
  - A regulatory officer requests the information

PROCEDURES:
Verbal Information

- Any information obtained by Educators or staff in relation to the Educators, staff or the families of children enrolled for the service must be treated confidentially.
- Only information which is relevant to providing quality care for a child needs to be discussed between the Educator and Co-ordination Unit.
- Staff and Educators need to be aware it is not appropriate for them to discuss children in care with people other than the child/ren’s families, Co-ordination Unit or Educator.
- It is important Educators do not refer to a child by name when discussing an incident, which has occurred as part of their Family Day Care business, with another Educator, family or member of the public.

Records

- Personal information in written records will be kept securely by storing records confidentially in a safe and secure area.
- Thorough destruction or secure disposal of records after the elapse of the mandatory period of retention will also be practised.
• Educators must not be performing other duties while supervising children. This includes social networking sites and internet usage not directly related to the care and supervision of children in attendance at the service.
• The Co-ordination Unit will ensure no information or images are used on the service website without written permission from families to use that piece of information or image.
• The Co-ordination Unit will maintain a current website with information to promote the service and Educators in a positive, professional manner at all times.

Families are encouraged to:

• Respect the private and confidential relationship between themselves and the Educator.
• Refrain from discussing grievances with an Educator in the public arena.
• Use the Grievance Handling Policy when issues arise.
• Promote the service positively at all times.

Reviewed: January 2012

To be reviewed on or before: March 2013
MANAGING RECORDS POLICY

AIM:
To ensure the Approved Provider, Nominated Supervisor, Co-ordination Unit and Educators maintain and securely store all records required under the legislation, ensuring confidentiality and easy access by authorised persons.

STATEMENT:
Regulatory, licensing and funding bodies require the retention and maintenance of records in relation to service stakeholders and children. All records are required to be kept up to date, stored confidentially in a safe and secure area with access by authorised persons only. This includes both electronic and hardcopy format. Carefully organised storage systems are required in order to easily access records which are required by legislation to be kept in some cases up to 24 years.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010 Section 175
Education and Care Services National Regulations 2011 Clause 177 178 and 179
Work Health and Safety Act 2011
Work Health and Safety Regulation 2011
Health Records and Information Privacy Act 2002 No 71 – NSW
Privacy and Personal Information Protection Act 1998 No 133 – NSW
Government Information (Public Access) Act 2009 - NSW
Freedom of Information Amendment (Reform)Act 2010 Act 48 of 1977
DEEWR Child Care Service Handbook

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 7
PROCEDURES:
An appropriate person will be appointed to the role of Nominated Supervisor to ensure the following accurate records required under section 175 of the Law are kept.
The documentation of child assessments for the delivery of the educational program including:-
- An incident, injury, trauma and illness record
- A medication record
- A record of assessments of Family Day Care residences and approved Family Day Care venues
- A record of volunteers and students
- The records of the responsible person at the service
- A record of staff and Family Day Care Co-ordinators engaged by the service and Family Day Care Educator assistants approved by the service
- A children’s attendance record
- Child enrolment records
- A record of the service’s compliance with the Law
- A record of the Certified Supervisors placed in day to day charge of the education and care service

A Family Day Care Educator must keep the following accurate records required under section 175 of the Law;
- The documentation of child assessments
- An incident, injury, trauma and illness record
- A medication record
- A children’s attendance record
- Child enrolment records
- A record of visitors to the family day care residence or venue
The above records must be made available to a parent/guardian of a child on request unless prohibited by a court order.

The record of the service compliance must be available to any person who requests it.

Records must be kept at the service for the following periods

**For Family Day Care services only**

<table>
<thead>
<tr>
<th>Record Description</th>
<th>Responsible Party</th>
<th>Retention Period</th>
<th>Regulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment of family day care residences and approved family day care venues</td>
<td>Approved Provider</td>
<td>Until the end of 3 years after the record was made</td>
<td>Regulation 116</td>
</tr>
<tr>
<td>Record of family day care staff (including educators, co-ordinators and assistants)</td>
<td>Approved Provider</td>
<td>Until the end of 3 years after the staff member works for the service</td>
<td>Regulation 154</td>
</tr>
<tr>
<td>Record of visitors to family day care residence or approved family day care venue</td>
<td>Family Day Care Educator</td>
<td>Until the end of 3 years after the record was made</td>
<td>Regulation 165</td>
</tr>
</tbody>
</table>

