Hamilton South Before and After School Care Centre Inc.

Policies and Procedures

Index

PHILOSOPHY

Hamilton South Before and After School Care Centre Inc. believes that each child has the right to be an active member of the community in which they live, to express their opinions and have their views considered in any decision that may affect them.

We believe that the best interests of the children and their right to play, learn and develop in a safe and nurturing environment is the primary consideration in the entire decision making at the service and is visible in the actions, interactions and daily work with the children.

We acknowledge that parents and families are the child's primary nurturers and the respectful, collaborative relationships strengthen the capacity and efforts of families and other services to support their children and promote each child's health and wellbeing.

We believe that the right to equitable access and participation in the community is clearly visible in all aspects of service delivery.

Hamilton Before and After School Care Centre Inc. believes that children, parents and Educators have the right to have their individual and cultural identity recognised and respected and we value Australia's Aboriginal and Torres Strait Islander cultures as a core part of the nation's history, present and future.

Hamilton Before and After School Care Centre Inc. has a number of goals on which our service is based. These goals are based on the outcomes for children outlined in the National Quality Framework for School Ages Children.

Our goals are to encourage children to…..

Have a Strong Sense of Identity

Hamilton Before and After School Care Centre Inc. aims to teach children to demonstrate a capacity of self-regulation, negotiating and sharing behaviours by motivating and encouraging children to succeed when faced with challenges.

Be Connected with and Contribute to Their World

Hamilton Before and After School Care Centre Inc. aims to teach children to demonstrate awareness of connections, similarities and differences between people and how to react in positive ways encouraging children to listen and to respect diverse perspectives.

Have a Strong Sense of Wellbeing

Hamilton Before and After School Care Centre Inc. aims to teach children to show self-regulation and manage emotions in ways that reflect the feeling and needs of others by showing care, understanding and respect for all people.

Be Confident and Involved Learners

Hamilton Before and After School Care Centre Inc. aims to teach children to use reflective thinking to consider why things happen and what can be learnt from these experiences by encouraging children to communicate and make visible their ideas and theories, collaborate with others and model reasoning, predicting and reflecting processes as well as language.

Be Effective Communicators

Hamilton Before and After School Care Centre Inc. aims to teach children to convey and construct messages with purpose and confidence, including conflict resolution and following directions by modelling language and encouraging children to express themselves through language in a range of contexts and for a range of purposes including leading and following directions.

Child Safe Statement

Hamilton South OOSH is committed to the safety and well-being of children and, as such, is committed to creating and maintaining a child safe organisation.

We have zero tolerance of child abuse and are committed to actively contributing to a child safe community where children are protected from abuse.

Our commitment to the safety of children is based on our duty of care and responsibilities to children and always acting in the best interests of children.

Our commitment will be enacted through the implementation and monitoring of the Child Safe Standards.

We all play an important role in protecting children, especially if we have concerns for a child's safety. We aim to create a culture of child safety that reduces the opportunity for harm and gives staff a clear process to follow when someone raises concerns about child safety or reports abuse.

Our Child Safe Statement applies to all employees, volunteers, work experience students, relevant contractors and stakeholders.

HOURS OF OPERATION

POLICY STATEMENT:

Hamilton South Before and After School Care Centre Inc. will ensure their service operates within the hours of need for the majority of the families using the service.

MORNING SESSION:

Open – 7am

Close – 9am

The children allowed to go to the playground from 8:25am or stay and continue playing in the OOSH building until 8.45am.

AFTERNOON SESSION:

Open: 2.55pm – When school finishes.

Close: 6pm

Educators are present at the centre prior to opening time doing preparation work.

CLOSURES:

The centre does not operate during school holidays, teachers strike days, public holidays or pupil free days. You are not charged for the days we don't operate on, except for the Annual In-Service Day fee which is paid along with your Annual Registration Fee.

INSURANCE

POLICY STATEMENT:

Hamilton South Before and After School Care Centre Inc. aims to have appropriate insurance cover at all times and in all areas as required by our funding body. The Management Committee view insurance protection as an essential ingredient of sound management. It protects the children, parents/carers, Educators and Management Committee from the severe financial consequences of matters of public liability.

PROCEDURES:

The centre must take out insurance to cover such things as public liability, building insurance, contents insurance (including equipment), robbery/theft and workers compensation. The Management Committee will take into account the range of children likely to use the centre and will take expert advice when necessary about the proper forms and levels of insurance. The Management Committee will ask their insurance brokers whether existing insurance cover needs to be amended if there significant change in the range of children using the centre

ESSENTIAL INSURANCE POLICIES ARE:

- Public Liability – A cover no less than $20,000,000 or as indicated by the Department of Education in the lease agreement issued by the Department.
- Workers Compensation – compulsory for all employees against accident or injury at work.
- Volunteer insurance
- Ambulance cover for Educators and children

The Management Committee should investigate additional policies depending on their operational and financial situation.

The Management Committee should:

- Always read the policy carefully (especially the fine print and product disclosure statement issued by the insurer)
- Be aware of any exclusions in the policy
- Be adequately covered

The Director should:

- Keep the insurance register up to date

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1/9/25
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

HEALTH AND SAFETY POLICY

Our Out of School Hours Care (OSHC) Service has a responsibility of providing a healthy and safe environment for children so that they can explore, discover and learn. We are committed to maintaining a safe and healthy environment through comprehensive policies and procedures and managing risks and hazards appropriately and effectively.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Failure to adequately supervise children
S. 167	Failure to take reasonable precautions to protect children from harm and hazards
73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
82	Tobacco, drug and alcohol-free environment

86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises
102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing and security
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements—indoor
108	Space requirements—outdoor space
109	Toilet and hygiene facilities
110	Ventilation and natural light
111	Administrative space
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision
156	Relationships in groups
158	Children's attendance records to be kept by approved provider
168	Policies and procedures are required in relation to enrolment and orientation
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of Medication Policy Child Protection Policy Dealing with Infectious Diseases Policy Delivery of, and collection from Education and Emergency Evacuation Policy Governance Policy Incident, Injury, Trauma and Illness Policy	Nutrition and Food Safety Policy Rest Time Policy Safe Transportation Policy Sun Safety Policy Student, Volunteer and Visitor Policy Water Safety Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place to ensure the health, safety and wellbeing of children, staff and families. We aim to protect the health, safety and welfare of children, educators, families, and visitors of the Service by complying with current health and safety laws and legislation as outlined in this policy.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

The National Quality Framework establishes the standards and learning frameworks to provide high quality inclusive education and care in early and middle childhood settings, which can only occur in a safe and healthy work environment. The NQF makes few references to work, health and safety legislation as it underpins this framework. *Quality Area 2…. reinforces children's right to experience quality education and care in an environment that provides for their health and safety*." p: 138, 2020.

Thorough work health and safety policies, procedures and practices ensure that:

- coordinators and nominated supervisors fulfil their responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees
- employees meet their health and safety obligations and are safe in the workplace; and
- the work environment supports quality education and care.

We are dedicated to ensuring that all health and safety needs are met through the implementation of a high standard of hygiene practices to control the spread of infectious diseases, the prevention and management of injuries and illness, and to provide a safe and secure physical environment for children. In any occurrences where children show any signs of illness, accident, injury or trauma, educators will refer to the *Incident, Injury, Trauma and Illness Policy*.

We believe in quality education and care in an environment that provides for all children's protection through adequate supervision, safe experiences and environments, and vigilance to potential risks. Educators at the OSHC Service are dedicated to understanding their legal and ethical responsibility to

protect the children enrolled at the Service. Our *Work Health and Safety Policy* provides further detail about Hazard Reduction and Risk Minimisation.

CHOOSING APPROPRIATE RESOURCES AND EQUIPMENT

- The approved provider will be ultimately responsible for any purchases of equipment.
- Management will keep up to date with any recalled products by joining Product Safety Recall mailing lists and/or registering products where possible (e.g., electronics/furniture)
- Resources and equipment will be chosen to reflect the cultural diversity of the service's community and the cultural diversity of contemporary Australia.
- All new equipment will be checked against Australian Safety Standards.
- Children will be introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Equipment that should only be used under supervision will be stored in a safe place out of children's reach.
- The use of pools and toys or equipment, which involves the use of water, will be used under the direct supervision of educators. All equipment will be emptied of water when not in use and stored in such a manner that it cannot collect water.
- Equipment will be checked regularly by the educators to ensure it is in a clean and safe condition which will be recorded on the appropriate indoor and outdoor safety checklist.
- The approved provider will advise educators and parents about the purchase of new equipment and if required, ensure a risk assessment has been conducted.

ON-GOING MAINTENANCE

- The OSHC Service will reflect on the environment and establish a plan ensuring that the environment continuously complies with our philosophy of providing a safe and secure environment, that is stimulating and engaging for all who interact with it.
- The approved provider/nominated supervisor will also ensure that the OSHC Service and its grounds comply with Local Government regulations, and regulations regarding fire protection, ventilation, natural and artificial lighting and safety glass.
- Should the OSHC Service undertake major renovations, management plans will be put in place to ensure that the safety of educators, children, families and others at the service is not compromised.

SAFETY CHECKS

Prior to children arriving at the OSHC Service, a daily inspection of the premises will be undertaken which will include the:

- Service Perimeters
- Fences/Fence Line
- Gates
- Paths
- Buildings
- All rooms accessible by children
- Sand Pit

This must be done in order to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals. In the event of a sharp object being found (for example a syringe) educators will follow the *Safe Disposal of Sharps Procedure*, wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council. Similarly, trees in the grounds must be checked regularly for overhanging, dead or dangerous looking branches as well as checked for any infestations or nests.

Non-fixed play equipment in the OSHC Service grounds can be no more than 1500 mm high and must be supervised at all times by an educator. (AS 4685)

The Service will have regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any findings from the pest control check will be carried out in line with the recommendation of the pest control company.

The *Outdoor Cleaning/Safety Checklists* will be used as the procedure to conduct these safety checks. A record of these will be kept by the Service. Any required maintenance will immediately be reported to the approved provider/nominated supervisor who will make the appropriate arrangements to have repairs carried out.

CLEANING OF BUILDINGS, PREMISES, FURNITURE AND EQUIPMENT

GENERAL CLEANING

- The OSHC Service will use structured cleaning schedules to ensure that all cleaning is carried out regularly and thoroughly.
- High touch surfaces will be cleaned and disinfected at least twice daily

- Educators will clean the OSHC Service at the end of each day and throughout the day as needed.
- Accidents and spills will be cleaned up as quickly as possible to ensure that the Service always maintains a high level of cleanliness, hygiene, and safety.

When purchasing, storing and/or using any dangerous chemicals, substances, medicines or equipment, our OSHC Service will:

- adhere at all times to manufacturer's advice and instructions when using products to clean furniture and equipment at the OSHC Service
- store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times.
- ensure any substance found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where appropriate will not be used under any circumstances.
- ensure containers should be disposed of correctly following local council guidelines and not reused under any circumstances.
- ensure all dangerous chemicals, substances and equipment is stored in a locked place or facility which is secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges and toiletries.
- follow the instructions of manufacturers, particularly of any product which may need to be stored in a refrigerated environment.
- refrigerate any substance that must be stored in a labelled, child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children
- ensure all hazardous chemicals must be supplied with a Safety Data Sheet (SDS). Our OSHC Service will adhere to the manufacturer's instructions for use, storage, and first aid instructions recorded on the SDS
- ensure there is a register of all hazardous chemicals, substances and equipment used at the Service. Information recorded should include where they are stored, their use, any risks, and first aid instructions and the current SDS. The register will be readily accessible.
- ensure appropriate personal protective clothing should be worn in accordance with the manufacturer's instructions when using and disposing of hazardous substances or equipment
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on 13 11 26, or call an Ambulance on 000.

- ensure emergency medical and first aid procedures are carried out, with relevant notification given to the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- In any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard, call the emergency services, dial 000 and notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.

HAND WASHING

Effective handwashing is the best way to prevent the transmission of infectious diseases. Our Service will ensure signs and posters remind employees and visitors of the importance of handwashing to help stop the spread of infectious diseases. Adults and children should wash their hands thoroughly with soap and water and/or alcohol-based sanitiser:

- upon arrival at the Service
- when hands are visibly dirty
- when coming inside from being outside
- before eating
- before putting on disposable gloves
- before preparing food items
- after touching raw meats such as chicken or beef
- after toileting children (if required) and coming into contact with any body fluids such as blood, urine or vomit
- after touching animals or pets
- after blowing your nose or sneezing and after assisting a child to blow their nose
- after meals
- after going to the toilet
- before and after administering first aid
- before and after administering medication
- after removing protective gloves
- after using any chemical or cleaning fluid

MINIMISING POTENTIALLY DANGEROUS SUBSTANCES

Our OSHC Service minimises the use of potentially dangerous substances. Ordinary detergents will be used to help remove dirt from surfaces. Colour-coded sponges (e.g., pink for the kitchen, yellow for the

bathroom) will be used in order to eliminate cross contamination. Different rubber gloves will also be used in each room then hung out to air-dry. Before returning to the children, educators will wash and dry hands.

DISINFECTANTS

Disinfectants are usually unnecessary as very few germs can survive exposure to fresh air and natural light. In an outbreak situation, such as gastroenteritis or other infectious virus (COVID-19), the Public Health Unit or SafeWork Australia, may specify the use of a particular disinfectant and increased frequency of cleaning. In this situation, for the disinfectant to work effectively, there still needs to be thorough cleaning using a detergent beforehand.

Essentially, there is no ideal disinfectant. Disinfectants cannot kill germs if the surface is not clean. It is more important to ensure that surfaces have been cleaned with detergent and warm water than to use a disinfectant.

In the event of an outbreak of gastroenteritis, a disinfectant such as bleach solution may be used following the manufacturer's directions. Gloves must be worn at all times when handling and preparing bleach.

To kill germs, any disinfectant needs:

- A clean surface to be able to penetrate the germ.
- To be able to act against those particular germs.
- To be of the right concentrate.
- Enough time to kill the germs, which is generally at least 10 minutes.

DETERGENTS

To work in accordance with *Staying healthy: Preventing infectious diseases in early childhood education and care services,* (6th edition) proper cleaning with detergent and warm water, followed by rinsing and air-drying kills most germs from surfaces as they are unable to multiply in a clean environment. Cleaning equipment should be stored and taken care of so it can dry between uses and not allow germs to multiply.

ARRANGEMENTS FOR LAUNDERING OF SOILED ITEMS

Soiled clothing will be returned to a child's home for laundering. Educators will remove soiled content prior to placing clothing into a plastic bag and securely storing these items in a sealed container, not placed in the child's bag.

CLOTHING

- Educator's clothing should be washed daily.
- Educators should also have a change of clothes available in case of accidents.
- Dress-up and play clothes should be washed once a term or as required.

EQUIPMENT AND TOY CLEANING

Educators are required to clean the children's equipment and toys on a regular basis in order to minimise cross contamination and the spread of illnesses. Educators will wash a toy or piece of equipment immediately if it has been sneezed on and/or soiled or if it has been discarded after play by a child who has been unwell. The Service will have washable toys for the younger children. Toys and equipment must be cleaned more often in the event of an infectious disease or virus is present in the service or community.

RECOMMENDED CLEANING MATERIALS:

- Most toys can be washed with normal dishwashing liquid and rinsed with clean water.
- Get into corners with a toothbrush and allow to air dry (if possible, in the natural sunlight).
- Leaving items such as LEGO and construction blocks to drain on a clean tea-towel overnight is ideal.

PLAY DOUGH

Our OSHC Service will reduce the risk of the spread of disease when playing with play dough by:

- encouraging hand washing before and after using play dough
- if there is an outbreak of vomiting and/or diarrhoea, discarding the playdough at the end of each day during the outbreak.

PUZZLES AND GAMES

- Wooden puzzles – wipe over with a damp cloth- do not immerse in water as this can destroy the equipment.
- Cardboard should be wiped over with a slightly damp cloth.

SUN PROTECTION

Our OSHC Service will work in compliance with the NSW SunSmart Program to ensure children's health and safety is maintained at all times whilst at the OSHC Service. SunSmart recommends that all early childhood education and care services have a SunSmart Policy to reduce UV damage to those in care, including educators.

1. OUTDOOR ACTIVITIES

Sun protection is required when UV levels reach level 3 or above. Our OSHC Service will monitor UV levels daily through one of the following methods:

- using smart phone SunSmart app
- viewing Bureau of Meteorology website
- visiting www.myuv.com.au

The OSHC Service will use a combination of sun protection measures whenever **UV Index levels reach 3 and above.**

- Care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.
- Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.
- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions and incursions.

2. SHADE

The OSHC Service will provide and maintain adequate shade for outdoor play. Shade options can include a combination of portable, natural and built shade. Regular shade assessments should be conducted to monitor existing shade structures and assist in planning for additional shade.

3. HATS

Educators 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 angled brim that is size at least 5cm (adults 6cm) and must shade the face, neck and ears
- broad brimmed hat with a brim size of at least 6cm (adults 7.5cm)
- approved school hat from the child's school.

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not a suitable alternative. Children without a sun safe hat will be asked to play in an area protected from the sun (e.g., under shade, veranda or indoors) or can be provided with a spare hat.

4. CLOTHING

When outdoors, educators and children who are not wearing school uniforms will wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- Loose fitting shirts and dresses with sleeves and collars or covered neckline.
- Longer style skirts, shorts and trousers.
- Children who are not wearing sun safe clothing can be provided with spare clothing.

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

5. SUNSCREEN

As per Cancer Council Australia recommendations: All educators and children will apply SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors. Sunscreen is stored in a cool, dry place and the use-by-date monitored. The children will apply sunscreen after signing in to OOSH.

6. ROLE MODELLING

Educators will act as role models and demonstrate sun safe behaviour by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- wearing sunglasses that meet the Australian Standard 1067 (optional)
- Families and visitors are encouraged to role model positive sun safe behaviour.

DELIVERY AND COLLECTION OF CHILDREN

The following procedure must be adhered to at all times to ensure the safety of the children. (*See Delivery of, and Collection from Education and Care Service Premises Policy, Safe Transportation Policy)*

ARRIVAL - MORNING

- All children must be signed in by their parent or person who delivers the child to our OSHC Service
- An educator is to check the sign in sheet ensuring families have signed their child in. If families have

not signed the child in, the educator or nominated supervisor will sign the child in, complying with Reg. 158.

- An educator will greet and receive each child to ensure the child is cared for at all times.

ARRIVAL – AFTERNOON

Please see our safer arrival policy for more information.

DELIVERY TO SCHOOL

Please see our safe arrival policy for more information

COLLECTION FROM SCHOOL

- Please see our safe arrival policy for more information.

TRANSPORT TO AND FROM SCHOOL

Our centre does not transport children to and from school.

ABSENT OR MISSING CHILDREN

Please see our safe arrival policy for more information.

MISSING CHILDREN

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling 000.
- Contact the child's parents.
- Contact the school to inform them of the missing child.
- Ensure that other children remain appropriately supervised.

DEPARTURE FROM SERVICE

- All children must be signed out by their parent or person who collects the child from our OSHC Service. If the parent or other person forgets to sign the child out, they will be signed out by the nominated supervisor or an educator.
- Children can only be collected by a parent, an authorised nominee named on their enrolment record, or a person authorised by a parent or authorised nominee to collect the child. Children may leave the premises if a parent or authorised nominee provides written or verbal authorisation for the child to leave the premises.

- Photo identification must be sighted by an educator before the child is released if the educator isn't familiar with the person collecting the child. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- Children will not be released into the care of a person not authorised to collect the child e.g., court orders concerning custody and access. If an unauthorised person is not willing to leave the premises without the child, the educator will call the police.
- Nominated supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date.
- Nominated supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow authorised nominees under the age of 18 to sign the child out. The nominated supervisor or responsible person will sign the child out and escort them to the gate.
- No child will be released into the care of anyone not known to educators. Parents must give prior notice where:
    - the person collecting the child is someone other than those mentioned on the enrolment form (e.g., in an emergency) or
    - there is a variation in the persons picking up the child, including where the child is collected by an authorised nominee who is unknown to educators.
- If educators do not know the person by appearance, the person must be able to produce some photo identification. If educators cannot verify the person's identity, they may be unable to release the child into that person's care.
- If the person collecting the child appears to be intoxicated, or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
    - discuss their concerns with the person, if possible, without the child being present
    - suggest they contact another parent or authorised nominee to collect the child.
    - if the person insists on taking the child, Educators will inform the police of the circumstances, the person's name and vehicle registration number.
    - Educators cannot prevent an incapacitated parent from collecting a child but must consider their obligations under the relevant child protection laws.
- At the end of each day educators will check the premises including outdoors and indoors to ensure that no child remains on the premises after the OSHC Service closes.
- Children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy.*

- Details of absences during the day will be recorded.

VISITORS

To ensure we can meet Work Health and Safety requirements and ensure the safety of our children, individuals visiting our OSHC Service must sign in when they arrive at the Service and sign out when they leave. Refer to our *Student, Volunteer and Visitor Policy* for more detailed information. Visitors are not to be left alone with children at any time whilst at the service. Working with Children Checks will be recorded and verified for any visitor who is not fully supervised at the OSHC Service. Visitors to the service are expected to comply with service policies and procedures, including health and safety policies and report any health and safety issues to management.

WATER SAFETY

Our OSHC Service has a dedicated *Water Safety Policy* and procedure in place for managing water safety, including during any water-based activities. The approved provider will identify and assess risks associated with any water hazards and water-based activities and ensure adequate supervision is provided when children are participating in water activities.
Please see our water safety policy for more information.

KITCHENS

- Children must not gain access to any harmful substance, equipment or amenity.
- No child will be allowed to enter the kitchen area unsupervised.

MONITORING AND REVIEWING HAZARDS

Risk management is an ongoing process. Risks must be systematically monitored, and management strategies reviewed to ensure that they continue to be effective and contribute to a safe and healthy work environment. New hazards can emerge over time resulting in control strategies becoming ineffective and therefore may require updating.
Hazard identification, Risk Management and Hazard Reduction is specifically addressed within our *Work Health and Safety Policy.*

BACK CARE AND MANUAL HANDLING

- Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.

- Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee.
- Manual handling injuries also include overuse injuries or, as a result of falling during manual handling, bruising or laceration.

FURTHER RESOURCES

NSW: SafeWork NSW administers the Work Health and Safety legislation and has several codes of practice on specific work safety issues which are available online.

For further information see: https://www.safeworkaustralia.gov.au/

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Health and Safety Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	21/8/25
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2025
VERSION NUMBER	August 2025/1		

INCIDENT, INJURY, TRAUMA & ILLNESS POLICY

The health and safety of all staff, children, families and visitors to our Out of School Hours Care (OSHC) Service is of the utmost importance. We aim to reduce the likelihood of incidents, illness, accidents and trauma through implementing comprehensive risk management, effective hygiene practices and the ongoing professional development of all staff to respond quickly and effectively to any incident or accident.

We acknowledge that in education and care services, illness and disease can spread easily from one child to another, even when implementing the recommended hygiene and infection control practices. Our OSHC Service aims to minimise illnesses by adhering to all recommended guidelines from relevant government authorities regarding the prevention of infectious diseases and adhere to exclusion periods recommended by the Australian Government National Health and Medical Research Council (NHMRC) and Public Health Unit.

When groups of children play together and are in new surroundings accidents and illnesses may occur. Our OSHC Service is committed to effectively manage our physical environment to allow children to experience challenging situations whilst preventing serious injuries.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 174	Offence to fail to notify the regulatory authority
12	Meaning of serious incident
77	Health, hygiene and safe food practices
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RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Child Safe Environment Policy Dealing with Infectious Disease Policy Safe Arrival Policy Enrolment Policy	Family Communication Policy Health and Safety Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy

PURPOSE

Our OSHC Service has a duty of care to respond to and manage illnesses, accidents, incidents, and trauma that may occur at the Service to ensure the safety and wellbeing of children, educators and visitors. This policy will guide educators and staff to manage illness and prevent injury and the spread of infectious diseases and provide guidance of the required action to be taken in the event of an incident, injury, trauma or illness occurring when a child is educated and cared for.

SCOPE

This policy applies to children, families, staff, educators, the approved provider, nominated supervisor, management, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place for incident, injury, trauma and illness and take reasonable steps to ensure policies and procedures are followed. (ACECQA, 2021). In the event of an incident, injury, trauma or illness, all staff will implement the guidelines set out in this policy to adhere to National Law and Regulations and inform the regulatory authority as required.

Our OSHC Service implements risk management planning to identify any possible risks and hazards to our learning environment and practices. Where possible, we have eliminated or minimised these risks as is reasonably practicable.

Our OSHC Service implements procedures as stated in the Staying healthy: *Preventing infectious diseases in early childhood education and care services* (6th Edition) as part of our day-to-day operation of the OSHC Service.

We are guided by explicit decisions regarding exclusion periods and notification of any infectious disease by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction under the Public Health Act.

INJURY, INCIDENT OR TRAUMA

In the event of any child, educator, staff, volunteer or visitor having an accident at the OSHC Service, an educator who has a First Aid Certificate will attend to the person immediately. Adequate supervision will be provided to all children attending the OSHC Service.

Any workplace incident, injury or trauma will be investigated, and records kept as per WHS legislation and guidelines. An *Incident Injury Report Register* will be completed to assist with a review of practices following an incident or injury at the Service, including an assessment of areas for improvement.

All staff and educators are required to follow the procedures outlined in our related policy and procedures and as per current First Aid training.

DEFINITION OF SERIOUS INCIDENT

Regulations require the approved provider or nominated supervisor to notify regulatory authority within 24 hours of any serious incident at the OSHC Service through the NQA IT System

A serious incident (Reg. 12) is defined as any of the following:

a) The death of a child:

(i) while being educated and cared for by an OSHC Service or

(ii) following an incident while being educated and cared for by an OSHC Service.

(b) Any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an OSHC Service, which:

(i) a reasonable person would consider required urgent medical attention from a registered medical practitioner or

(ii) for which the child attended, or ought reasonably to have attended, a hospital. For example: whooping cough, broken limb and anaphylaxis reaction

(c) Any incident or emergency where the attendance of emergency services at the OSHC Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)

(d) Any circumstance where a child being educated and cared for by an OSHC Service

(i) appears to be missing or cannot be accounted for or

(ii) appears to have been taken or removed from the OSHC Service premises in a manner that contravenes these regulations or

(iii) is mistakenly locked in or locked out of the OSHC Service premises or any part of the premises.

A serious incident should be documented as an incident, injury, trauma and illness record as soon as possible and within 24 hours of the incident, with any evidence attached.

INCIDENT, INJURY, TRAUMA AND ILLNESS RECORD

An *Incident, Injury, Trauma and Illness* record contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for at the OSHC Service. The record will include:

- name and age of the child
- circumstances leading to the incident, injury, illness
- time and date the incident occurred, the injury was received, or the child was subjected to trauma
- details of any illness which becomes apparent while the child is being cared for including any symptoms, time and date of the onset of the illness
- details of the action taken by the educator including any medication administered, first aid provided, or medical professionals contacted
- details of any person who witnessed the incident, injury or trauma
- names of any person the educator notified or attempted to notify, and the time and date of this
- signature of the person making the entry, and the time and date the record was made

Educators are required to complete documentation of any incident, injury or trauma that occurs when a child is being educated and cared for by the OSHC Service. This includes recording incidences of biting, scratching, dental or mouth injury. Due to Confidentiality and Privacy laws, only the name of the child injured will be recorded on the Incident, Injury, Trauma or Illness Record. Any other child/ren involved in the incident will not have their names recorded. If other children are injured or hurt, separate records will be completed for each child involved in the incident. Parents/Authorised Nominee must acknowledge the details contained in the record, sign and date the record on arrival to collect their child. All Incident, Injury, Trauma and Illness Records must be kept until the child is 25 years of age. (See: *Record Keeping and Retention Policy*).

MISSING OR UNACCOUNTED FOR CHILD

At all times, reasonable precautions and adequate supervision is provided to ensure children are protected from harm or hazards. However, if a child appears to be missing or unaccounted for, removed

from the OSHC Service premises that breaches the National Regulations or is mistakenly locked in or locked out of any part of the Service, a serious incident notification must be made to the regulatory authority.

A child may only leave the OSHC Service in the care of a parent, an authorised nominee named in the child's enrolment record or a person authorised by a parent or authorised nominee or because the child requires medical, hospital or ambulance care or other emergency.
Educators must ensure that

- the attendance record is regularly cross-checked to ensure all children signed into the OSHC Service are accounted for
- children are supervised at all times
- visitors to the service are not left alone with children at any time

For After School Care, educators will check that all children booked in for a session of care arrives at the expected time. If a child does not arrive at the OSHC Service or nominated collection point, at the expected time educators will follow procedures outlined in the centres safe arrival policy.

Educators will regularly cross-check the attendance record to ensure all children signed into the OSHC Service are accounted for. Should an incident occur where a child is missing from the OSHC Service educators and the nominated supervisor will:

- attempt to locate the child immediately by conducting a thorough search of the premises (checking any areas that a child could be locked into by accident)
- cross check the attendance record to ensure the child hasn't been collected by an authorised person and signed out by another person
- if the child is not located within a 10-minute period, emergency services will be contacted on 000 and the approved provider will notify the parent/s or guardian
- continue to search for the missing child until emergency services arrive whilst providing supervision for other children in care
- provide information to Police such as: child's name, age, appearance, (provide a photograph), details of where the child was last sighted.

HEAD INJURIES

It is common for children to bump their heads during everyday play, however it if difficult to determine whether the injury is serious or not. In the event of any head injury, the First Aid officer will assess the child, administer any urgent First Aid and notify parents/guardians of the incident. Head injuries are generally classified as mild, moderate or severe. Mild head injuries may result in a small lump or bruise, however, may still result in a possible concussion. Parents/guardians will be advised to seek medical advice if their child develops any new symptoms of head trauma.

Emergency services will be contacted immediately if the child:

- has sustained a head injury involving high speeds or fallen from a height greater than one metre (play equipment)
- loses consciousness
- has a seizure, convulsion or fit
- seems unwell or vomits several times after hitting their head
- has a severe or increasing headache

TRAUMA

Trauma is defined as the impact of an event or a series of events during which a child feels helpless and pushed beyond their ability to cope. There are a range of different events that might be traumatic to a child, including accidents, injuries, serious illness, natural disasters (bush fires), assault, and threats of violence, domestic violence, neglect or abuse and wars or terrorist attacks. Parental or cultural trauma can also have a traumatising effect on children. This definition firmly places trauma into a developmental context:

"Trauma changes the way children understand their world, the people in it and where they belong" (Australian Childhood Foundation, 2010).

Trauma can disrupt the relationships a child has with their parents, educators and staff who care for them. It can transform children's language skills, physical and social development and the ability to manage their emotions and behaviour.

Behavioural responses for young children who have experiences trauma may include:

- new or increased clingy behaviour such as constantly following a parent, carer or staff around
- anxiety when separated from parents or carers
- new problems with skills like sleeping, eating, going to the toilet and paying attention
- shutting down and withdrawing from everyday experiences

- difficulties enjoying activities
- being jumpier or easily frightened
- physical complaints with no known cause such as stomach pains and headaches
- blaming themselves and thinking the trauma was their fault.

Children who have experienced traumatic events often need help to adjust to the way they are feeling. When parents, educators and staff take the time to listen, talk, and play they may find children begin to say or show how they are feeling. Providing children with time and space lets them know you are available and care about them.

It is important for educators to be patient when dealing with a child who has experienced a traumatic event. It may take time to understand how to respond to a child's needs and new behaviours before parents, educators and staff are able to work out the best ways to support a child. It is imperative to realise that a child's behaviour may be a response to the traumatic event rather than just 'naughty' or 'difficult' behaviour.

EDUCATORS CAN ASSIST CHILDREN DEALING WITH TRAUMA BY:

- observing the behaviours and expressed feelings of a child and documenting responses that were most helpful in these situations
- creating a 'relaxation' space with familiar and comforting toys and objects children can use when they are having a difficult time
- having quiet time such as reading a story about feelings together
- trying different types of play that focus on expressing feelings (e.g., drawing, playing with play dough, dress-ups and physical games such as trampolines)
- helping children understand their feelings by using reflecting statements (e.g., 'you look sad/angry right now, I wonder if you need some help?')

There are a number of ways for parents, educators and staff to reduce their own stress and maintain awareness, so they continue to be effective when offering support to children who have experienced traumatic events.

STRATEGIES TO ASSIST FAMILIES, EDUCATORS AND STAFF TO COPE WITH CHILDREN'S STRESS OR TRAUMA MAY INCLUDE:

- taking time to calm yourself when you have a strong emotional response. This may mean walking away from a situation for a few minutes or handing over to another educator or staff member if possible
- planning ahead with a range of possibilities in case difficult situations occur
- remembering to find ways to look after yourself, even if it is hard to find time or you feel other things are more important. Taking time out helps adults be more available to children when they need support.
- using supports available to you within your relationships (e.g., family, friends, colleagues).
- identifying a supportive person to talk to about your experiences. This might be your family doctor or another health professional.
- accessing support resources- BeYou, Emerging Minds

Living or working with traumatised children can be demanding so it is important to be aware of your own responses and seek support from management when required.

ILLNESS MANAGEMENT

To reduce the transmission of infectious illness, our OSHC Service implements effective hygiene and infection control routines and procedures from *Staying healthy: Preventing infectious diseases in early childhood education and care services- 6th Edition*.

Practising effective hygiene helps to minimise the risk of cross infection within our Service include:

- immunisation- for children and adults
- respiratory hygiene- limiting airborne germs and the transmission of respiratory diseases. Educators model good hygiene practices and remind children to cough or sneeze into their elbow or use a disposable tissue and wash their hands immediately with soap and water or use hand sanitiser after touching their mouth, eyes or nose.
- hand hygiene- handwashing techniques are practised by all educators and children routinely using soap and water before and after eating, when using the toilet and drying hands thoroughly with paper towel.
- parents, families and visitors are encouraged to wash their hands upon arrival and departure at the Service or use an alcohol-based hand sanitizer
- wearing PPE- gloves and masks to provide a protective barrier against germs

- environmental strategies- cleaning with specific products after any spills of body fluids (urine, faeces, vomit, blood); All surfaces including bedding (mat, cushions) used by a child who is unwell, will be cleaned with soap and water and then disinfected.
- toileting- Infection control practices including hand hygiene and proper cleaning and disinfection procedures are implemented
- exclusion – children, educators and other staff who show symptoms of infectious disease are excluded from the Service.

CHILDREN ARRIVING AT THE OSHC SERVICE WHO ARE UNWELL

Management will not accept a child into care if they:

- have a diagnosed contagious illness or infectious disease [specific exclusion periods may apply]
- have a temperature above 38.0°C
- have been given medication for a temperature prior to arriving at the OSHC Service (for example: Panadol)
- have had ***any*** diarrhoea and/or vomiting in the last 24 hours
- have started a course of antibiotics in the last 24 hours.

IDENTIFYING SIGNS AND SYMPTOMS OF ILLNESS

Educators and management are not doctors and are unable to diagnose an illness or infectious disease however, as our educators are familiar with the children in their care, they will watch for symptoms of sickness. If a child becomes ill whilst at the OSHC Service, educators will respond to their individual symptoms of illness and provide comfort and care.

Educators will closely monitor the child focusing on the symptoms displayed and how the child behaves and be alert to the possibility of symptoms that may suggest the child is very sick and needing urgent medical assistance.

Educators will:

- understand the differences between ***concerning and serious symptoms***
- if any ***serious symptoms*** are observed (breathing difficulties, drowsiness or unresponsiveness, looking pale or blue or feeling cold)
    - an ambulance will be called immediately
- if any ***concerning symptoms*** are observed (lethargy, fever, poor feeding, new rash, poor urine output, irritation or pain or sensitivity to light) educators will:

    - monitor the child carefully
    - call parents/carers
    - discuss symptoms with parents/carers and help them decide whether the child needs to see a doctor
- educators will monitor the child and will consider calling an ambulance if:
    - any concerning symptoms become severe
    - the child gets worse very quickly
    - there are multiple concerning symptoms.

(Staying healthy, 6th Edition, 2024)

In the event of any child requiring ambulance transportation and medical intervention, a serious incident will be reported to the regulatory authority (Reg. 12) by the approved provider.

If the child has symptoms that suggest they are sick and they are not well enough to enjoy activities, they should go home and parents/caregivers will be contacted. The child will be cared for in an area that is separated from other children in the Service to await pick up from their parent/guardian or emergency contact person. A child who is displaying symptoms of a contagious illness or virus (vomiting, diarrhoea, fever) will be moved away immediately from the rest of the group and supervised until he/she is collected by a parent or emergency contact person.

SYMPTOMS INDICATING ILLNESS MAY INCLUDE:

- lethargy and decreased activity
- difficulty breathing
- fever (temperature more than 38°C)
- headaches
- poor feeding
- poor urine output/ dark urine
- a stiff neck, irritability or sensitivity to light
- new red or purple rash
- pain
- diarrhoea
- vomiting
- discharge from the eye or ear
- skin that displays rashes, blisters, spots, crusty or weeping sores
- loss of appetite

- difficulty in swallowing or complaining of a sore throat
- persistent, prolonged or severe coughing

(This is not an exhaustive list of indicators of illness)

HIGH TEMPERATURES OR FEVERS

Children get fevers or temperatures for all kinds of reasons. Most fevers and the illnesses that cause them last only a few days. Recognised authorities suggest a child's normal temperature will range between 36.5°C and 38.0°C.

WHEN A CHILD DEVELOPS A HIGH TEMPERATURE OR FEVER WHILST AT THE OSHC SERVICE

- Educators will check a child's temperature if they think the child has a fever. If it is between 37.5°C and 37.9°C educators will retest within 30 minutes (records will be kept of time, date and temperature)
- Educators will notify parents when a child registers a temperature of 38°C or higher
- Educators will follow the *Illness Management Procedure* for methods to reduce a child's temperature or fever
- The child will need to be collected from the Service as soon as possible (within 30 minutes)
- Educators will monitor the child carefully to ensure their condition does not get worse and call an ambulance immediately if required
- Parents/carers will be provided with a *Fever* factsheet for further information
- Educators will complete an *Incident, Injury, Trauma and Illness* record and note down any other symptoms that may have developed along with the temperature (for example, a rash, vomiting, etc.).
- If the child has gone home from the OSHC Service with a fever but their temperature is normal the next morning they can return to the Service. (Staying healthy, 6th Edition, 2024)

RESPIRATORY SYMPTOMS

Respiratory symptoms include cough, sneezing, runny or blocked nose and sore throat. It is not unusual for children to have five or more colds a year, and children in education and care services may have as many as 8–12 colds a year. A runny or blocked nose is a common symptom for many respiratory conditions or diseases which may be infectious such as a cold, influenza or COVID. Some causes, however, are not infectious such as allergies (hay fever).

As each child may have different symptoms of a respiratory illness, our OSHC Service will consider exclusion based on the severity of the symptoms and the child's behaviour. Children can become

distressed and lethargic when unwell and should be at home with a parent or carer under close supervision.

A child will be excluded from the Service if:

- the respiratory symptoms are severe or;
- the symptoms become worse during the course of the day (more frequent or severe) or;
- the child has other concerning symptoms (fever, tiredness, pain, poor feeding).

(Staying healthy, 6th Edition, 2024).

DIARRHOEA AND VOMITING (GASTROENTERITIS)

Gastroenteritis (or 'gastro') is a general term for an illness of the digestive system. Typical symptoms include abdominal cramps, diarrhoea, and vomiting. In many cases, it does not need treatment, and symptoms disappear in a few days. However, gastroenteritis can cause dehydration because of the large amount of fluid lost through vomiting and diarrhoea. Therefore, if a child does not receive enough fluids, he/she may require fluids intravenously.

If a child has diarrhoea and/or vomiting whilst at the OSHC Service, Management will notify parents or an emergency contact to collect the child immediately. Parents/carers will be provided with a *Diarrhoea or vomiting (gastroenteritis*) fact sheet for further information.

In the event of an outbreak of viral gastroenteritis, management will contact the local Public Health Unit. Public Health Unit- Local state and territory health departments. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2-day period. Management must document the number of cases, dates of onset, duration of symptoms. (See: *Illness or Infectious Disease Register.*

Staff and children that have had diarrhoea and/or vomiting will be excluded from the OSHC Service until there has not been any diarrhoea or vomiting for at least 24 hours. If the diarrhoea or vomiting are confirmed to be norovirus, they will be excluded until there has not been any diarrhoea or vomiting for at least 48 hours. Staff who handle food will be excluded from the OSHC Service for up to 48 hours after they have stopped vomiting or having diarrhoea. [Staying healthy, 2024.]
Services can amend exclusion time as per state/territory Public Health Unit recommendations

NOTIFYING FAMILIES AND EMERGENCY CONTACT- SICKNESS OR INFECTIOUS ILLNESS

- It is a requirement of the OSHC Service that all emergency contacts are able to pick up an ill child within a 30-minute timeframe
- In the event that the ill child is not collected in a timely manner, or should parents refuse to collect the child, a warning letter will be sent to the families outlining Service policies and requirements. The letter of warning will specify that if there is a future breach of this nature, the child's position may be terminated.
- Parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring
- Families will be notified of any outbreak of an infectious illness (e.g.: Gastroenteritis, whooping cough) within the Service via email to assist in reducing the spread of the illness
- When a child has been diagnosed with an illness or infectious disease, the Service will refer to information about recommended exclusion periods from the Public Health Unit (PHU) and *Staying healthy: Preventing infectious diseases in early childhood education and care services.* (6th Edition), 2024
- Exclusion periods for illness and infectious diseases are provided to families and included in our *Dealing with Infectious Disease Policy*
- Families are provided with clear information about any illness or disease via Factsheets from Staying healthy, 6th Edition.

THE APPROVED PROVIDER, NOMINATED SUPERVISORS, RESPONSIBLE PERSON, AND EDUCATORS WILL ENSURE:

- that obligations under the *Education and Care Services National Law and National Regulations* are met
- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and associated procedure
- each child's enrolment records include authorisations by a parent or person named in the record for the approved provider, nominated supervisor or educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service and if required, transportation by an ambulance service
- parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring
- an *Incident, Injury, Trauma and Illness Record* is completed accurately and in a timely manner as soon after the event as possible (within 24 hours)

- if the incident, situation or event presents imminent or severe risk to the health, safety and wellbeing of any person present at the OSHC Service, or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident
- families are advised to keep their child home until they are feeling well, and they have not had any symptoms for at least 24-48 hours (depending upon the illness and exclusion periods)
- children or staff members who are diagnosed with an illness or infectious disease may be excluded as per recommended exclusion periods
- families are notified of any infectious disease circulating the Service within 24 hours of detection
- a child who has not been immunised will be excluded from the Service if a vaccine preventable disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our *Dealing with Infectious Diseases Policy*
- families of a child with complex and chronic medical conditions will be notified in the event of an outbreak of an illness or infectious disease that could compromise their health
- families are notified to collect their child if they have vomited or had diarrhoea whilst at the OSHC Service
- first aid kits are suitably equipped and checked on weekly basis (see *First Aid Kit Checklist*)
- first aid kits are easily accessible when children are present at the OSHC Service and during excursions
- that the following qualified people are in attendance **at all times** the Service is providing education and care to children [Reg. 136]
    - at least one educator, staff member or nominated supervisor who holds a current ACECQA approved first aid qualification- including emergency life support and CPR resuscitation
    - at least one educator, staff member or nominated supervisor of the Service who has undertaken current approved anaphylaxis management training
    - at least one educator, staff member or nominated supervisor of the Service who has undertaken current approved emergency asthma management training
- educators or staff who have diarrhoea or an infectious disease do not prepare food for others for at least 48 hours after the symptoms have resolved
- cold food is kept cold (below 5 °C) and hot food, hot (above 60°C) to discourage the growth of bacteria
- staff and children always practice appropriate hand hygiene and cough and sneezing etiquette
- appropriate cleaning practices are followed

- toys and equipment are cleaned and disinfected on a regular basis which is recorded in the toy cleaning register or cleaned immediately if a child who is unwell has used toys or resources
- additional cleaning will be implemented during any outbreak of an infectious illness or virus
- all illnesses are documented in the service's *Incident, Injury, Trauma and Illness Record*
- information regarding the health and wellbeing of a child or staff member is not shared with others unless consent has been provided, in writing, or provided the disclosure is required or authorised by law under relevant state/territory legislation (including Child Information Sharing Scheme [CISS].

FAMILIES WILL:

- adhere to the Service's policies regarding *Incident, Injury, Trauma and Illness*
- provide authorisation in the child's enrolment record for the approved provider, nominated supervisor or educator to seek medical treatment from a medical practitioner, hospital or ambulance service and if required, transportation by ambulance service
- provide up to date medical and contact information in case of an emergency
- provide emergency contact details and ensure details are kept up to date
- ensure that their child is able to be collected from the Service within a 30-minute timeframe if required due to illness by either a parent or emergency contact
- provide the OSHC Service with all relevant medical information, including Medicare and private health insurance
- provide a copy of their child's medical management plans and update these annually or whenever medication/medical needs change
- adhere to recommended periods of exclusion if their child has a virus or infectious illness- (exclusion for common or concerning conditions)
- seek medical advice for their child's illness/fever as required
- complete documentation as requested by the educator and/or approved provider- *Incident, Injury, Trauma and Illness record* and acknowledge that they were made aware of the incident, injury, trauma or illness
- inform the OSHC Service if their child has an infectious disease or illness
- provide evidence as required from doctors or specialists that the child is fit to return to care if required- including post-surgery
- provide written consent for educators to administer first aid and call an ambulance if required (as per enrolment record)
- complete and acknowledge details in the *Administration of Medication Record* if required.

BREACH OF POLICY

Staff members or educators who fail to adhere to this policy may be in breach of their terms of employment and may face disciplinary action.

CONTINUOUS IMPROVEMENT/REFLECTION

The *Incident, Injury, Trauma and Illness Policy* will be reviewed on an annual basis in conjunction with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP- RELATED RESOURCES

Administration of Medication Form First Aid Checklist Hand Washing Procedure	Illness or Infectious Disease Register Incident, Injury, Trauma or Illness Record Safe Arrival Policy

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	21.8.2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

Dealing with Medical Conditions and Medical Administration – Including Anaphylaxis, Asthma, Diabetes and Epilepsy

POLICY STATEMENT:

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

PROCEDURE:

a) Dealing with medical conditions

- Families will be asked to inform the service of any medical conditions the child may have at the time of enrolment. This information will be recorded on the child's enrolment form.
- Upon notification of a child's medical condition, the service will provide the family with a copy of this policy in accordance with regulation 91.
- Specific or long term medical conditions will require the completion of a medical management plan developed in conjunction with the child's doctor and family.
- It is a requirement of the service that a risk minimisation plan and communication plan is developed in consultation with the child's family. The Director will meet with the family and relevant health professionals as soon as possible prior to the child's attendance to discuss the content of the plan to assist in a smooth and safe transition of the child into the service.
- Content of the management plan will include:

✓ Identification of any risks to the child or others by their attendance at the service.

- ✓ Identification of any practices or procedures that need adjustment at the service to minimise risk e.g. food preparation procedures.
- ✓ Process and time line for orientation or training requirements of educators.
- ✓ Methods for communicating between the family and educators if there are any changes to the child's medical management plan.

- The medical management plan will be followed in the event of any incident relating to the child's specific health care need, allergy or relevant medical condition. All educators including volunteers and administrative support will be informed of any special medical conditions affecting children and orientated regarding the necessary management. In some cases specific training will be provided to educators to ensure that they are able to effectively implement the medical management plan.
- Where a child has an allergy, the family will be asked to supply information from their doctor explaining the effects if the child is exposed to whatever they are allergic to and to explain ways the educators can help the child if they do become exposed.
- Where possible the service will endeavour to not have that allergen accessible in the service.
- All medical conditions including food allergies will be placed on a noticeboard near the kitchen area out of the sight of general visitors and children. It is deemed the responsibility of every educator at the service to regularly read and refer to the list.
- All relief Educators will be informed of the list on initial employment and provided orientation on what action to take in the event of a medical emergency involving that child.
- Where a child has a life threatening food allergy and the service provides food, the service will endeavour not to serve the particular food allergen in the service when the child is in attendance and families will be advised not to supply that allergen for their own children. Families of children with an allergy may be asked to supply a particular diet if required (e.g. soy milk, gluten free bread).
- Where it is necessary for other children to consume the particular food allergen (e.g. milk or other dairy foods) the child with a food allergy will be seated separately during meal times and all children will wash their hands before and after eating.

- Where medication for treatment of long term conditions such as asthma, diabetes, epilepsy, anaphylaxis or ADHD is required, the service will require an individual medical management plan from the child's medical practitioner or specialist detailing the medical condition of the child, correct dosage of any medication as prescribed and how the condition is to be managed in the service environment.
- Hamilton South Before and After School Care Centre will not and does not allow children to self-medicate. All medication is to be administered by Educators in accordance with the documentation from the child's doctor.

ANAPHYLAXIS MANAGEMENT

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions including anaphylaxis. Anaphylaxis is a severe and sometimes sudden allergic reaction which is potentially life threatening. It can occur when a person is exposed to an allergen (such as food or an insect sting). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis should always be treated as a medical emergency, requiring immediate treatment. Most cases of anaphylaxis occur after a person is exposed to the allergen to which they are allergic, usually a food, insect sting or medication. Any anaphylactic reaction always requires an emergency response.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
S. 172	Failure to display prescribed information
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
173(2)(h)	Prescribed information to be displayed- a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service
174	Time to notify certain circumstances to Regulatory Authority
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First aid Policy Administration of Medication Policy Excursion/ Incursion Policy Enrolment Policy Incident, Injury, Trauma and Illness Policy	Medical Conditions Policy Nutrition Food Safety Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Safe Transportation of Children Policy Supervision Policy

PURPOSE

We aim to minimise the risk of an anaphylactic reaction occurring at our Out of School Hours Care (OSHC) Service by following our *Anaphylaxis Management Policy,* developing and implementing risk minimisation strategies and following the child's ASCIA Action Plan. We will ensure that all staff members are adequately trained to respond appropriately and competently to an anaphylactic reaction.

SCOPE

This policy applies to children, families, staff, management, the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

DUTY OF CARE

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

a. a safe environment for children free of foreseeable harm and
b. adequate Supervision of children

Our focus is keeping children safe and promoting the health, safety and wellbeing of children attending our OSHC Service. Staff members including relief staff need to be aware of children at the OSHC Service who suffer from allergies that may cause an anaphylactic reaction. Management will ensure all staff are aware of the location of children's Australasian Society of Clinical Immunology and Allery (ASCIA) Action Plans, risk minimisation plan and required medication. This policy supplements our *Medical Conditions Policy.*

BACKGROUND

Anaphylaxis is a severe, rapidly progressing allergic reaction that is potentially life threatening.

The most common allergens in children are:

- Peanuts
- Eggs

- Tree nuts (e.g., cashews pistachios, almonds)
- Cow's milk/diary
- Fish and shellfish
- Wheat
- Soy
- Sesame
- Certain insect stings (particularly bee stings)
- Latex

Signs of anaphylaxis (severe allergic reaction) include any 1 of the following:

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking/and or a hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- pale and floppy (young children)
- abdominal pain and/or vomiting (signs of a severe allergic reaction to insects)

The key to the prevention of anaphylaxis and response to anaphylaxis within the OSHC Service is awareness and knowledge of those children who have been diagnosed as at risk, awareness of allergens, and the implementation of preventative measures to minimise the risk of exposure to those allergens. It is important to note however, that despite implementing these measures, the possibility of exposure cannot be completely eliminated. Communication between the OSHC Service and families is vital in understanding the risks and helping children avoid exposure.

Adrenaline given through an adrenaline autoinjector (such as an EpiPen® or Anapen®) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Children at risk of anaphylaxis will not be enrolled into the OSHC Service until the child's personal ASCIA Action Plan is completed and signed by their medical practitioner. A site-specific risk minimisation plan must be developed with

parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

The ASCIA Action Plans meet the requirements of regulation 90 as a medical management plan. It is imperative that all educators and volunteers at the Service follow a child's ASCIA Action Plan in the event of an incident related to a child's specific health care need, allergy, or medical condition.
The OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs, including having families provide written authorisation to display the child's ASCIA Action Plan in prominent positions within the OSHC Service.

THE APPROVED PROVIDER/MANAGEMENT AND NOMINATED SUPERVISOR WILL ENSURE:

- that obligations under the *Education and Care Services National Law and National Regulations* are met
- that a copy of this policy is provided and reviewed during each new staff member's induction process
- all staff, educators, students, visitors and volunteers have knowledge of and adhere to this policy
- the Best practice guidelines for anaphylaxis prevention and management in children's education and care services are implemented
- that as part of the enrolment process, **all** parents/guardians are asked whether their child has been diagnosed as being at risk of anaphylaxis or has severe allergies and clearly document this information on the child's enrolment record
- if the answer is *yes*, the parents/guardians are required to provide an ASCIA Action Plan signed by a registered medical practitioner **prior** to their child's commencement at the Service
- parents/guardians are informed the service may administer emergency anaphylaxis treatment if required, with advice from emergency services. Parents are advised of this at time of enrolment and orientation to the OSHC Service.
- at least one educator or nominated supervisor who holds a current accredited first aid certificate, has completed emergency asthma management training and emergency anaphylaxis management training (as approved by ACECQA) is in attendance at all times education and care is provided by the Service and is available immediately in an emergency
- all staff and educators have completed ACECQA approved first aid training at least every 3 years and cardiopulmonary resuscitation (CPR) at least every 12 months.
- staff responsible for preparing, serving and supervising food for children with food allergies should undertake the *All about Allergens for Cooks and Chefs and All about Allergens for Children's Education and Care (CEC)* online courses- Food Allergy Aware Training

- staff training is kept up to date in each staff member's record
- that all staff members are aware of
    - any child at risk of anaphylaxis enrolled in the service
    - the child's individual ASCIA Action Plan and its location
    - symptoms and recommended immediate action for anaphylaxis and allergic reactions and,
    - the location of their EpiPen® / Anapen ® device
- risk minimisation strategies are discussed regularly at staff meetings
- that the child's risk minimisation plan is reviewed following exposure to a known allergen while attending our OSHC Service
- that updated information, resources, and support for managing allergies and anaphylaxis are regularly provided for families
- risk assessments are developed prior to any excursion or incursion consistent with Reg. 101
- that at least one general use adrenaline injector is available at the Service in case of an emergency- Reg. 89. First Aid Kits
- that medication is administered in accordance with the *Administration of Medication Policy*
- a risk assessment is completed to determine if additional general use adrenaline devices are required
- that when medication has been administered to a child in an anaphylaxis emergency, emergency services (in the first instance) and the parent/guardian of the child are notified as soon as is practicable but no later than 24 hours after the incident (Reg.94)
- that they notify the regulatory authority of any serious incident of a child while being educated and cared for at the Service within 24 hours.

MANAGEMENT STRATEGIES WHERE A SCHOOL AGED CHILD IS DIAGNOSED AT RISK OF ANAPHYLAXIS. THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- Converse with the parents/guardians to begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until an ASCIA Action Plan is provided by the family and signed by a medical practitioner
- ensure the ASCIA Action Plan includes:
    - child's name, date of birth
    - a recent photo of the child
    - confirmed allergen(s)- specific details of the child's diagnosed medical condition
    - family/emergency contact details (name and phone number)
    - supporting documentation (if required)

  - triggers for the allergy/anaphylaxis (signs and symptoms)
  - first aid/emergency action that will be required
  - administration of adrenaline autoinjectors
  - contact details and signature of the registered medical practitioner
  - date the plan should be reviewed
- develop and document a risk minimisation plan in collaboration with parents/guardian, by assessing the potential for accidental exposure to allergens while the child at risk of anaphylaxis is in the care of the Service (particular attention should be given to mealtimes as this is a significant risk for children with food allergies)
- develop and document a risk minimisation plan in collaboration with parents/guardian, by assessing the potential for accidental exposure to allergens while the child at risk of anaphylaxis is in the care of the OSHC Service (particular attention should be given to mealtimes as this is a significant risk for children with food allergies)
- ensure the risk minimisation plan is specific to our OSHC Service environment, activities, incursions and excursions, and the individual child and is reviewed annually
- ensure that a child who has been prescribed an adrenaline auto-injection device is not permitted to attend the OSHC Service without a complete auto-injection device kit (which must contain a copy the child's anaphylaxis medical management plan)
- ensure that all staff in the Service know the location of the auto-injection device kit and the child's ASCIA Action Plan
- collaborate with parents/guardians to develop and implement a communication plan and encourage ongoing communication regarding the status of the child's allergies, this policy, and its implementation
- request parental authorisation to display a child's ASCIA Action Plan in key locations at the Service, where educators and staff are able to view these easily whilst ensuring the privacy, safety and wellbeing of the child (for example, in the child's room, the staff room, kitchen, and / or near the medication cabinet)
- display ASCIA First Aid Plan for Anaphylaxis (ORANGE) in key locations in the OSHC Service
- ensure that all staff responsible for the preparation of food are trained in managing the provision of meals for a child with allergies, including high levels of care and close attention to preventing cross contamination during storage, handling, preparation, and serving of food. Training will also be given in planning appropriate menus including identifying written and hidden sources of food allergens on food labels.

- ensure the child with an allergy receives the right food/snack/meal by implementing a two-person check, where a second educator checks that the right child receives the right meal
- ensure supervision is managed consistently across mealtimes to maintain effective risk minimisation strategies
- ensure that all relief staff members in the OSHC Service have completed training in anaphylaxis management including the administration of an adrenaline auto-injection device, awareness of the symptoms of an anaphylactic reaction and awareness of any child at risk of anaphylaxis, the child's allergies, the individual anaphylaxis medical management action plan and the location of the auto-injection device kit
- ensure risk assessments for excursions consider the risk of anaphylaxis
- ensure that risk assessments for transporting children by the OSHC Service consider potential risks of anaphylaxis – our centre does not transport children.
- ensure that a staff member accompanying children outside the OSHC Service carries a copy of the child's ASCIA Action Plan with the auto-injection device kit e.g., on excursions that this child attends, transporting the child, or during an emergency evacuation
- ensure an up-to-date copy of the ASCIA Action Plan is provided whenever any changes have occurred to the child's diagnosis or treatment- [note ASCIA Action Plans do not expire and are valid beyond their review date]

CHILDREN WHO CARRY THEIR OWN ADRENALINE AUTOINJECTOR IN OUTSIDE OF SCHOOL HOURS CARE SERVICES

In some cases, children over preschool age attending an OSHC Service might carry their own adrenaline auto-injector. Children at risk of anaphylaxis usually only carry their own adrenaline auto-injector once they travel independently to and from school. This often coincides with high school or the latter years of primary school. To ensure compliance with the National Quality Framework an authorisation for a child over preschool age to self-administer medication is required (Reg. 96).

Where a child over preschool age carries their own adrenaline auto-injector it is advisable that the OSHC Service requests the child's parent to provide a second adrenaline auto-injector to be kept on the Service premises in a secure location, as it should not be relied upon that the auto-injector is always being carried on their person. If a child does carry an auto-injector device, the exact location should be easily identifiable by OSHC staff. Hazards such as identical school bags in before and after school care should be considered. Where an auto-injector device is carried on their person, a copy of the child's ASCIA Action

Plan should also be carried. Procedures should be in place to ensure that the auto-injector device is with the child when they arrive at the OSHC Service.

EDUCATORS WILL:

- read and comply with the *Anaphylaxis Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*
- ensure that a complete auto-injection device kit (which must contain a copy the child's ASCIA Action Plan signed by the child's registered medical practitioner) is provided by the parent/guardian for the child while at the OSHC Service
- ensure a copy of the child's ASCIA Action Plan visible and known to staff and students in the OSHC Service
- always follow the child's ASCIA Action Plan in the event of an allergic reaction, which may progress to anaphylaxis
- practice the administration procedures of the adrenaline auto-injection device using an auto-injection device trainer and 'anaphylaxis scenarios' on a regular basis, preferably quarterly
- ensure the child at risk of anaphylaxis only eats food that has been prepared according to the parents' or guardians' instructions
- always check a meal before it is given to a child with anaphylaxis by implementing the two-person check.
- ensure tables and bench tops are washed down effectively before and after eating
- encourage all children wash their hands upon arrival at the OSHC Service and before and after eating
- increase supervision of a child at risk of anaphylaxis on special occasions and events such as excursions, incursions, parties and family days
- ensure that the auto-injection device kit is:
    - stored in a location that is known to all staff, including relief staff
    - NOT locked in a cupboard
    - easily accessible to adults but inaccessible to children
    - stored in a cool dark place at room temperature
    - NOT refrigerated
    - contains a copy of the child's ASCIA Action Plan
- ensure that the auto-injection device kit containing a copy of the ASCIA Action Plan for each child at risk of anaphylaxis is carried by a staff member accompanying the child when the child is removed from the OSHC Service e.g., on excursions that this child attends, transporting the child or during an emergency evacuation

- regularly check and record the adrenaline auto-injection device expiry date. (The manufacturer will only guarantee the effectiveness of the adrenaline auto-injection device to the end of the nominated expiry month)
- provide information to the OSHC Service community about resources and support for managing allergies and anaphylaxis.

FAMILIES WILL:

- inform staff at the OSHC Service, either on enrolment or on diagnosis, of their child's allergies
- read and be familiar with the Service's *Anaphylaxis Management Policy and Medical Conditions Policy*
- provide staff with an ASCIA Action Plan giving written authorisation to use the auto-injection device in line with this action plan and signed by the registered medical practitioner
- develop an anaphylaxis risk minimisation plan in collaboration with the nominated supervisor and other Service staff
- develop a communication plan in collaboration with the nominated supervisor/responsible person and lead educators
- provide staff with a complete auto-injection device kit each day their child attends the OSHC Service
- comply with the OSHC Service's policy that a child who has been prescribed an adrenaline auto-injection device is not permitted to attend the Service or its programs without that device
- maintain a record of the adrenaline auto-injection device expiry date to ensure it is replaced prior to expiry
- provide an updated plan at least annually or whenever medication or management of their child's allergy or anaphylaxis changes
- assist staff by offering information and answering any questions regarding their child's allergies
- communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child
- notify the OSHC Service if their child has had a severe allergic reaction while not at the service- either at home or at another location
- comply with the OSHC Service's policy that a child who has been prescribed an adrenaline auto-injection device is not permitted to attend the OSHC Service or its programs without that device
- identify and liaise with the nominated staff member primarily caring for their child
- notify staff in writing via email or through the *Notification of Changed Medical Status* form of any changes to their child's allergy status and provide a new ASCIA Action Plan in accordance with these changes

- review the risk minimisation plan annually with the nominated supervisor/responsible person and other service staff.
- provide an updated plan at least annually or whenever medication or management of their child's allergy or anaphylaxis changes

IF A CHILD SUFFERS FROM AN ANAPHYLACTIC REACTION THE SERVICE AND STAFF WILL:

- Follow the child's ASCIA Action Plan - administer an adrenaline injector
- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Record the time of administration of adrenaline autoinjector
- If after 5 minutes there is no response, a second adrenaline autoinjector should be administered to the child if available
- Ensure the child experiencing anaphylaxis is lying down or sitting with legs out flat and is not upright
- Do not allow the child to stand or walk (even if they appear well)
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours

IN THE EVENT WHERE A CHILD WHO HAS **NOT** BEEN DIAGNOSED AS AT RISK OF ANAPHYLAXIS, BUT WHO APPEARS TO BE HAVING AN ANAPHYLACTIC REACTION:

- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Administer an adrenaline autoinjector
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours.

[Authorisation for emergency medical treatment for conditions such as anaphylaxis or asthma is not required and medication may be administered- as per Reg. 94]

REPORTING PROCEDURES

Any anaphylactic incident is considered a serious incident (Reg. 12).

- staff members involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record*, which will be countersigned by the Nominated Supervisor of the Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- if necessary, a copy of the completed form will be sent to the insurance company
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's individual record
- the nominated supervisor will inform the OSHC Service management about the incident
- the nominated supervisor or the approved provider will inform regulatory authority of the incident within 24 hours through the NQA IT System (as per regulations)
- staff will be debriefed after each anaphylaxis incident and the child's individual ASCIA Action Plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- staff will discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure
- a review of practices is conducted following an incident involving anaphylaxis at the Service, including an assessment of areas for improvement.

EDUCATING CHILDREN AND YOUNG PEOPLE ABOUT ALLERGIES AND ANAPHYLAXIS

'Allergy awareness' is regarded as an essential part of managing allergies in childcare services. Our Service will:

- talk to children about foods that are safe and unsafe for the anaphylactic child. They will use terms such as '*this food will make _____ sick*', '*this food is not good for _____', and '_____ is allergic to that food'.*
- help children understand the seriousness of allergies and the importance of knowing the signs and symptoms of allergic reactions (e.g., itchy, furry, or scratchy throat, itchy or puffy skin, hot, feeling funny)
- staff will talk about strategies to avoid exposure to unsafe foods, such as taking their own plate and utensils, having the first serve from commercially safe foods, effectively washing their hands before and after eating and not sharing food or drinks/drink bottles
- encourage empathy, acceptance and inclusion of the child with an allergy

Australasian Society of Clinical Immunology and Allergy (ASCIA) provide information on allergies. The ASCIA Action Plans for Anaphylaxis are device-specific and must be completed by a medical practitioner. There are three types of ASCIA Action Plans for Anaphylaxis and a First Aid Plan.

ASCIA Action Plan (RED) are for children or adults with medically confirmed allergies, who have been prescribed adrenaline autoinjectors (Plans are available for EpiPen® or Anapen®)

ASCIA Action Plan for Drug (Medication) Allergy (DARK GREEN) for children or adults with medically confirmed drug (medication) allergies, who have NOT been prescribed adrenaline injectors.

ASCIA Action Plan for Allergic Reactions (GREEN) is for children or adults with medically confirmed food or insect allergies who have not been prescribed adrenaline autoinjectors and

ASCIA First Aid Plan for Anaphylaxis (ORANGE)

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Anaphylaxis Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

ASTHMA MANAGEMENT POLICY

Asthma is a chronic health condition affecting approximately 15% of children. It is one of the most common reasons for childhood admission to hospital. Community education and correct asthma management will assist to minimise the impact of asthma. It is generally accepted that children under the age of six do not have the skills or ability to recognise and manage their own asthma effectively. Our Out of School Hours Care (OSHC) Service recognises the need to educate its staff and families about asthma and to implement responsible asthma management strategies.

NATIONAL QUALITY STANDARD (NQS)

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

2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
S. 172	Failure to display prescribed information
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Excursion/ Incursion Policy Enrolment Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Supervision Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including asthma management. We aim to provide a safe and healthy environment for all children enrolled at the Out of School Hours Care (OSHC) Service. We believe in providing children with asthma the ability to participate in the programmed learning activities and experiences ensuring an inclusive environment is upheld. We ensure all staff, educators and volunteers follow our *Asthma Management Policy* and procedures and children's medical management plans.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, student, volunteers and visitors of the OSHC Service.

DUTY OF CARE

Our OSHC Service has a legal responsibility to take reasonable steps to ensure the health needs of children enrolled in the service are met. This includes our responsibility to provide

c. a safe environment free from foreseeable harm and
d. adequate Supervision for children.

Staff members, including relief staff, need to be aware of children at the OSHC Service who suffer from allergies, including asthma and know enough about asthma reactions to ensure the safety and wellbeing of the children. Management will ensure all staff are aware of children's medical management plans and risk management plans. This policy supplements our *Medical Conditions Policy.*

BACKGROUND

Asthma is clinically defined as a chronic lung disease, which can be controlled but not cured. In clinical practice, asthma is defined by the presence of both excessive variation in lung function, i.e., variation in

expiratory airflow that is greater than that seen in healthy children ('variable airflow limitation'), and respiratory symptoms (e.g., wheeze, shortness of breath, cough, chest tightness) that vary over time and may be present or absent at any point in time (National Asthma Council Australia, 2015, p.4).

Asthma affects approximately one in 10 Australian children and adults. It is the most common reason for childhood admission to hospital. However, with correct asthma management people with asthma need not restrict their daily activities. Community education assists in generating a better understanding of asthma within the community and minimising its impact.

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

Asthma causes three main changes to the airways inside the lungs, and all of these can happen together:

- the thin layer of muscle within the wall of an airway can contract to make it tighter and narrower – reliever medicines work by relaxing these muscles in the airways
- the inside walls of the airways can become swollen, leaving less space inside – preventer medicines work by reducing the inflammation that causes the swelling
- mucus can block the inside of the airways – preventer medicines also reduce mucus.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. Our OSHC Service will ensure that there is at least one educator on duty at all times who has current approved emergency asthma management training in accordance with the Education and Care Services National Regulations.

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs. It is imperative that all educators and volunteers at our OSHC Service follow each individual child's medical management plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

THE APPROVED PROVIDER/MANAGEMENT AND NOMINATED SUPERVISOR WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- that a copy of this policy is provided and reviewed during each new staff member's induction process
- all staff, educators, students, visitors and volunteers have knowledge of and adhere to this policy and our Service's *Medical Conditions Policy*
- that as part of the enrolment process, **all** parents/guardians are asked whether their child has a medical condition and clearly document this information on the child's enrolment record
- if the answer is *yes*, the parents/guardians are required to provide a medical management plan and signed by a registered medical practitioner **prior** to their child's commencement at the Service [see section below- *In Services where a child is diagnosed with asthma]*
- parents/guardians are provided with a copy of the Service's *Medical Conditions Policy*, *Asthma Management Policy* and *Administration of Medication Policy* upon enrolment of their child
- parents/guardians are informed the Service may administer emergency asthma medication or treatment if required, with advice from emergency services. Parents are advised of this at time of enrolment and orientation to the Service.
- to always have Salbutamol (Ventolin or Zempreon) onsite and accessible for an emergency, regardless of whether or not they have a child enrolled with asthma.
- at least one educator, staff member or nominated supervisor is in attendance and immediately available at all times children are being cared for by the service who:
    - holds a current ACECQA approved first aid qualification
    - undertaken current ACECQA approved emergency asthma management and
    - current ACECQA approved emergency anaphylaxis management training
- all staff and educators have completed ACECQA approved first aid training at least every 3 years and cardiopulmonary resuscitation (CPR) at least every 12 months.
- staff training is kept up to date in each staff member's record
- that all staff members are aware of
    - any child identified with asthma enrolled in the service
    - the child's individual medical management plan
    - symptoms and recommended first aid procedure for asthma and
    - the location of the child's asthma medication
- all staff members are able to identify and minimise asthma triggers for children attending the OSHC Service where possible
- risk assessments are developed prior to any excursion or incursion consistent with Reg. 101

- upon employment at the OSHC Service all staff will read and be aware of all medical condition policies and procedures, maintaining awareness of asthma management strategies
- children with asthma are not discriminated against in any way
- children with asthma can participate in all activities safely and to their full potential
- *Asthma Australia's Asthma First Aid* for posters are displayed in key locations at the OSHC Service
- that medication is administered in accordance with the *Administration of Medication Policy*
- that when medication has been administered to a child in an asthma emergency, emergency services (in the first instance) and the parent/guardian of the child are notified as soon as is practicable (Reg.94)
- that when medication has been administered to a child in an asthma emergency, the parent/guardian of the child and emergency services are notified as soon as is practicable (Reg.94)
- communication between management, educators, staff and parents/guardians regarding the Service's *Asthma Management Policy* and strategies are reviewed and discussed regularly to ensure compliance and best practice
- that updated information, resources, and support for managing asthma is regularly provided for families
- that in the event of a serious incident, such as a severe asthma attack, notification to the regulatory authority is made within 24 hours of the incident
- a review of practices is conducted following an incident at the Service, including an assessment of areas for improvement.

IN OSHC SERVICES WHERE A CHILD DIAGNOSED WITH ASTHMA IS ENROLLED, THE NOMINATED SUPERVISOR WILL:

- meet with the parents/guardians to begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until a medical management plan developed in consultation with parents and the child's medical practitioner is provided
- ensure the medical management plan includes:
    - child's name, date of birth
    - a recent photo of the child
    - specific details of the child's diagnosed medical condition
    - supporting documentation (if required)
    - triggers for asthma (signs and symptoms)
    - list of usual asthma medicines including doses

  - response for an asthma emergency including medication to be administered
  - contact details and signature of the registered medical practitioner
  - date the plan should be reviewed
- develop and document a risk minimisation plan in collaboration with parents/guardian
- ensure the risk minimisation plan is specific to our Service environment, activities, incursions and excursions, and the individual child and is reviewed annually
- discuss with the requirements for completing an *Administration of Medication Record* for their child
- discuss authorisation for children to self-administer asthma medication if applicable. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the OSHC Service, parents/guardian and the child's medical management team
- request parental authorisation to display a child's medical management plan in key locations at the Service, where educators and staff are able to view these easily whilst ensuring the privacy, safety and wellbeing of the child (for example, in the child's room, the staff room, kitchen, and / or near the medication cabinet)
- keep a copy of the child's medical management plan and risk minimisation plan in the child's enrolment record
- ensure families provide reliever medication whilst their child attends the OSHC Service
- ensure that all staff in the Service know the location of asthma medication and the child's medical management plan or Action Plan
- collaborate with parents/guardians to develop and implement a communication plan and communicate any concerns with parents/guardians regarding the management of their child's asthma whilst at the OSHC Service
- ensure that a staff member accompanying children outside the OSHC Service carries a copy of each child's individual asthma medical management action plan and required medication e.g., on excursions that this child attends, transporting the child, or during an emergency evacuation
- ensure an *Administration of Medication Record* is kept for each child to whom medication is to be administered by the Service
- ensure families update their child's asthma medical management plan regularly or whenever a change to the child's management of asthma occurs
- regularly check the expiry date of reliever medication and ensure that spacers and facemasks are cleaned after every use. Expiry dates are checked weekly by centre staff.
- discussions occur regarding authorisation for children to self-administer asthma medication if applicable. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the OSHC Service, parents/guardian and the child's medical

management team.

EDUCATORS WILL:

- read and comply with the *Asthma Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*
- maintain qualifications for approved emergency asthma management training.
- know which child/ren are diagnosed with asthma, and the location of their medical management plan and risk management plans and any prescribed medications
- be able to identify and, where possible, minimise asthma triggers as outlined in the child's medical management plan and risk minimisation plan
- ensure the first aid kit, children's personal asthma medication and medical management plans are taken on excursions, during transportation of the child or other offsite events, including emergency evacuations and drills
- administer prescribed asthma medication in accordance with the child's medical management plan and the OSHC Service's *Administration of Medication Policy*
- ensure that the asthma medication is:
    - stored in a location that is known to all staff, including relief staff
    - NOT locked in a cupboard
    - easily accessible to adults but inaccessible to children
    - stored in a cool dark place at room temperature
    - NOT refrigerated
    - contains a copy of the child's medical management plan or Action Plan
- regularly check and record the asthma medication expiry date. This is done weekly by centre staff.
- ensure any asthma attacks are clearly documented in the *Incident, Injury, Trauma or Illness Record* and advise parents as a matter of priority, when practicable
- consult with the parents/guardians of children with asthma in relation to the health and safety of their child, and the supervised management of the child's asthma
- communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- ensure that children with asthma are not discriminated against in any way
- ensure that children with asthma can participate in all activities safely and to their full potential, ensuring an inclusive program.

FAMILIES WILL:

- inform staff, either on enrolment or on initial diagnosis, that their child has asthma
- read and be familiar with the Service's *Asthma Management Policy and Medical Conditions Policy*
- provide a copy of their child's medical management plan to the OSHC Service ensuring it has been prepared in consultation with, and signed by, a registered medical practitioner
- provide written authorisation to the OSHC Service for their child to self-administer medication (if applicable)
- develop a risk minimisation plan in collaboration with the nominated supervisor/responsible person and other service staff
- ensure they communicate with the nominated supervisor and lead educators about any changes to the child's asthma management plan or recent asthma episodes
- ensure all details on their child's enrolment form and medication record are completed prior to commencement at the OSHC Service
- review the risk minimisation plan annually with the nominated supervisor and other service staff
- provide an adequate supply of appropriate asthma medication and equipment for their child
- provide an updated plan at least annually or whenever medication or management of their child's asthma changes
- comply with the Service's policy that a child who has been prescribed asthma medication is not permitted to attend the Service or its programs without that medication
- notify the OSHC Service in writing via email of any changes to their child's medical condition status and provide a new medical management plan in accordance with these changes
- communicate regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma
- encourage their child to learn about their asthma, and to communicate with Service staff if they are unwell or experiencing asthma symptoms.

IF A CHILD SUFFERS FROM AN ASTHMA EMERGENCY STAFF WILL:

- Follow the child's medical management plan (If the child has not been diagnosed with asthma; educators will follow the steps below and follow emergency service advice)
- If the child does not respond to steps within the medical management plan call an ambulance immediately by dialling 000
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable

- Notify the regulatory authority within 24 hours.

[Authorisation for emergency medical treatment for conditions such as anaphylaxis or asthma is not required and medication may be administered- as per Reg. 94]

REPORTING PROCEDURES

Any incident involving serious illness of a child while the child is being educated and cared for by the Service for which the child attended, or ought reasonably to have attended a hospital e.g., severe asthma attack is considered a serious incident (Reg. 12).

- staff members involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the Nominated Supervisor of the Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- place a copy of the record in the child's file
- the nominated supervisor will inform the Service management about the incident
- the nominated supervisor or the approved provider will inform regulatory authority of the incident within 24 hours through the NQA IT System (as per regulations)
- staff will be debriefed after each serious incident and the child's individual medical management plan/action plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- staff will discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Asthma Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

DIABETES MANAGEMENT POLICY

Diabetes in children can be a diagnosis that has a significant impact on families and children. It is imperative that educators and staff within the Out of School Hours Care (OSHC) Service understand the responsibilities of diabetes management to reduce the risk of emergency situations and long-term complications. Most younger children will require additional support from the service and educators to manage and monitor their diabetes whilst in attendance however, older children may be working towards independence and learning to self-monitor blood glucose and insulin injecting.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
S. 172	Failure to display prescribed information
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed

175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Administration of Medication Policy Excursion/ Incursion Policy Enrolment Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Nutrition Food Safety Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Supervision Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including diabetes. Our Out of School Hours Care (OSHC) Service is committed to providing a safe and healthy environment that is inclusive for all children, staff, volunteers, visitors, and family members. The aim of this policy is to minimise the risk of a diabetic medical emergency occurring for any child whilst at our Service by supporting young people with diabetes, working in partnership with families and health professionals, and following the child's medical management plan.

SCOPE

This policy applies to children, families, staff, management, the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

DUTY OF CARE

Our OSHC Service has a legal responsibility to take reasonable steps to ensure that the health needs of all children enrolled in the service are met. This includes our responsibility to provide

e. a safe environment and
f. adequate supervision at all times.

Our OSHC Service will ensure all staff members, including relief staff, have adequate training and knowledge about diabetes and know what to do in an emergency to ensure the health and safety of children (especially regarding hypoglycaemia and safety in sport). Management will ensure all staff are aware of children's medical management plan and risk management plans. This policy supplements our *Medical Conditions Policy.*

DESCRIPTION

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

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

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs including having families provide written authorisation to display the child's medical management plan in prominent positions within OSHC Service.

A copy of our *Medical Conditions Policy* and *Diabetes Management Policy* will be provided to all educators, volunteers, and families of the OSHC Service. It is important that communication is open between families and educators so that management of diabetes is effective.
Children diagnosed with diabetes will not be enrolled into the OSHC Service until the child's medical management plan is completed and signed by their medical practitioner or diabetes team and the relevant staff members have been trained on how to manage the individual child's diabetes. A risk minimisation and communication plan must be developed with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

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

THE APPROVED PROVIDER, NOMINATED SUPERVISOR / RESPONSIBLE PERSON WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met

- all staff, educators, students, visitors and volunteers have knowledge of and adhere to this policy and our Service's *Medical Conditions Policy*
- that as part of the enrolment process, **all** parents/guardians are asked whether their child has a medical condition and clearly document this information on the child's enrolment record
- if the answer is *yes*, the parents/guardians are required to provide a medical management plan completed by the child's diabetes medical specialist team **prior** to their child's commencement at the Service
- at least one educator, staff member or nominated supervisor is in attendance and immediately available at all times children are being cared for by the service who:
    - holds a current ACECQA approved first aid qualification
    - undertaken current ACECQA approved emergency asthma management and
    - current ACECQA approved emergency anaphylaxis management training
- all staff and educators have completed ACECQA approved first aid training at least every 3 years and cardiopulmonary resuscitation (CPR) at least every 12 months
- a risk minimisation plan is developed in collaboration with parents/guardian and cover the child's known triggers and where relevant other common triggers which may lead to a diabetic emergency
- the risk minimisation plan is specific to our OSHC Service environment and the individual child
- keep a copy of the child's medical management plan and risk minimisation plan in the enrolment record
- ensure the medical management plan includes all how to manage the child's diabetes on a day-to-day basis as well as the emergency management of the child's medical condition. The plan should include:
    - blood glucose testing- BG meter
    - insulin administration
    - food, carbohydrate counting
    - how to store insulin correctly
    - how the insulin is delivered to the child- as an injection or via an insulin pump/ Continuous Glucose Monitoring CGM
    - oral medicine the child may be prescribed
    - managing diabetes during physical activities and excursions
    - a recent photograph of the child
- parental authorisation is provided to display a child's medical management plan in key locations at the OSHC Service, where educators and staff are able to view these easily whilst ensuring the privacy,

safety and wellbeing of the child (for example, in the child's room, the staff room, kitchen, and / or near the medication cabinet)

- a communication plan is developed in collaboration with staff and parents/guardians encouraging ongoing communication regarding the management of the child's medical condition, the status of the child's medical condition, and this policy and its implementation within the Service prior to the child starting at the OSHC Service
- a copy of this policy is provided and reviewed during each new staff member's induction process
- there is a staff member who is appropriately trained to perform finger-prick blood glucose or urinalysis monitoring and is aware of the action to be taken if these are abnormal whenever the child attends the Service
- consideration is given as to how and where insulin is stored and the safety of sharps disposal
- the family supplies all necessary glucose monitoring and management equipment, and any prescribed medications prior to the child's enrolment
- discussions occur regarding authorisation for children to carry diabetes equipment with them and the self-administration of Blood Glucose testing and insulin injecting. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the OSHC Service, parents/guardian, and the child's medical management team.
- all staff members are trained to identify children displaying the symptoms of a diabetic emergency and are aware of the location of the child's medical management plan, required insulin/food and risk minimisation plan
- risk assessments are developed prior to any excursion or incursion consistent with Reg. 101
- a staff member accompanying children outside the Service to attend excursions, or any other event, carries the appropriate monitoring equipment; any prescribed medication and a copy of the medical management plan for children diagnosed with diabetes
- the programs delivered at the OSHC Service are inclusive of children diagnosed with diabetes and that children with diabetes can participate in activities safely and to their full potential
- updated information, resources and support is regularly given to families for managing childhood diabetes
- meals, snacks and drinks that are appropriate for the child and are in accordance with the child's medical management plan are available at the Service at all times
- eating times are flexible and children are provided with enough time to eat
- Diabetes Australia are contacted for further information to assist educators to gain and maintain a comprehensive understanding about managing and treating diabetes

- applications for additional funding opportunities are made if required to support the child and educators.
- that they notify the regulatory authority of any serious incident of a child while being educated and cared for at the service within 24 hours.

EDUCATORS WILL:

- read and comply with the *Diabetes Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*
- know which child/ren are diagnosed with diabetes, and the location of their monitoring equipment, medical management and risk management plans and any prescribed medications
- perform finger-prick blood glucose or urinalysis monitoring as required and will act by following the child's diabetes medical management plan if these are abnormal [or educator/staff member trained to perform finger-prick blood glucose or urinalysis monitoring]
- communicate with parents/guardians regarding the management of their child's medical condition
- ensure that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the OSHC Service
- follow the strategies developed for the management of diabetes at the OSHC Service
- ensure a copy of the child's diabetes medical management plan is visible and known to staff within the Service
- take all personal medical management/action plans, monitoring equipment, medication records, and any prescribed medication on excursions and other events outside the Service
- recognise the symptoms of a diabetic emergency and treat appropriately by following the medical management plan
- ensure a suitably trained and qualified educator (the centre first aid officer on duty) will administer prescribed medication if needed according to the medical management/action plan and in accordance with the OSHC Service's *Administration of Medication Policy*
- record any medication in the *Administration of Medication Record*
- identify and where possible minimise possible triggers as outlined in the child's medical management plan and risk minimisation plan
- increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties and family days, as well as during periods of high-energy activities
- ensure appropriate supplies of insulin administration equipment, carbohydrate and hypo food are taken on excursions, including back-up supplies in the event of delays

- maintain a record of the expiry date of the prescribed medication relating to the medical condition to ensure it is replaced prior to expiry
- ensure the location is known of glucose foods or sweetened drinks to treat hypoglycaemia (low blood glucose), e.g., glucose tablets, glucose jellybeans, etc.

FAMILIES WILL:

- provide details of the child's health condition, treatment, medications, and known triggers during the enrolment process
- provide a medical management plan following enrolment and prior to the child starting at the Service. The plan must be completed by their child's diabetes team (paediatrician or endocrinologist, medical practitioner and diabetes educator).
- provide written authorisation for their child over preschool age to self-administer medication (if applicable)
- develop a risk minimisation plan in collaboration with the nominated supervisor/responsible person and other service staff
- communicate with the nominated supervisor/responsible person and lead educators
- ensure the appropriate monitoring equipment needed according to the diabetes medical management plan is provided to the OSHC Service
- ensure an adequate supply of emergency insulin for the child is provided at all times according to the medical management plan
- notify the OSHC Service in writing via email of any changes to their child's medical condition including the provision of a new diabetes medical management plan to reflect these changes as needed
- communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child that may impact on the management of their diabetes
- review the risk minimisation plan annually with the nominated supervisor/responsible person and other service staff

DIABETIC EMERGENCY

A diabetic emergency may result from too much or too little insulin in the blood. There are two types of diabetic emergency.

a) very low blood sugar (hypoglycaemia, usually due to excessive insulin), and

b) very high blood sugar (hyperglycaemia, due to insufficient insulin).

The more common emergency is hypoglycaemia. This can result from:

- too much insulin or other medication
- not having eaten enough carbohydrate or other correct food
- a meal or snack has been delayed or missed
- unaccustomed or unplanned physical exercise or
- the young person has been more stressed or excited than usual

SIGNS and SYMPTOMS

HYPOGLYCAEMIA (HYPO)

If a child is wearing a CGM device, it will sound an alert when they are below their target range. Symptoms can very between each young person.

If caused by low blood sugar, the child may:

- feel dizzy, weak, tremble and feel hungry
- look pale and have a rapid pulse (palpitations)
- sweat profusely
- feel numb around lips and fingers
- change in behaviour- angry, quiet, confused, crying
- become unconsciousness or have a seizure

HYPERGLYCAEMIA (HYPER)

If caused by high blood sugar, the child may:

- feel excessively thirsty
- have a frequent need to urinate
- feeling tired or lethargic
- feel sick
- be irritable
- complain of blurred vision
- lack concentration
- have hot dry skin, a rapid pulse, drowsiness
- have the smell of acetone (like nail polish remover) on the breath
- become unconsciousness

If a child suffers from a diabetic emergency the Service and staff will:

- Always provide adult supervision
- Follow the child's medical management plan
- If the child does not respond to steps within the medical management plan, immediately dial 000 for an ambulance
- Continue first aid measures and follow instructions provided by emergency services
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the regulatory authority within 24 hours.

REPORTING PROCEDURES

Any incident involving serious illness of a child which requires urgent medical attention or hospitalisation is regarded as a serious incident. The following is required:

- staff members involved in the situation are to complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the nominated supervisor of the OSHC Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- if necessary, a copy of the completed form will be sent to the insurance company
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's file
- the nominated supervisor will inform the Service management about the incident
- the nominated supervisor or the approved provider will inform regulatory authority of the incident within 24 hours as per regulations
- staff will be debriefed after each incident and the child's individual medical management plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Diabetes Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

EPILEPSY MANAGEMENT POLICY

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

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
S.172	Failure to display prescribed information
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents

92	Medication record
93	Administration of medication
95	Procedure for administration of medication
96	Self-administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Administration of Medication Policy Excursion/ Incursion Policy Enrolment Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Nutrition Food Safety Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Supervision Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions. Our OSHC Service is committed to providing a safe and healthy environment that is inclusive for all children, staff, students, volunteers, visitors and family members who have been diagnosed with Epilepsy. The aim of this policy is to ensure that educators, staff, and families are aware of their obligations in supporting children with epilepsy and work in partnership with families and health professionals to manage seizures by following the child's medical management plan.

SCOPE

This policy applies to children, families, staff, management, the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

DUTY OF CARE

Our OSHC Service has a legal responsibility to take reasonable steps to ensure that the health needs of all children enrolled in the service are met. This includes our responsibility to provide

g. a safe environment free from foreseeable harm and
h. adequate supervision for all children at all times.

Our OSHC Service will ensure that all staff members, including relief staff, have adequate knowledge about epilepsy and the management of seizures to ensure the safety and wellbeing of the children. Management will ensure all staff are aware of children's medical management plan and risk management plans. This policy supplements our *Medical Conditions Policy.*

BACKGROUND

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

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

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs including having families provide written authorisation to display the child's medical management plan in prominent positions within the Service.

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

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

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

THE APPROVED PROVIDER/MANAGEMENT AND NOMINATED SUPERVISOR WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- all staff, educators, students, visitors and volunteers have knowledge of and adhere to this policy and the Service's *Medical Condition Policy*
- that as part of the enrolment process, **all** parents/guardians are asked whether their child has been diagnosed with a medical condition and clearly document this information on the child's enrolment record
- if the answer is *yes*, the family will meet with the Service and its educators to begin the communication process for managing the child's medical condition in adherence with the registered medical practitioner or health professional's instructions
- at least one educator, staff member or nominated supervisor is in attendance and immediately available at all times children are being cared for by the service who:
    - holds a current ACECQA approved first aid qualification
    - undertaken current ACECQA approved emergency asthma management and
    - current ACECQA approved emergency anaphylaxis management training
- all staff and educators have completed ACECQA approved first aid training at least every 3 years and cardiopulmonary resuscitation (CPR) at least every 12 months
- the medical management plan will describe the prescribed medication for that child and the circumstances in which the medication should be administered
- parental authorisation is provided to display a child's medical management plan in key locations at the Service, where educators and staff are able to view these easily whilst ensuring the privacy, safety and wellbeing of the child (for example, in the child's room, the staff room, kitchen, and / or near the medication cabinet)
- a risk minimisation plan is developed in consultation with the parents of a child diagnosed with epilepsy outlining procedures to minimise the incidence and effect of a child's epilepsy. The plan will cover the child's known triggers and where relevant other common triggers which may cause an epileptic seizure.
- that the risk minimisation plan is specific to our Service environment and the individual child

- they encourage ongoing communication between parents/guardians and staff regarding the current status of the child's medical condition, this policy, and its implementation
- that no child who has been prescribed epilepsy medication attends the OSHC Service without their medication
- a copy of this policy is provided and reviewed during each new staff member's induction process
- all staff attend regular training on the management of epilepsy and, where appropriate, emergency management of seizures using emergency epileptic medication, when a child with epilepsy is enrolled at the OSHC Service
- all staff members are trained to identify children displaying the symptoms of a seizure and are aware of the child's medical management plan and required medication (if applicable)
- risk assessments are developed prior to any excursion or incursion consistent with Reg. 101
- that a staff member accompanying children to or from school, or outside the Service on excursions or to events carries the prescribed medication and a copy of the medical management plan for children diagnosed with epilepsy
- that they notify the regulatory authority of any serious incident of a child while being educated and cared at the service within 24 hours.

EDUCATORS WILL:

- read and comply with the *Epilepsy Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*
- ensure a copy of the child's medical management plan is visible and known to staff and volunteers in the OSHC Service
- recognise the symptoms of a seizure and treat appropriately and in accordance with the child's medical management plan in the event of a seizure
- record all epileptic seizures according to the medical management plan
- take all personal medical management plans, seizure records, medication records, and any prescribed medication when delivering or collecting the child from school, or on excursions and other events outside the Service
- ensure a suitably trained and qualified educator will administer prescribed medication when needed according to the in accordance with the Service's *Administration of Medication Policy*.
- identify and where possible, minimise possible seizure triggers as outlined in the child's medical management plan and risk minimisation plan
- communicate with the parents/guardians of children with epilepsy in relation to the health and safety of their child, and the supervised management of the child's epilepsy

- ensure that children with epilepsy can participate in all activities safely and to their full potential
- increase supervision of a child diagnosed with epilepsy on special occasions such as excursions, incursions, parties and family days
- maintain a record of the expiry date of the prescribed epilepsy management medication so as to ensure it is replaced prior to expiry. This is done weekly by centre staff.

FAMILIES WILL:

- provide information upon enrolment or on diagnosis, of their child's medical condition-epilepsy.
- provide staff with a medical management plan developed and signed by a registered medical practitioner for implementation within the OSHC Service
- develop a risk minimisation plan in collaboration with the nominated supervisor and service staff
- provide permission for their child to self-administer medication if required as stated in their child's medical management plan signed by their medical practitioner or neurologist
- communicate with the nominated supervisor and service staff
- provide staff with prescribed medications each day their child attends care at the OSHC Service
- maintain a record of the expiry date of medication and ensure it is replaced prior to expiry
- notify staff in writing via email of any changes to their child's medical condition including the provision of a new medical management plan to reflect these changes as needed
- communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child
- review the risk minimisation plan annually with the nominated supervisor and other service staff

IF A CHILD (KNOWN TO HAVE AN EPILEPTIC CONDITION) SUFFERS FROM AN EPILEPTIC EMERGENCY, STAFF WILL:

- Follow the child's medical management plan
- Protect the child from injury- remove any hazards that the child could come into contact with
- Not restrain the child or put anything in their mouth
- Gently roll them on to the side in the recovery position as soon as possible (not required if, for example, child is safe in a wheelchair safe and airway is clear)
- Monitor the airway
- Call an ambulance immediately by dialling 000 if:
    - a seizure continues for more than three minutes
    - another seizure quickly follows the first
    - it is the child's first seizure
    - the child is having more seizures than is usual for them

  - certain medication has been administered
  - they suspect breathing difficulty or injury
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- If the incident presented imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident through the NQA IT System (as per regulations)

THE ABOVE PROCEDURE SHOULD BE FOLLOWED IF A CHILD WHO IS NOT DIAGNOSED AS EPILEPTIC EXPERIENCES A SEIZURE WHILST ATTENDING THE OSHC SERVICE.

DEFINITIONS

FOCAL SEIZURES

Focal seizures without impaired consciousness:

Formerly called simple partial seizures, these arise in parts of the brain not responsible for maintaining consciousness, typically the movement or sensory areas.

Consciousness is NOT impaired, and the effects of the seizure relate to the part of the brain involved. If the site of origin is the motor area of the brain, bodily movements may be abnormal (e.g., limp, stiff, jerking). If sensory areas of the brain are involved the person may report experiences such as tingling or numbness, changes to what they see, hear or smell, or very unusual feelings that may be hard to describe. Young children might have difficulty describing such sensations or may be frightened by these.

Focal Seizures with impaired consciousness:

Often the person's actions are clumsy, and they will not respond normally to questions and commands. Behaviour may be confused, and they may exhibit automatic movements and behaviours e.g., picking at clothing, picking up objects, chewing and swallowing, trying to stand or run, appearing afraid and struggling with restraint. Colour change, wetting and vomiting can occur in complex partial seizures. Following the seizure, the person may remain confused for a prolonged period and may not be able to speak, see, or hear if these parts of the brain were involved. The person has no memory of what occurred during the complex partial phase of the seizure and often needs to sleep.

Focal Seizures becoming bilaterally convulsive:

Focal seizures may progress due to spread of epileptic activity over one or both sides of the brain. Formerly called secondarily generalised seizures, bilaterally convulsive seizures look like generalised tonic-clonic seizures.

GENERALISED SEIZURES

Tonic-clonic seizures: produce sudden loss of consciousness, with the person commonly falling to the ground, followed by stiffening (tonic) and then rhythmic jerking (clonic) of the muscles. Shallow or 'jerky' breathing, bluish tinge of the skin and lips, drooling of saliva and often loss of bladder or bowel control generally occur.

The seizures usually last one to three minutes and normal breathing and consciousness then returns. The person is tired following the seizure and may be confused. If the seizures last more than five minutes an ambulance should immediately be called.

Absence seizures: (previously called petit mal seizures) produce a brief cessation of activity and loss of consciousness, usually lasting less than 10 seconds. Often the momentary blank stare is accompanied by subtle eye blinking and mouthing or chewing movements. Awareness returns quickly and the person continues with the previous activity. Falling and jerking do not occur in typical absences.

Myoclonic seizures: are sudden and brief muscle contractions usually only lasting a second or two, that may occur singly, repeatedly or continuously. They may involve the whole body in a massive jerk or spasm or may only involve individual limbs or muscle groups. If they involve the arms, they may cause the person to spill what they were holding. If they involve the legs or body the person may fall.

Tonic seizures: are characterised by generalised muscle stiffening, lasting 1-10 seconds. Associated features include brief cessation of breathing, colour change and drooling.

Tonic seizures often occur during sleep. When tonic seizures occur suddenly with the child awake, they may fall violently to the ground and injure themselves. Fortunately, tonic seizures are rare and usually only occur in severe forms of epilepsy.

Atonic seizures: produce a sudden loss of muscle tone that, if brief, may only involve the head dropping forward ('head nods'), but may cause sudden collapse and falling ('drop attacks').

Source: Epilepsy Australia (2019).

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Epilepsy Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	21.8.2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

Fees

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined, and understood and support effective decision making and operation of the service

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
Child Care Subsidy Minister's Rules 2017	A New Tax System (Family Assistance) Act 1999
Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook in https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Dealing with Complaints Policy Delivery of Children to, and Collection from and Education and Care Service Premises	Governance Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Enrolment Policy

POLICY STATEMENT:

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

PROCEDURES:

(a) Bond

Hamilton South does not charge a bond. We do, however, charge an annual registration and in-service day fee as detailed below.

(b) Fee Schedule

Fee schedules are reviewed at the end of the financial year, in line with the budget.

Morning fee:

$23 per child per session (Permanent)

$25 per child per session (Casual)

Afternoon fee:

$33 per child per session (Permanent)

$35 per child per session (Casual)

Fee increases may occur throughout the year.

(c) Membership and Registration

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

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

A registration fee of $100 per family is payable on an annual basis. Plus an additional $10 for the annual in-service day fee.

(d) Parents Cancelling Permanent or Casual Bookings

The family must give two weeks' notice if they wish to cancel a child's enrolment or permanent bookings; failure to do so will mean that all associated fees will still need to be paid. 48 hours notice is required to cancel a casual booking; failure to do so will mean that all associated fees will still need to be paid.

(e) Child Care Subsidy

Child Care subsidy (CCS) is the payment made by the Government to assist families with the cost of child care. It is paid directly to the service and passed on to the families as a fee reduction. Families are required to make a co-contribution to their child care fees and pay the service the difference between the fee charged and the subsidy amount, known as the Gap Fee.

The service is not directly involved in the calculation of a family's entitlements this is a matter between the family and Centrelink.

The family is responsible for ensuring that Centrelink has processed their information and they have logged on through MyGov to confirm their enrolment at the service.

Families should ensure they provide true and complete information to Centrelink for the purpose of claiming Child Care Subsidy. This is a legal requirement of families, and the provision of incorrect information may result in families incurring debts that need to be recovered at a later date by Centrelink and/or the service.

In the event of a dispute between Centrelink and the family or the failure of Centrelink to make a payment of subsidy to the family, full fees are payable until such time as the subsidy is reinstated.

(f) Bookings and Cancellations

- Each family is expected to make bookings in advance for the care sessions required. Bookings will only be accepted when the families have completed the service's Enrolment Form in full. Enrolment forms will not be processed until they are completed in full.

- Families wishing to cancel their child's place at the service are required to provide two weeks written notice to the Nominated Supervisor. The centre will then apply the two weeks cancellation notice period fees.

(g) Absences

- Fees are payable for family holidays (longer than 10 business days), sick days and block cancellations for, as example, sporting commitments if those days fall on a day that a child is

booked into the service. The centre will provide families with up to 10 days per year to use for holidays without being charged their usual fee.

- The service will provide families with information about approved and allowable absences and will adhere to the Child Care Subsidy (CCS) in relation to absences.
- Families may use the Home app to mark their child as absent.

(h) Service closure

- No fee is charged while the service is closed over the Christmas/New Year period, school holidays and public holidays. An annual fee of $10 is charged per family to cover school in-service days.

(i) Payment of Fees

- Fees must be paid once invoiced, within the stated due date. Families will be provided with a statement of fees charged by the service and will be provided to all families (Regulation 168).
- Failure to pay unpaid fees may result in debt recovery action being taken and discontinuation of care for the child unless the family has initiated a repayment schedule for the unpaid fees with the Nominated Supervisor.
- Fees will still be payable if you choose or elect to drop or cancel some of your permanent bookings due to your own child's outside commitments. For example, if you have permanent bookings on a particular afternoon and your child is playing sport and you would like drop a block of dates but still keep your spot for when the sporting commitment ends then you will still need to pay for the days your child is absent during that block period.
- You may elect to have your permanent bookings based on fortnightly attendance. If you choose to do this then you will be required to pay the weeks that you don't attend the centre. That is, if your child has permanent bookings and they only attend fortnightly then you will still be charged for the weeks your child does not attend.
- If you choose to drop a block of days, weeks or terms due to your child's outside commitments then these days will be marked as absence days and these absence days will contribute towards your 42 day total. Absence days are refreshed on 1 July every year.

(j) Debt recovery

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

Where a family owes any overdue fees to the service, the child's place may be suspended until all outstanding monies are paid, or both parties agree to a payment plan.

If a payment plan isn't agreed to by the party owing the fees within 7 days of the fees being due, then the child's place at the centre will be suspended and any outstanding fees immediately referred to a debt collection agency. The suspension will last until the fees are paid in full.

Fees will still be payable while the child is suspended from the centre.

If the party owing the fees to the centre doesn't adhere to the payment plan that was agreed to by both parties then the child's place at the centre will be immediately suspended and the remaining outstanding fees will be referred to a debt collection agency.

Fees will still be payable while the child is suspended from the centre.

If a family is no longer enrolled at the centre and still owes fees then they will be immediately referred to a debt collection agency.

(k) Late Collection Fee

The service operates from 7am to 9am and 2.55pm to 6pm. The Educators are unable to accept children in the service outside of these hours. Should children be present after the closing time, a late fee of $20 per 15 minutes or any part thereof will apply.

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

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

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

(l) Methods of Payment

Fees can be paid by:

1. Direct Transfer (ONLY) – from your bank account or credit card into the service's bank account. Details of the service's bank account are included in the Parent Handbook.

The service does not accept any other form of payment.

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

(m) Confidentiality

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

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

(n) Increase of Fees

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

(o) Acknowledgement of Responsibility to Pay Fees

Families are required to read and sign section 9, Payment of Fees, Terms and Conditions and Section 10, Disclaimer/Informed Consent of the services Enrolment Form.

(p) Payment of a Non-Contact Fee

Families who do not contact the centre prior to the booked session starting to advise the centre that their child will not be attending will be charged a $20 no contact fee.

(q) Statements

Statements will be issued each Monday via email.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	25/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 20025/1		

Emergency and Evacuation

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 174(2)(a)	Serious incident - Any emergency for which emergency services attended
S. 174(2)(c)	Any incident that requires the approved provider to close, or reduce the number of children attending the service for a period
S.174(2)(c)	Any circumstance at the service that poses a risk to the health, safety or wellbeing of a child attending the service
4	Definitions "multi-storey building" and "storey"
12(d)	Meaning of a serious incident- any emergency for which emergency services attended
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
136	First aid qualifications
168	Education and Care Services must have policies and procedures
170	Policies and procedures are to be followed
171	Policies and procedures to be kept available
175	Prescribed information to be notified to regulatory authority

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of First Aid Policy Bush Fire Policy Child Safe Environment Policy Delivery of Children to, and collection from Education and Care Service Premises Enrolment Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Record Keeping and Retention Policy

POLICY STATEMENT:

Hamilton South Before and After School Care Centre will provide an environment that ensures the safety and wellbeing of the children at all times ("*My Time, Our Place V2"*1.1, 3.1). All children and educators will be aware of, and practised in emergency and evacuation procedures. In the event of an emergency, natural disaster or threats of violence these procedures will be immediately implemented. In implementing drills of emergency procedures with children, educators will encourage children to discuss possible scenarios where emergency procedures may be required and support children to come up with solutions and ideas for improving on the procedures or discussing ways to avert emergency situations (*"My Time, Our Place V2"* 4.2).

Emergency, in relation to an education and care service, means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the education and care service. For example, Flood, fire or a situation that requires the education and care service premises to be locked down.

PROCEDURE:

- A risk assessment will be conducted by educators and management annually to review and refine emergency procedures and to assess potential emergencies relevant to the service in accordance with National Regulations.
- Emergency evacuation procedures and floor plans will be clearly displayed in a prominent position near the main entrance and exit of each room used by the service.
- All educators, including relief Educators, will be informed of the procedure and their specific duties identified in their orientation to the service. Educators will make arrangements as to duties undertaken in the absence of other educators.
- Educators will discuss the emergency procedures with the children and the reasons for practising the drills prior to each emergency drill being undertaken. Following each drill,

children should be reassured and their suggestions and comments welcomed for how the drill might be improved to provide them with a sense of control and understanding of the process.

- Children and educators will practice the emergency procedure at least twice a term, in all types of care, before school, after school and at the beginning of vacation care.
- All emergency drills will be recorded with date, time and length of time it took to leave building. Additional comments on recommendations for improvements can also be included in the record.
- Drills will be conducted more regularly when there are new children.
- Families will be informed of the procedure and assembly points in the parent handbook.
- No child or educator is to go to their bags to collect personal items during an emergency evacuation. This would lead to confusion and delays.
- The service will maintain a fire blanket and have them checked regularly as per the manufacturer's instructions.
- Fire extinguishers will be installed and maintained in accordance with Australian Standard 2444. Educators will be instructed in their operation.
- Educators will only attempt to extinguish fires if the fire is small, there is no threat to their personal safety and they feel confident to operate the extinguisher and all the children have been evacuated from the room.
- Educators should be aware of bush fire danger and if relevant have appropriate training on the necessary procedures.
- The Local Fire Authority should be contacted for advice and training on fore safety and this plan included in your procedure.
- Any serious incidents will be reported to the Regulatory Authority within 24 hours or as soon as possible.
- The service must ensure that they have access to a working telephone or other similar means of communication at all times.
- The centre will ensure that a planned/practise lockdown and evacuation drill is undertaken twice each per term. As per Regulation 97(3), they must be done at least every 3 months.

Evacuation Plan

- There will be 3 bursts on the whistle.
- Educators are to remain clam.
- Educators are to remove and escort people from the immediate danger area.
- Assemble all people to holding area as indicated on map
- Fire Warden to take mobile phone, roll call folder, Educators sign in folder, visitor folder, evacuation bag and medical box.
- Roll call will be conducted as soon as practicable. Roll Call will take place at the assembly area or if this is deemed unsafe, in an area deemed safe by the fire warden or emergency services.
- Senior Educators to call parents for child collection (if required)

The Evacuation Plan Will Include:

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

Educators Will Be Nominated To:

- Make the announcement of the evacuation, identifying where and how to evacuate.
- Collect children's attendance records and families contact numbers.
- Collect emergency services numbers and mobile phone.

- Make the phone call to 000 or other appropriate service, management and families as required.
- Collect the first aid kit
- Check that the building and playground is empty and that all doors and windows are closed as far as possible, to reduce the spread of fire.
- Supervise the children at the assembly area, to take a roll call of children, educators and any volunteers or visitors.
- When the emergency service arrives, the Nominated Supervisor/Responsible Person will inform officer in charge of the nature and location of the emergency and if there is anyone missing.
- No one should re-enter the building until the officer in charge has said it is safe to do so.