**Reviewed: January 2012**

**To be reviewed on or before: March 2013**
# Records and documents required to be kept

<table>
<thead>
<tr>
<th>Type of record</th>
<th>Responsibility</th>
<th>Timeframe</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence of current public liability insurance</td>
<td>Approved Provider Family day care educator</td>
<td>Available for inspection at service premises or family day care office</td>
<td>Regulations 29, 30, 180</td>
</tr>
<tr>
<td>Quality Improvement Plan</td>
<td>Approved Provider Family day care educator</td>
<td>Current plan is to be kept</td>
<td>Regulations 31, 55</td>
</tr>
<tr>
<td>Child assessments</td>
<td>Approved Provider Family day care educator</td>
<td>Until the end of 3 years after the child's last attendance</td>
<td>Regulations 74, 183</td>
</tr>
<tr>
<td>Incident, injury, trauma and illness record</td>
<td>Approved Provider Family day care educator</td>
<td>Until the child is 25 years old</td>
<td>Regulations 87, 183</td>
</tr>
<tr>
<td>Medication record</td>
<td>Approved Provider Family day care educator</td>
<td>Until the end of 3 years after the child's last attendance</td>
<td>Regulations 92, 183</td>
</tr>
<tr>
<td>Child attendance</td>
<td>Approved Provider Family day care educator</td>
<td>Until the end of 3 years after the record was made</td>
<td>Regulations 158–159, 183</td>
</tr>
<tr>
<td>Child enrolment</td>
<td>Approved Provider Family day care educator</td>
<td>Until the end of 3 years after the child's last attendance</td>
<td>Regulations 160, 183</td>
</tr>
<tr>
<td>Death of a child while being educated and cared for by the service</td>
<td>Approved Provider</td>
<td>Until the end of 7 years after the death</td>
<td>Regulations 12, 183</td>
</tr>
<tr>
<td>Record of service's compliance history</td>
<td>Approved Provider</td>
<td>Until the end of 3 years after the Approved Provider operated the service</td>
<td>Regulation 167</td>
</tr>
</tbody>
</table>
CUSTOMER SERVICE AND SATISFACTION POLICY

AIM:
To maintain high quality service standards and ensure Eurobodalla Family Day Care receives regular feedback from all stakeholders about the delivery of the service.

STATEMENT:
Eurobodalla Family Day Care acknowledges maintaining and improving Service Quality for all stakeholders is a huge priority. The service operates under the National Quality Framework. Service Quality is based on ongoing evaluation of the service and improvement. Strategies need to be in place to ensure formal and informal feedback is received from all stakeholders. Eurobodalla Family Day Care has a responsibility to ensure the service is accountable in terms of funding and compliance.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011
National Quality Standards Areas 4, 6 and 7

KEY RESOURCES:
National Quality Standards 2011 (ACECQA)

PROCEDURES:
Eurobodalla Shire Council will:

● Oversee the implementation of systems to ensure stakeholders are provided with the opportunity to comment on service delivery with the aim of improving Service Quality.
Where appropriate respond to feedback received and consider improvements as a result of the feedback.

Refer to the Grievance Handling Policy when necessary.

**Co-ordination Unit staff will:**

- Develop, conduct and maintain ongoing opportunities for all stakeholders to provide feedback on service delivery.
- Survey all stakeholders and random samples of stakeholders over different periods.
- Record and review feedback received and respond appropriately.
- Provide a variety of feedback options for all stakeholders e.g. verbal, written surveys, email contact.
- Include feedback options for ensuring the information used to process childcare usage is accurate.

**Educators will:**

- Participate in opportunities to provide feedback to the service
- Support the service to collect feedback from families and other stakeholders.
- Provide accurate records and information to the Co-ordination Unit in terms of compliance.

**Families are encouraged to:**

- Provide feedback to the Educator and Co-ordination Unit in any format regarding service delivery.

**Reviewed: January 2012**

**To be reviewed on or before: March 2013**
GRIEVANCE HANDLING POLICY

AIM:
Eurobodalla Family Day Care will ensure families, Educators and staff of the Co-ordination Unit are able to raise and have resolved any grievance/complaint they may have regarding the service without fear of retribution.

STATEMENT:
Eurobodalla Family Day Care acknowledges the right for all persons to be able to state their views and have them heard. It is important to ensure grievances are resolved by discussion and negotiation between the parties concerned. A mediating problem-solving approach should be adopted with efforts made to encourage constructive communication between the parties involved.
A grievance is any matter related to work or the work environment that is causing concern or distress to any individual or group of individuals. Grievances may arise from any act, situation, discussion or omission, which may be considered unfair, discriminatory or unjust. The practices will be made freely available to all stakeholders in an easily understood format. Records will be kept of grievances raised, action taken, outcomes reached, method of resolution and feedback from originating person.