HARASSMENT AND THREATS OF VIOLENCE

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

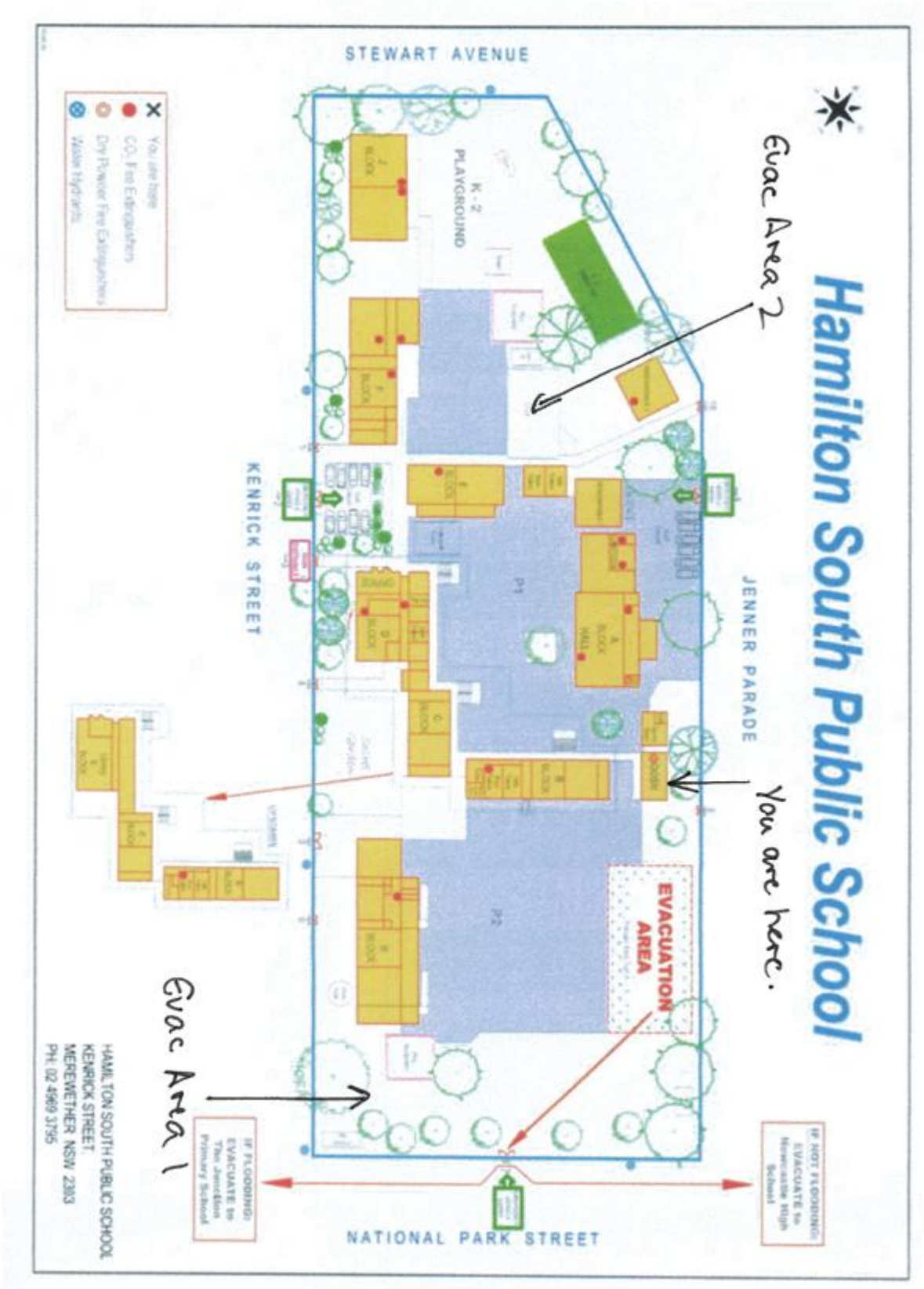
- Calmly and politely ask them to leave the service or the vicinity of the children.
- Be firm and clear and remember your primary duty is to the children in your care.
- If they refuse to leave, explain that it may be necessary to call the police to remove them.
- If they still do not leave, call the police.
- If the Director/Nominated Supervisor is unable to make the call another educator should be directed to do so. Educators should liaise with team members in advance to determine a code phrase that will alert another team member to a threat situation arising and prompt them to contact police. This should be something that will not draw attention to the situation by the offender and something only the Educators are aware if, for example, “please put the Play Station on for the children” as only Educators will know that the service does not actually have one.
- Where possible, educators must endeavour to calmly move the children away from the person and this may be achieved quickly with the use of another code phrase that will encourage word of mouth transmission between children to move quickly from the area and

initiate lockdown procedure without causing them alarm (as an example, the reminder to a child that ice cream is being served today at a specified location for all children).

- No educator should attempt to physically remove the unwelcome person, but try to remain calm and keep the person calm as far as possible and wait for the police.
- Educators should be aware of any unfamiliar person on the premises and find out what they want as quickly as possible and try to contain them outside the service.

Lockdown Plan

- There will be a 3 second blast on the air horn.
- All Educators are to remain calm. Senior Educators member is to call the Police.
- Educators must alert all children, parents and visitors and usher them into the OOSH building. Educators will then lock the external door to the OOSH building.
- If we are using the school hall, the Educators member(s) supervising in the hall will immediately usher the children in to the hall, close and lock all doors and windows.
- Educators will use the centre issued mobile phones to communicate between the hall and OOSH building (as per the mobile phone policy).
- Hall Educators will communicate with the Educators in the OOSH building via the centre issued mobile phones – TEXT or SMS only – phone will be switched to silent. Hall Educators will send a TEXT/SMS to the OOSH building Educators advising which children and Educators they have with them in the hall for cross referencing.
- Educators will lower all blinds and/or Curtin's. Educators will turn off all lights (they will use the torch supplied in the evacuation bag if needed). All Educators, children, parents and visitors are to get down under tables and remain quiet at all times.
- Educators, children, parents and visitors are to remain in lockdown until ALL CLEAR is given via mobile phone.
- Lockdowns may also be called for adverse weather if the Director/Nominated Supervisor/Responsible Person deems it necessary.


Hamilton South Public School
STEWART AVENUE
K-2 PLAYGROUND
KENRICK STREET
JENNER PARADE
NATIONAL PARK STREET
EVACUATION AREA
Evac Area 2
You are here.
Evac Area 1
HAMILTON SOUTH PUBLIC SCHOOL
KENRICK STREET
MEREWETHER NSW 2303
PH: 02 4969 3795

THE AUSTRALIAN WARNING SYSTEM (AWS)

The Australian Warning System (AWS) is a nationally consistent, three-tiered approach designed to make warnings clearer and lead people to take action during emergencies like bushfire, flood, storm, extreme heat and severe weather. The warning system comprises of levels, action statements, hazard icons, colours and shapes. https://www.ses.nsw.gov.au/about-us/our-warnings/

JURISDICTION SPECIFIC WEBSITE DETAILS FOR EACH STATE

NEW SOUTH WALES (NSW)
• NSW Police: www.police.nsw.gov.au • NSW Rural Fire Service: www.rfs.nsw.gov.au • NSW State Emergency Services: www.ses.nsw.gov.au

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	25/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

BUSHFIRE POLICY- NSW

Bushfires are an inherent part of Australia's environment. Bushfires can significantly impact on lives, property and the environment. The basic factors that determine whether a bushfire will occur include the presence of fuel, oxygen, and an ignition source. The intensity and speed the bushfire will spread depends on the current temperature, fuel load (fallen bark, leaf litter, small branches), fuel moisture (dry fuel will burn quickly, damp or wet fuel may not burn at all), wind speed, and slope angle.

Emergency management arrangements for fire safety differ within each state and territory and are determined by the State Emergency Services or combined emergency service agencies. This policy reflects information related to Out of School Hours Care (OSHC) Services located in NSW.

The National Law requires education and care services to ensure that every reasonable precaution is taken to protect children from any harm or hazard likely to cause injury, including bush fires. Regulations 97 and 168 (2) of the Education and Care Services National Regulations require that every education and care service in Australia, including OSHC Services has an emergency and evacuation policy and procedure which includes:

- a risk assessment to identify the potential emergencies that are relevant to the service
- instructions for what must be done in the event of an emergency and evacuation procedures
- an emergency and evacuation floor plan, and
- the rehearsal of emergency and evacuation procedures every 3 months.

This policy outlines the strategies and procedures the OSHC Service will adhere to in the event of a bush fire, including information about closures during an emergency evacuation, and forms part of our Service's Emergency Management Plan (EMP). The EMP records the emergency management arrangements to ensure every reasonable precaution to protect children, staff, and visitors from harm and hazard is maintained at all times.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		

7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.51	Conditions on service approval (safety, health and wellbeing of children)
S.167	Offence relating to protection of children from harm and hazards
S.174(2)(a)	Serious incident - Any emergency for which emergency services attended
S.174(2)(c)	Any incident that requires the approved provider to close, or reduce the number of children attending the service for a period
4	Definitions "multi-storey building" and "storey"
12	Meaning of serious incident
89	First Aid Kits
93	Administration of medication
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
168(2)(e)	Policies and procedures are required in relation to: Emergency and evacuation
168	Education and care services must have policies and procedures
170	Policies and procedures are to be followed
175	Prescribed information to be notified to the Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Emergency and Evacuation Policy Health and Safety Policy	Incident, Injury, Trauma and Illness Policy Supervision Policy Work Health and Safety Policy

PURPOSE

We aim to ensure every reasonable precaution is taken to protect children and staff from harm and hazards likely to cause injury, including potential injury from bushfires. The potential for extreme fire conditions varies greatly throughout Australia, both in frequency and severity. Each state and territory have varying mandatory regulations for implementing policies and procedures for being safe in areas where bushfires occur. Our OSHC Service will adhere to the regulations outlined by the Early Childhood Education Directorate, NSW Department of Education and be familiar with relevant legislation and other

special requirements such as building regulations, traffic restrictions or emergency announcements that may apply to the area our service is located.

SCOPE

This policy applies to children, families, staff, educators, management, the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

It is vital for the OSHC Service to be informed and prepared for bush fire conditions and respond appropriately during periods of high fire danger or local bush fire activity. This policy, and related procedure are to be implemented should a bush fire threaten our Service. During peak bush fire season, the nominated supervisor will monitor fire ratings through relevant authorities on a daily or hourly basis and communicate with all stakeholders as required. We are aware of the Australian Fire Danger Rating System (AFDRS) and have appropriate fire safety equipment installed and maintained at all times. Our *Emergency Management Plan* (EMP) ensures all staff are trained to use fire safety equipment and through regular training, understand evacuation procedures in case of an emergency.

DEFINITIONS

The Australian climate is frequently hot, dry, and susceptible to drought. The widely varied fire seasons are reflected in the continent's different weather patterns. For New South Wales and southern Queensland, the peak risk usually occurs in spring and early summer.

A 'Bush fire prone area' is an area of land that can support a bushfire or is likely to be subject to bushfire attack. Bush fire prone maps are prepared by local councils and governments within each state and territory. Baseline data for bushfire prone areas is referred to as Bushfire Attack Level (BAL).

Australian Fire Danger Rating (AFDRS): provides an indication of the possible consequences of a fire. This rating is standardised across all Australian states and territories. The higher the fire danger rating, the more dangerous the conditions. The AFDRS uses four tiers of fire danger from *Moderate* to *Catastrophic*. The AFDRS are maintained and updated by emergency services in each state or territory.

Emergency Management Plan (EMP): identifies the nature and range of possible emergencies and hazards to which children and staff may be exposed and the response and procedure in the event of an emergency. Effective planning and preparation of the EMP within the workplace ensures optimal

response to emergencies should they occur. A risk assessment to identify potential emergencies that impact the service form the basis of the EMP.

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL:

- ensure obligations under the *Education and Care Services National Law and National Regulations* are met
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- ensure all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- ensure the *Emergency Management Plan* (EMP) is updated regularly and is inclusive of Emergency and Evacuation policies and procedures
- consult with relevant authorities for guidance and advice on the management of bushfire risk and emergencies (including schools if the OSHC is located on school grounds)
- ensure a back-up communication device is kept in a permanent location and is always available in an emergency.
- conduct a risk assessment to identify a potential bush fire risk to the OSHC Service
- review the risk assessment at least every 12 months and following any incident
- ensure the risk assessment considers-
    - prevention measures the OSHC Service will take prior and during the bush fire period
    - procedures to be taken when there is a bush fire in the local district including onsite (shelter-in-place) and offsite evacuation procedures
    - response measures the OSHC Service will take if confronted with a bush fire hazard or emergency
    - identified evacuation assembly areas and evacuation routes (it is recommended that the plan contains two external (off-site) evacuation assembly areas, if practical to do so)
    - what assistance will be required to evacuate children at the service (including non-ambulant children and consideration for multi-storey buildings)
    - emergency communication arrangements in case of power outages- designated landline, Emergency Positioning Indicator Radio Beacon (EPIRB), satellite phone, designated mobile phone
    - the use of a battery-operated radio in its shelter-in-place location or emergency kit
    - when evacuating children, if the weather is hot, do the children need footwear?

  - what mechanisms are in place to ensure the transfer of real-time information, such as weather forecasts, bush fire activity, site closures and emergency operations
  - how parents will know where to locate their child, if evacuated
  - procedures to ensure children are only released to persons authorised to collect them
  - procedures to ensure correspondence is made to feeder schools
  - mechanisms to ensure visitors and contractors are aware of the service's emergency response procedures
  - location of flammable substances/materials (gas storage bottles and fixed tanks)- ensure these are secured and controlled
- ensure a current emergency and evacuation floor plan of the OSHC Service and instructions for what to do in an emergency are clearly displayed in a prominent position near each exit of the service (Reg: 97(4))
- exit signs are displayed above emergency exits, emergency exits are free from debris and obstructions and are easy to open
- ensure emergency drills, including a bush fire drill and shelter-in-place on site are practiced with educators and children at least every 3 months. Our centre does two drills per term.
- ensure a record is kept of each emergency evacuation drill practiced
- ensure the OSHC Service and educators are prepared for bush fire conditions and prepared to respond quickly and appropriately during high fire danger periods
- ensure all fire safety equipment is installed and maintained regularly- (fire extinguishers, fire panels, smoke detectors, long hoses with nozzles, buckets etc.
- ensure all fire safety equipment is easily accessible, has clear signage with operating instructions displayed and are clear of vegetation or debris
- ensure all outdoor taps are in working order
- communicate with staff, educators, and families about bush fire preparation information and provisions
- discuss the *Bush Fire Response Procedure* at team meetings and make any amendments as required
- ensure local emergency services have current contact details, including mobile number for emergency contact after hours
- ensure clear and effective communication procedures during an emergency are rehearsed to test their effectiveness in an emergency
- provide a battery-operated radio for emergencies
- ensure gutters are cleaned out and free from dry leaves and other debris
- ensure flammable items are removed from the Service

- ensure boundaries, outdoor areas and driveways are clear of dry grass, long grass, dead vegetation, thick and continuous shrubs, leaves, dead limbs/trees and other combustible materials
- consult with neighbouring property/landowners or local council if neighboring properties pose a fire risk
- ensure driveways are accessible for fire emergency vehicles, clear of overhanging branches and archway structures
- ensure rubbish and recycle bins are secure with closed lids, emptied on a regular basis and located away from the Service's shelter-in-place location
- consider the Service's shelter-in-place and off-site location ensuring it is accessible and can accommodate all children and staff, with access to toilets and water
- ensure all emergency exits are clear and accessible at all times
- conduct an emergency evacuation kit checklist to ensure emergency contact information and supplies are current
- ensure all records of attendance of children, staff, visitors and volunteers is accurate for each session of care
- ensure current emergency phone numbers are near the phone, and in the contacts of designated mobile phones, including emergency services and the regulatory authority
- monitor the bush fire situation when the rating is above High through internet or radio
- ensure the Hazards Near Me is installed on designated Service mobile phones (NSW& ACT)
- upon advice from relevant authorities (Department of Education or Fire Authority) not accept children for care on days when there is a catastrophic danger rating
- be prepared for closures of the Service on days when Catastrophic Fire Danger Rating (AFDRS) is issued in the NSW Fire Area (as advised by the relevant authority)
- cancel any outdoor activities on days where air quality due to bushfire smoke may cause harm to children [see *Bush Fire Response Procedure*]
- notify the regulatory authority in the event of any closures or damage to premises within 24 hours or as soon as possible via the NQA ITS or phone if there is no access to the internet
- at a reasonable time after the incident has occurred, consider asking emergency services to review the Service's incident response.

EDUCATORS WILL:

- examine the OSHC Service grounds during their daily indoor and outdoor safety checks to ensure flammable and/or combustible materials (e.g., dead leaves and bark, chemicals) have been removed
- ensure they are familiar with the daily Australian Fire Danger Rating System (AFDRS)

- ensure the emergency evacuation kit is organised and stored in an area that is easily accessible
- become familiar, confident with and implement the OSHC Service's emergency evacuation policies and procedures
- participate in emergency drills, including *Bush Fire Response* procedures at least every 3 months
- become familiar with the service's emergency exits
- be aware of the designated assembly area/s
- eliminate all papers around the OSHC Service, including artwork, posters, displays and emptying garbage and recycle bins, if advised that bush fires are in the local district
- keep up to date with professional development and training about bush fires, emergency equipment and emergency evacuation
- be familiar with their role and responsibilities in the event of a bush fire.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Bush Fire Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	25/8/2025
POLICY REVIEWED	AUGUST 2025	NEXT REVIEW DATE	SEPTEMBER 2026
VERSION NUMBER	August 2025/1		

DELIVERY OF CHILDREN TO, AND COLLECTION FROM EDUCATION AND CARE SERVICE PREMISES – INCLUDING SAFE ARRIVAL OF CHILDREN

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

Arrival and departure times are planned to promote a smooth transition between home and our Out of School Hours Care (OSHC) Service for before and after school care. The opportunity to build secure, respectful and reciprocal relationships between children and families is promoted during arrival and departure times where educators have the opportunity to engage in conversations with families and support each child's well-being.

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

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.162 (A)	Child protection training
S.165	Offence to inadequately supervise children
S.167	Offence relating to protection of children from harm or hazard
S.170	Offence relating to unauthorised persons on education and care service premises
84	Awareness of child protection law
86	Notification to parents of incidents, injury, trauma and illness
87	Incident, injury, trauma and illness record
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
102	Authorisations for excursions
102AAB	Safe arrival of children policies and procedures
102AAC	Risk assessment for the purposes of safe arrival of children policies and procedures
102B	Transport risk assessment must be conducted before service transports a child
102C	Conduct of risk assessment for transporting children by education and care service
102D	Authorisation for service to transport children
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios- centre-based services
157	Access for parents
158	Children's attendance record to be kept by approved provider
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change of policies or procedures
173	Prescribed information to be displayed

175	Prescribed information to be notified to the regulatory authority
176	Time to notify certain information to Regulatory Authority
177	Prescribed enrolment and other documents to be kept by approved provider

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of Medication Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Infectious Diseases Policy Emergency Evacuation Policy Enrolment Policy Incident, Injury, Trauma and Illness Policy	Privacy and Confidentiality Policy Safe Arrival of Children Policy Student, Volunteer and Visitor Policy

PURPOSE

We aim to ensure the protection and safety of all children, staff members, and families accessing the OSHC Service. Educators and staff will only release children to an authorised person as named by the parent/guardian on the individual child's enrolment form, or as instructed via a parent/guardian email.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Our OSHC Service has detailed processes, guidelines and practices for the delivery and collection of children to ensure the safety and wellbeing of each individual child. We ensure that all educators, educator assistants and staff implement these.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/RESPONSIBLE PERSON WILL ENSURE:

- that obligations under the *Education and Care Services National Law and National Regulations* are met
- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy
- families are aware of this *Delivery of children to, and collection from an Education and Care Service Premises Policy*

- adequate supervision is provided when children arrive and depart the OSHC Service premises
- relevant educator to child ratios is adhered to at all times
- accurate attendance records are kept
- children only leave the education and care premises in the care of a parent or authorised person or in accordance with written authorisation as per Reg. 99
- enrolment records are kept for each child enrolled in the OSHC Service including the name, address and contact details of
    - any emergency contacts
    - any authorised nominee
    - any person authorised to consent to medical treatment or administration of medication
    - any person authorised to give permission to the educator to take the child off the premises
    - any person who is authorised to authorise the education and care service to transport the child or arrange transportation of the child
    - details of any court order, parenting orders or parenting plan
    - authorisations for the service to take the child on regular outings
    - authorisations for the service to take the child on regular transportation
    - any medical management plan, anaphylaxis medical management plan (ASCIA) or risk minimisation plan
- should any serious incident occur, an Incident, injury, trauma or illness record must be completed (see *Incident, Injury, Trauma and Illness Policy and Procedure*)
- in the case of a serious incident occurring, the regulatory authority must be notified within 24 hours through the NQA IT System
- all new educators and staff are provided with an induction to the Service including an understanding of this policy
- all educators and staff are provided with procedures and training on how they will verify the identity of an authorised nominee, or a person authorised by the parent or authorised nominee to collect the child (including procedures of what to do when an unauthorised person attempts to collect a child).

ARRIVAL AT SERVICE

- all children need to be signed in by an authorised person. Note: the signing in of a child is verification of the accuracy of the attendance record. Information required on the register includes the child's name, the date and time and the signature of the person dropping off the child
- the parent/authorised nominee must also advise staff who will be collecting the child/children

- families will be reminded to sign their child/children into the OSHC Service and will be encouraged to do so immediately upon arrival to avoid forgetting
- should families forget to sign their child/children in, National Regulations require the nominated supervisor or an educator to sign the child in
- sign in sheets/attendance records are to be used as a record in the case of an emergency to account for all children
- children are to be sighted by an educator before the parent or person responsible for the child leaves. This ensures that the educator is aware that the child has arrived and is in the building.
- a child's medication needs, or any other important or relevant information should be passed on to one of the child's educators by the person delivering the child
- the educator will check that the family has completed an *Administration of Medication Record* and store the medication appropriately, away from children's reach
- in order for children to feel secure and safe, it is important that children and families are greeted upon arrival by a member of staff and have the chance to say goodbye to the person dropping them off
- in the case of a separated family, either biological parent is able to add a contact in writing unless a court order is provided to the nominated supervisor stating that one parent has sole custody and responsibility.

DELIVERY TO SCHOOL

Educators and staff will:

- implement procedures for the safe handover of children between our OSHC Service and an educational facility as per our *Safe Arrival of Children Policy* and procedure
- ensure documentation is correctly and clearly communicated with all stakeholders
- accurate attendance records are kept up to date recording:
    - the time and date children arrive and depart the OSHC Service
    - the signature of the person who has collected or delivered the child to our OSHC Service
- follow the *Safe Arrival of Children Policy* at all times if traveling between our OSHC Service and another education facility
- will be signed out of the OSHC Service by an educator.

ABSENT OR MISSING CHILDREN

- parents must advise the OSHC Service staff as early as possible of their child/children's absence from school. This must be done before 2.55pm to avoid a non-contact fee of $20.
- if a child has not arrived at the OSHC Service and the parent has not contacted the OSHC Service to advise of the child/children's absence, an educator will follow the procedures in our safe arrival policy.
- if a child is collected from the school early due to illness or other reasons the parent must notify the OSHC Service by phone or email.
- if a child does not arrive at the OSHC Service at the expected time an educator will:
    - Follow the centres Safe Arrival Policy and Procedures
    - if the parents have been contacted and the child is subsequently found, the educator must immediately contact the parents to let them know

MISSING CHILDREN

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling 000
- Contact the child's parents
- Contact the school to inform them of the missing child
- Ensure that other children waiting to be transported to the OSHC Service remain appropriately supervised
- Notify the regulatory authority within 24 hours of becoming aware of a serious incident

DEPARTURE FROM OSHC SERVICE

- Children may only leave the OSHC Service premises if the child leaves:
    - in accordance with the written authorisation of the child's parent or authorised nominee named in the enrolment record; or
    - taken on an excursion or on transportation provided or arranged by the OSHC Service with the written authorisation of the child's parent or authorised nominee; or
    - given into the care of a person or taken outside the premises because;
        - the child requires medical, hospital or ambulance care or treatment; or
        - because of another emergency (evacuation due to bush fire, flood, severe storm)
- in the case of an emergency, where the parent/guardian or a previously authorised nominee is unable to collect the child, the parent or person responsible for the child (as listed on enrolment form as having a parenting role) may telephone the service and arrange an alternative person to pick

up the child. If the person is unknown to centre staff, photo identification will be required for staff to release the child in to their care.

- parents/guardians are to advise their child's educator if someone different is picking up their child. This person is to be named on the enrolment form or added in writing to Management as an authorised nominee for the child.
- photo identification must be sighted by a primary contact educator before the child is released. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- all children must be signed out by their parent (or a person authorised by the parent-authorised nominee) when the child is collected from our OSHC Service including each child's name, date and time they depart. If the parent or other person forgets to sign the child out, they will be signed out by the nominated supervisor or educator. Educators will confirm via a phone call with the child's parent/guardian if they are unable to confirm with staff that the child has been collected safely from the centre.
- parents/guardians are required to arrive to collect their child/children by 6.00pm
- no child will be withheld from an authorised contact or biological parent named on the enrolment form unless a current court order is on file at the OSHC Service
- in the case of a particular person (including a biological parent) being denied access to a child, the service requires a written notice (court order) from a court of law.
    - educators will attempt to prevent that person from entering the service and taking the child; however, the safety of other children and educators must be considered
    - educators will not be expected to physically prevent any person from leaving the Service
    - in such cases, the parent with custody will be contacted along with the local police and appropriate authorities
    - where possible the educator will provide police with the make, colour, and registration number of the vehicle being driven by the unauthorised person, and the direction of travel when they left the Service
    - a court order overrules any requests made by parents to adapt or make changes
- in the case of a serious incident occurring, as described above, the regulatory authority must be notified within 24 hours through the NQA IT System
- if the person collecting the child appears to be intoxicated or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
    - discuss their concerns with the person, without the child being present if possible, and
    - suggest they contact another parent or authorised nominee to collect the child

  - follow procedures to protect the safety of children and staff of the education and care service as per Child Protection Law and Child Protection Policy
  - contact the Police and other regulatory authorities (Child Protection Hotline 132 111)
  - if an authorisation to collect a child is refused by the Service, it is best practice to document the actions for evidence to authorities (refer to *Refusal of Authorisation Register*).
- at the end of each day educators will check indoor and outdoor premises including all rooms and storage rooms and sheds to ensure that no child remains on the premises after the service closes
- children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy*
- details of absences during the day will be recorded.

VISITORS

- to ensure we can meet Work Health and Safety requirements and ensure a child safe environment, individuals visiting our OSHC Service must sign in when they arrive at the service and sign out when they leave. It is also a requirement of the National Regulations that visitors are not left alone with children at any time. Unless prior authorisation has been granted by the child's parent/guardian. For example: a child attending session with a speech therapist. In these instances, the child will be signed out and in by the approved specialist. Approval must be obtained from the parent/guardian, in writing, prior to the session commencing for this to occur.

LATE COLLECTION OF CHILDREN

- if there are children still present at the OSHC Service upon closing, it is best practice to ensure a minimum of two educators are present remain until all children are collected.
- if parents/guardians know that they are going to be late, they must notify the OSHC Service. If possible, they should make arrangements for someone else to collect their child
- if they have not arrived by 6:00pm the Service will attempt to contact them via phone. If parents/authorised persons are unable to be contacted the nominated supervisor will call alternative contacts as listed on the enrolment form to organise collection of the child
- due to licensing and insurance purposes, if by 6pm neither the parent or any of the authorised contacts are available or contactable, the Service may need to contact the police and other relevant authorities
- if the child is taken to an alternative safe location for example: Police Station, a sign will be displayed at the OSHC Service notifying parents/guardian of the child's whereabouts. If this occurs, the OSHC

Service will be obligated to contact relevant Child Protection Agencies and notify the Regulatory Authority.

- A late collection fee of $20 per 15 minutes or any part thereof will apply for children collected after 6pm.
- where families are continually late to collect children, a *Late Collection of Children letter* will be presented to parents/guardians
- should this non-compliance continue, the Service reserves the right to terminate a child's enrolment.

Safe Arrival Policy

Hamilton South Before and After School Care Centre Inc. will ensure all children who are enrolled in OOSH for an afternoon Session will arrive safely to OOSH and be signed in, or, have their whereabouts confirmed by a contact nominated in the child's enrolment form so they can be marked safely as absent for that day.

The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place in relation to the safe arrival of children who travel between an education and service and any other education or early childhood service.

Children's safety and wellbeing is of primary importance, and approved providers and their services must ensure that appropriate measures are in place to protect children from any harm or hazard, including during the time children are travelling to or from the service.

The travel of children to, and away from, a service requires particular attention, particularly given how busy it can be at certain times and the number of people coming and going. Safeguarding children during travel between the service premises and other educational settings can be enabled by the creation of policies and procedures and an effective process for their implementation.

PROCEDURES:

Safe Arrival Procedures

For Kindergarten Children

1. All Kindergarten children will walk to their classroom/supervised playground area with an educator each morning (first 8 weeks of term 1).

2. All Kindergarten children will by meet by an educator each afternoon (first 8 weeks of term 1) and they will walk to the supervised OOSH area each afternoon together. Educator will assist with putting bag away, getting hat and signing in. The educator will have a class list for the day and check each child off before moving to OOSH area.

For All Children

3. If a child/children has/have not signed in for the afternoon, the educator who is signing children in will:
    a. Check with Nominated Supervisor or Responsible Person to see if they have information on the child/children.
    b. Check the centre diary and emails to see if we have been informed the child/children is/are absent.
    c. Check school gates for the child/children.
    d. Check with the school office to see if the child/children was/were at school or absent from school.
    e. If at school, phone calls will be made to the contacts listed on enrolment to check the child/children was/were collected from school safely.
    f. If the child/children has/have been at school and contacts confirm the child/children should be at OOSH, staff will check with all OOSH Educators and areas in case the child/children forgot to sign in.
    g. If the child/children cannot be located and it's confirmed that they should be at OOSH and the child/children is/are not at the exit gates. OOSH staff will check with teachers, contact Principal and contact NSW Police.
    h. If the Nominated Supervisor is not present in the centre, OOSH staff will contact them and inform them of the situation.

Safe Departure (Arrival Home) Procedures

a. Staff will conduct regular head counts using the centre's electronic sign in/out software (Qikkids Kiosk) to determine if the numbers are accurate and each child is accounted for.
b. Staff will encourage and guide families to use the sign in/out tablet when leaving with their child.
c. OOSH staff will request photo identification for any person collecting a child if they have not met or cannot remember meeting that person in the past. No child will be signed out without

the collector producing photo identification that matches their photo and the names listed in the child's enrolment for and/or Qikkids.

d. Only people authorised by the child's family in their enrolment form will be permitted to collect children from the centre. The family may authorise additional people by email.
e. No OOSH staff member will leave/close the centre for the evening if a child has not been signed out. They will stay until they have been able to confirm with the child's authorised contacts if they child has been collected and is safe.

If they are unable to get in contact with the authorised contacts, OOSH staff will notify the Nominated Supervisor. OOSH staff will contact NSW Police to advise them of the situation. No OOSH staff will leave the centre until a child has been confirmed as safe by either their authorised contacts or NSW Police. The Nominated Supervisor will also notify the school Principal and provide regular updates.

CONTINUOUS IMPROVEMENT/REFLECTION

The *Delivery of children to, and collection from Education and Care Service Policy* will be reviewed on an annual basis in conjunction with children, families, educators and staff.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	26/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

EXCURSION/INCURSION/EXTRA-CURRICULAR ACTIVITIES POLICY

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

Excursions/incursions/extra-curricular activities enhance children's learning by providing them the opportunity to participate in curriculum planned activities and experiences to extend on their skills and knowledge in the current interest topic. Our OSHC Service recognises that excursions provide opportunities for children to explore the wider community as a group and extend on the educational program provided.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
2.2	Safety	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.1	Supervision	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.2	Incident and emergency management	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 51(4A)	Conditions of service approval- ensure number of children educated and cared for by the service at any one time does not exceed the maximum number of children specified in the service approval
S.165	Offence to inadequately supervise children
Sec.167	Offence relating to protection of children from harm and hazards
4 (1)	Definition regular outing
89	First Aid Kits
90	Medical conditions policy
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises

100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursion
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
102E	Children embarking a means of transport – centre-based services
102F	Children disembarking a means of transport – centre-based services
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios-centre-based services
136	First Aid qualifications
149	Volunteers and students
151	Record of educators working directly with children
158	Children's attendance record to be kept by approved provider
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
168	Policies and procedures are required
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of Medication Policy Administration of First Aid Policy Child Safe Environment Policy Code of Conduct Policy	Interaction with Children, Family and Staff Policy Medical Conditions Policy Privacy and Confidentiality Policy Safe Transportation Policy Safe Use of Digital Technologies and Online Environments

Delivery of Children to, and Collection from and Education and Care Service Premises Emergency and Evacuation Policy Incident, Incident, Trauma and Illness Policy	Sun Safety Policy Water Safety Policy

PURPOSE

To ensure that all excursions and incursions undertaken by the Outside School Hours Care Service are planned and conducted in a safe manner, maintaining children's health, safety and wellbeing at all times in accordance with Education and Care National Regulations. We believe excursions/incursions provide the children with the opportunity to expand and enhance their skills and knowledge gaining insight into their local and the wider community. We are committed to complying with all relevant regulations to support the planning, authorisation, supervision and risk management of all excursions and incursions. This includes ensuring the safe use of digital technologies and online environments during excursions and incursions, in line with our policies to protect children's privacy, safety and wellbeing.

SCOPE

This policy applies to children, families, educators, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Excursions and incursions will be conducted with the children's safety and wellbeing in mind at all times. We may regularly schedule incursions and visitors to our OSHC Service however, if we feel an excursion will benefit the children and offer a valuable experience, we will adhere to the National Regulations and Service policies and procedures to plan and manage an experience that is enjoyable for children. This policy relates to excursions that may be a 'regular outing' or a one-off excursion for a particular purpose and incursions, where visiting performers, groups or community services may visit our OSHC Service.

Children who are enrolled in our OSHC Service may participate in extra-curricular activities that are organised separately from our OSHC. Our OSHC will support children to participate in extra-curricular activities located within school grounds.

DEFINITIONS

Excursion: means an outing organised by an education and care service. It does not include an outing organsied by an education and care service provided on a school site if-

(a) the child or children do not leave the school site.

Extra-Curricular Activities: means an activity organised separately from the OSHC Service that children may attend during OSHC operating hours. Examples include music lessons, dance class, choir lessons.

Regular outing: in relation to an education and care service, means a walk, drive or trip to and from a destination

(a) that the service visits regularly as part of its educational program; and

(b) where the circumstances relevant to the risk assessment are *substantially* the same on each.

Incursion: means an activity organised by our Service, whereby an outside body is employed or engaged to visit the service to run an educational program and to promote culture and diversity. This could include a visit from the Rural Fire Service, an Aboriginal Cultural awareness group, science or reptile show or a musical or drama performance. Some incursions may be offered free of charge whilst others may incur a small participation cost.

CONSIDERATIONS FOR EXCURSIONS AND INCURSIONS

The purpose of the excursion should be clearly identified by staff providing information on how the excursion or incursion supports the educational program and contributes to the outcomes for children.

Excursions/incursions should be planned in advance and consideration given to the:

- time away from the OSHC service
- availability of toilet and washing facilities
- access to safe drinking water
- adequate health and hygiene practices
- possible risk to children (identified in risk assessment)
- accessibility for all children
- transportation
- cost
- weather- wet weather arrangements
- teaching children safety procedures and responsibilities whilst on an excursion
- communication with parents and families
- Risk Assessment documentation provided by the excursion venue
- safety and wellbeing of children whilst at the OSHC service whilst participating in an incursion (identified in risk assessment)
- communication between educators participating in the excursion and the Service
- adequate shade and sun protection
- transitions between areas of the venue
- water hazards.

EXCURSION/INCURSION RISK ASSESSMENT

The approved provider or nominated supervisor must conduct a risk assessment which reflects

Reg. 101 before an authorisation is scheduled under Reg. 102 to determine the safety and appropriateness of the excursion/incursion. If the excursion involves transporting children, the risk assessment must adhere to **all** components of regulations 101, 102, 102B, 102C (effective March 2023).

The risk assessment must:

- identify and assess possible risks that the excursion/incursion may pose to the health, safety and wellbeing of any child being taken on the excursion or participating in the incursion
- specify how the identified risks will be managed and minimised
- ensure Working with Children Checks are conducted for all adults visiting the Service on incursions
- ensure the visiting group/performance is covered by insurance
- consider the proposed route and destination for the excursion and
- identify any water hazards
- reflect on any risks associated with water-based activities
- consider the transport to and from the proposed destination for the excursion
- consider the duration of the transportation
- consider any requirements for seatbelts or safety restraints under a law for our state/territory jurisdiction
- the process for entering and exiting the education and care service premises and the pick-up location or destination (as required)
- procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking
- consider the ratio of adults to children involved in the excursion
- consider the risks posed by the excursion/incursion, the number of educators or other responsible adults required to provide supervision, and whether any adults with specialised skills are required to ensure children's safety (e.g.: lifesaving skills)
- consider the planned activities
- determine the duration of the excursion
- consider items that should be taken on the excursion (mobile phone, emergency contacts, first aid kit, medical plans, etc.).
- consider strategies to ensure supervision is consistent at all times during the excursion-transitions, toileting, departure from the service and conclusion of the excursion

If the excursion is a *regular excursion*, or '*regular outing'* a risk assessment authorisation is only required to be carried out once in a 12-month period, however, must be regularly reviewed. If circumstances around the excursion change, a new risk assessment is required.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- an *Excursion/Incursion Risk Assessment* is developed prior to any excursion or incursion
- staff are provided with ongoing training and information sharing to ensure they fulfil their roles effectively
- all educators, student and volunteers participating in the excursion undertake regular head counts at least every 30 minutes (best practice)
- attendance checks are completed regularly, including prior to leaving the Service, embarking and disembarking from transport, upon arrival at the venue, transitioning between spaces whilst at the venue, leaving the venue, returning to the Service
- the excursion coordinator takes the Service mobile phone on the excursion, ensuring the mobile phone is charged and in working order
- child to educator ratios are considered in high-risk situations, such as water hazards or busy roads/highways
- child safe standards are adhered to at all times
- families are notified about the excursion using an *Excursion/Incursion Authorisation Form* and written authorisation must be provide by a parent or other person named in the child's enrolment record
- families are notified about any incursion occurring at the Service.
- families have a right to view the risk assessment prior to the excursion/incursion upon request in which the Service must comply with ensuring all information is available
- all documentation and records relating to excursions are kept safe and secure for a period of 3 years after the date of the excursion
- the number of children attending the excursion does not exceed the Service's licensed capacity
- volunteers, students and other adults participating in the excursion are aware of their roles and responsibilities, including ensuring they are not left alone with children
- a review of practices is conducted following the excursion, including an assessment of areas for improvement.

PARENT/GUARDIAN AUTHORISATION

The approved provider/nominated supervisor must ensure:

- that a child is not taken outside the OSHC Service premises on an excursion unless written authorisation has been provided
- the authorisation must be given by a parent or other authorised person named in the child's enrolment record as having authority to authorise transportation of a child
- the *Excursion/Incursion Authorisation* form must state:
    - the child's name
    - the reason the child is to be taken outside the premises/transported
    - the reason the child is to be transported (if transportation is included in the excursion)
    - if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outing
    - the date the child is to be taken on the excursion and transported (unless the authorisation is for a regular outing)
    - a description of the proposed pick-up location destination for the excursion
    - the method of transport to be used for the excursion
    - the proposed activities to be undertaken by the child during the excursion
    - the period the child will be away from the premises
    - the period of time during which the child is to be transported
    - the anticipated number of children likely to be attending the excursion
    - the anticipated educator to child ratio attending the excursion to the anticipated number of children attending the excursion
    - the anticipated number of staff members and any other adults who will accompany and supervise the children on the excursion
    - any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported
    - that a risk assessment has been prepared and is available at the Service
    - that written policies and procedures for transporting children are available at the Service
- if the excursion is a regular outing, the authorisation is only required to be obtained once in a 12-month period
- parental authorisation may be required for incursions if identified in the risk assessment or if a cost is required
- authorisations must be kept securely in the child's enrolment records

- authorisation records for excursion/incursions must be kept for a period of 3 years after the excursion, as per reg. 183.

STAFFING ARRANGEMENTS

The approved provider/nominated supervisor will ensure that:

- educator to child ratios is no less than the prescribed ratios as per National Regulations
- additional educators/staff are engaged to provide care and support to children with additional needs
- adequate supervision is provided for children and the educator to child ratio for school age care is always maintained as per National Regulations
- consideration for ratios include:
    - location of excursion
    - type of excursion
    - risk identified for excursion
    - the number, ages and abilities of children
    - individual needs of each child
    - how children are grouped whilst participating in the excursion
- consideration for adequate supervision includes:
    - the number, age and ability of children
    - the number and physical positioning of educators
    - each child's current activity
    - risks related to the mode of transport (for example: walking)
    - visibility and accessibility
    - the experience and skill of each educator
- educators are aware of their responsibility to provide supervision to other responsible adults or volunteers assisting on the excursion
- educators are aware the procedures to follow in the event of an emergency
- at least one educator or the nominated supervisor attending the excursion must holds current ACECQA approved first aid qualification, CPR qualification, approved emergency asthma management and approved anaphylaxis management training
- if children remain at the Service and are not participating in the excursion, that at least one educator or the nominated supervisor at the Service holds current ACECQA approved first aid qualification, CPR qualification, approved emergency asthma management and approved anaphylaxis management training
- a supervision plan is completed as part of excursion preparation

- educators continue to follow National Regulations and Service policies and procedures whilst participating in the excursion away from the Service.

PARENT AND VOLUNTEER PARTICIPATION

The approved provider/nominated supervisor will ensure parents and volunteers:

- are encouraged/invited to participate in excursions when possible
- cannot be counted as part of the educator to child ratio [best practice]
- cannot be left alone with a child/children and must be supervised by an educator at all times
- are briefed prior to participating on an excursion about the risk assessment, emergency procedures, supervision, photograph policy for privacy and confidentiality and use of mobile phone
- are aware that smoking or vaping is not permitted at any time whilst participating in the excursion
- are aware of need to wear appropriate clothing and footwear
- understand they are to follow the directions of the excursion coordinator as required
- alert the excursion coordinator or staff if they notice a child is missing or unaccounted for or appears unwell
- Working with Children Checks/Clearances are verified for parent and volunteers prior to participating in excursions (best practice).

ITEMS TO BE TAKEN ON AN EXCURSION

The approved provider/nominated supervisor must ensure that the following items are taken on all excursions, as per the risk assessment:

- appropriate number of suitably equipped first aid kits
- fully charged and operating mobile phone
- emergency contact information details for all children participating on the excursion
- medication for children requiring medical and relevant medical management plans
- items required for excursion circumstances- such as sunscreen, hats, other equipment
- child attendance record

TRANSPORTATION FOR EXCURSION

Excursions involving transportation must adhere to the *Safe Transportation Policy* including ensuring a risk assessment has been completed prior to children being transported by the service and authorisation for the service to transport children as part of the excursion. It is a requirement of the National

Regulation that the means of transport is stated on the risk assessment record and parent authorisation record. Information must be included in the risk assessment about the process for embarking and disembarking the means of transport, including how each child is to be accounted for.

The *means of transport* may mean:

- Walking

Educators must ensure children and adults use the safest footpaths and safe crossings where possible, such as pedestrian crossings and traffic lights. Educators will ensure all children and adults obey road rules. Educators will ensure children follow the 'stop, look, listen and think' process when walking near roads. Educators will remain vigilant that no child runs ahead or lags behind the group

- Bus

The nominated supervisor must ensure that the seating capacity as displayed on the compliance registration is not exceeded. All children must sit on seats, preferably with, or close to an adult. Any requirements for seat belts or safety restraints under law must be followed depending on the vehicle used. If the bus has seat belts, they must be worn at all times.

- Train

The nominated supervisor will be required to contact the local station prior to the excursion to inform them of the time you will be travelling, the destination, and the number of children and adults who will be travelling.

Provisions should be made to ensure children have ample time to board the train safely and in an unhurried way. This will allow the station to inform the train guard so that they can hold the train for the period of time for safe boarding and disembarkment. All children should be seated at all times, with an adult close by. All children should be seated in the one carriage if possible- and not in a Quiet Carriage.

- Car

Any motor vehicle that is used to transport children on an excursion be fitted with child restraints and/or seatbelts that are appropriate for the age and weight of each child, that conform to the Australian Standards and are professionally installed or checked by an authorised restraint fitter.

The vehicle must be registered and free of any defects that could put any passenger at harm.

All children must be fastened in the vehicle according to National Child Restraint Laws for Vehicles (below). The educator or staff member driving the vehicle must hold a current Australian driver's licence appropriate for the vehicle type. (A national police check or Bus Driver Authority may be required for any educator or staff member driving a vehicle)

The process for entering and exiting the Service premises safely must be considered at all times.

EXTRA-CURRICULAR ACTIVITIES

Our OSHC Service will support children to participate in extra-curricular activities that may be organised within school grounds during OSHC operating hours. Communication between families and the school or the extra-curricular activity organisation (e.g., third party music teacher/provider) is paramount to the support provided to children to participate in the activity, Families are to make arrangements between

the extra-curricular organisation/coordinator regarding attendance for their child. Examples of extra-curricular activities include music lessons, dance classes, team sports, drama classes or chess club.

Children attending extra-curricular activities will be signed out of the attendance record by OSHC educators and signed back into the OSHC Service upon return.

INSURANCE

Management must review their insurance policy of the vehicle prior to the excursion/incursion to ensure liability is protected by the OSHC Service. A copy of the insurance policy should be kept within the service's vehicle at all times. Note: Some insurance policies may not cover high-risk activities such as merry-go-rounds, air-filled jumping castles, water slides and pony rides.

CHECKING FOR CHILDREN'S SAFETY

During the excursion educators will ensure:

- children's attendance records are taken on excursions
- all children are accounted for when embarking/disembarking the car/vehicle or bus
- children's names are marked off as they enter and leave the vehicle including time and date
- a thorough check is made of the vehicle to ensure no child is left in the vehicle (a second person should repeat this check for safety)
- the vehicle is parked to avoid other vehicles, driveways or car parks
- the vehicle is parked as close as possible to the OSHC premises or visiting venue
- children only disembark the vehicle when it is safe to do so
- head counts are conducted at least every 30 minutes whilst on the excursion
- bathrooms and toilets are checked for any potential hazard before children enter, and children are escorted to the bathrooms and supervised
- transitions between venue areas are carefully considered, with head counts conducted prior to moving between areas of the venue
- medication is administered to children as per *Administration of Medication Record*
- children remain in the care and supervision of educators from the Service during the excursion. If a parent or authorised guardian collects the child whilst on an excursion the *Delivery of Children to and Collection from EEC Service Premises Policy* and procedures must be followed.

CHILD BECOMES ILL WHILST ON EXCURSION- EDUCATORS WILL:

- assess the child's illness and follow the *Incident, Injury, Trauma and Illness Procedure*, including contacting an ambulance if required
- keep the child calm and comfortable
- if a child has an individual medical management plan for their symptoms displayed, follow the directions and administer medication if applicable and notify parents/guardians

- use the supplies in the excursions first aid kit to assist in applying first aid to child
- seek medical assistance, including ambulance transport, medication if required (as per child's excursion authorisation form)
- contact the child's parents/guardian as soon as possible, no later than 24 hours after the incident
- contact the nominated supervisor at the Service for further direction if required
- ensure ratios are maintained for supervision
- complete an *Incident, Injury, Trauma and Illness Record*
- notify the regulatory authority of any serious incident of a child while being educated and cared for at the Service within 24 hours

LOST CHILD DURING AN EXCURSION/ EXTRA-CURRICULAR ACTIVITY

In the event of a child being unaccounted for during an excursion or following an extra-curricular activity, educators will immediately:

- inform another educator and provide supervision for groups
- conduct a head count
- ask children/parent helpers/other educators if they have seen the missing child
- check with the extra-curricular activity coordinator if they aware of the missing child's location
- search the premises
- check organised meeting points (use mobile phone to contact other educators)
- alert the venue management and request that an announcement is made
- if the child is still unaccounted for after checking as above, the nominated supervisor or excursion coordinator will contact the Police on 000 and report the incident
- the nominated supervisor will contact parents/guardian
- educators will reassure other children and provide supervision
- the approved provider must make a notification to the regulatory authority within 24 hours of a serious incident

EMERGENCY MANAGEMENT DURING AN EXCURSION

During the planning of the excursion, the excursion coordinator will conduct a risk assessment to identify any potential emergencies that may occur. The excursion coordinator will check whether the venue has appropriate emergency procedures in place and incorporate this information into the excursion risk assessment. In the event of an emergency occurring while educators and children are participating in the excursion, staff will follow the emergency evacuation procedure or lockdown procedure as required.

The excursion coordinator will contact the nominated supervisor or the responsible person immediately and follow instructions provided by emergency services. Families will be informed as soon as practicable, but no later than 24 hours after the emergency event. Families may be required to collect children from the excursion venue; educators will contact parents/guardians or emergency contacts if required. The approved provider will notify the regulatory authority of any serious incident involving a child while being educated and cared for at the Service within 24 hours. The approved provider will complete a review following the emergency incident, including an assessment of areas of improvement.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Excursion/Incursion/Extra Curricular Activities Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	26/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

SAFE TRANSPORTATION POLICY

Our centre will only transport children away from the centre in an emergency situation only. If we do transport children for other purposes, for example, excursions then the below policy is what we would follow.

Our Out of School Hours Care (OSHC) Service provides education and care for children before school, after school and during school holidays. For children to access our Service, we provide transportation between our Service location, primary schools and other locations whilst participating on excursions.

Compliance with the Education and Care National Law and Regulations is mandatory to ensure the safety of children at all times and new provisions and amendments to these regulations are reflected in our procedures and policy for transportation and the safe handover of children.

We acknowledge our duty of care obligations by adhering to relevant legislation providing adequate supervision of children at all times, maintaining correct educator to child ratios, maintaining accurate attendance records and providing appropriate child restraints for children under our care.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 51(4A)	The approved provider must ensure that the number of children educated and cared for by the service at any one time does not exceed the maximum number of children specified in the service approval
S. 165	Failure to adequately supervise children
S. 167	Failure to take reasonable precautions to protect children from harm and hazards
4 (1)	Definition regular transportation
24(ha)	Application for service approval—centre-based service A description of any proposed regular transportation of children by or arranged by the education and care service
85	Incident, injury, trauma and illness policies and procedures

89	First Aid Kits
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct a risk assessment for excursion
102	Authorisation for excursion
102A	Transportation of children other than as part of an excursion
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
102E	Children embarking a means of transport – centre-based services
102F	Children disembarking a means of transport – centre-based services
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios-centre-based services
136	First aid qualifications
151	Record of educators working directly with children
158	Children's attendance record to be kept by approved provider
161	Authorisations to be kept in enrolment record
168	Education and care service must have policies and procedures
168(2)(ga)	Education and care service must have policies and procedures (transportation)
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures
175(2)(f)(g)	A notification must be made to the regulatory authority if regular transportation starts or ceases being provided or arranged by the service
177(1)(o)(p)	Prescribed enrolment and other documents to be kept by the approved provider a record of children embarking a means of transport at the education and care services premises as set out in regulation 102E(4)(c); a record of children disembarking a means of transport at the education and care service premises as set out in regulation 102F(4)(d)
183	Storage of records and other documents

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Behaviour Guidance Policy Child Protection Policy Child Safe Environment Policy Delivery of, and collection from Education and Care Service Premises Emergency and Evacuation Policy Enrolment Policy Excursions/Incursions/Extra Curricular Activities Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Record Keeping and Retention Policy Safe Arrival of Children Policy Safe Use of Digital Technologies and Online Environments Policy Work Health and Safety Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place in relation to the safe transportation of children and take reasonable steps to ensure those policies and procedures are followed (Reg. 170).

[ACECQA, 2021]

We aim to ensure that all children being educated and cared for by our OSHC Service are adequately supervised at all times. This includes ensuring educator to child ratios are met whenever and wherever our service is operating including providing or arranging transportation as part of our OSHC Service activity. We are committed to complying with all relevant regulations to support the safe travel of children as part of our Service, including excursions, single trips and regular transportation. This includes ensuring the safe use of digital technologies and online environments during transport, in line with our policies to protect children's privacy, safety and wellbeing.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

The safety of children enrolled at the OSHC Service is paramount. Every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury. Appropriate safety measures have been implemented through our comprehensive risk assessment process to ensure supervision is

adequate at all times including transporting children before and after school to our Service and when children are participating in excursions as part of the educational program. Educator to child ratios are adhered to in addition to ensuring the maximum numbers on the service approval are not breached at any time. Adequate supervision is therefore not static as it is dependent upon a range of considerations documented in risk assessments. Specific risk assessments and procedures for excursions during school holidays are included in our *OSHC Excursion Policy*. Procedures are in place to ensure a nominated supervisor or staff member is present and accounts for each child (and make a record) when children embark and disembark the vehicle at the service premises and the interior of the vehicle is thoroughly checked to ensure no child is left behind.

DEFINITIONS

Excursion: an outing organised by an education and care service

Regular outing: in relation to an education and care service, means a walk, drive or trip to and from a destination

(a) that the service visits regularly as part of its educational program; and

(b) where the circumstances relevant to the risk assessment are *substantially* the same on each outing

Regular transportation: in relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are the same for each occasion on which the child is transported.

Transportation (that is part of the education and care service): Transportation forms part of an education and care service if the service remains responsible for children during the period of transportation. The responsibility for, and duty of care owed to, children applied in scenarios where services are transporting children, or have arranged for the transportation of children, including between an education and care service premises and another location, for example their home, school or a place of excursion.

Transition: In relation to the day-to-day process of moving between the service and a range of different education and care settings or from the education and care setting to a school setting.

Written authorisation: authorisation given by a parent or other person named in the child's enrolment record as having authority to authorise the child being transported by the service or on transportation arranged by the service. If the transportation is regular transportation, the authorisation is only required to be obtained once in a 12-month period. When there is a change in circumstances relevant to the risk assessment for regular transportation, updated written authorisation must be obtained from families before transportation resumes. The OSHC Service will notify families of the change in circumstances and provide an updated authorisation form for families to complete, which must be returned prior to the next scheduled transportation.

The authorisation must state:

a) the child's name; and
b) the reason the child is to be transported; and
c) if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outings; and
d) if the authorisation is **not** for a regular transportation, the date the child is to be transported; and
e) a description of the proposed pick-up location and destination; and
f) the means of transport; and
g) the period of time during which the child is to be transported; and
h) the anticipated number of children likely to be transported; and
i) the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation; and
j) any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported; and
k) that a risk assessment has been prepared and is available at the education and care service; and
l) that written policies and procedures for transporting children are available at the education and care service.

TRANSPORT SPECIFIC RISK ASSESSMENT

As per the Education and Care Services National Law, our service will '*ensure that every reasonable precaution is taken to protect children…from harm and from any hazard likely to cause injury*' (Section 167). Our OSHC Service will conduct comprehensive transport specific risk assessments to minimize and manage all potential risks for transporting children before authorisation is sought to transport a child. [Reg. 102B, 102C, 102D (4)].

A risk assessment will be undertaken at least annually for '*regular transportation*' of children. Each time our Service transports, or arranges, the transport of children as part of an excursion, a new risk assessment will be conducted. All risk assessments will be regularly assessed and evaluated as to facilitate continuous improvement in our OSHC Service.

Our risk assessment process is guided by the following:

- **identify** any hazards or potential hazards that the transportation of a child may pose to the safety, health and wellbeing of the child
- **assess** the risk of harm or potential harm using a risk matrix
- **specify how the identified risks will be managed** by eliminating or minimising the impact using control measures
- **evaluate** the current risk or potential harm by implementing control measures
- **review** and monitor the risk or potential harm to ensure it continues to be managed as a low risk

Source: Safe Transportation of Children ACECQA (2023)

Our risk assessment will consider:

a) the proposed route and duration of the transportation; and
b) the proposed pick-up location and destination; and
c) the means of transport; and
d) any requirements for seatbelts or safety restraints (as per the law of our jurisdiction); and
e) any water hazards; and
f) the number of adults and children involved in the transportation; and
g) given the risks posed by transportation, the number of educators or other responsible adults to provide supervision and whether any adults with specialised skills are required; and
h) whether any items should be readily available during transportation (mobile phone, list of emergency contact numbers) and
i) the process for entering and exiting-
    i. the education and care service premises; and
    ii. the pick-up location or destination (as required); and
j) procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking.

Additional considerations may include:

- the experience of the driver and licensing conditions for the vehicle
- the age, ability, needs and skills of children being transported (non-ambulant)

- the experience of the adults involved in transportation and their capacity for supervising children
- movement of children between the vehicle and venues
- traffic conditions
- extreme weather conditions or natural disasters
- environmental hazards such as temperature extremes, smoke
- communication to/from the vehicle- mobile phone reception
- health needs of all children and adults
- first aid provision and management of illness, injuries and emergencies
- child safe practices.

source: NSW Government Kids and Traffic (2020)

THE APPROVED PROVIDER WILL NOTIFY THE REGULATORY AUTHORITY:

- that the Service will offer or arrange transportation as part of the service approval application
- within seven (7) days if there is a change to the regular transportation provided or arranged by the service, including if the regular transportation is no longer provided.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- every reasonable precaution is taken to protect children from harm and hazards likely to cause injury
- all staff and driver (s) are aware of and inducted in the *Safe Transportation Policy* and procedure and have completed practical training relating to safe transportation of children
- all staff, volunteers and students follow the *Safe Transportation Policy* and procedure
- information related to the safe transportation of children is shared with all staff to assist management fulfill their roles responsibly
- a copy of any training undertaken by staff related to practical training of safe transportation is kept at the Service
- any updates to policies, procedures and risk assessments are clearly communicated to all staff
- roles and responsibilities are clearly communicated with educators
- relevant criminal history requirements and Working with Children Checks (WWCC) are verified for any person transporting children. WWCC is recorded in staff records.

- any allegation of misconduct of an educator or staff member will be reported immediately to management of the OSHC Service as per the Reportable Conduct Scheme detailed in our *Child Protection Policy* and/or *Child Safe Environment Policy and Code of Conduct Policy.*
- risk assessments are carried out prior to seeking authorisation for transporting children, including excursions where transport is arranged by the Service
- risk assessments for 'regular transportation' are:
    - evaluated regularly or whenever a change of circumstances warrants a new assessment- e.g.: route change of vehicle due to roadworks, additional pick-up points or new provider of transport, to ensure potential risks are identified and managed
    - reviewed at least annually
- details of the safest route for travel, type of vehicle and required restraints are included in the risk assessment
- a designated driver is nominated as the person who will be responsible for driving the vehicle
- the designated person driving the vehicle/bus holds a current Australian driver's licence
- each driver completed a *Driver Declaration* to confirm they hold a suitable licence, are fit to drive and are committed to following OSHC Service policies and procedures whilst operating the vehicle
- under no circumstances will the driver and educators/employees supervising children be under the influence of alcohol or drugs
- families are advised fully of transportation details such as pick up/drop up locations, educator to child ratios, procedures for communicating changes of attendance
- families are encouraged to communicate changes to attendance as soon as possible via email
- to explicitly communicate attendance, register procedure with all stakeholders (school, parents, educators)
- procedures for the safe handover of children between the OSHC Service and other educational site is documented correctly and communicated clearly with all stakeholders
- messages from families regarding attendance changes to pick up or drop offs are communicated to the designated educator/educators
- every effort will be made to notify parents/carers of delays returning to the OSHC Service if applicable
- parents/guardians complete a written authorisation for all transportation provided by the OSHC Service, including regular transportation, of their child and a copy of this is filed in the child's enrolment record/ attached to the enrolment form

- authorisations relating to transport, including transport provided for an excursion are complete, accurate and current and include details as described in the definition section '*Written Authorisation'*
- a designated educator, who is not the driver, is nominated as the person who will be responsible for accounting for each child before, during and after transportation and ensuring relevant records are completed immediately
- children are instructed on processes for entering and exiting the service premises and are aware of the pick-up and destination locations
- a *Vehicle Safety Report* is accurately completed before each use of the vehicle for transporting children
- an *Emergency Transport Folder,* including emergency details for the OSHC Service, children and staff, is completed prior to any transport provided to children
- the *Transport Checklist* is completed each time transportation is provided to children
- A *Transportation Attendance Record* is provided to the designated educator prior to leaving the service to record:
    - children's attendance on the vehicle
    - how children are accounted for as they embark and disembark on the vehicle
    - a final check of the vehicle, including the interior, to ensure no child is left on the vehicle
- children are signed into or out of the attendance record upon delivery or collection of a child to the Service in accordance with the *Delivery of Children to, and Collection from Education and Care Service Premises Policy*
- where digital devices are used during transportation, they must be used in accordance with the *Safe Use of Digital Technologies and Online Environments Policy*
- attendance checks or head checks are conducted regularly, including prior to leaving the OSHC Service, when embarking the vehicle, after disembarking the vehicle, upon entering the OSHC Service
- children wear approved seatbelts/restraints whilst the vehicle is in motion in accordance with NSW Road Rules and Road Transport Act
- the nominated supervisor or other staff member (other than the driver) conducts a final sweep of the vehicle, including the interior of the vehicle, to ensure there are no children or belongings left behind and confirms the check by signing the *Transportation Attendance Record* immediately
- a second educator confirms the interior of the vehicle was checked and has signed the *Transportation Attendance Record*
- children exit the vehicle using the 'safety door'

- rehearsals for transportation of children are conducted throughout the year as 'best practice'
- education on road safety for children is included in the Service's programming (for example Kids and Traffic, Vic Roads Primary School roads information)
- safety rules are developed with children to ensure a clear understanding of appropriate and educator to child ratio requirements are maintained at all times, including when children are being transported as part of the OSHC Service activity

- a record of staff working with directly with children (Reg. 151) is kept
- children are never left unattended in the vehicle
- the maximum number of children approved for a service as confirmed on the Service approval is adhered to no matter where the children are located, including when they are being transported by the Service [S. 51(4A)]
- effective and adequate supervision is provided when children are being transported, including prior to embarking or disembarking the vehicle, whilst in the vehicle and when the vehicle is moving. Consideration must include:
  - the number, age and developmental ability of children
  - the requirements of individual children
  - visibility and accessibility
  - physical positioning of educators
  - risks related to the mode of transportation (including travel on foot)
  - risks in the environment, location, route and while travelling
  - the experience, knowledge and skill of each educator
  - the capacity of an educator to immediately respond to a situation requiring urgent intervention
- when transportation is provided by the OSHC Service, staff rosters are planned to ensure adequate supervision and that at least one staff member in each vehicle holds appropriate first aid qualifications (see below) (Reg. 136)
- at least one staff member accompanying children during transportation holds:
  - an approved first aid qualification and
  - a current approved Cardiopulmonary Resuscitation (CPR)
  - a current approved anaphylaxis management training qualification and
  - an approved emergency asthma management training qualification.
- an easily recognised and suitably equipped first aid kit is easily accessible during transportation
- educators carry medication, health plans and risk assessments for individual children

- the *Administration of First Aid Policy* is implemented in the event of a serious incident, injury, trauma or medical emergency, including contacting emergency services (in the first instance) and notifying parents/guardians as soon as practical and the regulatory authority within 24 hours
- flow charts for procedures of what to do in case of an emergency (missing or unaccounted child) are clearly communicated with all stakeholders regularly, including implementation of the *Missing Child During Regular Transportation Procedure*
- a working mobile phone or other similar means of communication to communicate with the OSHC Service, parents/carers is provided in case of emergency
- educators and staff follow procedures in the event of an emergency or vehicle breakdown, see *Safe Transportation Procedure*
- a review of practices is conducted following any incident involving transportation provided by the OSHC Service, including an assessment of areas for improvement
- ensure the regulatory authority is notified within 24 hours if a child is involved in a serious incident, including while being transported, at the OSHC Service
- documents and records relating to safe transportation of children, including *Transportation Attendance Record* and *Transport Checklist,* are stored securely and kept for a period of 3 years after that child's last date of attendance as per *Record Keeping and Retention Policy.*

THE DESIGNATED EDUCATOR/DESIGNATED DRIVER/EDUCATORS WILL ENSURE:

- they adhere to the *Safe Transportation Policy* and participate in practical training relating to the safe transportation of children
- a *Driver Declaration* form is completed to confirm they hold a suitable licence, are fit to drive and are committed to following Service policies and procedures whilst operating the vehicle
- their driver's licence is current and the driver is in a fit and proper state to drive
- if driving larger vehicles to transport children they hold the relevant licence for the vehicle classification
- they are aware of their roles and responsibilities while providing transportation for children
- a Risk Assessment has been completed in accordance with the requirements as outlined above
- a *Vehicle Safety Report* is accurately completed before each use of the vehicle for transporting children
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- effective and adequate supervision is provided when transporting children
- educator to child ratio requirements are maintained at all times, including when children are being

transported as part of the service activity

- attendance checks or head checks are conducted regularly, including prior to leaving the OSHC Service, when embarking the vehicle, after disembarking the vehicle, upon entering the OSHC Service
- children do not participate in transport activities unless written authorisation has been provided
- children are never left unattended in the vehicle
- they adhere to the road rules and regulations mandated by law within each state/territory
- safety rules are discussed and developed with children to ensure a clear understanding of appropriate and inappropriate behaviour, including correct wearing of seat belts
- children remain seated and do not behave in a dangerous or inappropriate manner
- children wear approved seatbelts/restraints whilst the vehicle is in motion in accordance to NSW Road Rules and Road Transport Act
- the vehicle is parked in a secure and safe location for children to access
- the number of passengers does not exceed the legal requirement
- a working, fully charged mobile phone is taken in case of an emergency
    - the *Administration of First Aid Policy* is implemented in the event of a serious incident, injury, trauma or medical emergency, including contacting emergency services and notifying parents/guardians as required
    - the *Missing Child During Regular Transportation Procedure* is followed in the event a child is deemed missing or unaccounted for
- a fully equipped first aid kit is easily accessible
- medication, health plans and risk assessments for individual children are available during transportation
    - educators and designated drivers wear a high visibility vest
    - a list of emergency contact numbers for the children and staff being transported is available
    - emergency contact information is available
    - every effort will be made to notify parents/carers of delays returning to the Service if applicable
    - messages from families regarding children's attendance changes to pick up or drop offs are communicated effectively and timely to educators travelling with children
    - documents and records relating to safe transportation of children, including *Transportation Attendance Record* and *Transport Checklist,* are completed immediately
    - the *Transportation Attendance Record* is completed immediately to record how each child was accounted for as they embark or disembark from the vehicle during transportation

- the nominated supervisor or other staff member (other than the driver) conducts a final sweep of the vehicle, including the interior of the vehicle, to ensure there are no children or belongings left behind
- procedures are followed in the event of an emergency or vehicle breakdown, see *Safe Transportation Procedure.*

TRANSPORTATION ATTENDANCE RECORD KEEPING [Reg: 177 (1)(o)(p)]

The designated driver and designated educator will ensure:

- the *Transport Checklist* is completed each time transportation is provided to children
- the *Transportation Attendance Record* is completed to record:
    - each child is signed into the *Transportation Attendance Record* and Service attendance record upon collection, noting the time children enter the vehicle (for collection from school/home)
    - each child is signed out of the *Transportation Attendance Record* and OSHC Service attendance record noting the time children exit the vehicle (delivery of children to school/home)
    - each child is accounted for as they embark and disembark from the vehicle during transportation
    - that once all children have exited the vehicle/bus, a final sweep of the vehicle is conducted by the designated educator/ nominated supervisor, including the interior of the vehicle, checking around and under seats, storage areas and under the vehicle to ensure there are no children or belongings left behind
    - a secondary educator conducts a final sweep of the vehicle, including the interior of the vehicle, checking around and under seats, storage areas and under the vehicle to ensure there are no children or belongings left behind
    - a second educator will confirm the interior of the vehicle was checked and sign the *Transportation Attendance Record*

SAFE MAINTENANCE OF TRANSPORTATION VEHICLE

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/ DESIGNATED EDUCATOR/ DESIGNATED DRIVER/EDUCATORS WILL ENSURE:

- the transportation vehicle is fitted with the required seat belts and child restraints (if required), approved by the Roads and Traffic Authorities (see Rule 266 of the Australian Road Rules)

- there are sufficient seat belts installed for all passengers in accordance with current Australian Safety Standards- (AS/NZS 1754)
- the vehicle has enough fuel to transport the children each day as in accordance to schedule
- the vehicle is registered, roadworthy and insured (general legal requirements and best practice standards are adhered to)
- the vehicle undergoes regular servicing in accordance with manufacturer guidelines
- any repairs are completed as soon as possible by a qualified mechanic
- checks of the vehicle should be recorded, signed by the relevant person and kept for inspection by the regulatory authority
- drivers hold a current Australian driver's licence, licenced to carry the required number of passengers for the vehicle
- in the event of any mechanical or other breakdown, children will be kept safe, comfortable and occupied with suitable activities
- every effort will be made to notify parents/carers of delays returning to the Service if applicable.

FAMILIES WILL:

- adhere to the Service's *Delivery of children to, and Collection from Education and Care Service Premises Policy* and *Safe Transportation Policy*
- communicate any change in transportation requirements for their child with the OSHC Service as soon as they are aware (for example: no transport is required on a particular day as the child has returned home from school due to illness)
- notify the OSHC Service if their child is going to be absent on a particular day and not require transport
- ensure written authorisation for transportation of their child by the OSHC Service is granted by either the parent or authorised nominee (for transportation authorisation) named in the child's enrolment record
- provide emergency contact details and phone numbers upon enrolment and update emergency contact details and phone numbers regularly
- sign attendance record upon delivery or collection of a child to the Service in accordance with the *Delivery of Children to, and Collection from Education and Care Service Premises Policy*
- be encouraged to promote safe transportation practices with their child, such as using seat belts.

RELATED RESOURCES:

Kids and Traffic- Early Childhood Road and Safety Education Program

- Transporting children safely- Guidance on Understanding safe transport and travel requirements for education and care service providers (2020).
- Safe Travel and Transport- Advice for working with children, families, schools and communities (2020).

CONTINUOUS IMPROVEMENT/ REFLECTION

Our *Safe Transportation Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	26/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

CHILD SAFE ENVIRONMENT POLICY

The United Nations Convention on the Rights of the Child (UNCR) outline that children and young people have a right to be safe and cared for, no matter where they are or who they are with. Children have the right to be protected from violence, abuse or neglect. When working with children and young people, it is important to understand children's rights and needs.

We are advocates for children and have a strong commitment to child safety and establishing and maintaining a child safe environment. Children's safety and wellbeing are paramount at our Out of School Hours Care (OSHC) Service. Our OSHC Service embeds the National Principles for Child Safe Organisations and promotes a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children's sense of security and belonging. [NQF October 2023]

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.162A	Child protection training
S.165	Offence to inadequately supervise children
S.166	Offence to use inappropriate discipline
S.167	Offence relating to protection of children from harm and hazards
82	Tobacco, drug and alcohol-free environment
83	Staff members and family day care educators not to be affected by alcohol or drugs

84	Awareness of child protection law
97	Emergency and evacuation procedures
99	Children leaving the education and care service premises
102AAB	Safe arrival of children policies and procedures
102AAC	Risk assessment for the purposes of safe arrival of children policies and procedures
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
102E	Children embarking a means of transport—centre-based service
102F	Children disembarking a means of transport—centre-based service
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
115	Premises designed to facilitate supervision
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios- centre based services
136	First aid qualifications
145	Staff record
149	Volunteers and students
155	Interactions with children
162	Health information to be kept in enrolment record
165	Record of visitors
166	Children not to be alone with visitors
167	Record of service's compliance
168 (h)	Education and care services must have policies- Providing a child safe environment
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
175	Prescribed information to be notified to regulatory authority

RELATED POLICIES

Child Protection Policy Code of Conduct Policy Cyber Safety Policy Dealing with Complaints Policy Delivery of Children to, and Collection from Education and Care Service Premise Policy Emergency and Evacuation Policy Excursion/Incursion Policy Injury, Incident, Trauma and Illness Policy Interactions with Children, Families and Staff Policy Medical Conditions Policy Nutrition and Food Safety Policy	Privacy and Confidentiality Policy Safe Arrival of Children Policy Safe Transportation of Children Policy Sun Safe Policy Water Safety Policy

PURPOSE

Our Out of School Hours Care Service (OSHC) has a legal and ethical responsibility to provide a safe and friendly environment where all children are respected, valued and encouraged to reach their full potential. Children's safety and wellbeing is paramount, and we aim to take all practical steps to protect children and young people from harm, ensuring a healthy and safe environment. Our OSHC Service provides children and staff with an environment free from the use of tobacco, alcohol and illicit drugs.

SCOPE

This policy applies to children, families, staff, students, volunteers, educators, approved provider, nominated supervisor, management and visitors of the OSHC Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations the approved provider must ensure that policies and procedures are in place for providing a child safe environment and take reasonable steps to ensure those policies and procedures are followed. (Reg. 168, Reg.170). The National Law requires management to ensure all children being educated and cared for are adequately supervised and every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury. Our focus is to build a child safe environment which is reflected in our Service policies and procedures and understood and practiced by all children and young people, educators, staff, families, volunteers and students.

'Child safety is everyone's responsibility.' (A guide to the Child Safe Standards. p.26. 2020)

KEY TERMS- DEFINITIONS

Code of Conduct	Together with a code of ethics, the code of conduct helps guide interactions between management, educators and staff, as well as informing the service decision-making processes relating to professional standards
Disclosure	The process where a child or young person conveys or attempts to convey that they are being or have been abused.
Information sharing	Refers to sharing or exchanging information, including personal information about or related to, abuse in organisational contexts. The terms refer to sharing information between (or within) organisations, as well as sharing information with professionals who provide key services for children.
Mandatory reporter	A person who is required to report known and suspected cases of child abuse and neglect to a nominated government department or agency.
Mandatory reporting	The legislative requirement for selected classes of people to report suspected cases of child abuse and neglect.
National Principles for Child Safe Organisations	Reflect ten child safe standards recommended by the Royal Commission into Institutional Responses to Child Sexual Abuse and are the vehicle for giving recommendations relating to the standards.
Reportable conduct	Certain organisations or entities have legal obligations under Reportable Conduct Schemes to notify and investigate certain allegations of abuse involving a child, when the allegation is against someone they employ, engage or contract in circumstances outlined in the legislation.
Rights of the Child	Human rights belonging to all children, as specified in the United Nations Convention of the Rights of the Child.
Wellbeing	Sound wellbeing results from the satisfaction of basic needs. It includes happiness and satisfaction, effective social functioning and the dispositions of optimism, openness, curiosity, and resilience.
Working with Children / working with vulnerable people check (WWCC/WWVP)	

A notice, certificate or other document granted to, or with respect to a person under a working with children law. The person has been assessed as suitable to work with children; there has been no information that if the person worked with children the person would pose a risk to the children; or the person is not prohibited from attempting to obtain, undertake or remain in child-related employment.

Definitions sourced from

ACECQA. (2023). Policy and procedure guidelines. *Providing a Child Safe Environment*.

NSW Department of Education (2021). Guide to the Child Safe Standards for early childhood education and care and outside schools hours care services

COMMITMENT TO THE SAFETY OF CHILDREN AND YOUNG PEOPLE (National Principles 1-10)

Our OSHC Service is committed to being a child safe organisation and embeds the National Principles for Child Safe Organisations, placing the protection of children as a priority of our responsibilities and obligations. The Child Safe Standards recommended by the Royal Commission provide guidance for our Service to ensure our policies and procedures, strategies and attitudes, ensure children's safety is paramount and that we continue to improve our child safe culture and practices.

Our OSHC Service has a zero tolerance to child abuse, and we are committed to the safety, participation and empowerment of all children and young people. We ensure all staff, educators, volunteers and students have undertaken current child protection training and understand their obligations as mandatory reporters. We promote diversity and tolerance and aim to form equitable and positive relationships with children. We ensure children and young people participate in decisions affecting them and listen and respect their suggestions and ideas. We respond to any concerns, disclosures, allegations or suspicions of harm by reporting to the relevant authorities.

We are committed to diversity and welcome all children and young people regardless of their abilities, sex, gender or social economic or cultural background.

Our OSHC Service will not tolerate bullying or harassment and our *Behaviour Guidance Policy* and procedure outlines the preventative strategies and supervision implemented by our Service to deal with bullying and help protect children. Our priority is to ensure the safety and wellbeing of children and young people and encourage positive relationships.

COMMUNICATION (National Principles 2 and 3)

We aim to build and maintain positive and respectful relationships with children, families, staff and educators of our OSHC Service and prioritise a child safe environment. We communicate regularly and clearly with all stakeholders and ensure our policies and procedures are available to staff, educators, employees, students, volunteers, families and children and young people. (Reg. 170). Our policy folder is available at the service located in the bookshelf under the centre's defibrillator and also on our website. We welcome and encourage all stakeholders to share feedback and evaluation of our policies and procedures through surveys, feedback or discussions with management.

PARTICIPATION OF FAMILIES, CHILDREN AND YOUNG PEOPLE (National Principle 2)

Our OSHC Service ensures families are always welcome and feel comfortable asking questions on how we prioritise child safety. We provide a range of opportunities for consultation and collaboration about decisions about their child's safety whilst at our Service including:

- policy and procedure review
- child protection
- allegations/grievance procedures
- sun safety
- written authorisations- parenting orders
- code of conduct
- inclusivity and supporting children and young people with diverse needs

We promote a respectful, child safe culture where children and young people's concerns are always responded to, and children feel empowered to participate in decisions and provide feedback to educators and staff. Our OSHC Service provides opportunities for conversations with children and young people about their rights and encourages children and young people speak up if they are feeling unsafe or worried. We provide multiple channels for children and young people to lodge complaints, tailoring these options to their communication preferences based on their feedback. We work individually with children and young people about the type of support they may require participating in the complaints procedure.

CODE OF CONDUCT (National Principles 4 and 6)

Management, educators, staff, volunteers and students will adhere to our Service's *Code of Conduct Policy.* Our *Code of Conduct Policy* clearly outlines expectations regarding behaviour and describes the principles, values, and ethical guidelines that guide our staff and stakeholders in their interactions and activities. All educators and staff members are made fully aware that following breaches of the Code of

Conduct and role responsibilities may result in disciplinary action which may lead to termination of employment. Individuals can report any concerns they may have about inappropriate actions of any educator, staff, student or volunteer that involves children or young people to management, ensuring a prompt and thorough response to maintain a safe and secure environment for all.

We will:

- promote a culture of child safety and wellbeing in all aspects of our Service's operations
- adhere to our *Child Safe Environment Policy, Child Protection Policy* at all times
- ensure all staff, educators, volunteers and students have undertaken current child protection legislation training
- provide adequate and effective supervision of children at all times
- ensure the safe use of online environments
- take reasonable action to protect children and young people for risk of harm
- ensure the service premise is free from the use of tobacco, illicit drugs and alcohol
- be responsible for their own, and others health and safety
- adhere to our *Privacy and Confidentiality Policy*
- be a positive role model to children and young people
- respect children and young people's privacy and dignity at all times
- listen and respond appropriately to the views and concerns of children and young people
- report any allegations of child abuse to the approved provider or to relevant authorities
- notify the approved provider and/or the regulatory authority within 24 hours of any serious incident or complaint as per the National Regulations
- encourage children and young people to 'have a say' on issues that are important to them.

Staff, educators, students and volunteers must:

- not discriminate against any child, because of age, gender, cultural background, race, ethnicity or disability
- not put children or a young person at risk of abuse- refusing food/play, making threats, exposing children to inappropriate language or material (movies, internet, photos)
- not develop any 'special' relationships with children or young people that could be seen as favouritism such as the offering of gifts or special treatment
- not be under the influence of drugs or alcohol while working; bring alcohol or drugs onto the premises
- not smoke or vape in or on surrounding areas of the Service.

- Not their their personal devices whilst working directly with children. For example: mobile phones, Ipads, laptops, USB's or smart watches that are capable of taking photos or video.

RECRUITMENT (National Principle 5)

Our OSHC Service maintains a rigorous and consistent recruitment, screening and selection process to ensure the best staff members and educators are employed based on skills, qualifications, experience and suitability for the position available. All staff and educators participate in robust interviews and have reference checks completed to ensure the applicant's suitability to the role, previous experiences and their commitment to child safe values and practices.

All prospective applicants must declare that they do not hold any prohibition notices preventing them from working with children (Reg 188). The approved provider will verify prohibition notices using the NQA ITS 'register search' tool. Candidates applying for roles such as nominated supervisor or responsible person must also complete a Compliance History notice. Existing employees are encouraged to disclose any enforcement actions taken against them.

All staff and educators are provided with a comprehensive induction process which outlines our Code of Conduct, identifying and responding to child abuse, grievance processes, and work health and safety. New employees (including the nominated supervisor and staff members), students and volunteers are to familiarise themselves with the Child Protection Policy to understand the Child Protection Law and their obligations and mandatory reporting duties to ensure the safety and well-being of children at the service.

WORKING WITH CHILDREN CHECK- POLICE CHECKS (National Principle 5)

Working in conjunction with the Child Protection Act and National Regulations, the safety, welfare and wellbeing of children is paramount within our OSHC Service and community. A Working with Children Check (WWCC) is a requirement for people who work in child-related work. It involves a national criminal history check and a review of findings of workplace misconduct. The result of a Working with Children Check is either a clearance to work with children and is valid for five years, or a bar against working with children. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked.

Management is responsible for the periodic review and maintenance of up-to-date records of employees' Working with Children Check, including the Working with Children Check number and the date on which each clearance expires.

Once an employee provides their WWCC clearance, management will verify the clearance to ensure that is it valid and current. The WWCC will be placed in the individual's file and continue to be updated as required. Management will verify all student and volunteer WWCCs prior to placement.
The approved provider will keep a record for each day a student or volunteer participates in the Service including date and hours of participation.

CHILD PROTECTION- REPORTABLE CONDUCT SCHEME (National Principle 6)

Children and young people always have a right to be safe and protected. To comply with legislation and ensure a child safe environment, all educators, staff, volunteers and students are advised of current child protection law and understand any obligations under the law. Supervision is effective to ensure they understand that *child safety is everyone's responsibility.*

All management (with direct contact of children or young person), educators and staff are mandatory reporters and have a legal obligation to make reports if they suspect on reasonable grounds, a child is at risk of significant harm. Neglecting these obligations could potentially be deemed a criminal offence. All staff are provided with up-to-date training about child protection law and their obligations under this law and to ensure they are confident in following the reporting guidelines within NSW and adhere to our *Child Protection Policy*. (Reg. 84). Management will ensure training and development are provided for all educators, staff, and volunteers in child protection on at least an annual basis.

Through continual education and training, educators and staff are equipped with the knowledge, skills and awareness to keep children safe. Training gives educators and staff confidence to identify, respond and report child abuse.

Coordinators or responsible persons in day-to-day charge must complete a course in child protection approved by the regulatory authority on an annual basis. All staff must refresh their knowledge about mandatory reporting each year.

To protect children and young people and ensure their safety, welfare and wellbeing, management is legally required to report allegations or convictions of harm or risk of harm to a child or young person and child related misconduct by any staff member, educator, volunteer or contractor to the Office of the Children's Guardian (OCG), The NSW Regulatory Authority and NSW Police.

Our OSHC Service is committed to providing support to children, young people, families, educators or staff who have made a report regarding child protection, with a focus on upholding strict confidentiality throughout the process. Our primary concern is the well-being and safety of the child or young person, and we will work closely with relevant authorities, professionals, and support networks to ensure that the child or young person's best interests are met throughout the process. Our dedicated support system will assist educators and staff in navigating this challenging process while safeguarding their privacy and professional well-being.

CHILD PROTECTION- Allegations Against Employees (National Principle 6)

To protect children and ensure their safety, welfare and wellbeing, management is responsive to report allegations or convictions of child abuse and child related misconduct by any staff member or volunteer or contractor to the Office of the Children's Guardian (OCG) (NSW) as part of the *Reportable Conduct Scheme* and the NSW Regulatory Authority.

Our OSHC Service will ensure an appropriate level of confidentiality of information relating to the reportable allegations as per the Children's Guardian Act 2019 and any other necessary authorities and/or departments We take our legislative responsibilities as part of the Reportable Conduct Scheme seriously and will respond to any reportable allegation or conviction against employees or volunteers that may arise.

REPORTING AND RESPONDING TO GENERAL COMPLAINTS (National Principle 6)

Feedback from children, families, educators, staff and the wider community is fundamental in creating an evolving Childcare Service working towards the highest standard of care and education. We ensure educators, staff, volunteers and students are well informed about the different ways children may express concerns, distress and disclose harm as well as the process for responding to disclosures from children- including a complaint that alleges a child is exhibiting sexual behaviours that may be harmful to the child or another child. (ACECQA, 2023.)

We aim to investigate all complaints and grievances with a high standard of equity and fairness. Our OSHC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence.

PHYSICAL ENVIRONMENT- SUPERVISION AND SAFETY CHECKLISTS (National Principles 5 and 6)

Children's safety is embedded in our day-to-day practices. We ensure effective and adequate supervision is provided to children and young people at all times, whilst ensuring educator to child ratios are met at all times. at all times. Educators will employ 'active supervision' strategies within the service environment and when participating in excursions or transporting children and young people. Consideration will be made for the different ages and abilities of children and the activities that may require different levels of supervision.

To ensure compliance with regulations, we will only include educators in the educator to child ratio who are working directly with the children and ensure a current roster and a sign on/sign off record are available to verify this. Staff rosters and routines ensure adequate supervision of children is always provided.

Through conducting risk assessments, we assess and manage risks in the physical environment collaborating with children to develop behaviour guidelines for play including adventurous play to ensure their safety. Educators have a sound understanding of their duty of care and responsibilities in ensuring a child safe environment.

Educators conduct regular safety checks to maintain basic standards of safety within our OSHC Service venues. We believe that child safety is a shared responsibility at all levels within our OSHC Service. Children and young people are encouraged to speak up about their safety and the safety of their friends by telling an educator if they feel unsafe in a particular situation or environment.

Educators will complete the following daily checklists to assist and record inspections of the physical environment where foreseeable risks may be evident and cause harm or injury to a child:

- Outdoor Environment Check each morning and afternoon prior to children attending the centre.

Any findings that require attention will be either dealt with immediately or submitted into the maintenance book depending on priority. The approved provider/ nominated supervisors and Principals of primary schools must be notified of any areas that need immediate attention within the OSHC Service venue.

RISK ASSESSMENT AND RISK ASSESSMENT TOOL (National Principle 8)

It is a legislative requirement that management, staff and educators implement a risk management system where they identify and manage hazards and risks within the workplace to ensure a child safe environment. Strategies are in place to make sure child safety (through the National Principles for Child Safe Organisations) and Education and Care National Regulations are embedded across our Service. The key principles of risk management include:

1. Identifying all hazards or potential hazards in the OSHC Service
2. Assess the risk of harm or potential harm for each hazard
3. Control or manage the risk – Risk Rating Matrix
4. Monitor and improve safety – Risk Assessment Action Plan
5. Evaluate and Review

It is the responsibility of coordinators or responsible persons in day-to-day charge to complete a risk assessment where children's safety may be jeopardised and when organising an excursion/incursion.

Children's safety must be incorporated into everyday practice within the OSHC Service.
Common hazards which may require a risk assessment include:

- cross-infection and infectious disease
- administration of medication
- anaphylaxis procedures and management
- building and equipment (including storage)
- inadequate space for conducting activities and experiences
- hazardous chemicals
- electrical appliances
- food preparation and storage
- environmental influences such as shade, noise etc
- sun safety
- children's behaviours
- water safety
- fire equipment
- pets and/or animals
- inadequate supervision of children
- children's activities and experiences
- Work Health and Safety such as manual handling
- non-compliance risk

- hot drinks
- transportation of children (regular outing and regular transportation)
- excursions
- potential emergencies
- natural disasters
- safe arrival of children
- organisation culture (child-safe culture)
- physical contact
- training
- online activities
- electrical devices (photographs/videos)
- privacy and confidentiality

To maintain a child safe environment, all staff and educators will adhere to our OSHC Service policies and procedures and conduct the following checklist and audits:

- Risk assessments for activities and incursions
- Regular checks of indoor and outdoor equipment
- Outdoor environment checks each morning and afternoon prior to children arriving at the centre
- Hot water temperature checks each morning
- Adhere to food safety and hygene
- Complete the morning and afternoon cleaning charts

EMERGENCY AND EVACUATION PROCEDURES (National Principle 8)

Management will ensure that copies of the emergency and evacuation floor plan is displayed in prominent positions near each exit of the service premises, including indoor and outdoor learning areas.

All staff and educators are familiar with emergency evacuation procedures and regulatory requirements. Rehearsals for emergency and evacuation procedures, including lock downs, are conducted at least once every 3 months. Our centre conducts two lockdown and evacuation drills each term, or when required to train new staff or children. Records will be kept for all rehearsals.

ARRIVAL AND DEPARTURE AUTHORISATION (National Principle 1 and 8)

Our OSHC Service prioritises children's safety at all times. Staff and educators will only release children to an authorised person as named on the child's enrolment form. Management will request families provide current court orders, and parenting plans to ensure our records are up to date.

National Regulations require our OSHC Service to keep a record of children and visitor's arrival and departures, with the signatures of the person responsible for verifying the accuracy of the record and the identity of the person collecting the child or young person.

Educators will work in collaboration with our *Delivery of children to and Collection from Education and Care Premises Policy*, *Safe Arrival of Children Policy* and *Student, Volunteer and Visitors Policy* to promote a culture of child safety and wellbeing in the OSHC Service.

To ensure children's safety, educators have a clear understanding of their legal obligation to check identification when a person is collecting a child. To maintain compliance, parents and educators will notify the centre if they authorise a person who is not on their emergency contact form to pick up their child. Centre staff will check photo identification if this person is unknown to them to ensure they are releasing the child to the correct person.

ONLINE SAFETY (National Principle 8)

Our OSHC Service is committed to create and maintain a safe online environment with support and collaboration with children, young people, educators, staff, families and community. Management ensures anti-virus and internet security systems are installed to block access to unsuitable web sites, newsgroups and chat rooms. Our centre uses Norton 360.

Our OSHC Service ensures backups of important and confidential data is made regularly and stored securely offline on a portable hard drive. Software and devices are updated regularly to avoid any breach of confidential information.

Written authorisation is requested as part of the enrolment process for children to have their photo taken and published as part of promotional marketing or on the app program used by the Service. The identity of a child is not published on any platform.

Personal mobile phones or any personal electronic device are not used to take photos or video of children at the OSHC Service. Only Service issued electronic devices are used and strict controls are in

place to ensure the appropriate storage and retention of images and video of children as per the National Model Code and Guidelines.
From 1 September 2025, staff are not allowed to carry or use their personal devices whilst working directly with children.

Only educational software programs and apps that have appropriate content and have been examined prior to allowing their use are used in the Service. Children are always supervised using any technology.

Any video shown to children taken from the internet, for example, a Youtube video. Must be pre-watched by staff to ensure it is safe and free from pop-ups. Video's such as this must only be viewed using a centre issued device.

STORAGE OF HAZARDOUS SUBSTANCES (National Principle 8)

Our OSHC Service will endeavour to provide a safe environment where necessary chemical and hazardous equipment are safely stored away from children and handled appropriately.

OSHC management, staff and educators will keep a register of hazardous chemicals used within the service, including Safety Data Sheets (SDS).

EQUIPMENT, FURNITURE & MAINTENANCE RECORD (National Principle 8)

There are several factors that can contribute to a hazard, such as a deprived program, insufficient supervision and dilapidated equipment. To ensure a child safe environment free from hazards, our OSHC Service has implemented practices and continue to monitor Service policies and procedures that uphold Australian Safety Standards.

The venue of our OSHC Service, and all equipment and furniture used within the service are checked to ensure all aspects are safe, clean and in good repair. We understand that hazards are specific to developmental stages of children. Educators are aware that toys and equipment need to be checked to ensure they are safe and developmentally appropriate for school aged children from Kindergarten to Year 6. Regular checks occur within the OSHC Service to ensure that all toys, furniture and equipment are in good condition and working order.

CONTINUOUS REVIEW (National Principle 9)

To ensure we maintain a culture of continuous improvement, we will ensure our child safe practices are regularly reviewed, evaluated and improved. We aim to ensure all educators, staff, students and volunteers understand and effectively implement our policies and procedures to provide a child safe environment at our OSHC Service.

We will regularly review and monitor the effectiveness of our child safe policies and procedures and invite children, staff members, families and communities to contribute to their development.
Any updates or revisions will be communicated to all stakeholders. Our *Child Safe Environment Policy* will be reviewed on an annual basis.

CHILD SAFE STANDARDS LEGISLATION/RESOURCES

NSW

The Children's Guardian Amendment (Child Safe Scheme) Bill 2021 came into effect on 1 February 2022 requiring organisations who work with or provide services to children to implement the NSW Child Safe Standards. Compliance and enforcement measures under the Children's Guardian Act commenced from 1 February 2023.

Children's Guardian Act 2019

Children's Guardian Amendment (Child Safe Scheme) Bill 2021

Office of the Children's Guardian Child Safe Self-Assessment

Office of the Children's Guardian. Child Safe Standards

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	25/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2025
VERSION NUMBER	August 2025/1		

NUTRITION AND FOOD SAFETY POLICY

As per Education and *Care Services National Law and* Regulations, our Service has a *Nutrition and Food Safety Policy* and procedures in place to ensure quality practices relating to nutrition, food and beverages and dietary requirements are followed at all times.

Our Outside School Hours Care (OSHC) Service recognises the importance of safe food handling and healthy eating to the growth and development of young children.

Our OSHC Service recognises the important role educators have in teaching healthy lifestyles through everyday experiences and routines and physical activity.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented
2.1.3	Healthy lifestyles	Healthy eating and physical activity are promoted and appropriate for each child

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
79	Service providing food and beverages
80	Weekly menu
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
160	Child enrolment records to be kept by approved provider and family day care educator
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and Procedures to be followed

171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Administration of First Aid Policy Anaphylaxis Management Policy Child Safe Environment Policy Dealing with Infectious Diseases Policy Enrolment Policy Excursions / Incursions Policy	Governance Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy

PURPOSE

Out of School Hours Care Services are required by legislation within the National Quality Standard to ensure the provision of healthy foods and drinks that meet the requirements for children according to the *Australian Dietary Guidelines*. It is essential that our OSHC Service partners with families to provide education about nutrition and promote healthy eating habits for children to positively influence their health and wellbeing. Dietary and healthy eating habits formed in the early years are shown to continue into adulthood and can reduce the risk factors associated with chronic adult conditions such as obesity, type 2 diabetes and cardiovascular disease.

Our OSHC Service recognises the importance of healthy eating for the growth, development, and wellbeing of children and is committed to promoting and supporting healthy food and drink choices for children in our care. This policy affirms our position on the provision of healthy food and drink while children are in our care and the promotion and education of healthy choices for optimum nutrition.
We believe in providing a positive eating environment that reflects dietary requirements, cultural and family values, and promotes lifelong learning for children, as we commit to implementing and embedding the healthy eating key messages outlined the *Australian Guide to Healthy Eating.*

Our OSHC Service is also committed to ensuring consistently high standards of food preparation and food storage and transportation are adhered to.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Our OSHC Service has a responsibility to help children to develop good food practices and approaches, by working with families and educators.

Mealtimes reflect a relaxed and pleasant environment where educators engage in meaningful conversations with children. This assists in creating a positive and enjoyable eating environment. Food will be prepared in accordance with the Food Safety Program. All kitchens and food preparation areas will comply with Food Standards Australia and New Zealand (FSANZ) and any relevant local jurisdictional requirements (i.e., local council registrations and inspections). All staff involved in the stages of food handling and service will be trained as food safety supervisors.

Recent changes to the Food Standards Code and Food Act 2003 (Standard 3.2.2A) involve the appointment of a Food Safety Supervisor who must be available to supervise food handlers at the Service. It is a requirement that both the Food Safety Supervisor and all food handlers attend food safety training. Additionally, records must be maintained relating to receiving, storage, processing, displaying and transportation of food. These records must be retained for a period of 3 months.

NUTRITION

Promote healthy food and drinks based on the Australian Guide to Healthy Eating and the Dietary Guidelines for Children and Adolescents.

OUR OSHC SERVICE WILL:

WHERE FOOD IS PROVIDED BY THE OSHC SERVICE:

- provide children with a wide variety of healthy and nutritious foods for meals and snacks including fruit and vegetables, wholegrain cereal products, dairy products, lean meats, and high protein alternatives
- plan and display the OSHC Service Menu (at least two weeks at a time) that is based on *Australian Dietary Guidelines* and suggestions and feedback from the children at our centre.
- vary the meals and snacks on the menu to keep children interested and to introduce children to a range of healthy food ideas
- regularly review the menu to ensure it meets best practice guidelines. We provide a new menu each term, based on the season.
- develop the menu in consultation with children, educators and families
- respect and accommodate children's cultural or religious dietary practices as requested by families

WHERE FOOD IS BROUGHT FROM HOME:

- provide information to families on the types of foods and drinks recommended for children and that are suitable for children's lunchboxes and after school snacks
- provide information to families on how to read the *Nutritional Information Panel* on food and drink labels
- provide space in a refrigerator to keep lunchboxes or insulated lunch bags to be stored
- ensure insulated lunchboxes are unzipped to allow cool air to circulate
- encourage children to eat the more nutritious foods provided such as sandwiches, fruit, cheese and yoghurt, before eating any less nutritious food provided
- strongly discourage the provision of highly processed snack foods high in fat, salt, and/or sugar, and low in essential nutrients in children's lunchboxes. Examples of these foods include sweet biscuits, some muesli bars, breakfast bars and fruit filled bars, and chips.

THE APPROVED PROVIDER/ MANAGEMENT/ NOMINATED SUPERVISOR WILL:

- ensure educators and staff are aware of their responsibilities and obligations under the *Education and Care Services National Law and National Regulations* in relation to this policy and relevant procedures to ensure awareness of safe food handling practices while promoting healthy eating
- ensure new staff and educators are aware of food practices and procedures as outlined in this policy during induction and orientation
- ensure staff responsible for preparing, serving and supervising food for children with food allergies undertake the *All about Allergens for Cooks and Chefs and All about Allergens for Children's Education and Care (CEC)* online courses- Food Allergy Aware Training
- ensure that a notice is displayed prominently in the main entrance of the OSHC Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and provide details of the allergen/s (Reg. 173(2)(f)) [note: this notice should not identify the child]
- ensure water is readily available for children to drink
- ensure enrolment forms include information relating to child's food preferences, allergies, intolerances, cultural or religious considerations or medical conditions which involve food or food practices
- consult with families on enrolment to develop individual management plans, including completing *Medical Risk Minimisation Plans* for children with medical conditions involving food allergies, food intolerances and special dietary requirements as per *Medical Conditions Policy*
- ensure children's individual dietary requirements as per enrolment information or medical condition plans are communicated to all staff and food handlers

- ensure any changes to children's individual dietary requirements are recorded and communicated to all staff and food handlers
- appoint a Food Safety Supervisor to oversee food handlers
- ensure the Food Safety Supervisor hold a valid Food Safety Supervisor certificate and training
- ensure all staff handling food are trained as food safety supervisors
- comply with Food Safety Standard 3.2.2A requirements
- keep an up-to-date *Food Safety Certificate Register* to provide evidence of safe food handling training for all food handlers
- keep records relating to receiving, storage, processing, displaying and transportation of food. These records must be kept for a period of 3 months
- ensure the weekly menu is displayed in an accessible and prominent area for parents to view
- ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure the menu is reviewed on a regular basis. Our menu is reviewed and updated each term to suit the season. Amendments made to the menu will be recorded.
- ensure parents/guardians are notified as soon as practicable but within 24 hours if their child is involved in a serious incident/situation at the Service. Details of the incident/situation are to be recorded on the *Incident, Injury, Trauma and Illness Record.*
- notify the regulatory authority of any serious incident or complaints alleging the safety, health or wellbeing of children has been compromised within 24hours of the incident or the time that the person becomes aware of the incident or complaint
- conduct a review of practices following a serious incident, such as a food poisoning outbreak, including an assessment of areas for improvement.

EDUCATORS/ FOOD HANDLERS WILL:

- ensure children remain seated while eating and drinking
- be aware of children with food allergies, food intolerances, and special dietary requirements and consult with families and management to ensure individual management plans are developed and implemented, including completing *Medical Risk Minimisation Plans* for children with medical conditions involving food as per *Medical Conditions Policy*
- supervise children whilst eating and drinking
- participate in safe food handling training as required.
- keep records relating to the safe handling of food, where required

- consult with children, families, educators and dietitians regarding the review of the Service *Menu Record*
- follow the *Australian Dietary Guidelines* for serving sizes and different types of food
- ensure the weekly menu is displayed in an accessible and prominent area for parents to view
- ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure food is presently attractively
- not allow food to be used as a form of punishment or to be used as a reward or bribe
- encourage parents to the best of our ability to continue our healthy eating message in their homes
- ensure pets or animals are not present within the kitchen or food preparation areas

FOOD HYGIENE

Food poisoning is caused by bacteria, viruses, or other toxins being present in food and can cause extremely unpleasant symptoms such as diarrhoea, vomiting, stomach cramps, and fevers. (Foodsafety.gov, 2019). Our OSHC Service will strictly adhere to food hygiene standards to prevent the risk of food poisoning.

During warmer weather, the risk of foodborne illnesses increases. Our OSHC Service will strictly adhere to food hygiene standards to prevent the risk of food poisoning including:

- maintaining proper temperature control for perishable foods
- ensuring refrigerators are set to recommended temperature of 5 °C or below, regularly monitoring and recording temperatures to guarantee food safety
- emphasising hand hygiene for staff and children and encourage frequent handwashing before and after meals
- implementing food safety practices to minimise the risk of cross-contamination
- ensuring staff are aware of heightened increase in allergic reactions and maintain consistent allergen management
- consider the impact of the sun on food safety when eating meals outside
- use insulated containers to keep perishable food cool and avoid leaving food exposed to direct sunlight.

BUYING AND TRANSPORTING FOOD

Our OSHC Service will:

- ensure food supplies have been ordered in a timely manner

- always check labels for the 'use by' and 'best before' dates, understanding that 'use by' dates apply to perishable foods that could potentially cause food poisoning if out of date, whilst 'best before' dates refer to food items with long shelf life, but quality could be compromised
- avoid buying food items in damaged, swollen, leaking or dented packaging
- always check eggs within cartons: Never buy dirty or cracked eggs. Our centre does not use egg in any cooking. We will always use egg replacer.
- never buy any food item if unsure about its quality
- record temperatures of foods upon delivery (See *Food Delivery Register*)
- ensure fresh meat, chicken, or fish products cannot leak on to other food items
- ensure chilled, frozen, and hot food items are kept out of the 'danger zone' (5 °C to 60 °C) on the trip back to the Service by:
    - not selecting chilled frozen, or hot food items until the end of the shopping.
    - placing these items in an insulated shopping bag or cooler
    - immediately unpacking and storing these items upon the return to the Service
    - Immediately unpacking and storing these items upon the return to the Service.

STORING FOOD

Our OSHC Service will:

- ensure the refrigerator and freezer has a thermometer and that the refrigerator is maintained at 5 °C or below and the freezer is maintained at -18 °C or below
- ensure fridge and freezer temperatures are checked and recorded daily (See *Refrigeration Temperature Control Register*)
- store raw foods below cooked foods in the refrigerator to avoid cross contamination by foods dripping onto other foods
- ensure fresh meat is not stored in the fridge for more than 3 days
- ensure that all foods stored in the refrigerator are stored in strong food-safe containers with either a tight-fitting lid, or tightly applied plastic wrap or foil
- ensure that all foods not stored in their original packaging are labelled with:
    - the name of the food
    - the 'use by' date
    - the date the food was opened
    - details of any allergens present in the food
- transfer the contents of opened cans into appropriate containers
- ensure all bottles and jars are refrigerated after opening

- place 'left-over' hot food in an appropriate sealed container in the refrigerator as soon as the steam has stopped rising. Food can be cooled quickly to this point by placing in smaller quantities in shallow containers, reducing the amount of time sitting in the 'danger zone'
- not reuse disposable containers (e.g., Chinese food containers)
- store dry foods in labelled and sealed, air-tight containers if not in original packaging.
- not place anything on the floor of a walk-in pantry (as containers of any type create easy access to shelves for mice and rats)
- store bulk dry foods only in food-safe and airtight containers
- use the FIFO (first in, first out) rule for all foods (dry, chilled, and frozen) to ensure rotation of stock so that older stock is used first
- store cleaning supplies and chemicals separate to food items

PREPARING AND SERVING FOOD

Our OSHC Service will:

- ensure that all cooked food is cooked through and reaches 75 °C
- ensure that cooked food is served promptly
- use a thermometer to ensure that hot food is maintained at above 60 °C until ready to serve.
- ensure that prepared cold food is stored in the refrigerator maintained at below 5 °C until ready to serve
- discard any cooked food that has been left in the 'danger zone' for two or more hours. Do not reheat.
- reheat cooked food (if required, for example for a child who was sleeping at lunch time) to a temperature of 70 °C (but only ever reheat **once.** Discard if the food is not eaten after being reheated).
- keep cooked and ready-to-eat foods separate from raw foods
- ensure foods are defrosted in the fridge or microwave
- wash fruit and vegetables thoroughly under clean running water before preparation
- ensure unused washed fruit or vegetables are thoroughly dry before returning to storage
- ensure food that has been dropped on the floor is immediately discarded
- thoroughly clean kitchen utensils and equipment between using with different foods and/or between different tasks
- avoid cross-contamination by ensuring that separate knives and utensils are used for different foods
- avoid cross-contamination by ensuring that colour-coded cutting boards are ensure that gloves are changed between handling different foods or changing tasks

- ensure that staff preparing food for children with food allergies or intolerances are proficient at reading ingredient labels
- ensure that food allergies and intolerances are catered for by using separate easily identifiable cutting boards, utensils, and kitchen equipment (e.g., using a colour code, or food-safe permanent marker)
- ensure that children with food allergies and/or intolerances are served their meals and snacks individually on an easily identifiable plate (e.g. different colour), and that food is securely covered with plastic wrap until received by the child to prevent possible cross-contamination
- implement a two person check to ensure the '*right child gets the right meal*' for example: a checklist is developed to record children's names, their allergies, health needs
- ensure all educators and staff are aware of children who have severe allergic reactions to certain foods as per ASCIA Action Plans
- ensure that unwell staff do not handle food
- ensure left-over food is stored immediately in the fridge or thrown away

CLEANING

Our OSHC Service will:

- ensure that food preparation areas and surfaces are cleaned both before, after, and during any food preparation
- record cleaning and sanitising of food contact surfaces (See *Kitchen Cleaning Checklist*)
- ensure that all cooking and serving utensils are cleaned and sanitised before use
- ensure that all dishwashing sponges, brushes, and scourers are cleaned after each use and allowed to air dry or placed in the dishwasher
- ensure the food storage area is clean, ventilated, dry, pest free, and not in direct sunlight
- ensure refrigerators and freezers are cleaned regularly and door seals checked and replaced if not in good repair
- prevent pest infestations by cleaning spills as quickly as possible and ensuring rubbish and food scraps are disposed of frequently
- ensure that floor mops are thoroughly cleaned and air dried after each use
- replace any cleaning equipment that shows signs of wear or permanent soiling.

PERSONAL HYGIENE FOR FOOD HANDLERS

Our OSHC Service will:

- clean clothing is worn by food handlers (such as an apron or appropriate jacket)

- long hair is tied back or covered with a net
- hand and wrist jewellery are not worn while preparing food (e.g. rings and bracelets)
- nails are kept short and clean and no nail polish is worn (as it can chip into food and hide dirt under the nails)
- strict hand-washing hygiene is adhered to, including washing hands each time they return to the kitchen before continuing with food preparation duties
- gloves to be worn when handling food and tongs used
- wounds or cuts are covered with a brightly coloured, waterproof dressing (that will easily be seen if it falls off), and gloves will be worn over any dressings. We use bright blue band aids.
- staff who are not well will not prepare or handle food.

ALL STAFF HANDLING FOOD WILL:

- ensure children and staff wash and dry their hands (using soap, running water, and single use disposable towels or individual hand towels) before handling food or eating meals and snacks
- ensure gloves (and food tongs) are used by all staff handling 'ready to eat' foods.
- ensure food is stored and served at safe temperatures (below 5°C or above 60°C), with consideration to the safe eating temperature requirements of children
- ensure separate cutting boards are used for raw meat and chicken, fruit and vegetables, and utensils and hands are washed before touching other foods
- discourage children from handling other children's food and utensils
- ensure food-handling staff members attend relevant training courses and pass relevant information on to the rest of the staff.

CREATING A POSITIVE LEARNING ENVIRONMENT

Our OSHC Service will:

- ensure that educators sit with the children at meal and snack times to role-model healthy food and drink choices and actively engage children in conversations about the food and drink provided
- choose water as a preferred drink- consider serving it chilled or with ice in summer; add lemon, mint leaves or other fruits such as oranges for flavour
- endeavour to recognise, nurture and celebrate the dietary differences of children from culturally and linguistically diverse backgrounds
- choose foods from the five food groups
- create a relaxed atmosphere at mealtimes where children have enough time to eat and enjoy their food as well as enjoying the social interactions with educators and other children

- encourage children to try different foods but do not force them to eat
- not use food as a reward or withhold food from children for disciplinary purposes
- role-model and discuss safe food handling with children

COOKING WITH CHILDREN

Cooking can help develop children's knowledge and skills regarding healthy eating habits. Cooking is a great, fun activity and provides opportunities for children to be exposed to new foods, sharing of recipes and cooking skills. During any cooking experience, educators will be vigilant to ensure that the experience remains safe, and relevant food hygiene practices are adhered to.

COMMUNICATING WITH FAMILIES

Our OSHC Service will:

- request that details of any food allergies or intolerances or specific dietary requirements be provided to the OSHC Service and work in partnership with families to develop an appropriate response so that children's individual dietary needs are met
- display menus for families to view easily

FOOD SAFETY STANDARDS FOR STATE/TERRITORIES

Changes to the Food Standards Code have included new food safety requirements under the Food Safety Standard 3.2.2A. Please check your local Food Authority if the new Food Safety Standard applies to your service. See below for links to state regulators.