RELEVANT LEGISLATION:
Education and Care Services National Law 2010
Education and Care Services National Regulations 2011 Clause 168

KEY RESOURCES:
National Quality Standards 2011 (ACECQA) – Quality Area 4, Quality Area 7
PRACTICES:

Step 1
It is expected the grievance should initially be discussed with the person concerned. Every effort should be made to resolve the grievance at this level before moving on to the following steps.

A. BETWEEN FAMILY AND EDUCATOR/staff

Step 2
If the grievance is not resolved satisfactorily either party can bring the matter to the attention of the Senior Coordinator to assist in the resolution of the matter.

Step 3
Any grievance, which has been fully discussed between the Senior Coordinator and the parties involved and is still unresolved, can be referred for further mediation to the Licensee or a representative of the sponsoring body i.e. Eurobodalla Shire Council.

Step 4
If still unresolved the matter can be referred to:

i) NSW Early Childhood Education and Care Directorate
   Locked Bag 4028
   Ashfield NSW 2131
   Phone: 1800 619113
   Email: cslicensing@dhs.nsw.gov.au

ii) Department of Employment Education and Workplace Relations
   GPO Box 9880 CANBERRA ACT 2601 phone: 1300 363 079

iii) The N.S.W. Family Day Care Association
    Phone: 1800 157 818

iv) NSW Ombudsman Phone: 1800 451 524
B. BETWEEN THE EDUCATOR AND CO-ORDINATION UNIT STAFF

Step 1
The Educator has the right to approach the staff member concerned and to expect to have the grievance addressed in an understanding and sensitive manner.

Step 2
If unresolved the Educator can contact the Eurobodalla Family Day Care Senior Coordinator or Approved Provider who will attempt to find a resolution or an acceptable compromise by both parties.

Step 3
If still unresolved the Educator may refer the matter to the representative of the Licensee, Eurobodalla Shire Council, the NSW FDC Association or NSW Educators’ Association for further mediation.

C. BETWEEN THE SERVICE AND EDUCATOR
i) In the event the service is dissatisfied with an Educator, or if a complaint is made by a family, staff member or community member, the complaint must be notified to the Educator verbally by the Senior Coordinator or a delegated representative.

ii) If the complaint relates to a breach of the Law or Regulations or of special conditions of the service, the Senior Coordinator will investigate the circumstances and organise the issue to be discussed with the Educator.

iii) An action plan will be developed with the Educator to offer training to ensure future compliance.

iv) The Educator will be warned of future non-compliance with the Law and/or Regulations and/or conditions of the service, may result in de-registration proceedings.

v) If the Educator contravenes the Law or Regulations or conditions again, the Senior Co-ordinator, or delegated representative of the service will report to the Approved Provider and de-registration may be recommended.
vi) The Approved Provider will advise the Educator if s/he has been removed from the Family Day Care register and the reasons for this course of action.

vii) The Approved Provider will advise the Department of Education and Communities in writing the date from which the Educator is no longer registered with the service.

*The Education and Care Services National Law 2010 (Section 174) states:*

An approved Provider must notify the Regulatory Authority of the following information in relation to an approved education and care service operated by the approved provider –

a) Any serious incident at the approved education and care service;

b) Complaints alleging-

   i) that the safety, health and wellbeing of a child or children was or is being compromised while that child or children is or are being educated and cared for by the approved education and care service; or

   ii) that the Law has been contravened

viii) The contact number for questions on Family Day Care Educators rights to appeal to the Administration Decisions Tribunal is 02 97162100 www.lawlink.nsw.gov.au/adt

**D. BETWEEN EDUCATOR AND EDUCATOR**

**Step 1**
Discuss with the person concerned and attempt to resolve the grievance.

**Step 2**
If unresolved the Educator can contact the Senior Coordinator or another Co-ordination Unit staff member who will attempt to find a resolution or an acceptable compromise by both parties.
Step 3
If still unresolved the Educator may refer the matter to the Divisional Manager Community and Development Services Eurobodalla Shire Council, the NSW FDC Association or NSW Educators’ Association for further mediation.

E. BETWEEN CO-ORDINATION UNIT STAFF

Step 1
In the first instance the employees shall attempt to resolve the grievance between them.

Step 2
If the grievance is still unresolved the complaint can be referred to the Senior Co-ordinator or Authorised Supervisor of the service for mediation.

Step 3
If still unresolved, the Senior Co-ordinator or delegate, in consultation with the parties involved, will determine the next course of action. This may necessitate the involvement of the representative of the Approved Provider.

Reviewed: June 2012

To be reviewed: June 2013