The new requirements comprise of 3 key elements including:

- Food Safety Supervisor
- Food Handler Training
- Record Keeping

See Safe Food Australia (guide to the food safety standards in the Food Standards Code) or email information@foodstandards.gov.au. Food regulators also have information to help food businesses in their jurisdiction understand the requirements of this standard. See the web link below:

- New South Wales

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Nutrition and Food Safety Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	26/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

CHILD PROTECTION POLICY - NSW

Our Out of School Hours Care (OSHC) Service is committed to providing a child safe environment where children's safety and wellbeing is supported and children feel respected, valued and encouraged to reach their full potential. Our OSHC Service embeds the NSW Child Safe Standards and promotes a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children's sense of security and belonging. We will ensure all employees and volunteers understand the meaning, importance and benefits of providing a child safe environment and critically, understand their obligations and requirements as mandatory reporters. Our OSHC Service adheres to the National Model Code and Guidelines for taking images or videos of children.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is respected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection Child Safety and Protection (effective Jan 2026)	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect. Management, educators and staff are aware of their roles and responsibilities regarding child safety, including the need to identify and respond to every child at risk of abuse or neglect

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 162A	Child protection training
S. 165	Offence to inadequately supervise children
S. 166	Offence to use inappropriate discipline
S. 167	Offence relating to protection of children from harm and hazard
S. 174	Offence to fail to notify certain information to Regulatory Authority
S. 175	Offence relating to requirement to keep enrolment and other documents
84	Awareness of child protection law
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record

115	Premises designed to facilitate supervision
145	Staff records
149	Volunteers and students
155	Interactions with children
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
175	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority

LEGISLATION

Children's Guardian Act 2019	*Children and Young Persons (Care and Protection) Act 1998 (The Care Act)*
Child Protection (Working with Children) Act 2012	*Crimes Act 1900*

RELATED POLICIES

Behaviour Guidance Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy Health and Safety Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy	Safe Use of Digital Technologies and Online Social Media Policy

PURPOSE

All educators, staff, visitors and volunteers are committed to identifying possible risk and significant risk of harm to children and young people at the OSHC Service. We comprehend our duty of care responsibilities to protect children from all types of abuse and adhere to our legislative obligations at all times. We believe children's safety is the paramount consideration for early childhood professionals and embed child safety in our daily practices, policies and procedures.

We aim to implement effective strategies to assist in ensuring the safety and wellbeing of all children. Our OSHC Service will act in the best interest of each child, assisting them to develop to their full potential in a secure and child safe environment.

Keeping children safe: a shared responsibility.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

DEFINITIONS

Mandatory reporting is the legislative requirement for selected classes of people to report suspected child abuse and neglect to government authorities.

Mandatory reporters are listed in the *Children and Young Persons (Care and Protection) Act 1998 (The Care Act)* and include people who deliver:

- Health care (e.g., registered medical practitioners, specialists, general practice nurses, midwives, occupational therapists, speech therapists, psychologists, dentists and other allied health professionals working in sole practice or in public or private health practices)
- Education (e.g., teachers, counsellors, principals)
- Children's services (e.g., childcare workers, family day carers and home-based carers)

Maltreatment refers to non-accidental behaviour towards another person, which is outside the norms of conduct and entails a substantial risk of causing physical or emotional harm. Behaviours may be intentional or unintentional and include acts of omission and commission. Specifically abuse refers to acts of commission and neglects acts of omission. Note that in practice, the terms child abuse and child neglect are used more frequently than the term child maltreatment.

Risk of Significant Harm (ROSH) refers to circumstances causing concern for the safety, welfare and wellbeing a child or young person present to a significant extent. This means it is sufficiently serious to warrant a response by a statutory authority irrespective of the family's consent. Mandatory reporters should report their concern to the Child Protection Helpline within 24 hours.
What is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child's or young person's safety, welfare, or wellbeing. In the case of an unborn child, what is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child.

Immediate Risk of Significant Harm (IROSH) is a term used in the Mandatory Report Guide to tell reporters that they must report *immediately* to Department of Communities & Justice and NSW Police.

Reasonable Grounds refer to the need to have an objective basis for suspecting that a child may be at risk of abuse and neglect based on:

- Firsthand observation of the child or family
- What the child, parent or other person has disclosed
- What can reasonably be indirect based on observation, professional training and/ or experience

WHAT IS CHILD ABUSE?

The World Health Organisation ([WHO], 2006, p. 9) defines child abuse and neglect as:
"All forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power." (Australian Government, Australian Institute of Family Studies)

Child abuse is any action towards a child or young person that harms or puts at risk their physical, psychological, or emotional health or development. Child abuse can be a single incident or can be a number of different incidents that take place over time. NSW Communities and Justice identify different forms of child abuse which include- neglect, sexual, physical and emotional abuse or psychological harm.

TYPES OF ABUSE AND NEGLECT

The NSW Government- Department of Communities and Justice (DCJ) identifies the following types of abuse and neglect:

- neglect
- sexual abuse
- physical abuse
- emotional abuse or psychological harm
- circumcision, including female circumcision
- domestic and family violence
- forced marriage and underage forced marriage

There are common physical and behavioural signs that may indicate abuse or neglect. The presence of one of these signs does not necessarily mean abuse or neglect. Behavioural or physical signs which assist in recognising harm to children are known as indicators.

One indicator on its own may not imply abuse or neglect. However, a single indicator can be as important as the presence of several indicators. Each indicator needs to be deliberated in the perspective of other indicators and the child's circumstances. A child's behaviour is likely to be affected if he/she is under stress. There can be many causes of stress and it is important to find out specifically what is causing the stress. Abuse and neglect can be single incidents or ongoing and may be intentional or unintentional. The DCJ provides further definitions and indicators for Recognising Child Abuse

WORKING WITH CHILDREN CHECK

People working or volunteering with children in New South Wales must, by law, have a Working with Children Check (WWCC). The Office of the Children's Guardian provides checks of workers and volunteers to organisations, contributing to creating safe environments for children and other vulnerable people. A WWCC is an assessment of whether a person poses an unacceptable risk to children. As part of the process, the Office of the Children's Guardian will look at criminal history, child protection information and other information.

Working with Children Checks are valid for five years. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked. If new information about a person means they pose a risk to children's safety, that person's check will be re-assessed and, if necessary, they will be prohibited from working with children. The Office of the Children's Guardian will inform both the person affected and any organisations they're linked to about the change in status.

CHILDSTORY REPORTER COMMUNITY

If a child is at immediate risk and police or medical assistance is required, educators/staff must contact emergency services immediately on 000.

Child Story Reporter – Responding to and Reporting Risk of Abuse and neglect.
Mandatory reporters in NSW should use the online Mandatory Reporter Guide (MRG) if they have concerns that a child or young person is at risk of being neglected or physically, sexually or emotionally abused. The MRG assists in providing mandatory reporters with the most appropriate reporting decision. It is not designed to determine whether the matter constitutes risk of significant harm (ROSH). This is done at the Child Protection Helpline through the Screening and Response Priority (SCRPT) tool.

The MRG supports mandatory reporters to:

- determine whether a report to the Child Protection Helpline is needed for concerns about possible abuse or neglect of a child (including unborn) or young person
- identify alternative ways to support vulnerable children, young people and their families where a mandatory reporter's response is better served outside the statutory child protection system

It is recommended that mandatory reporters complete the MRG on each occasion they have risk concerns, regardless of their level of experience or expertise. Each circumstance is different, and every child and young person is unique.
[see: NSW Child Protection MRG Support Guide- Child Care Centre Desktop]

IMPLEMENTATION

Our OSHC Service strongly opposes any type of abuse against a child and endorses high quality practices in relation to protecting children. Educators have an important role to support children and young people and to identify concerns that may jeopardise their safety, welfare, or wellbeing including:

- a duty of care to ensure that reasonable steps are taken to prevent harm to children
- obligations are met under child protection legislation
- obligations are met under work, health and safety legislation.

Our Service promotes a culture of child safety and wellbeing within the Service. Nominated Supervisors and Responsible Persons will continue to maintain current knowledge of child protection law and mandatory reporter requirements by completing Child Protection Awareness Training annually.

MAKING A REPORT/NOTIFICATIONS

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

Dial 000 if a child is at immediate risk and Police or medical assistance is required

- follow the NSW Department of Education guide to *Responding to incidents, disclosures and suspicions of child abuse*
- report all instances (alleged or witnessed) of child abuse, including assault or sexual abuse (including grooming) to NSW Police

- notify the Department of Communities and Justice (DCJ) if a child is at risk of significant harm to the Child Protection Helpline 132111 or make online eReport through ChildStory Reporter website within 24 hours
- notify the NSW Department of Education through the NQA-ITS (within 24 hours) of any incident or allegation where it is reasonably believed that physical and/or sexual abuse of a child has occurred or is occurring while the child is being educated and cared for by the Service
- notify the NSW Department of Education through the NQA-ITS (within 24 hours) of any complaints alleging that a serious incident has occurred or is occurring at the Service
- notify the NSW Department of Education through the NQA-ITS (within 24 hours) of a serious incident, which may include physical or sexual abuse where emergency services attended the Service
- ensure documentation is completed to assist in making reports to relevant authorities including an incident, injury, trauma and illness record
- comply with legislation for Reportable Conduct Scheme and ensure the Office of the Children's Guardian is notified within 7 business days of becoming aware of any allegations and/or convictions of abuse or neglect of a child made against an employee or volunteer and ensure they are investigated, and appropriate action taken. (see Reportable Conduct Scheme section).

EDUCATORS WILL:

- contact the police on 000 if there is an immediate danger to a child and intervene if it is safe to do so
- respect what a child discloses, taking it seriously and follow up on their concerns through the appropriate channels
- report all incidents, allegations and complaints relating to child safety to the approved provider
- report all instances (alleged or witnessed) of child abuse, including assault or sexual abuse (including grooming) to NSW Police
- follow the NSW Department of Education guide to *Responding to incidents, disclosures and suspicions of child abuse*
- comprehend their mandatory reporting obligations and responsibilities to report suspected risk or significant risk of harm to the NSW Department of Communities and Justice (Child Protection Helpline) 132111 or make online eReport through ChildStory Reporter website within 24 hours
- prepare accurate records recording exactly what happened, conversations that took place and what was observed to pass on to the relevant authorities to assist with any investigation
- NOT investigate suspicion of abuse or neglect but collect only enough information to substantiate concerns and pass on to the Child Protection Helpline or appropriate authority

- understand that allegations of abuse or suspected abuse against them are treated in the same way as allegations of abuse against other people
- identify and report any concerns and allegations of reportable conduct involving a staff member, volunteer or contractor to the approved provider and/or NSW Office of the Children's Guardian as part of mandatory requirements under the Reportable Conduct Scheme
- refer families to appropriate agencies where concerns of harm do not meet the threshold of significant harm. These services may be located through CWU (Child Wellbeing Units) or/and FRS (Family Referral Services). Family consent will be sought before making referrals.

CONFIDENTIALITY

It is important that any notification remains confidential, as it is vitally important to remember that no confirmation of any allegation can be made until the matter is investigated. The individual who makes the notification should not inform the suspected perpetrator (if known). This ensures the matter can be investigated without contamination of evidence or pre-rehearsed statements. It also minimises the risk of retaliation on the child for disclosing.

PROTECTION FOR REPORTERS

All reporters are protected against retribution for making or proposing to make a report under amendments to the Children and Young Persons (Care and Protection) Act 1998 effective 1 March 2020. The identity of the reporter is protected by law from being disclosed, except in certain exceptional circumstances. Provided the report is made in good faith:

- the report will not breach standards of professional conduct
- the report cannot lead to defamation and civil and criminal liability
- the report is not admissible in any proceedings as evidence against the person who made the report
- a person cannot be compelled by a court to provide the report or disclose its contents
- the identity of the person making the report is protected.

A report is also an exempt document under the *Freedom of Information Act 1989.*

SHARING OF INFORMATION

Chapter 16A of the *NSW Children and Young Person (Care and Protection) Act 1998* provides for the exchange of information and cooperation between prescribed bodies, if the information relates to the safety, welfare or wellbeing of a child or young person.

Sharing personal information about children and their families must be lawful, which means either gaining consent or working within relevant legislation. Information sharing by consent, where possible, is important to meaningful work with families to facilitate change. Consent may be obtained verbally or in writing; however, you should not seek consent if doing so might compromise the safety of a child or any other person.

Information can only be shared between prescribed bodies. Prescribed bodies or organisations include:

- NSW Police
- public service agencies or public authorities
- private and public schools, and TAFE establishments

- health care providers
- OSHC providers
- organisations that have direct responsibility for, or direct supervision of, the provision of health care, welfare, education, children's services, residential services or law enforcement, wholly or partly to children or their parent/s.

To provide or request information it must relate to the safety, welfare or wellbeing of a particular child or class of children. The information must be for the purposes of assisting a prescribed body to:

- make any decision, assessment or plan or to initiate or conduct any investigation, or to provide any service, relating to the safety and welfare of the child or class of children, or
- manage any risk to the child or class of children that might arise in the prescribed body's capacity as an employer or designated agency.

THE APPROVED PROVIDER/ MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- that obligations under the Education and Care Services National Law and National Regulations are met and child's safety and wellbeing are prioritised at all times
- educators, staff, students and volunteers have knowledge of and adhere to this policy and associated procedure and are advised on how and where the policy can be accessed
- families are aware of this *Child Protection Policy* and procedure and are advised on how and where the policy can be accessed
- all children being educated and care for by the Service are adequately supervised (Sec. 165)
- staff, educators, volunteers, students and visitors have knowledge of and adhere to the National Model Code and Guidelines and not use, or have access to, any personal electronic devices, including mobile phones or smart watches used to take images or videos when educating and caring for children at the OSHC Service
- staff and educators only use electronic devices issued by the OSHC Service for taking images or videos of children enrolled at the Service
- that the premises, including toilets and nappy change facilities are designed and maintained to facilitate clear supervision of children whilst maintaining their rights and dignity
- students, volunteers and/or visitors are never left alone with a child whilst at the Service under any circumstance
- educators and staff are provided with training and ongoing supervision to promote a child safe culture and ensure they understand that *child safety is everyone's responsibility*, and they adhere to the Child Safe Standards
- any nominated supervisor and responsible person in day-to-day charge of the Service has successfully completed a course in child protection approved by the regulatory authority

- a thorough recruitment process is implemented to employ people who are committed to children's safety and ensure their views align with the Service's Code of Conduct, Statement of Philosophy and child safety policies and procedures (see *Recruitment Policy*)
- the recruitment process includes pre-employment screening and reference checks
- all prospective applicants are required to complete a prohibition notice declaration to acknowledge they do not hold any prohibition notices that would prevent them from working with children
- the OSHC Service registers with Office of the Children's Guardian and validates all staff, educator, volunteers and students Working with Children Checks (WWCC) in accordance with the *Child Protection (Working with Children) Act 2012* BEFORE the person begins working or interacting with children
- a record is kept and updated of the number of each WWCC number and expiry date and staff and educators are reminded to renew their WWCC prior to expiry
- registration for the Service is completed for eReporting through the *ChildStory Reporting Community*
- to emphasise child safety throughout the OSHC Service with regular discussions at team meetings and with children and families (NQF Safe Culture Guide (2025))
- to regularly check if staff understand child safety policies and procedures via quizzes/surveys (NQF Safe Culture Guide 2025)
- educators are provided with a reporting procedure and professional standards to safeguard children and protect the integrity of educators, staff and volunteers
- records of abuse or suspected abuse are kept in line with our *Privacy and Confidentiality Policy*
- records relating to child sexual abuse that has or is alleged to have occurred are kept for at least 45 years
- ensure our complaint handling processes are child-focused providing support and guidance for children to know who to talk to if they are feeling unsafe (*See Dealing with Complaints Policy*)
- ensure following any critical incident, children, staff and families are provided with access to support they may need- counselling, debriefing, access to community services
- ensure critical reflection on the incident is conducted with staff and educators to inform required changes to policy, procedures, practices (including supervision) and risk assessments
- all employees, volunteers and students are:
    - provided with a copy of the current *Child Protection, Child Safe Environment, Code of Conduct and Safe Use of Digital Technologies and Online Environments Policies*
    - required to participate in a comprehensive induction and orientation program, including an understanding of child protection law

- provided with access to all relevant legislations, regulations, standards and other resources to help meet their mandatory reporting obligations
- supported to a foster a child safe culture within the Service by complying with the NSW Child Safe Standards
- provided with support to adhere to a zero-tolerance stance against child abuse
- provided with regular up-to-date knowledge and training on how to identify, understand, report, and respond to child maltreatment, abuse and harm including the Reportable Conduct Scheme
- aware of their mandatory reporting obligations and responsibilities
- aware that neglecting to report child protection concerns may be deemed a criminal offence under the Crimes Act 1900
- provided with regular training and resources about the different ways children may express concerns, distress and disclose harm as well as the process for responding to disclosures from children- including a complaint that alleges a child is exhibiting sexual behaviours that may be harmful to the child or another child (ACECQA 2023)
- provided with regular training and resources about trauma-informed care, effective supervision and monitoring, appropriate and inappropriate discipline and online abuse
- required to participate in regular performance reviews
- aware of appropriate positive and consistent approaches to guide behaviour and ensure no child is subjected to any form of corporal punishment or discipline that is unreasonable in the circumstances (Sec. 166)
- aware of our Service policy and associated procedures for the safe use of digital technologies and online environments.

EDUCATORS AND STAFF WILL:

- adhere to the Service's policies and procedures
- promote the welfare, safety, and wellbeing of children at the OSHC Service by creating and maintaining child safe environment and adhere to the NSW Child Safe Standards
- foster a culture of openness, respect and cultural safety where children and young people feel safe to disclose risk of harm to children or report abuse
- participate in a comprehensive induction and orientation program that includes an understanding of child protection law and their obligations
- provide valid Working with Children Check (WWCC) details during their employment and engagement at the Service

- advise the approved provider of any circumstances that may affect their WWCC or fit and proper status
- not use, or have access to, any personal electronic devices, including mobile phones or smart watches used to take images or video of children at the Service
- participate in regular up-to-date training on how to identify, understand, report, and respond to child maltreatment, abuse and harm through annual child protection training
- have completed online training to understand the child protection reporting process and use of the Mandatory Reporter Guide (MRG) https://reporter.childstory.nsw.gov.au/s/mrg
- allow children to be part of decision-making processes where appropriate
- provide ongoing monitoring and follow-up for children's health and wellbeing.

STUDENTS/ VOLUNTEERS/ VISITORS WILL:

- adhere to the Service's policies and procedures
- participate in a comprehensive induction and orientation program, including an understanding of child protection law
- provide a child safe environment for all children
- provide valid Working with Children Check (WWCC) details during their engagement at the Service
- advise the approved provider of any circumstances that may affect their WWCC or fit and proper status
- promote the welfare, safety, and wellbeing of children at the Service, fostering a child safe culture
- participate in child protection training as required
- not use, or have access to, any personal electronic devices, including mobile phones or smart watches used to take images or video of children at the Service
- report any concern or suspicion that a child is at risk of abuse, harm, neglect or ill-treatment to the approved provider or nominated supervisor as soon as possible
- report all instances (alleged or witnessed) of child abuse, including assault or sexual abuse (including grooming) to NSW Police
- identify and report any concerns around staff, educator or volunteer behaviour or conduct to management/approved provider of the Service as soon as practicable
- allow children to be part of decision-making processes where appropriate.

DOCUMENTING A DISCLOSURE

A disclosure of harm emerges when someone, including a child, tells you about harm that has happened or is likely to happen. When a child discloses that he or she has been abused, it is an opportunity for an adult to provide immediate support and comfort and to assist in protecting the child from the abuse. It is also a chance to help the child connect to professional services that can keep them safe, provide support

and facilitate their recovery from trauma. Disclosure is about seeking support and your response can have a great impact on the child or young person's ability to seek further help and recover from the trauma.

WHEN RECEIVING A DISCLOSURE OF HARM, THE PERSON RECEIVING THE DISCLOSURE WILL:

- give the child or young person their full attention
- remain calm and find a place to talk where you can give the child your full attention (ask child or young person if you can move to a place where you can hear them properly). This should still be an area where you can be viewed by other staff or the centre office (with the door open)
- not make promises that can't be kept. For example, never promise that you will not tell anyone else.
- honestly tell the child or young person what you plan to do next
- tell the child/person they have done the right thing in revealing the information and that you will need inform someone who can help keep the child safe
- only ask enough questions to confirm the need to report the matter because probing questions could cause distress, confusion and interfere with any later enquiries
- let the child or young person take his or her time
- let the child or young person use his or her own words
- tell the child or young person that the abuse of maltreatment is not their fault
- support culturally and linguistically diverse children and children with additional needs to express themselves in the child's preferred way of communicating (NQF Safe Culture Guide)
- not attempt to conduct their own investigation or mediate an outcome between the parties involved
- not confront the perpetrator
- document as soon as possible so the details are accurately captured including:
    - time, date and place of the disclosure
    - '*word for word*' what happened and what was said, including anything they (the staff member/educator) said and any actions that have been taken
    - date of report and signature.

Source: *Responding to children and young people's disclosures of* abuse (2025). Australian Institute of Family Studies

BREACH OF CHILD PROTECTION POLICY

A breach is any action or inaction by any individual within the Service, including children and young people, that fails to comply with any part of the policy. All educators, students, volunteers and staff working with children are mandatory reporters under the *Crimes Act 1900* and have a duty of care to support and protect children. Any allegations of criminal offences against children must be reported to the Police immediately. Failure to report child sexual abuse to the police is a criminal offence.

MANAGING A BREACH IN CHILD PROTECTION POLICY

Management will investigate any breaches to this policy in a fair, unbiased and supportive manner by:

- liaising with the Department of Communities and Justice (DCJ), NSW Police and Office of Children's Guardian for appropriate processes to ensure chain of evidence is not destroyed or compromised
- not undertaking and investigating the allegation whilst the Child Protection, Police or Office of Children's Guardian are conducting an investigation
- follow directions from the DCJ and NSW Police that may include removal of the educator or staff member (who is the subject of allegations) immediately from a role with contact with children or young people until authorities conclude their investigation.

Management may undertake an investigation if Child Protection or the Police are not conducting their own investigation or if their action has concluded. Management will:

- give the educator, staff member, student or volunteer the opportunity to provide their version of events
- document the details of the breach, including the versions of all parties
- record the outcome clearly and without bias
- ensure the matters in relation to the breach are kept confidential
- reach a decision based on discussion and consideration of all evidence.

OUTCOME OF A BREACH IN CHILD PROTECTION POLICY

Staff members or educators who fail to adhere to this policy may be in breach of their terms of employment. Visitors or volunteers who fail to comply to this policy may face termination of their engagement. Depending on the nature of the breach outcomes may include:

- disciplinary procedures, including dismissal of employment, if required
- emphasising the relevant element of the child protection policy and procedure not followed
- providing closer supervision
- providing further education and training
- providing mediation between those involved in the incident (where appropriate)
- reviewing current policies and procedures and developing new policies and procedures if necessary.

REPORTABLE CONDUCT SCHEME- ALLEGATIONS AGAINST EDUCATORS AND OTHER EMPLOYEES, VOLUNTEERS or STUDENTS (or contractors)

Report to 000 if you have immediate concerns for a child's safety.

The approved provider has the legislative obligation under the *Reportable Conduct Scheme* to notify the *Office of the Children's Guardian* (OCG) of reportable allegations and convictions against their employees (including volunteers and contractors), investigate the allegation with procedural fairness and advise the Office of the outcome.

All educators and staff members of our OSHC Service have an obligation to report relevant allegations of a child protection nature as part of the Reportable Conduct Scheme to the approved provider or OCG. This reportable conduct may have occurred either within work hours or outside work hours. A child is anyone under the age of 18 at the time of the alleged conduct occurred.

In addition, the approved provider must take appropriate action to prevent reportable conduct by employees. The *Children's Guardian Act 2019,* effective 1 March 2020, defines the head of an organisation as a 'relevant entity'. An approved education and care service is listed at Schedule 1 of the Act as an 'entity'.

The approved provider must notify the OCG within seven (7) business days and conduct an investigation into the allegations. 7-day notification form Reportable Conduct Directorate: (02) 8219 3800. (Monday – Friday). A final report of the investigation must be ready to submit within 30 calendar days or provide information about the progress of the investigation to the OCG 30 Day interim report form.

The approved provider must send a report to the OCG that enables the OCG to determine whether the investigation was completed satisfactorily and whether appropriate action was or can be taken.
The approved provider must ensure an appropriate level of confidentiality of information relating to the reportable allegations as per the Act or other legislation. The heads of relevant entities have obligations under section 57 of the Act to disclose 'relevant information' to the following persons unless they are satisfied that the disclosure is not in the public interest:

- a child to whom the information relates
- a parent of the child
- if the child is in out-of-home care- an authorised carer that provides out-of-home care to the child.

[See: Office of the Children's Guardian for further information.]

The OCG will monitor the entity's response and may conduct their own investigation. The Children's Guardian Act 2019 defines reportable conduct as:

- a sexual offence has been committed against, with or in the presence of a child
- sexual misconduct with, towards or in the presence of a child
- ill-treatment of a child
- neglect of a child
- an assault against a child
- an offence under s43B (failure to protect) or s 316A (failure to report) of the Crimes Act 1900; *and*
- behaviour that causes significant emotional or psychological harm to the child

Employees are aware mandatory reporting procedures including notification to the Child Protection Helpline operate alongside, and does not replace, the Report Conduct Scheme.

EDUCATING CHILDREN ABOUT PROTECTIVE BEHAVIOUR

Our program will educate and support children to learn about their rights and encourage them to express their views and feelings. Children will learn:

- about acceptable and unacceptable behaviour in both physical and online environments

- about what is appropriate and inappropriate contact at an age-appropriate level and understanding
- about body safety, using correct names of private body parts to help recognise inappropriate touches and respect for personal space
- about their right to feel safe at all times
- to say '*no*' to anything that makes them feel unsafe or uncomfortable
- about how to use their own knowledge and understanding to feel safe
- to identify feelings that they do not feel safe
- help them identify trusted educators, adults and friends
- the difference between 'good' and 'bad' secrets
- that there is no secret or story that cannot be shared with someone they trust
- that educators are available for them if they have any concerns
- to tell educators of any suspicious activities or people
- to recognise and express their feelings verbally and non-verbally
- that they can choose to change the way they are feeling.

RESOURCES FOR INDICATORS OF ABUSE AND NEGLECT

Child Safe Organisations
Kids Helpline
Lifeline
NAPCAN- Prevent Child Abuse & Neglect
NSW Department of Education- Child safety
NSW Health Fact Sheets regarding sharing of information relating to Child Protection with other professionals.
NSW Government Communities and Justice ChildStory Reporter Community
Office of the Children's Guardian Child Safe Standards training and resources
Raising children. Safeguarding children and child sexual abuse.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Child Protection Policy* will be updated and reviewed annually in consultation with families, staff, educators and management. Our policy, procedures and practices will be critically examined regularly to ensure ongoing improvement to maintain and foster a child safe environment and child safe culture within our Service.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	27.8.2025
POLICY REVIEWED	AUGUST 2025	NEXT REVIEW DATE	September 206
VERSION	August 2025/1		

MOBILE DEVICE USAGE POLICY

All Out of School Hours Care (OSHC) Services have an obligation to provide a safe environment in which school age children are able to engage in a range of play activities and join in a variety of cultural, artistic and leisure experiences. Such experiences allow children to interact with friends, practice social skills and solve problems.

The use of mobile devices (including mobile phones and smart watches) in primary schools has recently been a subject of much debate and educational review- for example: Centre of Education Statistics and Evaluation (CESE) and Review into the non-education use of mobile devices NSW- report (2018) and review into the non-educational use of mobile devices in NSW schools-report (2024). There is a growing conversation raised by teachers, parents, educators and the media about the effect of non-educational uses of mobile digital devices on student learning and social interaction including cyberbullying, exposure to harmful material and mental and physical health.

We acknowledge the shared responsibility of supporting school policy and respect the collaborative partnerships we have formed with our feeder primary schools and families. Our Out of School Hours Care (OSHC) Service will implement a mobile phone policy from 1 September 2025.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
155	Interactions with children

RELATED POLICIES

Behaviour Guidance Bullying Policy Child Protection Policy Child Safe Environment Policy Cyber Safety Policy	Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Photograph Policy

PURPOSE

To ensure compliance with the National Quality Standard, National Regulations and National Principles for Child Safe Organisations, we aim to provide an environment that is safe for all students at all times. The outcomes of the '*My Time, Our Place'* Framework are reflected in our policy to ensure the OSHC environment is supporting children's emotional wellbeing, physical safety and cyber safety.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

We understand and accept that parents often provide a mobile device for their child/ren to provide personal security and safety whilst they travel to and from school. Additionally, some schools have a Bring Your Own Device (BYOD) policy to provide opportunities for students to engage in the curriculum and therefore students *may* have a mobile device with them when they attend OSHC.

However, within our OSHC Service, mobile devices are not permitted to be utilised as we provide a balance of activities for students where a mobile device is not required. Some children with a disability or health condition, may rely on the use of a mobile device for support needs will be exempt from this restriction. Exemptions must be made to management or the approved provider and clearly documented in the child's enrolment record.

Should students require internet access to complete homework assignments whilst attending OSHC they will be able to access computers and other technological devices within our Service that have safe search filters installed to protect children and are supervised by educators.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/EDUCATORS WILL ENSURE:

- children, families and carers attending Out of School Hours Care (OSHC) adhere to the policy
- any external communication is supervised and made using the OSHC service-issued phone

- parents/carers can access the OSHC phone number to make contact if required
- children do not use their mobile device whilst attending OSHC, including attending excursions and/or incursions
- if smartwatches are allowed to be worn, they should be turned to aeroplane mode to prevent notifications and other disruptive notifications
- If the smart watch is capable of taking photos or video is must be stored as per the storage of mobile devices (see: storage of mobile devices)
- the OSHC takes no responsibility for mobile devices that are brought to the Service (this includes if mobile device is lost or is damaged).
- all mobile devices must be clearly labelled with the child's name
- consultation will be made with management and parents of a child who requires access to a mobile phone due to their disability or medical condition.

STORAGE OF MOBILE DEVICES

If a child must bring a mobile device (including watches that can take photos or video) to OSHC for any reason, it will be stored in one of the ways listed below:

- switched off and stored in a locked box within the Service and collected by parents/carers at the end of the day

CONSEQUENCES

In the event of a child using their mobile device without permission, the child will be directed to place the device in the locked mobile storage box in the centre office for the remainder of the session and returned to the parent/carer at the end of the day.

Should the child be accessing inappropriate content or using the camera on the device without permission, written notification will be provided to parents advising them of the incident. The letter may also outline future restrictions to be imposed on the student's eligibility to have their mobile phone at the Out of School Hours Service at any time.

Any intentional misuse of a mobile phone for the purpose of online bullying or image-based abuse will be investigated and reported to relevant child protection authorities such as the Office of the eSafety Commissioner.

EDUCATORS, STAFF, VISITORS AND STUDENTS WORKING OR PEOPLE VOLUNTEERING AT THE CENTRE

No educators, staff, visitors (including trades people or people undertaking work or repairs) and students working or volunteering at our centre will be permitted to carry or use their personal device (for example: mobile phone, laptop, Ipad, usb or smart watch capable of taking photos or video) whilst working directly with children.

Our service will use centre issued devices, such as our centre mobile phones, Ipads and laptop. Staff will also be given centre issued usb's to use if they require one.

All educators, staff, students and volunteers working at our centre will need to store their phones in a locked box in the centre office or not bring their phones onto the grounds where we operate.

All trades people will need to seek permission from the Nominated Person or Responsible Person on duty to use their personal mobile device whilst working or attending at/to our centre.

PARENTS, CARERS, GUARDIANS AND FAMILIES

- will never use their personal devices (for example: mobile phones, Ipads, smart watches capable of taking photos or video or any other technology that may be able to take photos or record video) whilst at our centre or approved areas that our centre operates.

EDUCATIONAL JURISDICTIONS POLICY INFORMATION

NSW: Mobile devices in schools

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Mobile Device Usage Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	27/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

CYBER SAFETY POLICY

Cyber safety is the safe and responsible use of Information and Communication Technologies (ICT). It involves being respectful of other people online, using good 'netiquette' (internet etiquette), and above all, is about keeping information safe and secure to protect the privacy of individuals. Our Out of School Hours Care Service (OSHC) is committed to create and maintain a safe online environment with support and collaboration with staff, families and community. As a child safe organisation, our Service embeds the National Principles for Child Safe Organisations and continuously address risks to ensure children are safe in physical and online environments.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management System	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
168	Education and care services must have policies and procedures
181	Confidentiality of records kept by approved provider
195	Application of Commonwealth Privacy Act 1988
196	Modifications relating to National Education and Care Services Privacy Commissioner and Staff

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	
Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Governance Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy Enrolment Policy	Privacy and Confidentiality Policy Photography Policy Record Keeping and Retention Policy

PURPOSE

To create and maintain a cyber safe culture that works in conjunction with our OSHC Service philosophy, and privacy and legislative requirements to ensure the safety of enrolled children, educators and families.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

TERMINOLOGY	
ICT	Information and Communication Technologies
Cyber safety	Safe and Responsible use of the internet and equipment/device, including mobile phones.
Netiquette	The correct or acceptable way of using the internet

IMPLEMENTATION

Cyber Safety encompasses the protection of users of technologies that access the Internet, and is relevant to devices including computers, iPads and tablet computers, mobile and smart phones and any other wireless technology (including personal wearable devices- smart watches). With increasingly sophisticated and affordable communication technologies, there is a candid need for children and young people to be informed of both the benefits and risks of using such technologies. More importantly, safeguards should be in place to protect young children from accidentally stumbling upon or being exposed to unsuitable material or content.

Our OSHC Service has demanding cyber safety practices and education programs in place, which are inclusive of appropriate use agreements for educators and families.

CCS SOFTWARE

Our OSHC Service uses Qikkids which is a third-party software system to access the Child Care Subsidy System (CCSS). The software is used to manage the payment and administration of the Child Care Subsidy (CCS).

Review of CCS software: The approved provider will ensure the CCS software has policies and procedures regarding safe storage of sensitive data before using the software, the approved provider will review the privacy policy of the CCS software on a yearly basis or as required. The approved provider will review any potential threats to software security on a regular basis. The director/ nominated supervisor will advise the approved provider as soon as possible regarding any potential threat to security information and access to data sensitive information. Any breaches of data security will be notified to the Office of the Australian Information Commissioner (OAIC) by using the online Notifiable Data Breach Form.
All personnel using the software will have their own log in username and password. The approved provider will ensure all Personnel using the software will have their own log in username and password. Authorised users are encouraged to change their passwords every 6 months.

Each personnel who is responsible for submitting attendances and enrolment notices to CCS will be registered with PRODA as a Person with Management or Control of the Provider or as a Person with Responsibility for the Day-to-Day Operation of the Service.

REVIEW OF CCS SOFTWARE PROCEDURE

Review	How often	By Whom
All staff use an individual log-in to access CCS software	As required	Approved provider and nominated supervisor
Privacy policy of CCS software	As required	Approved provider
Any breaches of sensitive data relating to Enrolments	Upon notification	Approved provider

CONFIDENTIALITY AND PRIVACY

- the principles of confidentiality and privacy extend to accessing or viewing and disclosing information about personnel, children and/or their families, which is stored on the OSHC Service's network or any device

- privacy laws are such that educators or other employees should seek advice from Service management regarding matters such as the collection and/or display/publication of images (such as personal images of children or adults), as well as text (such as children's personal writing)
- all material submitted for publication on the Service Internet/Intranet site should be appropriate to the Service's learning environment
- material can be posted only by those given the authority to do so by the Service management
- the OSHC Service management should be consulted regarding links to appropriate websites being placed on the Service's Internet/Intranet (or browser homepages) to provide quick access to sites.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR/ MANAGEMENT WILL ENSURE:

- that obligations under the *Education and Care Services National Law and National Regulations* are met
- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and associated procedure
- all staff, families and visitors are aware of the OSHC Service's *Code of Conduct* and *Confidentiality and Privacy Policies*
- the OSHC Service ensures the latest security systems are in place to ensure best practice. These can block access to unsuitable web sites, newsgroups and chat rooms. However, none of these tools are fool proof - they cannot be a substitute for active parental involvement in a child's use of the Internet.
- backups of important and confidential data are made regularly (monthly is recommended)
- backups are stored securely either offline
- software and devices are updated regularly to avoid any breach of confidential information
- families are referred to the *Dealing with Complaints Policy* and procedure when raising concerns regarding digital technologies and personal data
- all staff are aware that a breach of this policy may initiate appropriate action including the termination of employment
- notification is made to the Office of the Australian Information Commissioner (OAIC) by using the online Notifiable Data Breach Form. in the event of a possible data breach. This could include:
    - a device containing personal information about children and/or families is lost or stolen (parent names and phone numbers; dates of birth, allergies, parent phone numbers).
    - a data base with personal information about children and/or families is hacked
    - personal information about a child is mistakenly given to the wrong person (for example: child developmental report, confidential information)

- this applies to any possible breach within the Service or if the device is left behind whilst on an excursion
- a review of practices related to Cyber Safety will be conducted following any breaches of data security as per *Data Breach Response Procedure*.

EDUCATORS WILL:

- ensure to use appropriate netiquette and stay safe online by adhering to OSHC Service policies and procedures
- keep passwords confidential and not share with anyone
- log out of sites to ensure security of information
- never request a family member's password or personal details via email, text, or Messenger
- report anyone who is acting suspiciously or requesting information that does not seem legitimate or makes you feel uncomfortable (See 'Resources' section for where to report)
- ensure that children are never left unattended whilst a computer or mobile device is connected to the internet
- personal mobile phones are not used to take photographs, video or audio recordings of children at the OSHC Service or whilst participating on excursions
- only use educational software programs and apps that have been thoroughly examined for appropriate content prior to allowing their use by children
- provide parents and families with information about the apps or software programs accessed by children at the OSHC Service
- participate in professional development regarding online safety
- provide online safety for children by adhering to policies and procedures that align to the National Principles for Child Safe Organisations and Child Safe Standards NSW
- ensure that appropriate websites are sourced for use with children prior to searching in the presence of children
- use a search engine such as 'Kiddle' rather than Google to search for images or information with children (See 'Resources' section)
- ensure privacy filters and parental control settings are turned on and used when children are accessing digital technologies online

FAMILIES WILL:

- be aware that when sharing anything using technologies such as computers, mobile devices, email, or any device that connects to the internet, you and everyone else invited to your account understands

about *netiquette* and staying safe online and ensures privacy laws are adhered to

- be aware that when it comes to your own children, it is your choice what you share outside of the OSHC Service. Remember though that young children cannot make their own decisions about what gets published online so you have a responsibility to ensure that whatever is shared, is in your children's best interests
- be mindful of what you publish on social media about your child as this may form part of their lasting digital footprint
- consider installing *Family Friendly Filters* to limit access to certain types of content on devices such as mobile phones and computers
- consider installing parental controls on streaming services to ensure children are not able to access inappropriate material
- be aware that sometimes other children in the Service may feature in the same photos, videos, and/or observations as their children. In these cases, families are never to duplicate or upload them to the internet/social networking sites or share them with anyone other than family members
- access further information about eSafety to help protect their children and be cyber safe.

CYBER BULLYING

Schools in all jurisdictions have policies related to bullying, including online, or cyber bulling. Our OSHC Service has a duty of care to children under various legislative frameworks to ensure the environment is safe, inclusive, respectful and free from risk of harm. We reject all forms of bullying behaviour.
Cyber bullying will respond appropriately to cyberbullying by reporting this behaviour immediately to management and seek further advice from the police. Our OSHC Service implements strategies suggested through *Bullying. No Way!*

BREACH OF POLICY

Staff members or educators who fail to adhere to this policy may be in breach of their terms of employment and may face disciplinary action. Visitors or volunteers who fail to comply to this policy may face termination of their engagement.

RESOURCES

Australian Government eSafety commission https://www.esafety.gov.au/educators
Bullying. No Way! www.bullyingnoway.gov.au
eSmart Alannah & madeline foundation www.esmart.org.au

Kiddle is a child-friendly search engine for children that filters information and websites with deceptive or explicit content: https://www.kiddle.co/

SCAMWATCH (Australian Competition & Consumer Commission: This website has been set up to receive information on scams that can then be provided to the public. To report an online scam or suspected scam, use the form found here:

https://www.scamwatch.gov.au/report-a-scam

More information on online fraud and scams can be found on the Australian Federal Police website:

https://www.afp.gov.au/what-we-do/crime-types/cyber-crime

Notifiable Data Breaches scheme (NDB) can be made through the Australian Government Office of the Australian Information Commissioner

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Cyber Safety Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	27/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
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SUN SAFE POLICY

Australia has one of the highest rates of skin cancer in the world with more than two in three Australians developing some form of skin cancer in their lifetime. Too much of the sun's UV radiation can cause sunburn, skin and eye damage and skin cancer. Infants and toddlers up to four years of age are particularly vulnerable to UV damage due to lower levels of melanin and a thinner stratum corneum (the outermost layer of skin). UV damage accumulated during childhood and adolescence is strongly associated with an increased risk of skin cancer later in life (Cancer Council Australia).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 167	Offence relating to protection of children from harm and hazard
100	Risk assessment must be conducted before excursions
113	Outdoor space natural environment
114	Outdoor space shade
136	First aid qualifications
168	Education and care service must have policies and procedures
168 (2)(a)(ii)	Sun Protection
170	Policies and procedures to be followed
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of First Aid Policy Bush Fire Policy Emergency and Evacuation Policy Enrolment Policy Excursion/Incursion Policy	Health and Safety Policy Physical Environment Policy Water Safety Policy

PURPOSE

By implementing a 'best practice' Sun Safe Policy, our OSHC Service can help ~~to~~ protect all children and staff from the harmful effects of ultraviolet (UV) radiation from the sun and teach children good sun protection habits from an early age to reduce their risk. To ensure the outdoor environment provides shade for children, educators and staff to minimise unsafe UV exposure. Additionally, this policy provides guidance on how to protect children and young people, and staff from severe hot weather events which are becoming more prevalent in Australia resulting from climate change.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Our OSHC Service will work in compliance with the *National SunSmart Program* to ensure children's health and safety is maintained at all times whilst at the Service. This policy has been reviewed and approved by the Schools and Early Childhood lead at SunSmart. (2024)

Our OSHC Service will monitor the Australian Bureau of Meteorology for notification of severe heat events and implement risk mitigation strategies to protect the health, safety and wellbeing of children. This policy applies to all activities on and off site.

MONITORING UV LEVELS

Sun protection is required when UV levels reach level 3 or above. Our OSHC Service will monitor the UV levels daily through one or more of the following method:

- viewing the Bureau of Meteorology website http://www.bom.gov.au/

OUTDOOR ACTIVITIES

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times, when the UV Index is 3 or above. The sun protection times are a forecast from the Bureau of Meteorology (BOM)or the time-of-day UV levels are forecast to reach 3 or higher. At these levels, a combination of sun protection is recommended for all skin types. The OSHC Service will use a combination of sun protection measures (see below) **whenever UV Index levels reach 3 and above.**

SUN PROTECTION TIMES

UV levels vary across Australia and throughout the year. This listing highlights when UV is typically three and above in each state / territory. There may be times UV levels are three and above outside these periods. Please check the daily local sun protection times and UV levels to be sure you are using sun protection when it is required for your location.

NSW Check the UV index/forecast at your location
Active outdoor play is encouraged throughout the day all year provided appropriate sun protection measures are used when necessary.

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times and when the UV index is three and above. A combination of sun protection measures is considered when planning all outdoor activities such as excursions and water play.

SHADE

THE APPROVED PROVIDER WILL ENSURE:

- sufficient natural, portable, or man-made shade is provided, particularly in high use areas
- shaded areas will be used for play experiences
- play experiences will be monitored throughout the day and moved as required to remain in the shade
- regular risk assessments and reviews will be made of the outdoor area to assist in planning for further shade requirements
- children who do not have appropriate hats or outdoor clothing are required to choose a shady play space or a suitable area protected from the sun and not move to unshaded areas of the playground
- children will still be required to wear hats, protective clothing, and sunscreen if playing under natural or portable shade

HATS

Educators, children, and visitors are required to wear sun safe hats at all times they are outdoors. Cancer Council Australia describes sun safe hats as:

- Hats that protect a person's face, neck, and ears, which include:
    - a legionnaire hat – the front peak and flap should overlap at the sides and the flap should cover the neck
    - a bucket hat with a deep crown and angled brim that is at least 5cm for young children and at least 6cm for adults and must shade the face, neck, and ears
    - a broad brimmed hat with a brim size of at least 6cm for children or 7.5cm for adults. The brim should provide shade for the whole face

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not a suitable alternative

- Children without a sun safe hat will be asked to play in an area protected from the sun.

CLOTHING

- When outdoors, staff and children will wear sun safe clothing that covers as much of the skin as possible. Cancer Council Australia recommends clothing that:
    - covers the shoulders, back and stomach
    - is loose fitting such as loose-fitting shirts and dresses with sleeves and collars or covered neckline, or longer style skirts, shorts and trousers
- Children who are not wearing sun safe clothing can be provided with spare clothing or will be required to play under shade or in an area protected from the sun.
  Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended.

SUNSCREEN

As per Cancer Council Australia recommendations:

- staff and children will apply SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours or more frequently if washed or wiped off
- where children have allergies or sensitivity to the sunscreen, parents are asked to provide an alternative sunscreen, or the child is required to play in the shade. A record of any allergy must be provided in writing from the parent/guardian and recorded on the child's enrolment record. Cancer Council Australia recommends usage tests before applying a new sunscreen
- sunscreen is stored in a supervised, cool, dry place and the use-by-date monitored.

RISKS OF SUMMER PLAY

Australia has a hot climate and inevitably playground equipment and surfacing can heat up rapidly and retain heat. Many playground surfaces and equipment can exceed temperatures greater than 50°C and if young children come into contact with these surfaces, they can be burned severely within seconds. Surfaces can retain heat for long periods of time and cause burns to children. Play surfaces must be monitored before children have access to the outdoor environment.

SEVERE HEAT

Severe heat or heatwaves are periods of unusually hot weather. Climate change is resulting in more intense heatwaves in Australia and presents an extreme risk to the health and safety of children. Children -especially young children can dehydrate quickly which can cause heat-related illness including heat stroke and heat exhaustion.

Active heatwave warnings are indicated within the Australian Warning System (AWS) and range from Advice to Emergency Warning. Risk management measures must be implemented and managed to ensure children remain safe and healthy during a severe heat event.

THE APPROVED PROVIDER, NOMINATED SUPERVISOR AND EDUCATORS WILL:

- ensure obligations under the *Education and Care National Law and Regulations* are met
- ensure risk assessments are conducted to identify any potential hazards to children during summer months that could cause harm or injury to children. Risk minimisation control measures will be put in place to protect children. Potential hazards could include:
    - hot equipment- slides, poles, guardrails, any metal surfaces
    - hot surfaces- rubber and synthetic grass, walkways, concrete surfaces
    - sun burn and dehydration
    - access to bodies of water (filled water troughs/containers/trays/pools)
    - severe heat
    - bushfires and air pollution
- complete a *Daily Playground Surface Temperature Check* during summer months or extreme hot weather
- use a thermometer or their hand to test surface temperature and make an informed decision about permitting children to play on equipment or in the outdoor space. If the surface temperature is determined to be too hot or is recorded as at or above 50°C it is recommended by Kidsafe Australia that children do NOT play on the surface

- ensure children wear shoes when playing in the outdoor area
- monitor Bureau of Meteorology (BOM) for severe heat weather warnings and implement procedures to ensure the health and safety of all children and staff
- monitor bush fire activity and be aware of air quality and hazardous levels of air pollution caused by bushfires *(see Bushfire Policy)*
- ensure children have access to water at all times throughout the day and remind them to take extra drinks during hot weather to avoid dehydration
- be aware of the signs and symptoms of heat-related illness children and implement first aid as required
- keep children indoors during severe heat events
- ensure fans/air conditioning are used to help keep children cool
- close blinds/curtains where required to prevent sun shining into rooms
- adhere to NSW health department advice for hot weather risks and recommendations
- ensure sunscreen purchased for the Service complies with Australian Standard AS/NZS 2604:2012.

ROLE MODELLING AND WORK, HEALTH AND SAFETY

Cancer Council Australia acknowledges that children are more likely to develop sun-safe habits if they are role-modelled and demonstrated by adults around them. Occupational UV exposure is also a WH&S issue. All educators, staff at the OSHC Service will therefore be required to role model appropriate sun protection behaviours by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- discussing sun protection with children and demonstrating a positive and proactive approach to the management of sun protection in the OSHC Service
- regularly drinking water and encouraging children to drink extra water in hot weather
- adapting the learning environment when severe weather events occur
- families and visitors are encouraged to role model positive sun safe behaviour
- monitoring the UV Index Levels and Daily Sun Protection Times throughout the day
- regularly monitoring and reviewing the effectiveness of the *Sun Safety Policy*
- submitting the Sun Safety Policy to the Cancer Council every three years to maintain SunSmart status (required if a SunSmart member).

EDUCATION AND INFORMATION

- Sun protection will be incorporated regularly into learning programs
- Sun protection information will be promoted to staff, families and visitors
- Severe hot weather events will be monitored through the Bureau of Meteorology (BOM) and risk mitigation measures implemented
- Further information and resources are available from the Cancer Council website https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety and each state and territory SunSmart web page
  See https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/be-sunsmart/sunsmart-in-schools for links
- The *Sun Safety Policy* will be made available to all educators, staff, families, and visitors of the OSHC Service to ensure a compressive understanding about keeping sun safe including appropriate hat, clothing and sunscreen requirements
- Information about Sun Safety will be included in our Family Handbook and sun protection information and resources made accessible and communicated regularly to families.

CONTINUOUS IMPROVEMENT

Our *Sun Safe Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

Australian Safety Standards

AS 4174:2018 Knitted and woven shade fabrics

AS/NZS 1067.1:2016, Eye and face protection - Sunglasses and fashion spectacles
AS/NZS 4399:2020, Sun protective clothing - Evaluation and classification
AS/NZS 2604:2012 Sunscreen products - Evaluation and classification
AS/NZS 4685.0:2017, Playground equipment and surfacing - Development, installation, inspection, maintenance and operation.6.2.1 General considerations, 6.3.9 Shade and sun protection, Appendix A Shade and sun protection

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	SEPTEMBER 2026
VERSION NUMBER	August 2025/1		

WATER SAFETY POLICY

The safety and supervision of children is paramount when in or around water. This relates to water play, excursions near water, hot water, drinking water and hygiene practices with water in the Out of School Hours Care (OSHC) Service environment.

Children will be supervised at all times during water play experiences to help keep children safe in and around water and support children's learning in a safe environment.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
12	Meaning of a serious incident
101	Conduct of risk assessment for excursions
115	Premises designed to facilitate supervision
122	Educators must be working directly with children to be included in ratios
168(2)(a)(iii)	Education and care service must have policies and procedures in relation to- Water safety, including safety during any water-based activities
170	Policies and procedures to be followed
176	Time to notify the certain information to the Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Child Safe Environment Policy Excursion/Incursion Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Sun Safe Policy Supervision Policy

PURPOSE

To ensure the safety and supervision of children in and around water. This includes water play, excursions near water, hot water, drinking water and hygiene practices with water in the Out of School Hours Care Service environment.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

WATER HAZARDS

The National Regulations make reference to '*water hazards'* however the term is not expressly defined. In this policy, a water hazard is defined as anything that can hold 5cm of water and fit a child's nose and mouth and a 'water hazard' may include:

- large bodies of water such as dams, creeks, river or pooling water, swimming pool, portable pools and spas, jetted bathtubs (or Jacuzzis)
- fishponds
- smaller bodies of water such as baths, mop buckets
- sinks, basins
- water features, such as a wishing well
- containers for feeding animals
- water troughs, containers for paddling- clam shells
- beach

IMPLEMENTATION

Under the Education and Care Services National Regulations, an approved provider must ensure that policies and procedures are in place for managing water safety, including during any water-based activities and take reasonable steps to ensure those policies and procedures are followed.

According to Kidsafe, drowning is one of the leading causes of unintentional death for Australian children. Every year a number of children are killed and hundreds more rescued from near drowning situations. Non-fatal drowning incidents are also of great concern as they can have potential long-term effects, including brain damage and permanent disability.

The most common factor in childhood drowning is lack of supervision. A child can drown in as little as a few centimetres of water. Items such as nappy buckets, sinks, pet drinking bowls, ponds, pools, water features, water tanks are all potential drowning hazards. [source: Kidsafe]

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- adhere to all obligations under the *Education and Care National Law and Regulations*
- ensure educators, staff, students and volunteers have knowledge of and adhere to this policy and associated procedure
- complete detailed risk assessments that identify and assess risks associated with any water hazards and water-based activities
- ensure water hazards and water play are always highly supervised including:
    - direct and constant monitoring of children
    - careful and intentional positioning of educators
    - scanning and moving around the environment
    - observing play and anticipating behaviour
    - ensuring higher adult to child ratios
    - ensuring no child is left unattended when in proximity to water
- provide direction and education to educators, staff and families on the importance of children's safety and supervision in and around water
- ensure health and safety practices incorporate approaches to safe storage of water and water play
- ensure premises adjacent to or providing access to any water hazards that are not able to be adequately supervised at all times (e.g., dams, swimming pool) are to be isolated from children by a child resistant barrier or fence
- ensure there are no items near fencing that children could climb up onto to gain access to a water hazard (pot plants, boxes, chairs)
- conduct a risk assessment in accordance with the requirements prior to taking children on an excursion which is near water- consider any water hazards and any risks associated with water-based activities before an excursion/incursion is approved

- ensure at least one educator who holds current approved first aid qualifications, that was attained within the previous three years (Reg. 136), is in attendance at the Service at all times
- ensure at least one educator has successfully completes cardio pulmonary resuscitation training (CPR) each year, is in attendance at the OSHC Service at all times
- display a Cardiopulmonary Resuscitation (CPR) guide near any swimming pool, wading pool, or body of water
- ensure hot water is inaccessible to children, including hot drinks accessed by educators, staff or families
- ensure the regulatory authority is notified within 24 hours of becoming aware of a serious incident.

EDUCATORS WILL:

- provide active supervision when children are participating in water activities including:
    - supervise children near water at all times
    - never leave children alone near any water
    - direct and constant monitoring of children
    - scanning and moving around the environment
    - observing play and anticipating behaviour
- ensure fish / frog ponds and water features that are not able to be adequately supervised at all times and/or pose an unacceptable risk to children are guarded or effective barriers are in place
- complete a daily Safety Inspection of premises to ensure that all hazards are known and minimised. When a hazard or potential hazard is detected, educators will complete a risk assessment to address any concerns and children will be excluded from the area until the hazard has been rectified.
- utilise water activities in appropriate weather as part of the planned program
- allow the children the opportunity to experiment with water, sand, and mixing materials
- incorporate water safety awareness into the educational program
- monitor all taps on the premises that children have access to and ensure they are turned off securely when not in use
- safely cover or make inaccessible to children all water containers
- empty wading pools immediately after every use store to prevent the collection of water, e.g., upright
- check for and empty any water that has collected in holes or containers after rainfall or watering gardens
- ensure water troughs are not used without a stand to keep it off the ground
- ensure children remain standing on the ground whilst using the water trough

- ensure buckets of water for soaking toys or clothing are inaccessible to children
- ensure water troughs or containers for water play are filled to a safe level and emptied into the garden areas after each use
- discouraged children from drinking from any water activities for health and safety
- ensure laundry, storerooms and educator areas have Staff only signs on doors to remind adults to close doors behind them
- they teach children about staying safe in and around water
- ensure wading pools are hygienically cleaned, disinfected and chlorinated appropriately:
    - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant.
        - wash away disinfectant before filling pool
        - add Chlorine to pool before children use the pool
        - check chlorine levels frequently
        - children with diarrhoea, upset stomach, open sores or nasal infections should not use the pool
        - all children should wear appropriate swimwear / bathers, go to the toilet before entering the pool, and follow correct toilet hygiene practices while in the pool
        - remove all children immediately, empty and disinfect the pool should a child pass a bowel motion whilst in the pool.

OPERATIONAL SAFETY

- water tanks will be labelled with “Do Not Drink” signage and the children will be supervised in this area to make sure they are not accessing this water for drinking
- educators will discuss with the children the use of water tank water and how it differs from drinking water
- hot water accessible to children will be maintained at the temperature of 50.C° which will be tested annually. [Australian standard AS 3498]
- hot drinks are not to be consumed near children by educators, students or visitors
- water for pets at the Service must be changed daily and only be accessible to children when educators are present.

Important: Parents will be notified as soon as practicable but within 24 hours if their child is involved in an incident/accident at the OSHC Service or while under Service care. Details of the incident/accident will be recorded on an *Incident, Injury, Trauma and Illness Record*.

Reg. 176: If the incident/accident, situation or event presents imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours. Educators will follow emergency procedures and contact emergency Services if a child appears to be missing or unaccounted for or is involved in a serious incident or accident.

CONTINUOUS IMPROVEMENT

Our *Water Safety Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	SEPTEMBER 2026
VERSION NUMBER	August 2025/1		

ADMINISTRATION OF FIRST AID POLICY

Under the *Education and Care Services National Regulations* the approved provider must ensure policies and procedures are in place for the administration of first aid (Reg. 168) and take reasonable steps to ensure policies and procedures are followed. First aid can save lives and prevent minor injuries or illnesses from becoming major. The ability to provide prompt basic first aid is particularly important in the context of an out of school hours service where educators have a duty of care and obligation to assist children who are injured, become ill, or require support with administration of medication.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.167	Offence relating to protection of children from harm and hazards
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
92	Medication record
93	Administration of medication

94	Exception to authorisation requirement-anaphylaxis or asthma emergency
97	Emergency and evacuation procedures
101	Conduct a risk assessment for excursions
102C	Conduct a risk assessment for transporting of children by the education and care service
136	First aid qualifications
137	Approval of qualifications
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168 (2)(a)(iv)	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
175	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Child Safe Environment Policy Dealing with Infectious Diseases Policy Diabetes Management Policy Emergency and Evacuation Policy Epilepsy Management Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Record Keeping and Retention Policy Safe Transportation Policy Sun Safety Policy Water Safety Policy

PURPOSE

Our Out of School Hours Care (OSHC) Service has a duty of care to provide and protect the health and safety of children, families, educators, and visitors of the Service. This policy aims to support educators to:

- Preserve life
- Ensure the environment is safe and other people are not in danger of becoming ill or injured
- Ensure that ill or injured persons are stabilised and comforted until medical assistance intervenes
- Relieve pain if possible
- Monitor ill or injured persons and promote recovery

- Provide immediate and effective first aid to children or adults
- Apply additional first aid if the condition does not improve

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

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, management, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

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

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT IS RESPONSIBLE FOR:

- ensuring obligations under the *Education and Care Services National Law and National Regulations* are met
- ensuring educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- ensuring all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- ensuring there is an induction process for all new staff, including casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements; individual children's allergies and individual children's medical management plans
- ensuring families are aware of this *Administration of First Aid Policy*
- taking every reasonable precaution to protect children at the OSHC Service from harm and/or hazards that can cause injury
- ensuring that the following qualified people are in attendance and immediately available in an emergency at all times the service is providing education and care to children [Reg.136]
    - at least one educator, staff member or nominated supervisor who holds a current ACECQA approved first aid qualifications

- at least one educator, staff member or nominated supervisor of the service who has undertaken current approved anaphylaxis management training
- at least one educator, staff member or nominated supervisor of the service who has undertaken current approved emergency asthma management training

(One staff member may hold one or more of the three qualifications)

OR

if children are being educated and cared for at a service premises on the site of a school, one of the following must be in attendance at the school site and be immediately available in an emergency [sub regulation (1)]

- at least one staff member of the school who holds a current approved first aid qualification
- at least one staff member of the school who has undertaken current approved anaphylaxis management training
- at least one staff member of the school who has undertaken approved emergency asthma management training

- ensuring staff maintain current ACECQA approved first aid qualification and ACECQA approved anaphylaxis and asthma management training every 3 years and renew cardio-pulmonary resuscitation every 12 months
  - planning and reviewing the staff roster to ensure all first aid qualification requirements are met at all times
- appointing a nominated first aid officer
- ensuring a risk assessment is conducted prior to an excursion, regular outing, or when providing transportation to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]
- providing and maintaining an appropriate number of up-to-date, fully equipped first aid kits that meet Australian Standards including transportable first-aid kits to be used on excursions and when providing transportation [Reg. 89]
- monitoring the contents of all first aid kits and arrange replacement of stock, including when the use-by date has been reached
- disposing of out-of-date materials and supplies appropriately
- ensuring safety signs showing the location of first aid kits are clearly displayed
- providing and maintaining a transportable first aid kit that can be taken to excursions and other activities [Reg. 89]

- ensuring that first aid training details are recorded and kept up to date on each staff member's record
- ensuring there is an induction process for all new staff, including casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements and individual children's allergies and individual medical management plans
- ensuring that families/parents are notified as soon as practicable if their child is involved in an incident, injury, trauma or illness at the Service and that details are recorded on the *Incident, Injury, Trauma and Illness* Record
- ensuring the regulatory authority is notified within 24 hours if a child is involved in a serious incident, injury, trauma or illness at the OSHC Service [Reg 12, 176]
- ensuring that staff members are offered support and debriefing subsequent to a serious incident requiring the administration of first aid
- keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes
- ensuring parents/guardians provide written consent (via the enrolment record) for service staff to administer first aid
- ensuring parents/guardians provide written consent for the approved provider, nominated supervisor or educator to seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital [Reg 161(1)(a)]

EDUCATORS WILL:

- implement appropriate first aid procedure. when necessary, by adhering to the service's *Administration of First Aid Procedure*
- maintain current ACECQA approved first aid qualification, and qualifications in approved anaphylaxis management and emergency asthma management as required
- renew cardio-pulmonary resuscitation every 12 months
- ensure that all children are adequately supervised while providing first aid and comfort for a child involved in an incident or suffering trauma
- ensure that the details of any incident requiring the administration of first aid are recorded on the *Incident, Injury, Trauma and Illness Record* accurately
- conducting a risk assessment prior to an excursion, regular outing or when providing regular transportation of children to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]

FAMILIES WILL:

- read and comply with the policies and procedures of the OSHC Service
- sign the *Incident, Injury, Trauma and Illness* acknowledging they have been made aware of the incident and the first aid that treatment that was given to the child
- provide the required information for the OSHC Service's medication record
- provide the service with a medical management plan for their child if required
- provide written consent (via the enrolment record) for Service staff to administer first aid
- provide written consent for the approved provider, nominated supervisor or educator to seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital
- be contactable, either directly or through emergency contacts listed on the child's enrolment record
- notify educators of any change in condition of their child's health that may impact the child's care and require the administration of first aid (ACECQA, 2021).

INCIDENT, INJURY, TRAUMA AND ILLNESS RECORD

Any incidents, injuries trauma or illness, including first aid provided, must be recorded and include the following details, as per Education and Care Services National Regulation 87:

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

FIRST AID KIT

The approved provider of the OSHC Service will ensure that first aid kits are kept in accordance with National Education and Care Service Regulations (Reg. 89).

ALL FIRST AID KITS AT THE SERVICE MUST:

- be suitably equipped
- not be locked

- not contain paracetamol
- be suitable for the number of employees and children and sufficient for the immediate treatment of injuries at the Service
- be easily accessible to staff and educators
- be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents
- be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments
- be regularly checked using the *First Aid Kit Checklist* to ensure the contents are as listed and have not degraded or expired
- be easily recognisable
- be easy to access and if applicable, located where there is a risk of injury occurring
- include emergency telephone numbers, and location of the nearest first aid trained educators
- display a photograph of the first aid trained educators, along with contact details to assist in the identification process
- be stocked with precautionary items such as sunscreen and water if using outdoors
- be taken on excursions
- be maintained in proper condition and the contents restocked as required.

Our nominated First Aid Officer responsible for maintaining all First Aid kits at the OSHC Service is:

FIRST AID OFFICER	
Name	Kelly Collinson
Role	Educational Leader and First Aid Officer
Number of First Aid Kits Responsible for at the Service:	3 kits, plus a portable carry bag
Additional First Aid Officer:	Michael Donnelly, Shilo Oldfield and Abbi Corcoran

These individuals are responsible for conducting and maintaining each first aid kit by complying with the First Aid Checklist, certifying each kit has the required quantities, items are within their expiry dates, and sterile products are sealed. This will occur after each use or if unused, at least annually.

Individuals along with the nominated supervisor will also consider whether the first aid kits and components are appropriate and effective for the Service's hazards and the injuries that have occurred. If

the kit requires additional resources, these individuals will advise and follow up with the nominated supervisor.

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

FIRST AID KIT CHECKLIST

Our OSHC Service will use a centre created checklist and check the contents of first aid kits and the portble carry bag weekly.
Safe Work Australia's *First Aid in the Workplace Code of Practice* also provides a guide to what to include in a First Aid Kit.

We will determine the need for additional items to those in the checklist, or whether some items are unnecessary, after analysing the number of children at our OSHC Service and what injuries children or adults may incur. We will review our incident, injury, trauma and illness records to assist us in making an informed decision about what to include.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Administration of First Aid Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

SLEEP AND REST TIME POLICY

The United Nations Convention on the Rights of the Child states that all children and young people are guaranteed the right "to rest and leisure, to engage in play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts". (My Time, Our Place: Framework for School Age Care in Australia, (V2.0) p. 5). Our Out of School Hours Care (OSHC) Service will cater for the needs of individual children who may require a rest, or even a sleep, after a busy school day.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1	Design	The design of the facilities is appropriate for the operation of a service.
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.165	Offence to inadequately supervise children
S.167	Offence relating to protection of children from harm and hazard
82	Tobacco, drug and alcohol-free environment
84A	Sleep and Rest
84B	Sleep and rest policies and procedures
84C	Risk assessment for purposes of sleep and rest policies and procedures
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
110	Ventilation and natural light

115	Premises designed to facilitate supervision
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be available
172	Notification of change to policies or procedures
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Child Safe Environment Policy Health and Safety Policy	Interaction with Children, Family and Staff Policy Work Health and Safety Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers and nominated supervisors to ensure their services have policies and procedures in place for children's sleep and rest having regard to the ages, developmental stages and individual needs of the children. Our OSHC Service will ensure that all children have appropriate opportunities to rest and relax in accordance with their individual needs whilst attending the service. Our OSHC Service has a duty of care, to ensure we respect and cater for each child's specific needs and provide an environment that takes every reasonable precaution from harm and hazard.

SCOPE

This policy applies to the approved provider, nominated supervisor, educators, staff, children, students, volunteers and visitors of the Service.

IMPLEMENTATION

'Children have different sleep, rest and relaxation needs. Children of the same age can have different sleep patterns that nominated supervisors and educators need to consider within the OSHC Service. As per Standard 2.1 (Element 2.1.1) of the National Quality Standard, each child's comfort must be provided for and there must be appropriate opportunities to meet each child's sleep, rest and relaxation needs.' (ACECQA)

Our OSHC Service defines 'rest' as a period of inactivity, solitude, calmness or tranquillity, and can include a child being in a state of sleep. Considering the busy and energetic nature of a child's day, we feel that it is important for children to participate in a quiet/rest period after school if required, to rest, relax and recharge their body.

Our OSHC Service will consult with families about their child's individual needs, ensuring they are aware of the different values and parenting beliefs, cultural or opinions associated with sleep/rest requirements.

SLEEP AND REST SPECIFIC RISK ASSESSMENT

The approved provider, in conjunction with educators of the OSHC Service, will conduct a comprehensive risk assessment in order to identify any potential risk/s or hazards and ensure the safety of all children during sleep and rest in line with Red Nose and ACECQA guidelines (Reg. 84A).

The risk assessment will be reviewed at least annually or after being aware of an incident or circumstance where the health, safety or wellbeing of children may be compromised during sleep or rest. All risk assessments will be regularly assessed and evaluated as to facilitate continuous improvement in our service. If a risk concerning a child's safety during sleep and rest is identified during the risk assessment, the approved provider must update the *Rest Time Policy* and procedure as soon as possible. The risk assessment must be stored safely and securely and kept for a period of 3 years.

Our risk assessment will consider and include the following information:

- the number, age, developmental stages and individual needs of children
- the sleep and rest needs of individual children being educated and cared for (including specific health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest)
- the suitability of staffing arrangements to adequately supervise and monitor children during sleep and rest periods
- the level of knowledge and training of staff supervising children during sleep and rest periods
- the location of sleep and rest areas, including the arrangement of beds within the sleep and rest areas
- the safety and suitability of beds and bedding equipment, having regard to the ages and developmental stages of the children
- any potential hazards

  - in sleep and rest areas
  - on a child during sleep and rest periods (such as jewellery)
- the physical safety and suitability of sleep and rest environments (including temperature, lighting and ventilation)

(ACECQA 2023)

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- ensure that obligations under the *Education and Care Services National Law and National Regulations* are met
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and associated procedure
- ensure families are aware of this *Rest Time Policy*
- conduct a sleep and rest specific risk assessment at least annually to ensure all protentional hazards are controlled in sleep or rest areas in line with Red Nose and ACECQA guidelines
- take reasonable steps to ensure that children's needs are being met by giving them the opportunity to rest, having regard to the ages, developmental stages and individual needs of each child
- ensure the area for rest is well ventilated and has natural lighting
- ensure educators provide safe and adequate supervision when children rest their bodies
- provide information to educators and staff about evidence based safe sleep practices as recommended by Red Nose (although school aged children are not considered high risk, these practices should be known by all educators)
- ensure children who are sleeping or resting are closely monitored and that all sleeping or resting children are within hearing range and observed. This involves physically checking/inspecting sleeping children at regular intervals [recorded every 10 minutes] and ensuring that they are always within sight and hearing distance of sleeping and resting children so they can easily monitor a child's breathing and the colour of their skin. It is recommended that educators will not perform administrative duties that would take their attention away from sleeping/resting children (Note: CCTV, audio monitors or heart monitors do not replace the need for physical checking/inspecting sleeping children)
- ensure educators, staff and volunteers follow the policy and procedures
- ensure sleep and rest environments will be safe and free from all hazards including cigarette and tobacco smoke.

EDUCATORS WILL:

- have a thorough understanding of the OSHC Service's policy and practices and embed practices to support safe sleep/rest into everyday practice
- consult with families about children's rest needs and include children in decision making (children's agency)
- ensure children are provided with a high level of safety when sleeping and resting and every reasonable precaution is taken to protect them from harm and hazard
- maintain adequate supervision and ratios throughout any rest period
- assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required
- communicate with families about their child's rest time and observed requirements
- encourage children to dress appropriately for the room temperature when resting. Lighter clothing is preferable, with children encouraged to remove shoes, jumpers, jackets, hats and bulky clothing.
- monitor the room temperature to ensure maximum comfort for the children
- provide an environment that is free from cigarette or tobacco smoke
- opportunities are presented for rest and relaxation, as well as sleep if required
- consideration is made for each child's sleep/rest needs- including the age of the child, medical conditions, individual needs
- a quiet area is provided for children to sleep/rest, away from the main group of children
- the designated rest area may include a cushion, bean bag or comfortable seat in a quiet section of the care environment
- sleeping and resting children are monitored at regular intervals
- faces of sleeping children are uncovered when they are sleeping
- an educator is always within sight and hearing of sleeping and resting children so they can be monitored (breathing patterns, colour of skin)

FAMILIES WILL:

- be informed during orientation of our *Rest Time Policy* and procedure
- be requested to provide educators with updates on their child's individual need for rest (or sleep) routines if applicable.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Rest Time Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

Key terms

Term	Meaning
ACECQA- Australian Children's Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.
Adequate supervision	Adequate supervision means: • that an educator can respond immediately, particularly when a child is distressed or in a hazardous situation. • knowing where children are at all times and monitoring their activities actively and diligently
Continuous supervision	Ensure an educator is in sight and hearing of a sleeping child at all times- representing best practice (Red Nose)
Rest	A period of inactivity solitude, calmness or tranquility and can include a child being in a state of sleep.
Relaxation	Relaxation or other activity for bringing about a feeling of calm in your body and mind.
Red Nose	Red Nose is Australia's leading authority on safe sleep and safe pregnancy advice.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	V10.02.25		

INTERACTIONS WITH CHILDREN, FAMILIES AND STAFF POLICY

My Time, Our Place (MTOP) identifies secure, respectful, and reciprocal relationships with children as one of the principles that underpin practice. Within our Out of School Hours Care (OSHC) community many different relationships are negotiated with and between children, educators, and families. The way in which these relationships are established and maintained, and the way in which they remain visible impacts on how our community functions as a whole. Relationships directly affect how children form their own identity, whether or not they feel safe and supported, and ultimately, their sense of belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parents views are respected	The expertise, culture, values and beliefs of families are respected, and families share decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.166	Offence to use inappropriate discipline
73	Educational program
84	Awareness of child protection law
115	Premises designed to facilitate supervision
117A	Placing a person in day-to-day charge
118	Educational leader
123	Educator to child ratios-centre-based services
126	Centre-based services- general educator qualifications
145	Staff record
155	Interactions with children
156	Relationships in groups
157	Access for parents
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed

RELATED POLICIES

Behaviour Guidance Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy Delivery of Children to, and Collection from and Education and Care Service Premises Governance Policy	Incident, Injury, Trauma and Illness Policy Privacy and Confidentiality Policy

PURPOSE

We aim to build positive relationships with children, families, and educators through collaboration and interactions, which is reflective of our Out of School Hours Care (OSHC) Service philosophy and the *My Time, Our Place Framework* (V2.0). Educators will encourage positive relationships between children and their peers as well as with educators and families at the Service, ensuring children feel safe and supported.

SCOPE

This policy applies to children, families, staff, the approved provider, nominated supervisor, management, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Under the *Education and Care Services National Regulations*, the approved provider must ensure that policies and procedures are in place for interactions with children (Reg. 168) and take reasonable steps to ensure those policies and procedures are followed.

To build and maintain positive and respectful relationships with children, families, and educators our OSHC Service will adhere to our statement of philosophy and the ACA Code of Ethics. We aim to provide a child safe culture where our values and practices that guide the attitudes and behaviour of all staff are guided by the National Principles for Child Safe Organisations and the implementation of the Child Safe Standards.

INTERACTIONS WITH CHILDREN

Children need positive relationships with educators that are trusting and responsive to their individual needs. Through these experiences and interactions children will develop a positive understanding of themselves and feel a sense of belonging. We promote a respectful, child safe culture where children concerns are always responded to, and children feel empowered to participate in decisions and provide feedback to educators and staff. All educators and staff play a vital role in protecting children from harm by responding to and reporting any incidents, disclosures or suspicions of abuse, harm, neglect or ill-treatment. Our Service upholds a strong reporting culture to safeguard children in our care.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR WILL:

- ensure obligations under the *Education and Care Services National Law and National Regulations* are met
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- ensure all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- create a welcoming and relaxed atmosphere in which children experience equitable, friendly and genuine interactions with all educators

- ensure environments are created to ensure children feel safe, valued, understood and supported to learn
- meet educator to child ratio and qualification requirements
- ensure educators and staff have undertaken current child protection legislation training including mandatory reporting requirements and obligations
- ensure all educators and staff are aware of the procedure of reporting allegations of abuse, neglect, harm or ill-treatment
- ensure that no child is subjected to any form of corporal punishment or any discipline that is unreasonable or inappropriate in the circumstances (S. 166 National Law)
- support educators to use trauma-informed practices to recognise and respond to the emotional needs of children (see *Incident, Injury, Trauma and Illness Policy*).

EDUCATORS WILL:

- role-model appropriate language and behaviour
- support children to be aware of their own feelings as well as the feelings of others
- encourage children to treat all other children with respect
- provide children with the opportunity to explore their dispositions for learning by expressing themselves and their opinions
- ensure children are aware of how to raise concerns or provide feedback – (child focused complaint handling system- *Dealing with Complaints Policy)*
- respond or report to children about how their feedback has been acted upon
- assist the children to build resilience and self-assurance through positive interactions
- guide children's behaviour positively (see *Behaviour Guidance Policy*)
- respect the rights, dignity and agency of children (United Nations Convention on the Rights of the Child)
- support children within the OSHC learning environment
- provide appropriate supervision so children feel safe in their interactions with other children
- speak to children in a positive manner at all times, promoting respect, tolerance and empathy, including the use of non-verbal cues and communication
- engage in meaningful, open interactions that support the acquisition of skills for life and learning of children
- respect each child's uniqueness, be attuned to, and respond sensitively and appropriately to children's efforts to communicate and use the child's own language, communication styles, and culture to enhance interactions

- listen to children and take them seriously; support and encourage children to use appropriate language in their interactions with adults and peers. Educators will extend upon children's interests and ideas through questions and discussions, supported and made visible in observations, reflections, and programming.
- understand their mandatory reporting requirements and respond to any incident, disclosure or suspicion of child abuse, harm, neglect or ill-treatment they witness or suspect immediately
- communicate with children by getting down to their level, using eye contact, and showing respect to the child whilst engaging in and promoting effective communication
- show empathy to children
- ensure that the values, beliefs, and cultural practices of the child and family are considered and respected (Reg. 155)
- ensure that no child is ever isolated for any reason other than illness, accident or pre-arranged appointment with parental consent. During this time, they will be under adult supervision.
- regularly reflect on their relationships and interactions with children and how these can be improved to benefit each child
- facilitate children's individual development extending upon their strengths, interests and abilities

INTERACTIONS BETWEEN MANAGEMENT, EDUCATORS AND FAMILIES

Effective communication is the key to developing and maintaining positive interactions and relationships with others and helps to build trusting and respectful partnerships with families. Educators use positive and open communication with families and siblings in order to create a responsive and inclusive environment for children, staff and families. Interactions with families help to inform educators' knowledge of each child's distinctive interests, skills cultures and abilities. This helps to build a positive experience and a safe learning environment that encourages children to expand their knowledge and understandings.

MANAGEMENT AND EDUCATORS WILL ENSURE:

- all families are treated equitably without bias or judgement, recognising that each family is unique
- families are provided with information and resources in their first language
- families are asked to identify a preferred method of regular communication with the Service (this may include utilising a translator service)
- families and children are greeted upon arrival in a respectful manner
- they learn the names of family members and use these names when they greet them

- two-way communication is established through leading by example and asking questions and a willingness to offer information about ourselves
- common terminology (not jargon) is used when talking to parents regarding their child's development
- privacy and confidentiality are respected at all times
- information about another child or family information is never discussed with a parent or visitor
- they remain sensitive to cultural differences amongst families and encourage families to share cultural aspects with the children and educators at the service
- the advice and opinion from other professional experts are requested, with parental permission, to assist educators develop and implement strategies to support the inclusion of children with additional needs
- they seek additional resources and professional support for families through a range of organisations such as KU Inclusion Support, Area Health and other specific health professional networks
- verbal communication is always open, respectful and honest
- families are provided with up-to-date service information and notices through Daily Reports, newsletters, communal notice boards, emails and sign-in sheets.
- they regularly reflect on parent input into the program and make changes where necessary that will best benefit the service and children
- connections between families are promoted and enhanced through inviting families to participate in routines and events at the OSHC Service
- families are aware of our complaint handling process- (*Dealing with Complaints Policy*)
- any gift (including cash money) received by a family valued over $100 is to be declared to management
- any bribe or gift received by a family that may influence or appear to influence a decision or action is to be declined and reported to management.

INTERACTIONS BETWEEN STAFF AND EDUCATORS

The OSHC Service recognises that the way educators interact with each other has an effect on the interactions they have with children and families. Educators working within our OSHC Service are required to demonstrate mutual respect towards each other and value the contributions made by each educator. This enables our OSHC Service to maintain positive relations and model the type of communication they want children to develop.

TO MAINTAIN PROFESSIONALISM AT ALL TIMES, EDUCATORS WILL:

- engage in professional communication in order to create an effective work environment and to build a positive relationship with educators, children and families. Communication amongst colleagues creates a positive atmosphere and a professional image for families. Communication between staff and families ensures that important information is being passed on consistently.
- champion a child safe culture through their attitudes, behaviours and actions
- collaborate together as a team sharing room roles and responsibilities through the use of a roster where necessary
- be respectful when listening to each other's point of view and ideas
- maintain effective communication to ensure that teamwork occurs
- use staff meetings to communicate their professional reflections and ideas for continuous improvement as a team
- attend in-service training to update and refresh and add to individual skills and knowledge
- keep up to date with current legislation to child protection including mandatory reporting requirements – (*Child Protection, Reportable Conduct Scheme)*
- refer to the *Dealing with Complaints Policy (Staff) /Procedure* if they feel a situation with another educator is not being handled with professionalism, respect, and fairness
- recognise each other's strengths and value the contribution each person makes to different work roles
- work collaboratively to reach decisions which will enhance the quality of the education and care offered at the OSHC Service
- welcome diverse views and perspectives
- work together as a team and engage in open and honest communication at all times
- respect each other's positions and opinions
- develop and share networks and links with other agencies
- resolve differences promptly and positively and use the experience to develop more effective methods of working together.

TO ENHANCE COMMUNICATION AND TEAMWORK, MANAGEMENT WILL:

- provide new educators with relevant information about the Service and program through a *Staff Handbook*, induction program, and daily communication
- treat educators with respect
- be sensitive to the feelings and needs of educators
- provide constructive feedback to educators as part of their professional learning plan support

- value the role and contribution of each educator
- demonstrate commitment to ongoing collaboration and engagement to support staff wellness
- provide opportunities for all educators to have input into the program development and evaluation
- appreciate and utilise educator skills and interests
- provide support, assistance and mentoring to educators
- hold regular educator meetings to encourage and support professional growth and reflective practice
- use appropriate conflict resolution techniques to solve problems
- ensure policies and procedures are up to date regarding communication, expected behaviour and grievances and providing a child safe environment
- provide opportunities for professional development

TO ENHANCE COMMUNICATION AND TEAMWORK, EDUCATORS WILL:

- maintain privacy and confidentiality
- be respectful, caring and inclusive of all colleagues
- be sensitive to the feelings and needs of other team members
- support colleagues during difficult situations
- provide constructive feedback to each other
- trust each other
- value the role and contribution of colleagues
- appreciate and utilise colleague skills, strengths and interests regardless of qualification and experience
- provide support and assistance to each other
- share responsibilities
- have a flexible attitude towards team roles and responsibilities
- greet each other by name
- show genuine interest in the other person by using active and reflective listening
- communicate ideas and opinions clearly and professionally
- use a communication book or daily diary to pass on messages and record relevant information
- use appropriate conflict resolution techniques to solve problems
- engage in opportunities for professional development.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Interaction with Children, Families and Staff Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

STAFFING ARRANGEMENTS POLICY

Our Outside School Hours Care (OSHC) Service aims to provide educators, staff and nominated supervisors who have the qualifications and experience to develop warm, nurturing, and respectful relationships with children. We are committed to ensuring that children's health, safety, and wellbeing is protected at all times through providing appropriate and effective supervision according to legislated ratios and best practice. Our educators, in collaboration with our educational leader, design and implement developmentally appropriate programs that support children's participation and engagement, interests and learning.

1.1 NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.1	Organisation of Educators	The organisation of educators across the Service supports children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of Educators at the Service.
4.2	Professionalism	Management, Educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, Educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.56	Notice of addition of nominated supervisor (Notice of change to nominated supervisor (WA Services)
S.56A	Notice of change of a nominated supervisor's name or contact details
S.161	Offence to operate education and care service without nominated supervisor
S.161A	Offence for nominated supervisor not to meet prescribed minimum requirements
S.162	Offence to operate education and care service unless responsible person is present
S.162A	Child protection training (Persons in day-to-day charge and nominated supervisors to have child protection training -WA Services)
S.169	Offence relating to staffing arrangements
S.172	Offence to fail to display prescribed information
S.173	Offence to fail to notify certain circumstances to Regulatory Authority
S.174	Offence to fail to notify certain information to Regulatory Authority

S.175	Offence relating to requirement to keep enrolment and other documents
S.188	Offence to engage person to whom prohibition notice applies
4 (1)	Definitions
10	Meaning of *actively working towards* a qualification
13	Meaning of *working directly with children*
35	Notice of addition of new nominated supervisor
83	Staff members and family day care educators not to be affected by alcohol or drugs
84	Awareness of child protection law
117A	Placing a person in day-to-day charge
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
118	Educational leader
120	Educators who are under 18 to be supervised
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios – centre-based services
136	First Aid qualifications
145	Staff Record
146	Nominated supervisor
147	Staff Members
148	Educational Leader
149	Volunteers and Students
150	Responsible Person
151	Record of educators working directly with children
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
173	Prescribed information to be displayed
174	Time to notify certain circumstances to regulatory authority
177	Prescribed enrolment and other documents to be kept by approved provider

243	Persons taken to hold an approved diploma level education and care qualification
244	Persons taken to hold an approved certificate III level education and care qualification

RELATED POLICIES

Code of Conduct Policy	Privacy and Confidentiality Policy
Child Protection Policy	Record Keeping and Retention Policy
Child Safe Environment Policy	Safe Transportation Policy
Dealing with Complaints Policy	Rest Policy
Emergency and Evacuation Policy	
Excursion/Incursion Policy	
Governance Policy	
Incident, Injury, Trauma and Illness Policy	

PURPOSE

Under the Education and Care Services National Regulations, the approved provider must ensure that policies and procedures are in place in relation to staffing arrangements (Reg. 168) and take reasonable steps to ensure those policies and procedures are followed. (ACEQA 2021) To ensure our OSHC Service adheres to the Education and Care Service National Regulation we employ educators and staff in compliance with any state specific qualifications and experience and adhere to regulated educator and child ratios.

SCOPE

This policy applies to staff, educators, management, approved provider, nominated supervisor, students and volunteers of the OSHC Service.

IMPLEMENTATION

Our OSHC Service will comply with the required educators to child ratios and take into consideration any qualification requirements and experience for educators at centre-based services in order to meet National Regulations and Standards.

There are no national qualification requirements for educators at centre-based services for school age children including Out of School Hours Care Services, however some states and territories may have specific requirements

STAFFING ARRANGEMENTS

Under the Education and Care Services National Regulations, the approved provider must ensure the OSHC Service meets minimum staffing arrangements including:

- nominating a responsible person to oversee the day-to-day operation of the Service
- employing staff who hold required qualifications including: anaphylaxis and emergency asthma management training, first aid, CPR and child protection training
- adhering to educator to child ratios

- ensuring an appropriately qualified and experienced educational leader is employed to lead the implementation of the educational program under the approved learning framework
- ensuring each staff member is considered fit and proper to work with children and hold a valid WWCC.

1.1.1 NOMINATED SUPERVISOR

The nominated supervisor is a suitable person appointed by the approved provider who is placed in day-to-day charge of an approved OSHC Service. The nominated supervisor has a range of responsibilities under the National Law and Regulations including, but not limited to, programming, supervision and safety of children, entry to and exit from the premises, food and beverage, administration of medication, excursions and staffing.

The approved provider will:

- ensure a nominated supervisor is nominated for the OSHC Service and display the name of the nominated supervisor in a place that is clearly visible to staff, educators, families and visitors
- notify the regulatory authority at least seven days prior to the nominated supervisor or as soon as practicable (no-more than 14 days after the nominated supervisor has commenced employment in the position)
- ensure the regulatory authority is notified if the nominated supervisor ceases employment at the Service, is removed from the role or withdraws consent to the nomination
- ensure the nominated supervisors meets the following requirements:
    - must be 18 years of older
    - holds a valid WWCC/clearance
    - have adequate knowledge and understanding of the provision of education and care to children and has the ability to effectively supervise and manage an education and care Service (Reg. 117C)
    - have the ability to adequately supervise and manage an education and care service
    - have successfully completed Child Protection training and be aware of mandatory reporting obligations
    - have a history of compliance with *Education and Care National Law* and other relevant laws (e.g., Family Law)

The nominated supervisor will:

- accept the role in writing, to ensure they have a clear understanding about their role and responsibilities
- ensure the OSHC Service program is reflective of the approved learning framework, incorporate the children's interests, and experiences, and consider the individual differences and needs of each child

- adhere to Service policies ensuring a safe and healthy environment is provided
- register with PRODA and complete required background checks, including Working with Children Check and criminal history record check.

1.1.2 RESPONSIBLE PERSON

The responsible person can be the approved provider, or a person with management or control placed in day-to-day charge of the Service. Our OSHC Service will ensure there is always a nominated supervisor or responsible person on the premises when children are being educated and cared for.

The approved provider or nominated supervisor will:

- ensure any persons nominated as a responsible person placed in day-to-day charge are at least 18 years old and have adequate knowledge and understanding of the provision of education and care to children and an ability to effectively supervise and manage an education and care service (Reg. 117B)
- clearly communicate the responsible person on duty with families, educators, staff and visitors by displaying this information in the foyer or reception area
- ensure the responsible person adheres to Service policies and procedures and maintain a safe and healthy environment for children
- ensure the responsible person always acts with professionalism when dealing with children, educators, visitors, families and volunteers
- ensure the responsible person accepts the role in writing, to ensure they have a clear understanding about their role and responsibilities (Reg.117A)
- ensure the responsible person has a history of compliance with *Education and Care National Law* and other relevant law (e.g., Family Law)
- ensure the responsible person has successfully completed Child Protection training and be aware of mandatory reporting obligations. (Reg. 84).

'SUITABLY QUALIFIED PERSON' DEFINITION

ACECQA determines the following qualifications as requirements for a 'suitably qualified person':
an individual who holds an approved qualification as listed on the ACECQA website that is approved by the National Authority or an individual who holds a qualification as approved by the National Authority

ACTIVELY WORKING TOWARDS DEFINITION

An educator who is enrolled in a course for an ACECQA approved diploma level or higher qualification.

1.1.3 EDUCATIONAL LEADER

The educational leader has an influential role in inspiring, motivating, affirming, and challenging or extending the practice and pedagogy of educators. It is a joint endeavour involving inquiry and reflection, which can significantly impact on the important work educators do with children and families.
The approved provider will:

- nominate a qualified and experienced educator to take on the educational leader role and responsibilities (Reg.118)
- ensure the name of the educational leader is displayed at the OSHC Service in a place that is clearly visible to staff, educators, families and visitors (Reg.173)
- support the educational leader to fulfill their responsibilities by ensuring opportunities for professional development to support continuous improvement

The educational leader will:

- accept the position, in writing
- keep a record about how they mentor and guide educators of the OSHC Service to ensure continuous improvement
- guide educators to provide a range of learning experiences that cater for the needs and interests of children through play and leisure opportunities
- maintain evidence about the development of the learning program and the alignment to the *My Time, Our Place* (V2.0) framework

1.1.4

1.1.5 WORKING WITH CHILDREN CHECK /CLEARANCE

To comply with National Regulations for those undertaking paid or voluntary child-related work all employees, volunteers and students of the OSHC Service will acquire a Working with Children Check.

The approved provider will:

- keep a record of the expiry date of the Working with Children Check (WWCC) for all staff, volunteers and students
- verify all WWCC before any staff, educators, students and volunteers are engaged at the OSHC Service, to ensure the children are protected at all times
- check the NQAITS portal during the recruitment process for any prohibition notices issued to a potential employee
- ensure any notifications or concerns regarding a person's Working with Children Check are recorded and steps taken immediately to ensure the person is not working directly with children in accordance with directions from the Office of the Children's Guardian (NSW) or related authority in NSW
- ensure any visitor who has direct contact with children will be required to provide a WWCC for verification prior to coming into contact with children

- ensure a staff member, employee, volunteer, or contractor is not employed or engaged at the Service if the person is prohibited from working with children, including a prohibition notice in force provided under the National Law.

1.1.6 APPROVED FIRST AID QUALIFICATIONS/ANAPLYAXIS AND EMERGENCY ASTHMA MANAGEMENT TRAINING

- The approved provider is required to ensure at least one staff member, or one nominated supervisor holds current qualifications for first aid (including cardio-pulmonary resuscitation), anaphylaxis management and emergency asthma management training.
- The approved provider must ensure at least one staff member, or one nominated supervisor be in attendance at any place children are being educated and cared for by the OSHC Service and be immediately available in an emergency and hold the mandatory qualifications for:
    - an ACECQA approved first aid qualification (including cardio-pulmonary resuscitation renewed every 12 months)
    - anaphylaxis management training and
    - emergency asthma management training.

  (Approved qualifications are published on the ACECQA website)
- Services must have a staff member with current approved qualifications on duty and be immediately available in an emergency
- It is the staff and educator's responsibility to ensure they maintain current first aid (including cardio-pulmonary resuscitation), anaphylaxis management and emergency asthma management training qualifications and provide the OSHC Service with a copy of the certificate. Staff and educators must ensure they participate in training prior to the expiration date on their certificates
- approved first aid qualifications and ACECQA approved anaphylaxis and asthma management training every 3 years and renew cardio-pulmonary resuscitation every 12 months

1.1.7

1.1.8 STAFF RECORD

Approved Services must keep information about the nominated supervisor, educational leader, staff, volunteers, students, and the responsible person at the OSHC Service including name, address, date of birth, evidence of qualifications (including evidence of working towards qualifications), evidence of approved training (including Child Protection).
Our OSHC Service will ensure records are kept in accordance with regulation 145 and our *Record Keeping and Retention Policy.*

1.1.9

1.1.10 ADEQUATE SUPERVISION

Our OSHC Service adheres to the educator-to-child ratios outlined in the National Legislation and National Quality Framework and requires educators to comply with our *Supervision Policy* and designated floor plans to ensure effective supervision. Educators will actively monitor children at all times, adjusting supervision to suit group needs, maintaining visibility and accessibility, and work together to ensure safety and well-being during all activities, including transitions, rest, toileting, and transportation.

WORKING DIRECTLY WITH CHILDREN

National Regulations state that an educator cannot be included in calculating the educator to child ratio of an OSHC Service unless the educator is working directly with children. A record must be kept of educators working directly with children which includes the name of each educator and the hours each educator works directly with children being educated and cared for by the OSHC Service.

- To ensure compliance with regulations, our Service will only include educators in the educator to child ratio who are working directly with the children and ensure a current roster and a sign on/sign off record are available to verify this.

1.1.11

1.1.12 ROSTERS

- Our OSHC Service will ensure the roster and routine provides adequate supervision of children at all times
- Consideration will be made to engage educators to maintain continuity of care to support children's development of secure relationships and contribute to their wellbeing
- Where possible, casual staff will be chosen from a pool of regular educators with whom the children are familiar.
- The staff roster will be planned in advance to ensure regulation requirements are met, including staff qualification and first aid qualification requirements.

1.1.13 STUDENTS, VOLUNTEERS AND VISITORS

The approved provider will ensure that students, volunteers and visitors meet any requirements for WWCC/Clearance and record and verify each student, volunteer or visitors WWCC (where required). At no time will students, volunteers and/or visitors be left alone with a child or group of children or be included in the educator to child ratio. Management will ensure the OSHC Service's *Student, Volunteer and Visitor Policy* is followed at all times. All volunteers and students will be inducted into the OSHC Service to ensure they adhere to the Service's policies and procedures, Statement of Philosophy and Code of Conduct.

1.1.14

1.1.15 PRIVACY

- Staff and educators will adhere to the OSHC Service's *Privacy and Confidentiality Policy* and Privacy Law in relation to children and their families, or matters relating to the Service and will at no time take part in inappropriate or unlawful conversations or discussions.
- The nominated supervisor will ensure that students and volunteers are made aware of the Services privacy and confidentiality policy and Privacy Law during their initial induction.
- All staff, educators, volunteers and students are provided with information about the ECA Code of Ethics.
- All staff and educators will be made aware of Child Information Sharing Schemes (CISS) and Family Violence Information Sharing Schemes (FVSS) for NSW

1.1.16

1.1.17 STAFF EMPLOYED UNDER 18 YEARS OF AGE

Our OSHC Service will ensure any staff member under 18 years of age does not work at the service alone and is adequately supervised at all times by an educator who is over 18 years of age.

1.1.18

1.1.19 STAFF RECRUITMENT

- Our OSHC Service will ensure a rigorous recruitment process is followed to select the best staff possible based on skills, qualifications, experience and suitability for the position available. Each role will refer to the appropriate position description during recruitment and the probation period to ensure applicants are suitable for the role and position.
- All potential staff will participate in robust interviews and have reference checks completed before an offer of employment is presented. Reference checks will take into consideration the suitability of the applicant for the role, previous experience and their commitment to child safe practices.
- All potential staff are subject to maintenance of a valid WWCC /Clearance and appropriate qualification. Valid first aid, asthma and anaphylaxis management or food safety qualification may also be required.
- All new staff will undergo a probation period of three (3) months, during this time they will participate in an induction and orientation program and hold regular discussions regarding their performance with an appointed mentor.
- Staff induction includes provision of the Service's policies and procedures, Code of Conduct, child protection, Work Health and Safety guidelines, behaviour guidance, service routines and human resource documentation

POLICIES AND PROCEDURES

Our OSHC Service will ensure a copy of the policies and procedures are available to all staff at all times, either electronically or in hard copy. The approved provider will ensure steps are taken to ensure staff follow policies and procedures through the following practices:

- new staff members are to read and acknowledge key policies and procedures during the induction process
- policy review is to be conducted during staff meetings to support staff understanding and adherence
- staff meeting minutes will record evidence of policies and procedures reviewed with staff
- policy review will be systematic and occur on a regular basis to support regular review and maintenance of policies and procedures
- staff are requested to provide feedback following policy reviews
- policy review will be conducted following updates to legislation or regulation amendments or following an incident or complaint
- performance reviews and improvements plans will be linked to policies and procedures

1.1.20 EDUCATOR TO CHILD RATIOS

<table>
<tr><th>Age</th><th>State</th><th>Educator to Child Ratio</th></tr>
<tr><td rowspan="3">Over Pre-School Age</td><td>NT, QLD, SA, TAS, VIC, NSW</td><td>1 :15</td></tr>
<tr><td>ACT</td><td>1 :11</td></tr>
<tr><td>WA
A service must have 1 qualified educator for the first 10 children- a second educator (not required to be qualified) is then required from the time the service has between 11-26 children.</td><td>1:10 anytime a child who attends Kindy is in attendance.
If NO preschool child attending session-
<table>
<tr><th>No. Children</th><th>Qualified Educator</th><th>Number Educator</th></tr>
<tr><td>1-10</td><td>1</td><td>1</td></tr>
<tr><td>11-26</td><td>1</td><td>2</td></tr>
<tr><td>26-39</td><td>1</td><td>3</td></tr>
<tr><td>40-52</td><td>2</td><td>4</td></tr>
</table>
</td></tr>
</table>

All staff at our centre will agree and sing the following staff code of conduct:

Code of Conduct For All Educators

Out of School Hour Services

Hamilton South OOSH is committed to protecting children attending the service and other children with whom the service comes into direct contact with. The service strives to provide a child safe environment at all times and this code aims to provide staff with certainty about what are acceptable standards of behaviour when working with children. This Code will support staff to work in a way that supports the safety, welfare and wellbeing of children at all times.

This Code is to be read with all policies within the Child Protection framework.

As an employee/volunteer of Hamilton South OOSH you must sign and abide by this Code of Conduct, which requires you to:

- Be responsible for promoting the safety and wellbeing of children.
- Commit to conduct yourself in a manner consistent with your position and as a positive role model to children.
- Read, understand and comply with organisational policy and guidelines around the safety of children as outlined in the Child-Safe or Child Protection policy.
- Follow relevant local, state and national laws pertaining to working with children, including reportable conduct obligations and mandatory reporting requirements.
- Be committed to following the Child Safe Standards (2017) and the Principles for Child Safe Organisations (2017).
- Be respectful of children's rights, background, culture and beliefs as set out in the UN Convention on the Rights of the Child.

I agree to:

- Ensure adequate supervision of children as defined by the Education and Care National Laws and Regulations.
- Safeguard children at all times and not place a child at risk of abuse, or condone behaviour of children which is unsafe.
- Treat all children with respect and act in a way that does not show unfair differential treatment, or favour particular children to the exclusion of others.
- Avoid one-on-one situations with children by ensuring that there is always another staff member or other children with me. If an unavoidable situation arises then communicate with other Educators about the situation.
- Always act in the best interest of children and avoid any unnecessary or potentially harmful physical contact with children, unless necessary for their safety and wellbeing. Physical contact is required on occasions, however I will not allow children to sit on laps, and will encourage children to carry out tasks of a personal nature (such as toileting and dressing) for themselves when possible.
- Be careful when participating in or supervising games involving children that the activity does not have the potential to cause harm or injury. This includes being mindful of the child's age, development and any illness, injury or special needs that could place them at risk.
- Not physically punish a child, and ensure that any restraint of a child is only used for protecting the child or another person from physical harm, and conforms to industry and agency standards regarding the use of restraint with children.
- Use appropriate language for the age and understanding of the child, and avoid confusing or age-inappropriate discussions with sexual, discriminatory or violent references.
- Avoid any actions or words intended to threaten, intimidate, shame, humiliate, belittle, embarrass or degrade children.

- Maintain professional and courteous relationships with children and their families which do not exploit or abuse my position.
- Ensure that all gifts given to children are from the service and not give any individual gifts to children.
- To not use personal digital devices, for example: mobile phones, cameras, smart watches capable of taking photos or personal USB's. Personal mobile phone may be used in an emergency situation.
- Only photograph children appropriately for the circumstances and with the necessary consent of the child/ and his/her parents/guardians.
- Not expose children to inappropriate imagery, including on age-inappropriate websites, for any reason.
- Use social media appropriately and not engage in social networking with any children in the service or children who have attended the service under the age of 16 or their siblings.
- Be aware of, and act on, any specific health issues with children in my care, particularly any medical and dietary specifications.
- Give medication to children in accordance with the service's medication policy and as detailed by the Education and care National Laws and regulations.
- Not attend work affected by illegal drugs or alcohol, consume them whilst on duty or supply them to children in my care.
- Not attend work adversely affected by prescription medication which might cause harm to any children in my care.
- Not smoke or vape whilst on duty, at the centre or in the vincinity of the centre.
- Declare all secondary work that involves children who attend the service (e.g. babysitting) and any out of work contact with children and their families met through the workplace.

- Report any concerning staff conduct towards children or any suspected risk of harm to a child to the Nominated Supervisor or responsible Person.

- Ensure that any breaches of this code of conduct will be reported to the Nominated Supervisor or responsible Person in charge. As a mandatory reporter I understand that all concerns regarding suspected child abuse and exploitation must be reported to the Nominated Supervisor as soon as possible.

- Report to the Approved Provider ASAP if I have any concerns about the Nominated Supervisor.

I have read this Code of Conduct and agree to abide by it at all times. This is to protect the children that I come in contact with and myself as a Children's Services Professional.

Name _____

Signed _____

Date _____

CONTINUOUS IMPROVEMENT

Our *Staffing Arrangements Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	August 2025/1		

CODE OF CONDUCT POLICY

We believe in maintaining an inclusive and welcoming environment and workplace that motivates and facilitates personal growth and development for staff and educators. The values that underpin our work ethic include equality, respect, integrity, and responsibility. Our OSHC Service is committed to adhere to the ECA Code of Ethics (2016) which is based on the principles of the United Nations Convention on the Rights of the Child (1991) and provides a framework for the reflection about the ethical responsibilities of early childhood professionals.

Our OSHC Service is committed to creating and maintaining an environment that promotes the safety of all children and embeds the National Principles for Child Safe Organisations. All staff and volunteers are responsible for promoting a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children's sense of security and belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purpose	A statement of philosophy guides all aspects of the service's operations.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
82	Tobacco, drug and alcohol-free environment
84	Awareness of child protection law
155	Interactions with children

168	Education and care services must have policies and procedures
170	Policies and procedures to be followed

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Dealing with Complaints Policy Interactions with Children, Family and Staff Policy Out of hours babysitting Policy Privacy and Confidentiality Policy	Record Keeping and Retention Policy Social Media Policy Staffing Policy

PURPOSE

We aim to establish a common understanding of workplace standards and ethics expected of all employees of the Service. We aim to ensure positive working relationships are formed between all educators and management, promoting dignity and respect by avoiding behaviour which is or may be perceived as harassing, bullying or intimidating. Educators and management will at all times conduct themselves in an ethical manner and strive to ensure that all interactions are positive and respectful and are in accordance with the Service's philosophy.

Our OSHC Service takes every reasonable effort to accommodate the diversity of all children in embedding the National Child Safe Principles into our organisation and service operations. We are committed to the safety and wellbeing of children and young people. We recognise the importance of and responsibility for, ensuring our Service provides a safe and supportive environment which respects and fosters the rights and wellbeing of children in our care. We are dedicated in promoting cultural safety for Aboriginal children, cultural safety for children from culturally and/or linguistically diverse backgrounds and to providing a safe environment for children with a disability.

SCOPE

This policy applies to management, the approved provider, nominated supervisor, staff, educators, families, children, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

The approved provider, nominated supervisor, educators, staff, volunteers, and students will adhere to the Early Childhood Australian Code of Ethics, Education and Care Services National Regulations and the

National Quality Standard, Child Safe Standards and Service policies and procedures at all times, promoting positive interactions both within the Service and the local community.

RESPECT FOR PEOPLE AND THE SERVICE

- Employees, educators, staff and Management are committed to the OSHC Service philosophy and values, inclusive of best practice in school age education and care and building positive partnership with children, families and staff Employees, educators, staff and management are committed to the OSHC Service philosophy and values, inclusive of best practice in school age education and care and building positive partnership with children, families and staff
- Our OSHC Service has developed *a Statement of Commitment to Child Safety and Wellbeing* to demonstrate a strong culture of child safety within the Service
- Employees, educators, staff and management adhere to our Child Safe policies at all times and take all reasonable steps to protect children from abuse and harm
- Employees, educators, staff and management understand that *child safety is everyone's responsibility*
- Effective, open, and respectful reciprocal communication and feedback between employees, children, families, and management is conveyed
- It is important to treat colleagues, children, and families with respect. Bullying or insulting behaviour, including verbal and non-verbal aggression, abusive, threatening, or derogatory language or intimidation towards other employees, educators, staff, management, children, visitors, or families is unacceptable and will not be tolerated
- Employees, educators, staff and management are committed to valuing and promoting the safety, health, and wellbeing of employees, volunteers, children, and families
- Employees, educators, staff and management promote the cultural safety, participation and empowerment of Aboriginal and Torres Strait islander children to express their culture and enjoy their cultural rights
- Employees, educators, staff and management promote the safety, participation and empowerment of children with culturally and/or linguistically diverse backgrounds to support children to express their culture and enjoy their cultural rights
- Employees, educators, staff and management promote the safety, participation and empowerment of children with a disability
- are committed to an Equal Opportunity workplace and culture which values the knowledge, experience, and professionalism of all employees, team members, and managers, and the diverse heritage of our families and children

- Employees, educators, staff and management respect the privacy of children and their families by keeping all information about child protection concerns confidential and only share information to promote child wellbeing or safety and /or manage risk of family violence with other Information Sharing Entities (IES) as per NSW legislation.
- Our OSHC Service will conduct a comprehensive probation and induction orientation program for all new employees, volunteers and students to include awareness of their roles and responsibilities in relation to Child Safe practices and Child Protection reporting obligations
- Policies and procedures will be developed to ensure employees, educators, staff, students, visitors and families are aware of the standards of behaviour that is expected within the service
- Employees, educators, staff and management are informed that inappropriate behaviour, including bullying, sexual harassment, discrimination and harassment will not be tolerated
- Policies and procedures will be developed to ensure employees, visitors and families are aware of the standards of behaviour that is expected within the service
- Employees are informed that inappropriate behaviour, including bullying, sexual harassment, discrimination and harassment will not be tolerated
- It is important employees, educators, staff and management listen and respond to the views and concerns of children particularly if they are telling you that they or another child has been abused or they are worried about their safety or the safety of another.

EXPECTATIONS OF EMPLOYEES

EMPLOYEES WILL:

- adhere to the *Code of Conduct Policy*
- ensure their Working with Children Check (WWCC) is valid and current
- ensure their work is carried out proficiently, harmoniously, and effectively. They will act in a professional and respectful manner at all times whilst at work, giving their full attention to their responsibilities and adhering to all Service policies, procedures, Child Safe Standards, Education and Care Services National Law and National Regulations, and the National Quality Standard
- act honestly and exercise attentiveness in all Service operations. They will carry out all lawful directions, retaining the right to question any direction which they consider to be unethical. If uncertain they can seek advice from the nominated supervisor, approved provider or the Ombudsman
- uphold the rights of children and always prioritise their needs
- treat all children and young people with respect

- promote the wellbeing and safety of children and take all reasonable steps to protect children from abuse
- provide adequate supervision of children at all times
- understand their legislative responsibility as mandatory reporters to report any allegation of child abuse, neglect or possible risk of harm to management and/or Child Protection authority
- understand their legislative responsibility to report any inappropriate action of any other employee that involves children or young people to management as part of the *Reportable Conduct Scheme*
- participate in all mandatory training, including update of Child Protection Law training every 12 months
- report any instances of suspected corrupt conduct, mismanagement of government funds or other serious allegation to the Department of Education via their Online contact form. For more information visit the Department of Education website: Reporting fraud via a tip-off
- follow and comply with the *Dealing with Complaints Policy* when matters are raised regarding Child Safety and Wellbeing
- have a solid understanding of the OSHC Service's policies and procedures, Child Safe Standards and the ECA Code of Ethics. If uncertain about the content of any policy or procedure with which they must comply, employees should seek clarification from the nominated supervisor or approved provider.
- be courteous and responsive when dealing with colleagues, management, students, visitors, children and families
- work collaboratively with colleagues and management, families and members of the community with courtesy, respect and recognise and value diversity
- be mindful of their duty of care towards themselves and others
- be positive role models for children at all times
- ensure compliance with a zero tolerance of racism within the Service
- report any incidents or bullying, discrimination or harassment, including sexual harassment they have experienced or witnessed
- adhere to the *Tobacco, Drugs and Alcohol-Free Policy*
- respect the confidential nature of information gained about each child participating in the program
- engage in critical reflection to inform individual and collective decision making and ensure continual improvement, including a review of Child Safe policies and procedures.

EMPLOYEES WILL NOT:

- use abusive, derogatory or offensive language
- engage in conduct that is detrimental to the professional standing of our OSHC Service, is improper or unethical, is an abuse of power, or harasses, discriminates against, victimises, humiliates, intimidates, or threatens other educators, staff members, volunteers, or visitors at the OSHC Service, either directly or indirectly via information technology such as email, text or social media. Additionally, they will not support those who do this
- condone or participate in illegal, unsafe or abusive behaviour towards children, including physical, sexual or psychological abuse, ill-treatment, neglect or grooming
- exaggerate or trivialise child abuse issues
- fail to report information to the approved provider if they know a child has been abused
- engage in unwarranted and inappropriate touching involving a child
- persistently criticise and/or denigrate a child
- verbally assault a child or create a climate of fear
- encourage a child to communicate with an adult in a private setting
- share details of sexual experiences with a child
- use sexual language or gestures in the presence of children
- discriminate against any child, because of culture, race, ethnicity or disability
- put children at risk of abuse- refusing food/play, making threats, exposing children to inappropriate language or material (movies, internet, photos)
- show preferential behaviour towards any child
- accept an offer of money, regardless of the amount
- seek or accept a bribe
- acquire personal profit or advantage because of their position (e.g., through the use of Service information)
- exchange any property of the Service for own use unless properly authorised
- approach other employees, managers or visitors directly on individual matters that are irrelevant to them
- engage in any action in breach of our *Privacy and Confidentiality Policy*, including but not limited to disclosure of confidential Service or customer information, or the improper or illegal use of that confidential information. Authorised persons will only access confidential information for the purpose intended.
- engage in or support any action in breach of Service policies and/or procedures.

EXPECTATIONS OF LEADERS AND MANAGEMENT

In addition to the above responsibilities, leaders and management are expected to:

- promote a collaborative and interconnected workplace by developing a positive working environment where all employees can contribute to the ongoing continuous improvement of the Service
- promote leadership by working with employees and providing opportunities for professional development and growth
- provide flexible opportunities to ensure all employees can participate in staff meetings and professional development
- promote open and effective communication with all staff regarding *Right to Disconnect* provisions under Fair Work Act- including out of hours emergency contact and expectations of staff
- provide ongoing support and feedback to employees
- keep employees informed about essential information and any relevant changes and make all documents readily accessible to them
- model professional behaviour at all times whilst at the Service
- implement supportive and effective communication systems, consulting employees in appropriate decision making
- take appropriate action if a breach of the code of conduct occurs
- share skills and knowledge with employees
- give encouragement and constructive feedback to employees, respecting the value of different professional approaches
- follow recruitment policies and procedures to ensure all potential candidates undergo appropriate background checks, including Working with Children Checks
- model and provide guidance to educators and staff to ensure compliance with a zero tolerance of racism within the OSHC Service.

REPORTING A BREACH IN THE CODE OF CONDUCT

Our OSHC Service aims to foster a culture of transparency and accountability while supporting employees to report any reasonable suspicion of reportable matters of improper, illegal or misconduct within the service to management including, but not limited to:

- breaches of the Service code of conduct or service policies
- breaches of Education and Care Services National Law or Regulations
- breaches of legislation or law
- criminal activity

- corruption
- conduct that poses a danger or harm to any person/s
- harassment or discrimination
- improper or misleading financial practices

Our OSHC Service will implement protective practices to ensure employees identity is not compromised or disclosed, where applicable, following a report of a reportable matter including storage of documents in a secure and confidential manner and ensuring access to confidential documents is restricted to authorised personnel only. Once a report has been made the matter may be investigated through a formal investigation.

- all employees are required by law to undergo a Working with Children Check (WWCC) which is verified by the employer to ensure it is valid and current
- employees are required to notify management immediately of any enforcement actions issued to them during their course of employment
- if employees become aware of a serious crime committed by another employee, they are required to report it to management as per the *Reportable Conduct Scheme*
- as mandatory reporters, all employees, students and volunteers must report possible risk of harm to children or young persons to management and/or Child Protection authority
- employees will report any concerns they may have about inappropriate actions of any other employee that involves children or young people to the approved provider /management as per the Reportable Conduct Scheme
- the approved provider/management will report any allegations or child related misconduct as per their legislative requirements (this may include reporting the matter to the Police, Department of Communities and Justice and the Office of the Children's Guardian in NSW.

MANAGING CONFLICT IN THE WORKPLACE

MANAGEMENT WILL:

- adhere to the *Dealing with Complaints Policy*
- remain objective and impartial when managing conflict in the workplace
- be responsive and address a possible breach of the code of conduct by any employee as soon as they aware of the breach
- investigate all allegations which may result in remedial action, or disciplinary action ranging from a caution to dismissal
- consider all relevant facts and make decisions or take actions fairly, ethically, consistently, and with

transparency. If they are uncertain about the appropriateness of a decision or action they will consider:

- whether the decision or conduct is lawful
- whether the decision or conduct is consistent with Service policies and objectives
- whether there will be an actual, potential, or perceived conflict of interest involving obligations that could influence the business relationship or conflict with business duties.

ADHERING TO SERVICE CONFIDENTIALITY

- Unless authorised to do so by legislation, employees must not disclose or use any confidential information without appropriate approval (including written approval as required)
- Lawful sharing of information with other parties must be to promote the wellbeing or safety of children and adhere to guidelines under Child and Family Information Sharing Schemes
- All employees are to ensure that confidential information is not accessed by unauthorised people.
- Employees will adhere to the Service's *Privacy and Confidentiality Policy*.

BABYSITTING

- Our OSHC Service does not provide babysitting services outside normal operating hours
- Should employees undertake private babysitting arrangements with families, our Service takes no responsibility for any private arrangements between staff members and the family. However, we do expect staff to inform the Service if they are babysitting or caring for a child that attends the Service.
- All staff are bound by contract to the Service's *Privacy and Confidentiality Policy*, where they are unable to discuss any issues regarding the Service, other staff members, parents/families, or other children.
- Staff are bounds by the terms and conditions in the centre's Employee Handbook.
- No babysitting may be arranged during work hours
- Any new babysitting arrangements must be disclosed by the staff member to the Nominated Supervisor or Approved Provider prior to accepting/beginning the babysitting care.
- It will considered a definite conflict of interest if a staff member agrees to babysit children who attend Hamilton South Public School or Hamilton South OOSH (unless preapproved) during our centre's approved/open hours of care. This may result in termination of employment.

RECORD KEEPING

- Employees and Management will maintain full, accurate, and honest records as required by Education and Care Services National regulations
- The approved provider has a responsibility to ensure that employees comply with their record keeping obligation outlined in the *Record Keeping and Retention Policy*
- Employees must not destroy records without permission from management
- Records must be retained and stored securely as per our *Record Keeping and Retention Policy*

DUTY OF CARE

- The approved provider, management and employees have a responsibility to take reasonable care for the health and safety of themselves and others at the workplace to enable compliance with the work health and safety legislation outlined in the *Work Health and Safety Policy*
- Duty of Care relates to both physical and psychological wellbeing of individuals
- The approved provider, management and employees must provide adequate supervision of children at all times and ensure the health, safety and welfare of children and young people in their care. This includes taking all reasonable action to protect children and young people from risk of harm that can be reasonably predicted.

APPROPRIATE USE OF COMMUNICATION AND SOCIAL NETWORKING SITES

SOCIAL MEDIA

- As a Child Safe Organisation, our OSHC Service has the responsibility to ensure children and educators are protected from harm when they engage in with digital technology including social media
- Strict guidelines for the use of social media are outlined in our *Employee Handbook*
- Staff members who have a personal Facebook account are not permitted to post any negative comments relating to the Service, children, colleagues, or families.
- The Service does not recommend staff to add families of the Service to their personal social media as they will be seen still as a representative of the Service and held to the Service's Code of Conduct on all posts on their private 'wall' if families have access.
- Families are asked in our *Social Media Policy* to respect that staff may have a personal policy on adding families due to their professional philosophy and that the Service does not recommend staff to have families as friends on their private account.
- Staff members are not permitted to request the 'friendship' of families from the Service.

NATIONAL MODEL CODE AND GUIDELINES

We are mindful that educators have a duty of care to ensure children are protected from potential risk of harm. It is imperative that all employees of the OSHC Service provide children with their full attention, ensuring supervision is maintained and remains on the children.

Our OSHC Service has adopted the National Model Code and Guidelines for taking images or videos of children.

- only service-issued/approved devices are to be used when taking images or video of children
- personal electronic devices that can take images or videos (such as tablets, phones, digital cameras, smart watches) and personal storage and file transfer media (such as SD cards, USB drives, hard drives and cloud storage) should not be in the possession of any person while providing education and care and working directly with children
- authorisation is only provided for a staff member or educator to use a personal electronic device for essential purposes (personal health requirement, disability or emergency event)
- strict protocols are implemented for appropriate storage and retention of images and videos of children.

PERSONAL PHONE CALLS/MOBILE PHONES/SMART WATCHES

- employees or staff are not authorised to use the Service's phones for personal reasons unless in the case of an emergency or with permission from management
- children are at no time to be given access to staff mobile phones
- if, for personal reasons an employee needs to remain contactable from someone outside the service they should ensure that the situation is explained to management and that the service's primary contact details are passed on to the persons/family outside the OSHC Service.
- no personal mobile phones are to be used, checked or brought on the floor during working hours.
- mobile phones are to be kept inside the centre's office area. A lock box can be provided if staff request to lock their devices up for safety purposes.
- employees are not permitted to use Smart watches to access emails and social media during working hours. Smart watches are only to be used for viewing the time. Smart watches must be set to do not disturb or airplane mode.
- if it becomes apparent that employees are using their Smart watches to check and respond to messages during shifts, they will be asked to either leave them at home or place in a designated locker / secure location until the end of their shift. Disciplinary action, for example, termination of employment, may occur.

- personal mobile phones and Smart watches may be used during shift breaks when employees are free from work and supervision duties. They are not to be used in general sight of children, unless a situation arises where there is an emergency.

SERVICE EMAIL

- Email is to be used only for company usage, not for private communications
- Passwords and access privileges are strictly confidential and to be used only by the educator issued with that access, or persons delegated to know and use that access in the normal course of operation
- It is the responsibility of the authorised user to take fair and reasonable steps to ensure the passwords and other forms of access are held safe
- Employees are to be aware that their Service email account may be accessed by management at any time.

USE OF ALCOHOL, DRUGS AND TOBACCO

- Smoking or vaping is NOT permitted in or on surrounding areas of the OSHC Service
- It is expected that the odour of cigarette smoke will not be detected on an employee's clothing. If an employee is found smoking/vaping on the premises, that employee's employment may be terminated. Our Service supports the Smoke Free Environment Act 2000. Our OSHC Service and its employees will follow all conditions outlined in this act.
- Our OSHC Service is bound by the Education and Care Services National Regulations. Alcohol, drugs, or other substance abuse by employees can have serious adverse effects on their own health and the safety of others. As such, all employees must not:
  - consume alcohol nor be under the influence of alcohol while working
  - use or possess illegal drugs at any workplace
  - drive a vehicle, having consumed alcohol or suffering from the effects of illegal substances, or
  - bring alcohol or any illegal drugs onto the premises.
- If a co-worker suspects a colleague to be affected by drugs or alcohol, they must inform the nominated supervisor immediately. No employee will be allowed to work under the influence of drugs or alcohol. (See: *Tobacco, Drugs and Alcohol-Free Policy*)
- Employees undergoing prescribed medical treatment with a controlled substance that may affect the safe performance of their duties are required to report this to the nominated supervisor. Consideration will be given as to whether the particular medication affects the person's capacity to provide education and care to children.

- All issues pertaining to these matters shall be kept strictly confidential. A breach of this policy may initiate appropriate action including the termination of employment.

DRESS CODE

All staff must adhere to the dress code described in the centre's employee handbook. For example (but not limited to:

- All employees must adhere to our uniform/dress code supplied during induction including the display of their name badge whilst on shift.
- Enclosed shoes must be worn at all times (strictly no high heels, thongs, or wedges).
- Clothes must be suitable for free movement, active play, and messy play.
- No offensive logos or political statements are to be displayed on clothing.
- Jewellery

PERSONAL HYGIENE

All employees are to adhere to the following standards:

- long hair is to be clean and neatly tied back: Ensure hair does not hang in your eyes
- makeup is to be light and natural
- fingernails are to be clean and well groomed
- nail polish (if worn) cannot be chipped
- employees will follow appropriate oral hygiene practices
- an appropriate deodorant/antiperspirant will be worn
- strong perfumes will not be worn as they may cause allergic reactions in children.

BREACH OF THE CODE OF CONDUCT

All employees are made fully aware that the following breaches of the Code of Conduct and role responsibilities may result in disciplinary action which may lead to termination of employment:

- reporting to work under the influence of alcohol or drugs
- refusal to complete required additional training
- possessing or selling drugs at the Service
- immoral, immature, or indecent conduct while at the OSHC Service
- inappropriate use of company equipment and/or resources
- refusing to work as reasonably directed
- possessing a dangerous weapon whilst at the OSHC Service
- bringing disrepute to the Service

- causing disruption or discontent in the relationship between a family and the OSHC Service
- disclosure of confidential information
- falsifying documentation
- associating with families without disclosing this information with management
- stealing, abusing, defacing, or destroying company property
- interfering with work schedules
- falsification of reports, documents, or wages information
- failure to report for work without notice
- walking off the job
- failure to follow policies and procedures
- vulgarity or disrespectful conduct to families, management or colleagues
- making or publishing false, vicious, or malicious statements about any employee of the OSHC Service, or the Service itself
- failure to hand in lost property (this is regarded as stealing): Lost property is to be handed to the nominated supervisor
- unable to maintain or hold a current Working with Children Check/Clearance

DISCIPLINARY ACTION

All staff members are made fully aware that continued abuse of the following may result in disciplinary action. These include, but are not limited to the following:

- unauthorised absence
- consistent or ongoing late arrivals and/or unauthorised extended breaks
- having personal visitors whilst on shift
- continued personal phone calls
- carrying a personal mobile phone whilst on shift
- using a personal mobile phone or device to take photographs of the children
- unauthorised distribution of Service resources or materials
- consistent or ongoing poor work standard
- carelessness in the performance of duties
- consistent or ongoing low level of enthusiasm
- lack of personal cleanliness and hygiene
- taking excessive breaks
- failure to report health, fire, or safety hazards
- repeated tardiness

All staff at our centre will agree and sing the following staff code of conduct:

Code of Conduct For All Educators

Out of School Hour Services

Hamilton South OOSH is committed to protecting children attending the service and other children with whom the service comes into direct contact with. The service strives to provide a child safe environment at all times and this code aims to provide staff with certainty about what are acceptable standards of behaviour when working with children. This Code will support staff to work in a way that supports the safety, welfare and wellbeing of children at all times.

This Code is to be read with all policies within the Child Protection framework.

As an employee/volunteer of Hamilton South OOSH you must sign and abide by this Code of Conduct, which requires you to:

- Be responsible for promoting the safety and wellbeing of children.
- Commit to conduct yourself in a manner consistent with your position and as a positive role model to children.
- Read, understand and comply with organisational policy and guidelines around the safety of children as outlined in the Child-Safe or Child Protection policy.
- Follow relevant local, state and national laws pertaining to working with children, including reportable conduct obligations and mandatory reporting requirements.
- Be committed to following the Child Safe Standards (2017) and the Principles for Child Safe Organisations (2017).
- Be respectful of children's rights, background, culture and beliefs as set out in the UN Convention on the Rights of the Child.

I agree to:

- Ensure adequate supervision of children as defined by the Education and Care National Laws and Regulations.
- Safeguard children at all times and not place a child at risk of abuse, or condone behaviour of children which is unsafe.
- Treat all children with respect and act in a way that does not show unfair differential treatment, or favour particular children to the exclusion of others.
- Avoid one-on-one situations with children by ensuring that there is always another staff member or other children with me. If an unavoidable situation arises then communicate with other Educators about the situation.
- Always act in the best interest of children and avoid any unnecessary or potentially harmful physical contact with children, unless necessary for their safety and wellbeing. Physical contact is required on occasions, however I will not allow children to sit on laps, and will encourage children to carry out tasks of a personal nature (such as toileting and dressing) for themselves when possible.
- Be careful when participating in or supervising games involving children that the activity does not have the potential to cause harm or injury. This includes being mindful of the child's age, development and any illness, injury or special needs that could place them at risk.
- Not physically punish a child, and ensure that any restraint of a child is only used for protecting the child or another person from physical harm, and conforms to industry and agency standards regarding the use of restraint with children.
- Use appropriate language for the age and understanding of the child, and avoid confusing or age-inappropriate discussions with sexual, discriminatory or violent references.
- Avoid any actions or words intended to threaten, intimidate, shame, humiliate, belittle, embarrass or degrade children.

- Maintain professional and courteous relationships with children and their families which do not exploit or abuse my position.
- Ensure that all gifts given to children are from the service and not give any individual gifts to children.
- To not use personal digital devices, for example: mobile phones, cameras, smart watches capable of taking photos or personal USB's. Personal mobile phone may be used in an emergency situation.
- Only photograph children appropriately for the circumstances and with the necessary consent of the child/ and his/her parents/guardians.
- Not expose children to inappropriate imagery, including on age-inappropriate websites, for any reason.
- Use social media appropriately and not engage in social networking with any children in the service or children who have attended the service under the age of 16 or their siblings.
- Be aware of, and act on, any specific health issues with children in my care, particularly any medical and dietary specifications.
- Give medication to children in accordance with the service's medication policy and as detailed by the Education and care National Laws and regulations.
- Not attend work affected by illegal drugs or alcohol, consume them whilst on duty or supply them to children in my care.
- Not attend work adversely affected by prescription medication which might cause harm to any children in my care.
- Not smoke or vape whilst on duty, at the centre or in the vincinity of the centre.
- Declare all secondary work that involves children who attend the service (e.g. babysitting) and any out of work contact with children and their families met through the workplace.

- Report any concerning staff conduct towards children or any suspected risk of harm to a child to the Nominated Supervisor or responsible Person.

- Ensure that any breaches of this code of conduct will be reported to the Nominated Supervisor or responsible Person in charge. As a mandatory reporter I understand that all concerns regarding suspected child abuse and exploitation must be reported to the Nominated Supervisor as soon as possible.

- Report to the Approved Provider ASAP if I have any concerns about the Nominated Supervisor.

I have read this Code of Conduct and agree to abide by it at all times. This is to protect the children that I come in contact with and myself as a Children's Services Professional.

Name _____

Signed _____

Date _____

CONTINUOUS IMPROVEMENT/REFLECTION

The *Code of Conduct Policy* will be evaluated and reviewed on an annual basis in conjunction with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY:	Michael Donnelly	Director	1/9/2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	September 20252/1		

ENROLMENT POLICY

Out of School Hours Care (OSHC) Services provide high quality care for children before and after school, on pupil free days and during school holidays as Vacation Care programs. Enrolment and orientation can be both an exciting and an emotional time for children and families whether they attend only occasionally or on a regular basis. It is important to manage this time with sensitivity and support, building partnerships between families and the Out of School Hours Service. Such partnerships enable the Out of School Hours Care Service and families to work toward the common goal of promoting consistent quality outcomes for individual children and the Out of School Hours Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views ae respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 175	Offence relating to requirement to keep enrolment and other documents
77	Health, hygiene and safe food practices

78	Food and beverages
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
88	Infectious diseases
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
96	Self-administration of medication
97	Emergency and evacuation procedures
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursions
102D	Authorisation for service to transport children
155	Interaction with children
157	Access for parents
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
177	Prescribed enrolment and other documents to be kept by approved provider
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
Disability Discrimination Act 1992	A New Tax System (Family Assistance) Act 1999
Child Care Subsidy Minister's Rules 2017	
Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook in https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Behaviour Guidance Policy Code of Conduct Policy Dealing with Infectious Disease Policy Dealing with Complaints Policy Delivery of children to and collection from Education and Care Service Premises Policy Excursion/Incursion Policy	Governance Policy Immunisation Policy Incident, Injury, Trauma and Illness Policy Interactions with Children, Families and Staff Policy Medical Conditions Policy Fees Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Safe Transportation Policy Sun Safe Policy

PURPOSE

We aim to ensure children and families receive a positive and informative enrolment and orientation process that meets their individual needs. We strive to establish respectful and supportive relationships between families and the Out of School Hours Care (OSHC) Service to promote positive outcomes for children whilst adhering to legislative requirements.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

ENROLMENT

According to the Child Care Provider Handbook (May 2023) '*enrolling children is a requirement under Family Assistance Law for all children who attend child care (or have an arrangement for care) regardless of their parent's or guardian's eligibility for Child Care Subsidy…An enrolment links the child, the individual claiming the subsidy and the child care service.*' An enrolment notice is required for each child attending the Service. This reflects the type of arrangement that is in place between the provider and the family/individual or organisation.

IMPLEMENTATION

The *Education and Care Services National Regulations* requires approved providers to ensure their Services have policies and procedures in place for enrolment and orientation (Reg. 168) and take reasonable steps to ensure those policies and procedures are followed (Reg. 170).

Our OSHC Service accepts enrolments of children who are formally enrolled in primary school.

Enrolments will be accepted providing:

a) the maximum daily attendance does not exceed the licensed capacity of the Out of School Hours Care Service

b) a vacancy is available for the booking required

c) the adult to child ratio is maintained at the Out of School Hours Care Service

ELIGIBILITY

Children must be enrolled at Hamilton South Public School in order to be eligible to attend the service. Children of Preschool age will not be accepted into the program.

INCLUSION OF CHILDREN WITH ADDITIONAL NEEDS

- Provision of places for children with additional needs will be made wherever possible, with a regular review period. Access to care will focus on the needs of the child and the service's ability to meet these needs. Ongoing arrangements will be at the discretion of the Nominated Supervisor in consultation with parents and educators. Where children with additional needs have needs outside of the realm of daily service delivery, the service will seek the assistance from the local support facility to access funding, resources and advice. Ultimately, the decision to offer places or enrolment to a child with additional needs will be at the sole discretion of the Director/Nominated Supervisor.

WAITING LIST

Where demand for care exceeds the service's number of approved places, families will be placed on the service's waiting list. Waiting lists will be refreshed annually, at the beginning of each school year.

ENROLMENT

ENROLLING INTO THE SERVICE

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

BEFORE A CHILD CAN ATTEND THE CENTRE

1. An enrolment form must be completed for each children.
2. The enrolment form must contain all details outlined in Regulations 160, 161 and 162 which includes but is not limited to personal medical, and custodial details for each child, parent/guardian and emergency contacts along with any special requirements relating to the child.
3. All forms and documentation relating to the child's care, for example, risk management plans, must be completed.
4. Registration must be paid.

The Director/Nominated Supervisor will go through the enrolment process with families prior to starting care to ensure all details are completed and understood. If an individual is having difficulties filling out the enrolment form an enrolment interview can be requested. If required, this can be organised in the families' first language.

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

CHILD CARE SUBSIDY (CCS)

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

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

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

Families need to create or access their Centrelink online account via www.my.gov.au to lodge a Child Care Subsidy Claim for their child. Where possible, parents or guardians should start the claim process before enrolling their child into the service. Centrelink will check and conform the eligibility of the individual and child for Child Care Subsidy.

2. The provider, Hamilton South Before and After School Care Centre, and individual (family) agree on an arrangement for care of a child.

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

3. The provider, Hamilton South Before and After School Care Centre, submits an enrolment notice.

Once the provider, Hamilton South Before and After School Care Centre, has arranged with an individual (family), a new enrolment notice is created with the Department.

4. The individual (family) confirms the enrolment

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

SHARED CARE/SEPARATED FAMILIES

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

Each parent will;

- Need to agree to their own "Complying Written Arrangement' with Hamilton South Before and After School Care Centre.
- Be assess separately for their entitlement to a Child Care Subsidy, based on their income and activity levels, and
- Be billed and invoiced individually for their share of care.

In all circumstances, including shared care arrangements, the allocation of 42 unexplained absences per financial year in which Child Care Subsidy can be paid relates to each child, not each individual claimant. Where families have separated after the commencement of the Complying Written Arrangement, the parent who is the Child Care Subsidy claimant must notify Centrelink of this change in their circumstances.

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

If parents separate while care is being provided for their child under a single arrangement they should advise Hamilton South Before and After School Care Centre (as well as Centrelink) of the separation as soon as possible. Hamilton South Before and After School Care Centre will create a new enrolment notice for the parent who was not previously the Child Care Subsidy claimant for the child, if that parent is

taking on liability for the cost of some of the child care fees. Once parents have separated and have been separately assessed for Child Care Subsidy by Centrelink, entitlements will be calculated individually.
It is the responsibility of Hamilton South Before and After School Care Centre to ensure that each child's attendances are submitted under the enrolment for the parent with whom they have an arrangement and who was liable for paying the fees for those sessions of care.
If parents do not inform Hamilton South Before and After School Care Centre of their changed circumstances, then it is the parent's responsibility to resolve any disputes they may have regarding Child Care Subsidy payments and fees.

- Enrolments will not be accepted from families without full completion of the enrolment form. To secure the enrolment, parents are required to pay the enrolment fee and registration fee. Information about fees is included in the Fee Policy.
- Educators will use the enrolment process as a way to find out information about the child in regards to their likes, dislikes, strengths, interests, needs etc. Hamilton South Before and After School Care Centre will use this information to make the child feel safe and comfortable during their time in the service, particularly when they are new to the service.

PROCESS FOR RENEWALS AND NEW ENROLMENTS

- All current family places will be held/carried over from the end of Term 4 to Term 1 the following year.
- Families will have two weeks from the date the renewal window/period opens to nominate whether they wish to keep the same days or to choose new days.
- If the family elects to choose new days then they will be placed into a queue with the other families who are also wanting to change days. These new days will be issued to families based on what day and time they returned their renewal form. Each form will be dated and time stamped.
- Once existing children have had their new days confirmed we will then begin accepting new enrolment forms for siblings of existing children.
- After we have offered spots to our existing children and their siblings we will then offer places to new families/children.
- Children/Families that have not received the days they wanted will be placed onto a waiting list for the days they need. Children will be placed on the waiting list as per the time and date stamped renewal/enrolment form.
- When filling vacancies, our service will give priority to existing families.When considering enrolments for the following school year, the service will consider the physical space and accept

enrolments ensuring compliance with the Education and Care Services National Regulations and Law is maintained.

- If proposed enrolments exceed the current physical space, the service will investigate access to additional space. If suitable additional physical space cannot be secured, the service will place a cap on the number of enrolments and once that cap is reached a waiting list will be established. Families will be made aware of this process.

As well as the above, the service policy is that children must be enrolled at Hamilton South Public School in order to be eligible to attend the service. Children of Preschool age will not be accepted into the program.

ATTENDANCE AND ENROLMENT RECORDS

Accurate attendance records will be kept, which:

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

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

CHILD'S ATTENDANCE ONCE ENROLLED

The service's responsibility for the child begins when placed in the Educators' care by the parent or guardian, or when they arrive from school for the afternoon session. If a child is to be absent on a day they are normally booked, the family must notify the service as soon as possible. If you do not notify the centre that your child will be absent and Educators have to contact you, you will be responsible for paying a Non-Contact Fee which is $20 per instance.

The rules for Allowable Absences under CCSS will be followed in relation to all absences.

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

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

CANCELLATION OF ENROLMENT

The family may terminate care with notice of two weeks as per our two week cancellation period. If care is no longer required, notice must be provided in writing via email or written notification. Child Care Subsidy guidelines will be followed once an enrolment is cancelled.

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

1. A parent/guardian advises the service that no further care needs to be provided
2. The service identifies that care is no longer required or being provided.

Should the need arise for a child's enrolment to be cancelled by the service due to extenuating circumstances such as behaviour management, the service will follow the Behaviour Guidance Policy and Procedures.

CONFIDENTIALITY AND STORAGE OF RECORDS

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

ORIENTATION

Families who are enrolling their child for the first time will be asked to contact the centre prior to their child starting at Hamilton South Before and After School Care Centre if they wish to have an orientation prior to their child's first day. If it is flagged that your child has a medical condition, then an additional medical conditions policy will be provided to the family.

Parents should advise educators when they are greeted that it is their child's first day at the service and educator's will introduce themselves and guide them through the sign in/out process, check that all relevant forms and authorities have been signed and show them around the service.

Educators will introduce the child to other children and engage them in an activity. The educator will remain with the child until they are settled and comfortable in the new environment. Educators will carefully monitor the child whilst in the service to ensure they are settling in.

All new families will be provided with access to the centre's Home app and a copy of the centres Policies and Procedures.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Enrolment Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	29/8/2025
POLICY REVIEWED	August 2025	NEXT REVIEW DATE	SEPTEMBER 2026
VERSION NUMBER	August 2025/1		

GOVERNANCE POLICY

The Governance Policy provides the overall direction, effectiveness, supervision and accountability of a Service. The approved provider and management are responsible for guiding the direction of the service, ensuring that its goals and objectives are met in line with the philosophy, and all legal and regulatory requirements governing the operation of the Out of School Hours Care (OSHC) Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 13	Matters to be taken into account in assessing whether fit and proper person
S. 14	Regulatory Authority may seek further information
S. 21	Reassessment of fitness and propriety
S. 51	Conditions on service approval
S. 162	Offence to operate education and care service unless responsible person is present
S. 165	Offence to inadequately supervise children

S.172	Offence to fail to display prescribed information
S. 173	Offence to fail to notify certain circumstances to Regulatory Authority
S. 174	Offence to fail to notify certain information to Regulatory Authority
S. 175	Offence relating to requirement to keep enrolment and other documents
S.188	Offence to engage person to whom prohibition notice applies
29	Condition on service approval-insurance
31	Condition on service approval-quality improvement plan
55	Quality improvement plan
56	Review and revision of quality improvement plans
73	Educational program
74	Record of child assessments or evaluations for delivery of educational program
84	Awareness of child protection law
85	Incident, injury, trauma and illness policies and procedures
136 (3)	First Aid qualifications
117A	Placing a person in day-to-day charge
117B	Minimum requirements for person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
157	Access for parents
158	Children's attendance record to kept by approved provider
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
167	Record of service's compliance
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures
173	Prescribed information to be displayed
174	Time to notify certain circumstances to Regulatory Authority
175	Prescribed information to be notified to the Regulatory Authority

176	Time to notify certain information to Regulatory Authority
177	Prescribed enrolment and other documents to be kept by approved provider
180	Evidence of prescribed insurance
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents
184	Storage of records after service approval transferred
185	Law and regulations to be available

RELATED LEGISLATION

Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook

https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook

RELATED POLICIES

Acceptance and Refusal Authorisation Policy	Medical Conditions Policy
Administration of First Aid Policy	Nutrition Food Safety Policy
Child Protection Policy	Fees Policy
Child Safe Environment Policy	Privacy and Confidentiality Policy
Dealing with Infectious Diseases Policy	Record Keeping and Retention Policy
Dealing with Complaints Policy	Safe Arrival of Children Policy
Delivery of Children to, and collection from EEC Service Policy	Safe Transportation Policy
Emergency and Evacuation Policy	Sleep and Rest Policy
Enrolment Policy	Staffing Policy
Interactions with Children, Staff and Families Policy	Sun Safety Policy
	Water Safety Policy

PURPOSE

Our Out of School Hours Care (OSHC) Service aims to ensure all legal and financial requirements are implemented and recognised through appropriate governance practices, providing quality education and care, meeting the principles, practices and elements of the approved national framework *My Time, Our Place: Framework for School Age Care in Australia* and the National Quality Standard.

SCOPE

This policy applies to children, families, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure that policies and procedures are in place in relation to the governance and management of the service (Reg. 168) and that they take reasonable steps to ensure those policies and procedures are followed (Reg. 170). ACECQA 2021

Governance is the process that directs and controls our Service, ensuring accountability and supporting decision making. The approved provider and nominated supervisor of the Service accept the legal responsibilities associated with establishing, administering, and maintaining the Service. Management may include Persons with Management or Control of the Service (PMC) as defined by ACECQA. Persons with management or control may *participate in executive or financial decision-making or have authority or responsibility for, or significant influence over, the planning, direction or control of the activities or the delivery of the education and care service* (ACECQA 2023). Our Service has the following established positions:

Approved Provider	Hamilton South Before and After School Care Centre Inc.
Nominated Supervisor	Michael Donnelly and Shilo Oldfield
Persons with Management or Control	Michael Donnelly – Nominated Supervisor and Public Officer Shilo Oldfield – Nominated Supervisor Sam Cordell – Parent Committee (PC) President Bianca Da Silva – PC Vice President John Bowlder – PC Treasurer Linda Norgard – Secretary Claire Edwards and Emma Trummel – Ordinary Members
Educational Leader	Shilo Oldfield and Kelly Collinson
Responsible Persons	Kelly Collinson and Abbi Corcoran
First Aid Officers	Michael Donnelly, Shilo Oldfield, Kelly Collinson and Abbi Corcoran

THE APPROVED PROVIDER IS LEGALLY RESPONSIBLE FOR:

- ensuring compliance with the Education and Care Services National Law and Education and Care Services National Regulations

- ensuring compliance by all employees and educators with the Education and Care Services National Law and Education and Care Services National Regulations
- ensuring educators, staff, students and volunteers have knowledge of and adhere to this policy
- ensuring families are aware of this *Governance Policy*
- ensuring all notifications are made to the Department, in writing, within the specified timeframes as outlines with the NQF and FAL
- complying with Family Assistance Law
- appointing a suitably qualified nominated supervisor, educational leader and Director/coordinator for

the Service

- supporting the nominated supervisor and management in their role, providing adequate resources to ensure effective administration of the Service
- notifying the regulatory authority of any changes to the nominated supervisor at least 7 days prior to the appointment (or as soon as possible, but no more than 14 days after commencement)
- notifying the regulatory authority within 14 days of any changes to Persons with management or control
- notifying the regulatory authority of any change to the ages of children being educated and cared for by the service; and any change to the nature of education and care offered by the service (reg 175 (2)(a)
- displaying the prescribed information as listed in Regulation 173 including the current rating levels for each quality area stated in the National Quality Standard
- ensuring background checks, including criminal history and Working with Children Checks/ Clearance, are completed for all staff and educators [amend for your state/territory requirements]
- determining whether or not a person working in the service is a 'fit and proper person' (as per National Quality Framework and Family Assistance Law requirements)
- provide information to the regulatory authority upon request in relation to being a 'fit and proper person'
- implementing a probation and induction orientation program to ensure employees are aware of their roles and responsibilities, understanding of the values and organisational culture of the Service, policies and procedures, child protection law and other legislation
- developing a clear and agreed philosophy, which guides business decisions and the work of management and staff
- acting honestly and with due diligence
- ensuring that families of enrolled children have access to enter the premises (regulation 157)
- ensuring there is a sound foundation of policies and procedures that complies with all legislative and regulatory requirements, and that enables the daily operation of the Service to be in line with the Service's philosophy and goals
- maintaining up to date and current policies and procedures for compliance by all educators

- ensuring the health, safety and wellbeing of children and taking every reasonable precaution to protect children from harm or hazard
- ensuring policies and procedures are followed in the event that a child is injured, becomes ill or suffers a trauma (Reg.85)
- confirming incident, injury, illness or trauma records are stored in a kept in a safe and secure place until the child is 25 years of age. In the event of a death of child while being cared for by the service or may have occurred as a result of an incident, the records must be kept until seven years after the death
- being an employer, including all legal and ethical responsibilities that this entails
- appointing staff and monitoring their performance
- ensuring educator qualification requirements are current
- ensuring all educators and staff have a clear understanding of the hierarchy of management
- providing clear and direct written and verbal feedback and instruction that is suitable and appropriate to the task
- ensuring the Service remains financially viable and can meet its debts and other obligations as they fall due
- ensuring the Service holds a current insurance policy for public liability with a minimum cover of $10, 000, 000 [or public liability provided by the Government of a State or Territory in respect for an education and care service]
- managing control and accountability systems
- reviewing the Service's budget and monitoring financial performance and management to ensure the Service is solvent at all times and has sound financial strength
- approving annual financial statements and providing required reports to government bodies and maintaining appropriate delegations and internal controls
- complying with funding agreements where appropriate
- reviewing the work process regularly
- completing a Quality Improvement Plan (QIP) for the OSHC Service and updating it at least annually
- ensuring the QIP is updated upon request by the regulatory authority and submitted to the regulatory authority upon request (Reg. 31, 56)
- developing coherent aims and goals that reflect the interests, values and beliefs of all stakeholders of the Service
- establishing clearly defined roles and responsibilities for the members of the Management Committee and staff, individually and as a collective, and clearly articulating the relationship between all stakeholders
- evaluating and improving the performance of the Management Committee
- ensuring the educational program is based on an approved learning framework (MTOP) and contributes to each child's sense of identity and wellbeing

- complying with all other [submit state/territory] and Australian governments' legislation that impacts upon the management and operations of a Service
- ensuring all notification and reporting requirements are met regarding the National Quality Framework and other legislation
- ensuring a copy of the Education and Care Services National Regulations and National Law is available at all times at the service for use by educators, staff, families and visitors (Reg. 185)
- ensuring that requirements relating to the physical environment, space, equipment and facilities are met
- notifying the regulatory authority if transportation is provided by the service for the first time or if transportation ceases to be provided by the service (Reg. 175)
- notifying families at least 14 days before changes to policy or procedures that:
    - affect the fees charged or the way they are collected
    - significantly impact the service's education and care of children, or
    - significantly impact the family's ability to utilise the service.

THE NOMINATED SUPERVISOR IS RESPONSIBLE FOR:

- adhering to the Education and Care Services National Law and National Regulations
- developing ethical standards and a code of conduct which guide actions and decisions in a way that is consistent and reflective of the Service's expectations
- undertaking periodical planning and risk assessments and having appropriate risk management strategies in place to manage risks faced by the OSHC Service
- ensuring that actions taken, and decisions made are clear and consistent and will help build confidence in all stakeholders
- the day-to-day management of the Service
- ensuring all notification and reporting requirements are met regarding the National Quality Framework and other legislation
- the effectiveness of the Service's well-defined partnership between the Management Committee and the nominated supervisor. The partnership requires clear understanding of roles and responsibilities, and regular and open communication
- producing outcomes together with educators and staff. Educators must agree on their responsibilities and work according to current policies and procedures
- providing educators with training, resources and support
- identifying and reporting if something significant occurs (for example: Work Health and Safety; Fraud Prevention; Complaint handling)
- identifying work required for completion and delegate to the appropriate educator/staff

- ensuring educators and staff do not delegate responsibilities for which they are accountable for or have been delegated to them by Management
- ensuring educators are adhering to service policies and procedures.

SERVICE PHILOSOPHY

- The development and review of the philosophy and policies will be a continuous process on an annual basis or when required.
- The philosophy and associated statement of purpose will reinforce all other documentation and the

practices of the OSHC Service. The philosophy will reflect the principles of the approved national

framework *My Time, Our Place: Framework for School Age Care in Australia, V2.0*

- There will be a collaborative and consultative process to support the development and maintenance of the philosophy that will include children, parents and educators.

CODE OF CONDUCT

The standards of behaviour outlined in our *Code of Conduct Policy* provide guidance for all staff and educators to make personal and ethical decisions related to confidentiality, recruitment, duty of care, record keeping, professional relationships and appropriate use of resources within the service.

CONFIDENTIALITY

All members of the Management Committee along with the nominated supervisor, responsible person, educators, and staff who gain access to confidential information, whether in the course of their work or otherwise, shall not disclose information to anyone unless the disclosure of such information is required by law and will respect the confidentiality of all documents and meetings that occur. Child Information Sharing may be mandated to promote children's wellbeing and safety under NSW legislation.

This also includes:

- using information acquired for their personal or financial benefit, or for the benefit of any other person
- permitting any unauthorised person to inspect or have access to any confidential documents or other information
- any information received or transmitted via mobile telephone (including text/SMS) or any other

electronic device (e.g., email) shall be treated with the same confidentiality as any other written

form of communication and must be stored confidentially.

This obligation, placed on a member of the Committee of Management, nominated supervisor, responsible person, educator, and staff shall continue even after the individual has completed their term and is no longer on the Management Committee or employed by the OSHC Service.

The obligation to maintain confidentiality also applies to any person who is invited to any meetings of the Management Committee.

ETHICAL DECISION-MAKING

Our OSHC Service will make decisions which are consistent with our policies and procedures and that work in conjunction with the Education and Care Services National Law and National Regulations, our approved learning framework (MTOP), and the ethical standards within the ECA Code of Ethics.

REVIEW AND EVALUATION OF THE SERVICE

- Ongoing review and evaluation will support the continuing development of the Service. We will ensure that the evaluation involves all stakeholders.
- The development of a Quality Improvement Plan (QIP) and Self-Assessment will form part of the reflection procedure. Reflection on what works within the Service and what needs additional development will be included in the QIP.

MAINTENANCE OF RECORDS

- The OSHC Service will adhere to record keeping requirements outlined in the National Regulations (177).
- The OSHC Service will adhere to the storage of confidential records outlined in the National Regulations (181-184)
- The OSHC Service has a responsibility to keep sufficient records about staff, families, and children in order to operate dependably and lawfully
- The Service will safeguard the interests of all children, their families, and the staff, using procedures to ensure appropriate privacy and confidentiality practices are upheld
- The approved provider assists in determining the process, storage location, and timeline for storage of records, using the National Regulations as a minimum standard
- The OSHC Service's orientation and induction processes will include the provision of significant information to managers, educators, children, and families to comply with National Regulations and Standards.
- The approved provider will ensure that the record retention procedure meets the requirements of the following government departments:
    - Australian Tax Office (ATO)
    - Family Assistance Office (FAO)
    - Family Assistance Law
    - National Law and Regulations

MANAGING CONFLICTS OF INTEREST

- Conflict of interest, whether actual, potential or perceived, must be declared by all members of the Management Committee, Persons with Management or Control, nominated supervisor, senior staff and managed effectively to ensure integrity.
- Every stakeholder that is in a position of management has a responsibility to ensure their transactions, external business interests and relationships will not cause potential conflicts and to make such disclosures in a timely manner as they arise.
- The following process will be followed to manage any conflicts of interest:

    1. Whenever there is a conflict of interest, the member concerned must notify the approved provider about the conflict.
    2. The member with a conflict of interest must not be present during the meeting of the Management Committee or Management meeting where the matter is being discussed or participate in any decisions made on that matter. The member concerned must provide the committee / Licensee with any and all relevant information they possess on the particular matter.
    3. The minutes of the meeting must reflect that the conflict of interest was disclosed, and appropriate processes followed to manage the conflict.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Governance Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1.9.2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	September 2025/1		

ACCEPTANCE AND REFUSAL AUTHORISATION POLICY

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

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
S. 175	Offence relating to requirement to keep enrolment and other documents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement- anaphylaxis or asthma emergency
99	Children leaving the education and care service
102	Authorisation for excursions
102C	Conduct a risk assessment for transporting children by the education and care service

102D	Authorisation for service to transport children
157	Access for parents
160	Child enrolment records to be kept by approved provider
161	Authorisation to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures must be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures

RELATED POLICIES

Administration of First Aid Policy	Epilepsy Management Policy
Administration of Medication Policy	Excursion/Incursion Policy
Anaphylaxis Management Policy	Governance Policy
Asthma Management Policy	Incident, Injury, Trauma and Illness Policy
Child Protection Policy	Medical Conditions Policy
Child Safe Environment Policy	Nutrition Food Safety Policy
Cyber Safety Policy	Orientation of Families Policy
Delivery of Children to, and collection from Education and Care Service Premises Policy	Record Keeping and Retention Policy
Diabetes Management Policy	Safe Arrival of Children Policy
Emergency and Evacuation Policy	Safe Transportation Policy
Enrolment Policy	Sun Safety Policy
	Water Safety Policy

PURPOSE

Our priority is ensuring the health, safety and wellbeing of children. We aim to ensure that all educators, staff, students and volunteers of the OSHC Service are consistent in how authorisations are managed and what constitutes a correct authorisation and what does not, which consequently may lead to a refusal. Our governance and quality management processes are effective and transparent and meet all regulatory requirements.

Decisions around refusing an authorisation will be made on a case-by-case basis by the OSHC Service in accordance with the nominated supervisor, Police, regulatory authority or other authorities.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated

supervisor, students, volunteers and visitors of the OSHC Service

IMPLEMENTATION

Our OSHC Service will ensure we comply with the current *Education and Care Services National Regulations,* and have policies and procedures in place in relation to the acceptance and refusal of authorisations which require parent or guardian written authorisation to be provided in matters including:

- Administration of medication to children
- Self-administration of medication
- Administration of medical treatment, dental treatment, and general first aid treatment.
- Emergency Ambulance transportation
- Transportation- including regular outings and regular transportation
- Safe Arrival of children to the OSHC service
- Excursions
- Incursion attendance
- Taking of photographs by people other than educators
- Water based activities
- Enrolment of children, including providing details of persons nominated to authorise consent for medical treatment, to collect children from the service, or trips outside the service premises
- Children leaving the premises in the care of someone other than a parent or guardian
- Children having access to the internet and/or an email account

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT WILL ENSURE THAT:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- the *Acceptance and Refusal Authorisation Policy* is reviewed and maintained by the OSHC Service management and adhered to at all times by educators and staff
- policies and procedures are readily accessible to nominated supervisors, coordinators, educators and staff and students and available for inspection
- all staff and educators follow the policies and procedures of our OSHC Service
- parent/guardians are provided with a copy of relevant policies for our OSHC Service or are aware of how they can be accessed
- an enrolment record is kept for each child that includes all authorisations signed by a parent or a person authorised to

    - to consent to seek medical treatment from a registered medical practitioner, hospital or ambulance service
    - transportation by an ambulance service
    - to authorise the education and care service to transport the child or arrange regular outings for the child
- documentation relating to authorisations contains:
    - the name of the child enrolled in the service
    - date
    - signature of the child's parent/guardian and authorised nominee as named on the enrolment form
- all staff understand circumstances that may lead to refusal of an authorisation
- the right of refusal is exercised if written or verbal authorisations do not comply with National Regulations or Child Protection Legislation. If an authorisation is refused by the OSHC Service, it is best practice to document:
    - the details of the authorisation
    - why the authorisation was refused, and
    - actions taken by the service. For example: if the service refused an authorised nominee named in the child's enrolment record to collect the child from the service as they were under the influence of alcohol, the action taken to ensure that the child was collected (Refer to *Refusal of Authorisation Record*)
- all parents/guardians have completed the authorised person's section of their child's enrolment form including authorised nominees (refer to *Enrolment Policy*), and that the form is signed and dated before the child commences at the OSHC Service
- attendance records are maintained for all children attending the OSHC Service
- a written record of all visitors to the OSHC Service, including time of arrival and departure and reasons for visit is documented
- educators/staff do not administer medication without the written authorisation of parent/guardian or authorised nominee named in the enrolment record as authorised to consent to the medical treatment of the child, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Asthma Management Policy, Anaphylaxis Management Policy, Diabetes Management Policy*, *and Epilepsy Management Policy)*

- where a child requires medication to be administered by educators/staff, that an *Administration of Medication Record* is completed, and authorisation provided by the parent/guardian or authorised nominee and included with the child's record (Refer to *Administration of Medication Policy*)
- where a child over preschool age, and is authorised by the parent or guardian to self-administer medication, this is recorded in the *Administration of Medication Record*
- when a child requires emergency medical treatment for conditions such as anaphylaxis or asthma compliance for authorisation is waived. In accordance with National Regulations (R. 93) the OSHC Service can administer medication in these circumstances without authorisation. If these situations occur the approved provider/management will be required to contact the parent/guardian as soon as practicable after the medication has been administered and emergency services. Notification to the Regulatory Authority is required within 24 hours of a serious incident
- parents/guardians and the child's health practitioner are consulted to determine the circumstances that the child could self-administer their medication as per their ASCIA Action Plan for Anaphylaxis or Asthma Foundation Action Plan for Asthma
- a location to store self-administered medication is determined by the OSHC service (asthma, anaphylaxis or diabetes medication must be stored in an easily accessible location)
- educators and staff only allow a child to participate in regular outings and regular transportation with the written authorisation of a parent/guardian or authorised nominee name in the child's enrolment record
- educators and staff allow a child to participate in excursions only when the written authorisation of a parent/guardian or authorised nominee named in the child's enrolment record is received and documented (refer to *Excursion Policy, Safe Transportation Policy and Safe Arrival of Children Policy*)
- educators/staff allow a child to depart the OSHC Service only:
    - with a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
    - in accordance with the written authorisation of the parent; or authorised nominee; or
    - on an excursion; or
    - in the case of a medical emergency or another emergency (Refer to *Delivery of Children to, and collection from Education and Care Service Premises Policy* and *Emergency Evacuation Policy*).
- there are procedures in place if an inappropriate person, or a person who does not appear to be fit to take care of the child attempts to collect the child from the OSHC Service or poses a risk to the safety of children or staff (refer to *Delivery of Children to, and collection from Education and Care Service Premises Policy*)

- families are notified at least 14 days before changing the policy or procedures (Reg. 172).

EDUCATORS WILL:

- follow the policies and procedures of the OSHC Service
- ensure that written authorisation is provided by the parent or other person named in the child's enrolment record for a regular outing or regular transportation
- ensure that parents/guardians sign and date permission/authorisation forms for excursions prior to the excursion being implemented
- allow a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee
- check that parents/guardians or an authorised nominee sign the attendance record as their child arrives and departs from the OSHC Service
- administer medication only with the written authorisation of a parent/guardian or authorised nominee as per the *Administration of Medication Record*, except in the case of an emergency, including asthma or anaphylaxis
- allow a child over pre-school age to self-administer medication under the following circumstances:
    - a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication.
    - medication is stored safely by an educator, who will provide it to the child when required
    - supervision is provided by an educator whilst the child is self-administering.
    - a recording is made in the medication record for the child that the medication has been self-administered
- allow a child to depart from the OSHC Service only:
    - with the person who is a parent/guradian or authorised nominee named in the child's enrolment record; or
    - in accordance with the written authorisation of the parent/guardian; or authorised nominee; or
    - on an excursion; or
    - in the case of a medical emergency or another emergency (Refer to *Delivery of Children to, and collection from Education and Care Service Premises Policy* and *Emergency Evacuation Policy*).
- follow procedures if an inappropriate person attempts to collect a child from the OSHC Service and poses a risk to the safety of the children and staff (for example, an intoxicated person). (Reg. 99)

- inform the approved provider when a written authorisation does not meet the requirements outlined in OSHC Service's policies.

FAMILIES WILL:

- read and comply with the policies and procedures of the OSHC Service
- complete and sign the authorised nominee section of their child's enrolment form before their child commences at the Service
- ensure that changes to nominated authorised persons are provided to the OSHC Service in a timely manner
- advise nominated authorised persons that they will require photo identification (such as a driver's licence) in order to collect their child from the OSHC Service
- sign and date permission forms for regular transportation and regular outings
- sign and date permission forms for excursions
- sign the attendance record as their child arrives and departs from the Service
- provide written authorisation on the *Administration of Medication Form* when their child requires medication to be administered by educators/staff, including signing and dating it for inclusion in the child's medication records
- provide a medical management plan and/or ASCIA Action Plan from their child's health practitioner regarding circumstances by which the child could self-administer their medication (e.g.: Asthma inhaler)
- be familiar with circumstances where authorisations may be refused/not applicable.

REFUSAL OF AUTHORISATIONS

All authorisations which are incomplete or incorrectly recorded are to be returned to the parent or guardian for required adjustments. Written or verbal authorisation may be refused if the authorisation does not comply with National Regulations or Child Protection Legislation. The approved provider or nominated supervisor will inform the parent or guardian the reason why the written or verbal authorisation does not meet National Regulations or policy procedures.

The parent or guardian will be provided a copy of this *Acceptance and Refusal of Authorisation Policy* and procedure. Management will discuss an alternative arrangement with the family following the refusal of authorisation. If an authorisation is refused by the Service, it is best practice to document details surrounding the refusal

Examples when an authorisation may be refused include:

- requests relating to dietary restrictions that are not related to medical reasons
- an authorised person collecting the child appears to be under the influence of drugs or alcohol
- the authorisation breaches a parenting order
- the authorisation breaches a service policy
- medication to be provided to a child that is not in original container or prescribed to the child (excluding Ventolin or Zempreon) or other breach of *Administration of Medication Policy*
- a breach of *Excursion/Incursion Policy* where the person providing consent for the excursion is not listed as a parent/guardian or authorised nominee on the enrolment form

AUTHORISATION REQUIREMENTS

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

Administration of Medication	• Name of the child • *Administration of Medication Record* is signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication • Authorisation is provided by a parent or guardian for the child to self-administer medication as per their Action Plan • Name of the medication to be administered • Clearly indicate time and date medication was **last** administered • Clearly indicate the time and date the medication is to be administered • Dosage of the medication to be administered • Method of dosage (e.g.: oral or inhaled) • Whether the medication is to be self-administered (asthma, diabetes) • Period of authorisation (actual days and dates: from and to). • Parent/Carer name and signature • Date the authorisation is signed • Medication must be in its original container and bearing the correct child's name • Medication is not past its expiry or use-by date • Medication is administered in accordance with any instructions attached to the medication or provided by a registered medical practitioner • A second person checks the signed *Administration of Medication Record,* checks the dosage of the medication, and witnesses its administration • The educator administering medication and witness must write their full name and sign the medication record • Details of the administration must be recorded in the medication record • Supervision is provided by an educator whilst a child is self-administering medication • A recording is made in the medication record for the child that the medication has been self-administered

Medical treatment of the child including transportation by an ambulance service (Included and authorised initially as part of the child's enrolment record):	• Name of the child • Authorisation to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service • Authorisation for the transportation of the child by an ambulance service • Name, address and telephone number of the child's registered medical practitioner or medical service • Child's Medicare number • Name of the parent or guardian providing authorisation

Emergency Medical Treatment (included and authorised initially as part of the child's enrolment record or as updates during enrolment):	• The Service is able to seek emergency medical assistance for a child as required (i.e. medical practitioner, ambulance or hospital) without seeking further authorisation from a parent or guardian in the case of an emergency, including for emergencies relating to medical conditions noted on the enrolment form.

Collection of Children (included and authorised initially as part of the child's enrolment record or as updated during enrolment)	• Name of the child • Name of the parent or the guardian of the child or the authorised nominee on the enrolment form providing authorisation • Name of the person/s authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises • Signature of the person providing authorisation and date of authorisation

Transportation (other than as part of an excursion)	If the transportation is 'regular transportation' the authorisation is only required to be obtained once in a 12-month period. The authorisation must state: • name of the child • the reason the child is to be transported • if the authorisation is for regular transportation, a description of when the child is to be transported and the date the child is to be transported • a description of the proposed pick-up location and destination • the means of transport • the period of time during which the child is to be transported • the anticipated number of children likely to be transported • the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation • any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported • that a risk assessment has been prepared and is available at the education and care service • that written policies and procedures for transporting children are available at the education and care service

Excursions	The authorisation must state: • name of the child • date of the excursion • reason for the excursion • proposed destination for the excursion • method of transport to be used • route to be taken to and from the excursion • any requirements for seatbelts or safety restraints • period of time away from premise- include time leaving premise and time returning to premise • proposed activities to be undertaken by the child during the excursion • anticipated number of children likely to be attending the excursion • ratio of educators attending the excursion to the number of children attending the excursion • number of staff members and any other adults who will accompany and supervise the children on the excursion (including parents, students, volunteers) • statement that a risk assessment has been prepared and is available at the service • name of the parent or guardian-providing authorisation • relationship to the child • signature of the person providing authorisation and date of authorisation • details of any water hazards and risks associated with water-based activities (to be included in risk assessment). • items that should be taken on the excursion

Regular outing	A regular outing means a walk, drive or trip to and from a destination that the service visits regularly as part of its educational program and where the circumstances relevant to the risk assessment are the same on each outing. Written authorisation only needs to be given once in a specified 12-month period for a regular outing. (Reg. 102(5)). If the conditions of the regular outing change, a new authorisation is required. The written authorisation must include: • name of the child • a description of when the child is to be taken on the regular outings • a description of the proposed destination • method of transportation (including walking) • any requirements for seatbelts or safety restraints • proposed activities to be undertaken • proposed time the child will be away from the premises • anticipated ratio of educators to the anticipated number of children • that a risk assessment has been prepared and is available at the OSHC service

Confirmation of Authorisation	• All authorisation forms received (including the initial enrolment form) are to be checked for completion • All authorisations (excluding the initial enrolment form) are checked to ensure that the authoriser (name and signature) is the nominated parent or guardian a person named on the enrolment form as having authority to authorise • If incomplete or inappropriately signed, the authorisation form should be returned to the parent or guardian for correction • Children will be suspended from any activity requiring authorisation until the appropriate form has been correctly completed and signed

CONTINUOUS IMPROVEMENT/REFLECTION

The *Acceptance and Refusal Authorisation Policy* will be reviewed on an annual basis in conjunction with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1/9/2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	September 2025/1		

DEALING WITH COMPLAINTS POLICY

Feedback from families, children, educators, staff and the wider community is fundamental in creating an evolving Out of School Hours (OSHC) Service working towards the highest standard of care and education. It is foreseeable that feedback will include divergent views, which may result in complaints. This policy details our OSHC Service's procedures for receiving and managing informal and formal complaints. Our policy and complaints processes support and encourage children, families, parents, visitors, students and members of the community to lodge a grievance or complaint with management in the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIPS		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service that is child safe.
7.2.1	Continuous Improvement	There is an effective self-assessment and quality improvement process in place.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 172	Offence to fail to display prescribed information
S.174 (2)(b)	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
84	Awareness of child protection law
149	Volunteers and students
168(2)(o)	Education and care service must have policies and procedures… for dealing with complaints
170	Policies and procedures must be followed
171	Policies and procedures to be kept available

172	Notification of change to policies or procedures
173(2)(b)	Requires an approved provider to make the name and telephone number of the person to whom complaints may be addressed clearly visible at the service
173	Prescribed information to be displayed- education and care service
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Child Care Subsidy Minister's Rules 2017
Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook	

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Enrolment Policy Governance Policy	Interactions with Children, Family and Staff Policy Fees Policy Privacy and Confidentiality Policy Safe Use of Digital Technologies and Online Environment Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for dealing with complaints (Reg. 168) and take reasonable steps to ensure those policies and procedures are followed (Reg. 170).

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We will ensure that all persons making a complaint are guided by the following policy values:

- procedural fairness and natural justice
- code of ethics and conduct
- child safe complaint culture
- culture free from discrimination and harassment
- transparent policies and procedures
- opportunities for further investigation
- adhering to our Service philosophy

PROCEDURAL FAIRNESS AND NATURAL JUSTICE

Our OSHC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Grievances and complaints can transpire in any education and care setting. Complaints help our Service identify problems and provide opportunities to address these appropriately and effectively to sustain a child safe, healthy, harmonious and productive service environment.

Our Dealing with Complaints Policy ensures that all persons are presented with procedures that:

- value the opportunity to be heard
- promote conflict resolution
- encourage the development of harmonious partnerships
- ensure that conflicts and grievances are mediated fairly
- are transparent and equitable
- appropriately handle children exhibiting harmful sexual behaviours
- promote children's rights, safety and wellbeing
- consider a child's age, cultural, developmental and additional needs

NATIONAL PRINCIPLES FOR CHILD SAFE ORGANISATIONS- CHILD FOCUSED COMPLAINTS PROCESS

Our OSHC Service is committed to the National Principles for Child Safe Organisations and adopts a child safe approach to complaints involving a child or young person. (Standard 6).

As a child safe organisation, we will respond promptly and systematically to any concerns, disclosers, allegations or suspicions while fostering an environment where children feel confident that their safety and wellbeing are paramount. Our OSHC Service ensures our complaint processes are easily understood by children, young people and families and are accessible, effective and culturally safe.

Educators teach children about the complaints process so they know who to talk if they want to make a complaint. We ensure complaints are taken seriously, addressed promptly and thoroughly, and comply with all legal obligations.

DEFINITIONS

Complaint: Expression of dissatisfaction made to or about an organisation related to its products, services, staff or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required. [AS/NZS 10002:2014 Complaint Management Standard]
Complaints can be made to the approved provider, staff/educators in the service, external bodies including the regulatory authority, police, child protection agency or e-Safety commissioner.
Complaints can be verbal or in writing (letter, email or digital form).

Complaints and Grievances Management Register: Records information about complaints and grievances received at the OSHC Service, along with the outcomes. This register includes documents that must be securely stored, accessible only to educators and regulatory authority. They can provide valuable information to the approved provider and nominated supervisor of the Service to ensure children and family's needs are being met.

Complaint handling: Effective processes of receiving, investigating and resolving complaints.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. A *workplace grievance* is a complaint raised towards an employer by an employee due to a violation of legalities (workplace policies, employment contract, national standards).

Investigation: A formal and systematic inquiry to establish facts about the complaint by collecting, documenting, examining and evaluating evidence.

Mediator: A person who attempts to assist and support people involved in a conflict to come to an agreement.
Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the *Education and Care Services National Law and Regulations*, National Quality Standard or alleges that the health, safety or wellbeing of a child at the Service may have been compromised. Any complaint of this nature must be reported by the approved provider or nominated supervisor to the Department of Early Childhood Education and Care within 24 hours of the complaint being made – (S. 174[2] [b], Reg. 176[2][b]).

If the approved provider/nominated supervisor are unsure whether the matter is a notifiable complaint, it is good practice to contact the Regulatory Authority for confirmation. Written reports must include:

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

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious Incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the Service in contravention of the Regulations or is mistakenly locked in/out of the Service premises (Reg. 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* as soon as possible and within 24 hours of the incident. The regulatory authority must be notified within 24 hours of a serious incident occurring at the Service (Reg. 176(2)(a)).
These records are required to be retained for the periods specified in Reg.183.

The approved provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the OSHC Service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the OSHC Service.

PRIVACY AND CONFIDENTIALITY

Management and educators will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances and complaints. However, if a grievance or complaint involves a staff member or child protection issues, a relevant government agency will need to be informed. (See: Reportable Conduct Scheme in our *Child Protection Policy*). Responding to incidents, disclosures and suspicions of child abuse or harm NSW

CONFLICT OF INTEREST

It is important for the complainant to feel confident in:

- being heard fairly
- an unbiased decision-making process

Should a conflict of interest arise during a grievance or complaint that involves the approved provider or nominated supervisor, other management will be nominated as an alternative mediator.

Our OSHC Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is be adhered to.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR/RESPONSIBLE PERSON WILL:

- ensure that obligations under the *Education and Care Services National Law and Regulations* are met
- ensure educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and associated procedures and are advised on how and where the policy can be accessed
- provide an induction program for new staff and educators that includes an overview of policies and procedures, including this *Dealing with Complaints Policy* and procedure
- ensure the name and telephone number of the person to whom complaints can be made is clearly visible at the entry of the OSHC Service
- ensure the address and telephone number of the regulatory authority where complaints can be made are clearly visible at the entry of the OSHC Service
- ensure our complaint handling processes are child-focused providing support and age-appropriate guidance for children to know who to talk to if they are feeling unsafe, and empowered to make a complaint
- notify the regulatory authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised. Notification must include any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the service or any

allegation that sexual or physical abuse of a child has occurred or is occurring at the OSHC Service. (The NSW Education Department, Office of The Children's Guardian, NSW Police)

- treat all grievances and complaints seriously and as a priority
- ensure grievances and complaints remain confidential
- ensure grievances and complaints reflect procedural fairness and natural justice
- ensure people feel safe or comfortable when making a complaint, including children
- ensure educators, staff, volunteers and students are well informed about the different ways children may express concerns, distress and disclose harm as well as the process for responding to disclosures from children- including a complaint that alleges a child is exhibiting sexual behaviours that may be harmful to the child or another child
- conduct a review of policies and procedures, where required, following a complaint or grievance as part of our continuous improvement practices
- ensure the approved provider is notified of all complaints and grievances
- acknowledge the complaint or grievance in writing within 2 working days of receipt
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- investigate and document the grievance or complaint fairly and impartially
- provide details of an outcome following an investigation if required. The investigation will consist of:
    - reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
    - discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond
    - permitting the accused person to have a support person present during the consultation (for example: Union Representative, HR Representative, lawyer, colleague, friend or family member. A support person may provide support by taking notes during the meeting, clarifying questions and allegations made, help formulate responses, engage in discussions and are more than a passive observer, aid in understanding processes, request breaks and be an emotional support. A support person cannot represent the employer, speak on their behalf or advocate for the organisation.
    - providing the employee with a clear written statement outlining the outcome of the investigation
- advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint
    - management will provide a written response outlining the outcome and provide a copy to all parties involved

  - if a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflect the resolution
  - all written responses will need to cater for complainant to be able to understand such as spoken language and special needs regarding reading
  - responses to children and young people will be age and developmentally appropriate
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant
- keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- monitor ongoing behaviour and provide support as required
- ensure the parties are protected from victimisation and bullying
- request feedback on the grievance or complaint process using a feedback form
- track complaints to identify recurring issues within the Service which are addressed appropriately within the OSHC Service's Quality Improvement Plan (QIP).

EDUCATORS WILL:

- report all complaints received to the nominated supervisors, and/or approved provider within required timeframes
- ensure the complaints handling process is child focused, culturally safe and accessible
- listen to the complainants view of what has happened
- clarify and confirm the grievance or complaint, documenting all the facts prior to the investigation
- encourage and support the complainant to seek a balanced understanding of the issue
- discuss possible resolutions available to the complainant. These would include external support options.
- encourage and assist the complainant to determine a preferred way of solving the issue
- record the meeting, confirming the details with the family at the end of the meeting
- maintain confidentiality at all times
- refer complainant (as necessary) to the OSHC Service policies that may assist in resolving the grievance or complaint
- be informed about the different ways children can express concerns or distress and disclose harm
- be aware of child protection law and their individual responsibilities as mandatory reporters/notifiers
- ensure children know who to talk to if they are feeling unsafe and know the process that will happen to support them.

COMPLAINANTS WILL:

- be informed of our duty of care to ensure that all persons are provided with a high level of equity and fairness in relation to the management of complaints. The complaints procedure ensures a fair opportunity for all stakeholders to be heard and promotes effective conflict resolution within our Service
- ensure children are able to express their concerns or allegations to either management, educators, and/or family members
- attempt to discuss their grievances/complaints with the relevant educator associated with a particular child and/or family as the first step to resolving the issue, unless it is a reportable offence to the regulatory authority to be made with 24 hours of complaint
- communicate any concerns they may have in writing addressed to the approved provider or nominated supervisor
- raise any unresolved concerns with the approved provider or nominated supervisor
- maintain confidentiality at all times
- be provided with details of external agencies to contact should they feel our OSHC Service has not resolved their concerns (e.g., regulatory authority, e-Safety).

COMPLAINTS RELATING TO THE ADMINISTRATION OF CHILD CARE SUBSIDY

Families who wish to raise concerns regarding the management of Child Care Subsidy should speak with the nominated supervisor in the first instance. The nominated supervisor will follow the steps as outlined in this policy, including advising the approved provider of all grievances.

Families can raise concerns regarding management of the Child Care Subsidy to the Department of Education via their Online contact form. Additionally, information about any potential breach of Child Care Subsidy can be reported anonymously by submitting an online report directly to the Department of Education. For more information visit the Department of Education website: Reporting fraud via a tip-off.

COMPLAINTS INVOLVING ALLEGATIONS OF A CHILD EXHIBITING SEXUAL BEHAVIOURS

'*Providers and educators play an important role in making informed professional judgements regarding sexualised behaviours involving children. Not all sexual behaviour involving children poses a risk to their safety*.' (ACEQA, 2024). The approved provider will ensure:

- educators and staff respond to any complaint that alleges a child is exhibiting sexual behaviours that may be harmful to the child or another child

- educators and staff assess the need for urgent police and emergency services assistance and inform the approved provider/nominated supervisor
- the regulatory authority is notified within 24 hours of any complaint alleging that a serious incident has occurred whilst a child is educated and cared for or complaints alleging that the Law has been contravened (S.174 (2)(b)).
- educators and staff are aware of the process for responding to disclosures from children as per our *Child Protection Policy* (Reg.84)
- educators and staff are aware of their duty of care and mandatory reporting obligations to make a report to Department of Communities and Justice (DCJ) Child Protection Hotline NSW
- educators and staff have a sound understanding of developmentally appropriate sexual development in children and sexual behaviour that may be concerning and requires a response
- educators and staff engage in professional learning to promote a consistent and appropriate approach to identifying and responding to sexual behaviours in children that may include:
    - age and developmental capacity of the child/children
    - reasons why a child may be behaving in sexually harmful ways
    - behavioural history of the child
    - how the behaviour impacts the behaviour of other children
    - risk the behaviour imposes on others
    - vulnerability of the child to be engaging in harmful sexual behaviour
- procedures for supporting all stakeholders during the complaint procedure are implemented including documenting discussions, ensuring confidentiality and providing information of the progress of the complaint and access to support agencies as required (See *Complaints / Grievance Procedure and Complaints / Grievance Investigation Guide and Form*)
- educators and staff follow guidance from the Traffic Lights Framework to manage the concern or complaint
    - RED- signals sexual behaviours which indicate immediate intervention and action
    - ORANGE- signals sexual behaviour which may be concerning and educators to take notice and gather information to assess appropriate action
    - GREEN- signals sexual behaviours that are 'normal' and age appropriate

[Traffic Lights Framework-Age-appropriate Sexual Play and Behaviour in Children]

CONTINUOUS IMPROVEMENT/EVALUATION

Complaints provide our OSHC Service with opportunities for learning and improvement. We encourage regular and ongoing feedback from staff, children and families and the community. Our OSHC Service is

committed to resolving complaints through prompt investigation, open communication, and transparent processes. Our *Dealing with Complaints Policy* will be updated and reviewed annually in consultation with families, children, staff, educators and management.

To ensure complaints and grievances are handled appropriately, the approved provider/ nominated supervisor will:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Management Register* to assess that a satisfactory resolution that has been achieved
- review complaints and grievances as recorded in the *Complaints and Grievance Management Register* to ensure a pattern of similar grievances is not occurring
- review the effectiveness of the OSHC Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally
- consider feedback from staff, educators and families, children and community regarding the policy and procedure.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1.9.2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION	September 2025/1		

BEHAVIOUR GUIDANCE POLICY

The right for children to receive positive guidance in a supportive and respectful environment is promoted within the *Education and Care Services National Regulations*. Children learn to face a variety of challenges throughout their lives. Learning the difference between acceptable and unacceptable behaviour assists children to regulate their own behaviours in different social and emotional environments as well as when interacting with peers and adults. Our Out of School Hours (OSHC) Service will liaise with local feeder primary schools to ensure consistency of behaviour guidance strategies such as Positive Behaviour for Learning (PBL) values.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
5.2.2	Self-Regulation	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
QUALITY AREA 6: PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 162A	Child protection training
S. 166	Offence to use inappropriate discipline
S. 167	Offence relating to protection of children from harm and hazards
S. 174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
84	Awareness of child protection law
147	Staff members [records]
155	Interactions with children
156	Relationships in groups
168	Education and care service must have policies and procedures
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Child Protection Policy Incident, Injury, Trauma and Illness Policy Interaction with Children, Family and Staff Policy	Medical Condition Policy Privacy and Confidentiality Policy Enrolment Policy

PURPOSE

We aim to create positive relationships with children making them feel safe, secure, and supported within our OSHC Service. We will ensure children are treated with respect, consistency, fairly and equitably as they are supported to develop the skills and knowledge required to behave in a socially and culturally acceptable manner.

Supporting children to develop socially acceptable behaviour is a primary goal for educators and families. This is embedded in fundamental documents including the My Time Our Place, V2.0 (MTOP), Education and Care Services National Regulations, and the National Quality Standard (NQS).

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, management, students, volunteers and visitors of the OSHC Service.

DEFINITIONS

Behaviour guidance- this term is used to reflect current thinking about the most positive and effective ways to help children gain understanding and learn skills that will help them to manage their own behaviour. Using appropriate behaviour guidance educators aim to support each child regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

Cool down- this is an example of appropriate discipline or behaviour guidance. A cool down period is when a child is having a difficult moment, they are encouraged to find a space, near an educator, to 'cool down' and regain self-control. This strategy can be used as an opportunity for educators to support children to regulate their own behaviour. [ACECQA, 2020]

Restraint- in situations where a child becomes a risk to themselves or others, they may need to be physically removed from the situation or physically restrained by an educator to prevent harm to themselves or others. For instance- attempting to scale a fence, running in front of a vehicle. ACECQA advises that children should only be restrained in emergency situations. (ACECQA, 2023, P.2)

Self-regulation- The ability to manage energy states, emotions, behaviour and attention: the ability to return to a balanced, calm and constant state of being. Self-regulation is a key factor for mental health, wellbeing and learning (KidsMatter, Early Childhood, 2014).

Inclusion- taking into account all children and young people's social, cultural and linguistic diversity (including learning styles, capabilities, disabilities, gender, family circumstance and geographic location) in program decision-making processes. (MTOP V2.0).

IMPLEMENTATION

The behaviour and guidance strategies used by staff and educators at our OSHC Service are designed to provide children the opportunity to expand their experiences of life in a productive, safe environment that allows individuals the right to safety, tolerance, self-expression, cultural identity, dignity and the worth of the individual. Educators understand that as children grow and develop self-regulation becomes an important aspect of social and emotional development as they begin to understand how their actions affect others.

We believe in providing clear, consistent guidelines for children's behaviour as part of a caring and trusting relationship with children and families to help them feel secure and self-confident. Children benefit from knowing that their environment is stable and that a competent adult is taking care of them.

There are three key aspects to promoting positive behaviour:

1. Creating a quality learning environment that is positive and supportive and provides developmentally appropriate experiences and resources.
2. Implementing guidance strategies for building skills and strengthening positive behaviour based on age-appropriate behaviour expectations.
3. Employing strategies for guiding children's behaviour resulting in decreasing undesired behaviours.

POSITIVE BEHAVIOUR GUIDANCE STRATEGIES

Guiding children's behaviour is an important aspect of caring for and educating children. Positive strategies need to be developed to assist children to learn appropriate ways of behaving.

All educators and staff at our OSHC Service will role model appropriate behaviour and language, encouraging children to socialise with other children, including children of different cultural backgrounds as well as from different age groups and different genders.

Behaviour guidance strategies implemented within our OSHC service are appropriate to the child's age and developmental capacity. Children are encouraged to make decisions for themselves and are provided with opportunities for independence and self-regulation. Children are given the opportunity to make choices and experience the consequences of these choices when there is no risk of physical or emotional harm to the child or anyone else. They are acknowledged when they make positive choices in managing their behaviour.

Strategies may include using visual cues, prompting, redirection, re-teaching strategies, developing logical consequences providing a 'cooling down' period and conferences with children. In the instance of adverse behaviour being persistently observed, educators will evaluate their program, room set up, supervision etc. to identify triggers and sources of inappropriate or challenging behaviour. Physically restraining a child will only be used in emergency situations if a child is:

- In a clearly unsafe situation – e.g., attempting to scale a fence or run onto a road
- Physically threating other children or adults
- Behaving in ways that are destructive to themselves, other people or the environment. [ACECQA, 2020]

Regular routines and consistency in implementing behaviour guidance strategies are critical to support children's wellbeing and promote children's agency. All staff implement an active and positive approach to guiding children's behaviour within our service.

INAPPROPRIATE DISCIPLINE

All staff play an important role in embedding child safe practices within our OSHC Service. Any form of corporal punishment, or any discipline that is unreasonable or inappropriate is not permitted at any time when children are being educated and cared for by an education and care service. Staff are made aware of interactions and practices with children that are classified as unreasonable or inappropriate discipline. All staff and educators have undertaken current child protection legislation training, including mandatory reporting requirements and obligations. Staff must report all alleged or witnessed instances of child abuse or child related misconduct by any staff member, volunteer or contractor immediately to the Regulatory Authority, Office of The Children's Guardian or Police on 000.

The approved provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the Service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the OSHC Service.

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy and procedure
- all new employees, students and volunteers are provided with a copy of this policy as part of their induction process
- families are aware of this *Behaviour Guidance Policy*
- no child being educated and cared for by the OSHC Service is subjected to any form of corporal punishment or any discipline that is unreasonable in the circumstances (S.166 National Law)
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- each nominated supervisor and person in day-to-day charge of the service has completed child protection training (S.162A of the National Law)
- staff records include evidence of the approved training completed by staff members (Reg.147)
- connections are built between our service and local primary schools to support positive learning environments
- behaviour guidance does not involve making judgements about children or their families

- information is gathered from families about their children's social skills, relationship preferences, family and cultural values which will be recorded in the child's individual file
- educators will use this information to engage children in experiences that support children to develop their social and decision-making skills
- positive and respectful relationships with children are established and maintained
- children are empowered to use language and other forms of non-hurtful communication to communicate their emotions
- positive, empathetic relationships are promoted between children assisting them to develop respectful relationships
- the dignity and rights of each child are maintained at all times
- positive and inclusive strategies are implemented to enable educators to encourage positive behaviour in children in order to minimise adverse behaviour
- general information about behaviour guidance is provided to families such through parent interviews and newsletters
- a partnership is developed with other professionals or support agencies that work with children who have diagnosed behavioural or social difficulties to develop plans for the inclusion of these specific children. This information will be kept confidential and in the individual child's file.
- excessive or challenging behaviour is managed and communicated with families
- strategies are implemented to re-direct a child who may be causing or about to cause harm to himself or herself, another child, or adult. Incidents may include a child who is kicking, spitting, biting, throwing furniture or toys, punching or hitting, or being disruptive. Redirection may also include an incident where a child places him/herself in a dangerous situation, for example, climbing a fence or hiding in a potentially dangerous position. Safety is a priority, and this may mean using physical re-direction in which an educator will actually remove the child from the harmful situation if required. It may be necessary to remove other children from the area while the child calms down.
- families are notified and the incident/behaviour is addressed sensitively.
- should the behaviour continue, the child's behaviour is observed and carefully documented. Additional information is collated related to the context and behaviour guidance strategies implemented.
- a meeting with the child's parents/carers and educator may be arranged to discuss any behaviours or concerns that have been observed. A *Behaviour Guidance Plan* may be developed in consultation with families and other health professionals as required
- *Behaviour Guidance Plans* are to be reviewed on a periodic basis reflecting changes that have been applied through the implementation of the plan in consultation with the child's family

- the child's primary school is contacted to gain information about behaviour guidance strategies implemented within the school context to ensure consistency between environments
- families, the child's primary school and professional agencies are consulted to ensure that a consistent approach is used to support the child with diagnosed behavioural or social difficulties
- application for additional support for educators to build their capacity and capabilities to include children with additional needs will be made
- if required, professional development is provided for educators to learn about Trauma Informed Practices to help educators understand challenging behaviours through a 'trauma lens'
- notification is made to parents/guardians as soon as practicable, but within 24 hours, if their child is involved in a serious incident/situation at the Service. Details of the incident/situation are to be recorded on the *Incident, Injury, Trauma and Illness Record.*
- notification is made to the regulatory authority, via the NQAITS, within the legislated time frames of any circumstance that poses a risk to the health, safety and wellbeing of a child or children, or of any complaint alleging that a serious incident has occurred at the OSHC Service
- notification is made to the regulatory authority and to the children's commissioner, child protection agencies or the police of any incident of inappropriate discipline
- a review of practices is conducted following a serious incident, including an assessment of areas for improvement (ensure any review or investigation does not interfere with outside agency investigations).

EDUCATORS WILL:

- encourage and support each child's social and emotional development, striving to develop children's self-regulation and an understanding of the feelings of others
- actively work with younger children to promote and role-model positive ways to interact with others
- teach behavioural expectations
- support appropriate behaviour- visual cues, prompting, positive verbal feedback and quality learning environments
- ensure children are provided with positive guidance and encouragement toward acceptable behaviour
- promote children's initiative and agency
- actively work with all children to support them in constructing and conveying ways of expressing needs, resolving conflict, and responding to the behaviour of others
- at all times provide positive role-modelling in their dealings with children, other educators and families

- discuss guidelines, rules, limits, and what is fair with children, and use their contributions in setting limits and guidelines
- talk calmly with children about the consequence of their actions, and the reason for rules
- use corrective consequences- prompt, redirect, re-teach, provide choice, logical consequence, conference with child and educator
- guide children's behaviour, teaching them how to be considerate of others – to think about the effects of their actions on others. It is important that children understand what acceptable and unacceptable behaviour is and how to manage their emotions.
- provide positive feedback and focus on children's strengths and achievements and build on their abilities
- take into consideration the child's past experiences as their behaviour could be a result of past trauma such as changes in routine, changes or losses within the family, placement in care, or more serious circumstances involving abuse, neglect, or family violence
- be responsive to these former experiences, designing and implementing behaviour plans with the individual child that include strategies which will assist alternative and positive behaviour
- provide age appropriate, challenging, and interesting activities, experiences, and equipment for children to use and become engaged with
- ensure there are sufficient materials and equipment for individual, small and large group activities
- set up the environment (indoor and outdoor) for children to engage in activities and experiences in accordance with their abilities and interests
- adapt a positive approach, excluding cruel, harsh, humiliating or demeaning actions
- commit to professional development and keep up to date with industry information regarding behaviour guidance strategies
- support children to explore different identities and points of view and to communicate effectively when resolving disagreements with others
- participate in planned and spontaneous conversations with children about emotions, feelings and issues of inclusion and fairness, bias and prejudice, and the consequences of their actions, as well as the appropriate rules and the reasons for the rules
- provide children with the language and vocabulary needed to express their emotions and feelings and verbalise their concerns
- encourage children to listen to other people's ideas, consider pro-social and altruistic behaviour and collaborate and negotiate in problem solving situations
- listen empathetically to children when they communicate their emotions, provide encouragement as they reassure the child it is normal to experience positive and negative emotions

- guide children to remove themselves from situations where they are experiencing frustration, anger, or fear
- support children to negotiate their rights and rights of others and mediate perceptively when children experience difficulty in resolving dissimilarity
- learn about children's relationships with others and their relationship preferences they have and use this knowledge to encourage children to manage their own behaviour and expand on their empathy skills
- use positive language, gestures, facial expressions, and tone of voice when redirecting or discussing children's behaviour with them
- remain calm, respectful and tolerant as they encourage children who are strongly expressing distress, frustration or anger
- guide children's behaviour with a focus on preserving and promoting children's self-esteem as they learn to self-regulate their behaviour

FAMILIES WILL:

- work collaboratively with educators and professional agencies when required in order to develop a broader understanding of the child's developmental level and share any recent events which may be influencing the child's behaviour
- consult with educators and provide consent when the Service is applying for Inclusion Support Funding
- work in partnership with educators and health professionals in the development of a behaviour guidance plan
- create consistency in behaviour guidance strategies used at the OSHC Service and at home

OOSH RULES:

Whilst at the service, we expect that children will comply with the following basic rules:

1. Respect each other
2. Respect other people's property and that of the service
3. Share with other children and be inclusive
4. Accept and respect individual needs and differences
5. Clean up after activities
6. Be polite to educators and to each other
7. Follow instructions from educators
8. Play only in the allocated areas as directed by educators and not enter areas that educators have designated as "out of bounds"

9. Remain in the supervised area of the program until the authorised person collecting them has signed them out
10. Not participate in physical fighting (play or real), for example, spitting, throwing toys, stones or dangerous objects
11. Not bully or engage in any form of aggressive behaviour
12. Use appropriate language at all times.

CONTINUOUS IMPROVEMENT

The *Behaviour Guidance Policy* will be evaluated and reviewed on an annual basis in conjunction with children, families, educators and staff.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1/9/2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
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INCLUSION

POLICY STATEMENT

Hamilton South Before and After School Care Centre Inc. aims to provide an environment that is free from bias and prejudice in which children learn the principles of fairness and respect for the uniqueness of each person. Children are encouraged to develop their own sense of identity and educators will facilitate this in a way that embraces the needs and abilities of each child (My Time, Our Place V2 Outcome 1).

Educators will ensure that children become aware of fairness and equity and have opportunities to practice challenging bias in their play (My Time, Our Place V2 Outcome 2). The service involves the community to assist educators and children to understand and accept the range of cultures and abilities of members of the local community.

Differences in backgrounds, culture and abilities are valued and families are actively encouraged to share their experiences with educators and other families and cultural competence in children will be fostered. The service will ensure that appropriate inclusion support services are accessed and families are referred to them in order to support children's well-being and full access to the program.

PROCEDURES:

Inclusive Practices

- Educators will actively seek information from children, families and the community about their cultural traditions, customs and beliefs and use this information to provide children with a variety of experiences that will enrich the environment within the service.
- Educators will work in partnership with families to provide care that meets the child's needs and is consistent with the family's culture, beliefs and child rearing practices. Specific requests will be acknowledged where practical, to demonstrate respect and ensure continuity of care of the child.
- Educators will obtain and use resources that reflect the diversity of children, families and the community and increase awareness and appreciation of Australia's Aboriginal and Torres Strait Islander and multicultural heritage.

- Educators will be sensitive and attentive to all children and respect their backgrounds, gender, unique qualities and abilities. The service will ensure that the service environment reflects the lives of the children and families using the service and the cultural diversity of the broader community, and ensure children's individual needs are accommodated at the service.
- Educators will treat all children equitably and encourage them to treat each other with respect and fairness.
- Educators will act as positive role models by encouraging all children to be involved in a variety of activities, regardless of gender.
- Educators will role model appropriate ways to challenge discrimination and prejudice, and actively promote inclusive behaviours in children.
- Children will never be singled out, or made to feel inferior to or better than others. Educators and children will discuss incidents of bias or prejudice in children's play or relationships with each other to help children understand and find strategies to counteract these behaviours.
- The program will include experiences for the children that are not based on sex role stereotypes.
- Resource materials and equipment used in the service will, as far as possible, be non-stereotyped.
- Families will be consulted in the development of holistic programs that are responsive to children's lives, interests, learning styles, genders and reflect children's family, culture and community.
- Educators will create opportunities for children to learn about, develop respect for, and celebrate the diversity that exists in the service and in the broader community by:

• Encouraging all families, children and other educators to share their experiences, skills, cultures and beliefs;

• Inviting community members to the service to share their stories, songs, experiences, skills, cultures and beliefs;

• Accessing and using a range of resources (including multi-cultural and multi-lingual resources) that reflect the diversity of children and families in the service and in the broader community.

Educator recruitment and professional development

- Wherever possible, our service will aim to recruit educators from diverse cultural and linguistic backgrounds that reflect the cultural diversity of our community and to employ staff from both genders.
- The nominated supervisor and educators will attend professional development that builds awareness of their own cultural beliefs and values, increases their cultural competence and helps them to challenge discrimination and prejudice.
- All educators will be provided with a copy of the Outside School Hours Care Code of Professional Standards.

Inclusion Support Agencies

- The service will access bicultural support workers when necessary and/or telephone translation services and provide information on aspects of the service in languages that are spoken in the local community to assist in communicating with families from diverse cultural backgrounds.
- The service will access additional support, assistance and resources for children with additional needs including children from diverse cultural backgrounds, children with high ongoing support needs and Aboriginal and Torres Strait Islander children.
- Educators will talk to children's families about any concerns they have and offer the family links to other support services within the community such as Inclusion Support Agencies; Community Health Services etc.
- Educators will work with families, inclusion support agencies and other specialists associated with the child to develop individual support plans.
- The service at any time has the right to refuse access.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	1/9/2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
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ANIMAL AND PET POLICY

Having a relationship with a pet and/or animal can help children develop a caring disposition and skills such as nurturing, responsibility, empathy and improved communication. Having a pet in an Out of School Hours Care (OSHC) environment enables children who are not otherwise exposed to animals learn these skills. The pet will become part of the daily educational program and lead to activities and learning about other animals. The safety of children, however, is always our first priority. Our OSHC Service will ensure that no animal poses a health or safety risk to children, staff or visitors of the Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.
3.2.3	Environmentally responsible	The service cares for the environment and supports children to become environmentally responsible.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
168	Policies and procedures are required in relation to health and safety
170	Policies and procedures to be followed

PURPOSE

Having a pet at our OSHC Service can be a valuable part of children's education enriching their learning about nature, ecology and relationships. Our OSHC Service aims to provide a safe, hygienic and humane environment for all animals and pets that visit or reside at the Service, educating children in the proper care of animals.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

The National Quality Standard (NQS) encourages educators to understand and appreciate the natural environment and the interdependence between people, plants, animals and the land. Pets help children from a young age learn to care for other living things. They can teach a sense of responsibility, caring and tolerance. They can offer many opportunities for developing observational skills and provide basic natural science experiences. If the educators wish to have a pet in the OSHC Service, they must make all the decisions in consultation with management and families.

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

ASSESSING AND MANAGING RISKS

Whilst there are many benefits to providing children with access to animals and keeping pets at the OSHC Service, there are issues that approved providers and educators need to consider for the safety and wellbeing of both the children and the animals concerned prior to choosing a pet or having an animal visit the Service.

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

Potential risks may include:

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

DISEASE

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

EFFECTIVE HAND WASHING AND CLEANING

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

APPROPRIATE SUPERVISION AND CLOTHING

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

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

SERVICE PETS

- Management and educators should prepare children for the animal visit, gaining perception into how the children may react to the pet
- Management, educators, children and families should consider the rationale for having a pet and long-term implications of such a decision prior to getting the pet
- All pets and their enclosures are to be kept clean and hygienic with appropriate bedding and water
- Food will be made available for all pets and animals but kept out of reach of children at all times
- Any animal or pet kept at the OSHC Service will be regularly fed, cleaned, vaccinated, and wormed (as appropriate), and checked for fleas and diseases
- Animals including pets will not be allowed in the sand pit or any other play area. In event that this happens, educators will refer to and adhere to the *Sand Pit*
- Animals including pets will never be taken into the food preparation area nor will they have access to the eating or rest areas, toys, eating surfaces and/or utensils
- Anyone who has handled the animal or pet will immediately wash their hands
- Children's animal or pets will only be allowed in the OSHC Service when the nominated supervisor has granted permission

- The educational program will include how to properly care for animals and how to treat them appropriately.

UNINVITED ANIMAL VISIT

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

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

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

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

PESTS AND VERMIN

- Pest control will occur at the OSHC Service on an annual basis as a minimum
- Negotiation may be required with school management for organisation depending upon the location of the OSHC Service
- Educators will monitor any occurrences in the Service to determine the success of control measures
- If pests and/or vermin are seen, or evidence of pests and/or vermin such as droppings, educators will advise the management
- Management is responsible for arranging additional pest control visits as required
- Where appropriate, educators will discuss safety issues relating to dangerous products, plants, vermin and objects with the children
- Educators will thoroughly clean all areas that pests have accessed in the OSHC Service with disinfectant
- If the remains of animal or animal faeces have been found, the remains will be disposed of according to the local Council guidelines and the area where the remains were found will be thoroughly disinfected

- Educators are responsible for assessing any situation in the OSHC Service where animals are involved to ensure the health, safety and wellbeing of children, families and animals.

PARENT/CARER/GUARDIAN/FAMILIES PETS

No parent, carer, guardian or family may bring animals to our centre or onto the grounds surrounding our centre without seeking and having prior approval. All pets must be tied up past the OOSH storage shed and out of children's reach.

Service pets, for example, guide dogs will be allowed.

We have children at our centre who are allergic to dogs.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Animal and Pet Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY:	Michael Donnelly	Director	1/9/2025
POLICY REVIEWED	SEPTEMBER 2025	NEXT REVIEW DATE	SEPTEMBER 2026
VERSION NUMBER	September 2025/1		

FAMILY COMMUNICATION POLICY

Family participation is an important part of making the OSHC Service a true part of the community. We believe in creating an environment that is welcoming and inclusive and supports a sense of belonging for children, families, and educators.

Partnerships are based on the foundations of respecting each other's perspectives, expectations and values, and building on the strength of each other' knowledge and skills. …. Educators recognise the diversity of children and young people with whom they work and the importance of connecting with families, community members and other professionals, including teachers in schools to support children and young people's wellbeing, learning and development. (MTOP. V2.0, 2022. p.14)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.1	Transitions	Continuity of learning and transitions for each child are supported by sharing information and clarifying responsibilities.
6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
111	Administrative space
157	Access for parents
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care Service must have policies and procedures
172	Notification of change to policies or procedures
181	Confidentiality of records kept by approved provider

RELATED POLICIES

Child Safe Environment Policy Dealing with Complaints Policy Incident Injury Trauma and Illness Policy	Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy

PURPOSE

We encourage family participation and open communication within our OSHC Service. Families are invited to attend parent information meetings and assist with projects in keeping with our *Open Door Policy*. We aim to ensure open communication through the enrolment and orientation process, policy and statement of philosophy review, feedback forms, Family Committee, daily program, documentation, formal and informal meetings, emails, and conversations.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

We acknowledge the primary influence that families have in their children's lives and understand that effective relationships between educators and families are fundamental to achieve quality outcomes for

children. Community partnerships that focus on active communication, consultation, and collaboration also contribute to children's learning and wellbeing. Positive relationships with families help to build collaborative partnerships, as together we share a common objective and responsibility for reaching quality outcomes and goals for children.

We will provide regular information about the OSHC Service and ongoing opportunities for families to contribute to our curriculum. All staff will communicate with families in a positive and supportive manner that encourages respectful and trusting relationships.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT WILL ENSURE:

- educators, staff, students and volunteers have knowledge of and adhere to this policy
- all families are welcomed and respected at our OSHC Service
- information communicated with families is reliable and accurate, especially if it involves the health and safety of children, employees and visitors to the OSHC Service
- families are informed about the processes for providing feedback and making complaints- including any complaints about the handling of CCS
- families are provided with a copy of our *Family Communication Policy*
- educators provide information to families regarding the content and operation of the educational program in relation to their child, and that a copy of the educational program is available for viewing at the education and care service
- families are notified of any incident, injury, trauma, or illness that affects their child whilst under the care of the OSHC Service either immediately after the incident or when they collect their child, depending on the severity of the incident.
- respect, confidentiality and sensitivity are key elements of effective communication with families
- processes are in place to communicate with families for whom literacy is an issue, or for whom English is not a first language. For example, the centre may use Google translate.
- the OSHC Service has an administrative space that is adequate for the purpose of consulting with parents and for conducting private conversations and meetings
- families are notified of changes to OSHC Service policies at least 14 days before making changes to a policy or procedure that may have a significant impact on
    - the OSHC service's provision of education and care to any child enrolled in the service or
    - the family's ability to utilise the service
    - changes to the way fees are charged and collected
- families are notified of any changes to the Education and Care Services National Regulations
- the current Education and Care Services National Regulations are available for parents to access.

- a Family Committee is created to encourage family involvement and input into the Service's organisation and activities.

NATIONAL LAW

NATIONAL REGULATIONS

NATIONAL QUALITY STANDARDS

APPROVED LEARNING FRAMEWORK

EDUCATORS WILL:

- develop collaborative partnerships with families that involve respectful communication about all aspects of a child's learning
- be available for families on arrival and pick up to communicate about their child's experiences through informal discussions
- share insights and perspectives about each child and young person (MTOP)
- acknowledge the diversity of families and their aspirations for their children and young people (MTOP)
- engage in shared decision-making to support each child and young person's wellbeing, learning and development (MTOP)
- encourage families to be involved in the curriculum, providing feedback, visiting the OSHC Service, bringing in items from the home environment, and giving feedback on children's emerging interests
- encourage ongoing open and direct two-way communication with families to develop trust and a collaborative relationship
- create a welcoming and safe environment where children and young people and families are respected regardless of background, ethnicity, languages spoken, religion, family makeup or gender (MTOP)
- provide families with a range of communication methods which may include use of online platforms, emails, verbal communication, newsletters, sign-in sheets, Notice Board and notes sent home
- use a communication book/diary

FAMILIES WILL:

- provide accurate information during the enrolment process about their child including related medical and health information
- notify educators when any information changes- (medical management plans, court orders-parental orders, authorised nominee)
- model appropriate behaviour and suitable conduct when interacting with children and staff
- communicate any concerns or grievances in accordance with the *Dealing with Complaints Policy*, acknowledging sensitive issues should not be discussed in front of children or other staff
- acknowledge inappropriate behaviour will not be tolerated towards children or staff
- participate in informal and formal interactions with educators to discuss their child's learning goals
- be encouraged to contribute to the learning program and share their culture, language and beliefs with others in the OSHC Service
- be invited to contribute to the quality improvement process within the OSHC Service

- be invited to be involved in the Family Committee
- be invited to assist with working bees or fundraising initiatives held at the OSHC service
- be invited to events held periodically to help family's network and develop friendships in the local community
- be invited to review the OSHC Service policies and routines
- treat all children at the Service equally and respectfully
- report any suspicious behaviour to the nominated supervisor or approved provider and encourage and actively support a safe and supportive Service environment
- respect the rights, dignity and worth of every person, regardless of their abilities, gender, religion or cultural background
- refrain from bullying, harassing or discriminating against any child or adult at the Service
- respect the decisions of educators and staff members and teach children (if adults) to do likewise
- tell an educator (if a child) or the approved provider or nominated supervisor if witness to any instances of bullying, harassment or discrimination at the service
- cooperate and follow classroom routines and procedures
- listen to educators' instructions and follow them
- speak to an educator, nominated supervisor or approved provider if worried, concerned, or have a grievance about something.

FAMILIES WILL NOT:

- use abusive, derogatory or offensive language
- drink alcohol or use illicit substances while on the Service's premises or come to the Service under their influence
- smoke on the Service's premises including in the car park
- remove a child from the premises without advising a staff member.

CONTINUOUS IMPROVEMENT/REFLECTION

The *Family Communication Policy* will be reviewed on an annual basis in conjunction with children, families, educators, staff and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	4.9.2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	September 2025/1		

RECORD KEEPING AND RETENTION POLICY

The approved provider and management are responsible for overseeing and ensuring records are maintained and stored in accordance with relevant legislation contained in the National Law and National Regulations, National Quality Standard and Family Assistance Law.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members'' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S.162A	Child protection training
29	Condition on service approval—insurance
31	Condition on service approval—quality improvement plan
55	Quality improvement plans
74	Documenting of child assessments or evaluations for delivery of educational program (ACT only)
87	Incident, injury, trauma and illness record
92	Medication record
102	Authorisations for excursions
102E	Children embarking a means of transport—centre-based service

102F	Children disembarking a means of transport—centre-based service
102D	Authorisations for service to transport children
118	Educational leader
126(2)	Centre-based services – general educator qualifications- caring for children over preschool age
145	Staff record
146	Nominated Supervisor
147	Staff members
149	Volunteers and students
150	Responsible Person
151	Record of educators working directly with children
158	Children's attendance record is to be kept by approved provider
161	Authorisations to be kept in enrolment record
160	Child enrolment records to be kept by approved provider and family day care educator
162	Health information to be kept in enrolment record
167	Record of service's compliance
168	Education and care service must have policies and procedures
170	Policies and procedures are to be followed
173	Prescribed information to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider
180	Evidence of prescribed insurance
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents
184	Storage of records after service approval transferred
185	Law and regulations to be available
274A	New South Wales - Programs for children over preschool age

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
Child Care Subsidy Minister's Rules 2017	A New Tax System (Family Assistance) (Administration) Act 1999
A New Tax System (Family Assistance) Act 1999	Work Health and Safety Act 2011
Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Child Protection Policy Child Safe Environment Policy Dealing with Complaints Policy Delivery of Children to, and from EEC Service Premises Policy Enrolment Policy Excursion/Incursion Policy Governance Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Privacy and Confidentiality Policy

PURPOSE

We aim to maintain and manage appropriate records in a private and confidential manner, working in accordance with legislative requirements and best practice.

SCOPE

This policy applies to families, staff, edcuators, management, approved provider, nominated supervisor, students , volunteers and visitors of the OSHC Service.

IMPLEMENTATION

The approved provider is responsible for compliance with record keeping requirements in accordance with Education and Care Services National Law and National Regulations. To maintain approval for Child Care Subsidy, providers must also keep certain records in accordance with Family Assistance Law.
This policy encompasses requirements for National Law and National Regulations and Family Assistance Law. Records that are required for Family Assistance Law must be kept for seven years.

PRESCRIBED RECORDS TO BE KEPT BY APPROVED PROVIDER

The approved provider, nominated supervisor and management will ensure the following records are to be retained in a secure location at the OSHC Service:

- complaints made to the provider, or to any of the services of the provider, relating to compliance with Family Assistance Law (records must be kept for seven years)
- children's attendance records (regardless of eligibility for Child Care Subsidy) (Reg. 158) (to be kept until the end of 3 years after the child's last attendance [Reg. 183]. These records are also required for Family Assistance Law (records must be kept for seven years)
- record of any absences from care for all children (regardless of eligibility for Child Care Subsidy- records must be kept for seven years)
- statements or documents demonstrating that addition absence days in excess of the initial 42 absence days satisfy requirements (records must be kept for seven years)
- copies of invoices and receipts issued for the payment of childcare fees (records must be kept for seven years)
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record of all staff
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record of students and volunteers to be kept until the end of 3 years after the last date the student or volunteer attended the Service

[except in case of NSW, QLD, SA and TAS- where staff member, volunteer, or student has provided: proof of their current teacher registrations; record of identifying number of their teacher registration, expiry date of that registration. This must be recorded by the approved provider. Reg. 147, 149]

- any evidence or information produced to obtain police checks and Working With Children Checks for personnel and to support any statements about these checks in an application for provider or service approval. These records are also required for Family Assistance Law (records must be kept for seven years)
- copies of all Statements of Entitlement issued, and any statements issued to advise that there was a change of entitlement (records must be kept for seven years)
- written record of any notice given to a state or territory body about a child at risk of abuse or neglect (records must be kept for seven years)
- copies of the evidence and information provided with an application for approval about persons with management or control of a provider and persons responsible for the day-to-day operation of the service (records must be kept for seven years)

- records of background checks for specified personnel who undertake actions related to the administration of CCS (records must be kept for seven years)
- educational leader records (Reg. 118)
- an incident, injury, trauma and illness record (Reg. 87) (to be kept until child is 25 years [Reg.183])
- medication records (Reg. 92) (Keep until the end of 3 years after the child's last attendance [Re 183])
- evaluations of the child's wellbeing, development and learning (Reg. 74) (to be kept for 3 years after the child's last day of attendance [Reg.183]) for services in ACT
- evidence about the development of the educational program is documented (Reg.274A, 289A, 298A, 325B, 345A, 359A, 373A) for services in NSW
- staff records (Reg. 145)
- record of volunteers and students (Reg. 149)
- records of the Responsible Person at the Service (Reg.150 and National Law S.162A)
- record of Educators working directly with children (Reg.151)
- children's attendance records (Reg.158) (to be kept until the end of 3 years after the child's last attendance [Reg. 183]
- any record relating to the death of a child whilst being educated and cared for by the Service or as a result of an incident whilst being educated and cared for, until the end of 7 years after the death of a child.
- child enrolment records (Reg. 160) (to be kept until the end of 3 years after the child's last attendance [Reg. 183])
- record of the Service's compliance with the Law (Reg. 167)
- a record of each nominated supervisor and any person placed in day-to-day charge of the education and care service (Reg. 146)
- PRODA RA Number (*for specified personnel- people managing or employed in child care in roles regarding the approval and operation of a service and permitted to undertake actions through the Child Care Subsidy System*- Child Care Provider Handbook p.30
- evidence of prescribed insurance must be available at the education and care service premises (Reg. 180). Current policy of insurance for public liability with a minimum cover of $10 000 000 (Reg. 29)
- evidence and records of the Service Quality Improvement Plan (QIP), the QIP must be prepared within 3 months of the service opening. The QIP must be reviewed and revised at least annually

or when requested by the regulatory authority. The QIP must be submitted to the regulatory authority upon request (Reg. 31, 55, 56)

- a copy of the Education and Care National Law and Regulations must be available and accessible at the service at all times for use by the nominated supervisor, staff members, volunteers, parents and any person seeking to make use of the service
- record of children embarking a means of transport at the education and care service premises (Reg. 102E)
- record of children disembarking a means of transport at the education and care service premises (Reg, 102F)
- records identified as relevant to child safety and wellbeing (including child sexual abuse that has or is alleged to have occurred), are:
    - kept for at least 45 years
    - clear, objective and thorough
    - maintained in an indexed, logical and secure manner
    - retained and disposed of in a consistent manner.

RECORDS TO BE KEPT IN RELATION TO CHILDREN EMBARKING AND DISEMBARKING A MEANS OF TRANSPORT (REG: 102E AND 102F)

The approved provider and nominated supervisor must ensure a record is immediately made when children embark or disembark a means of transport at the service.

The record must:

- confirm each child was accounted for when embarking and disembarking from the vehicle
- state how each child was accounted for when embarking and disembarking from the vehicle
- state a staff member or nominated supervisor, who is not driving the vehicle, has examined the interior of the vehicle to confirm no child/ren remain on the vehicle
- states the date and time the record was made
- states the name of, and is signed by, the staff member or nominated supervisor who examined the vehicle to confirm no child/ren remain on the vehicle.

RECORDS TO BE KEPT IN RELATION TO THE NOMINATED SUPERVISOR: (Reg: 146 and Law. S162A)

- the full name, address and date of birth
- evidence of any relevant qualifications held by the nominated supervisor

- if applicable, evidence that the nominated supervisor is actively working towards a qualification. If this is the case, the following must be recorded:
    - Proof of enrolment.
    - Documentary evidence that the nominated supervisor has commenced the course, is making satisfactory progress towards the completion of the course, is meeting the requirements of maintaining the enrolment.
    - For nominated supervisors who are working towards the completion of a Diploma level education and care qualification, proof that they hold an approved Certificate III level education and care qualification or have as completed the units of study that equate to an approved Certificate III level education and care qualification determined by ACECQA.
- evidence of any approved training (including first aid training, current approved anaphylaxis management training, approved emergency asthma management training and approved Child Protection) completed by the nominated supervisor.
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record and/or Australian National Police Check
- the date the check, card, record or registration was and the date this was verified and by whom
- PRODA RA Number
- evidence of the nominators written consent to the nomination
- evidence of Child Protection Training.

RECORDS TO BE KEPT IN RELATION TO STAFF AND EDUCATORS: (Reg: 147)

- the full name, address and date of birth
- evidence of any relevant qualifications
- evidence of any approved training (including first aid training) completed by the staff member
- the identifying number and expiry date of the Working with Children Check (WWCC) and the date this was verified.
- if applicable the identifying number and expiry date of their current teacher registration from state Department of Education and Training
- evidence of any approved training (including first aid training) completed by the staff member.

RECORDS TO BE KEPT IN RELATION TO THE EDUCATIONAL LEADER: (Reg: 148)

- the name of the educator who is designated at this role in accordance with Regulation 118.

RECORDS TO BE KEPT IN RELATION TO STUDENTS AND VOLUNTEERS: (Reg: 149)

- the full name, address and date of birth of each student or volunteer.
- the approved provider must also keep a record for each day on which the student or volunteer participates in the Service, the date and hours of participation
- the identifying number and expiry date of the Working with Children Check (WWCC) and the date this was verified.

RECORDS TO BE KEPT IN RELATION TO THE RESPONSIBLE PERSON: (Reg: 150 and Law. S162A)

- the staff record must include the name of the responsible person at the Service for each time that children are being educated and cared for by the Service
- application for approval about the person responsible for day-to-day operation of a Service
- evidence of Child Protection Training.

RECORDS TO BE KEPT IN RELATION TO EDUCATORS WORKING DIRECTLY WITH CHILDREN: (Reg: 151)

- the name of each educator
- the hours that each educator works directly with children.
- a staff roster or time sheet stating educators contact and non-contact hours/shift.

RECORDS TO BE KEPT IN RELATION TO INCIDENT, INJURY, TRAUMA AND ILLNESS: (Reg: 87)

- details of any incident in relation to a child or injury received by a child or trauma to which a child has been subject while being educated and care for by the Service. The following must be included:
    - the name and age of the child, including date of birth
    - gender
    - the circumstances leading to the incident, injury or trauma.
    - the time and date the incident occurred, the injury that was received or the child was subjected to the trauma.
- details of any illness, which becomes apparent while the child is being educated and cared for by the Service. The following must be included:
    - the name and age of the child
    - the relevant circumstances surrounding the child becoming ill and any apparent symptoms
    - temperature record and time temperature was taken
    - the time and date of the apparent onset of the illness
    - date when child was last at the service

- details of the action taken by the Service in relation to any incident, injury, trauma or illness which a child has suffered while being educated and cared for by the Service. The following must be included:
    - any medication administered, or first aid provided
    - any medical personnel contacted
    - details of any person who witnessed the incident, injury or trauma, including signature of witness
    - the name of any person who the education and care service notified or attempted to notify of any incident, injury trauma or illness a child has suffered at the Service and the time and date of the notification and notification attempts.
    - the name and signature of the person making an entry in the record and the time and date that the entry was made
    - signed and dated parent/guardian acknowledgement of record
- this record must be recorded as soon as is practicable, but not later than 24 hours after the incident, injury, trauma or onset of illness occurred
- the record must show that a serious incident is entered into the NQA IT System
- these records must be kept until the child is aged 25 years.

RECORDS TO BE KEPT IN RELATION TO MEDICATION: (Reg: 92, 95, 96)

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

RECORDS TO BE KEPT IN RELATION TO CHILDREN'S ATTENDANCE: (Reg: 158)

- the full name of each child attending the Service
- the date and time each child arrives and departs
- the signature of:
    - the person who delivers and collects the child when he or she arrives and departs or,
    - the nominated supervisor or educator.

RECORDS TO BE KEPT IN RELATION TO CHILD ENROLMENT: (Reg: 160)

- the full name, date of birth and address of the child [birth certificate, passport, identify papers]
- the name, address and contact details of:
    - each known parent of the child
    - any person who is to be notified of any emergency involving the child if any parent of the child cannot be immediately contacted
    - any person who is an authorised nominee
    - any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
    - any person who is authorised to authorise an educator to take the child outside the education and care service premises
    - any person who is authorised to authorise the education and care service to transport the child or arrange transportation for the child
    - details of any court orders, parenting orders or parenting plans provided to the approved provider relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child
    - details of any other court orders provided to the approved provider relating to the child's residence or the child's contact with a parent or other person
    - gender of the child
    - language used in the child's home
    - cultural background of the child and parents
    - any special considerations for the child (e.g., cultural, religious, dietary requirements or additional needs)
    - authorisations signed by a parent or a person named in the enrolment record as authorised to consent to the medical treatment of the or nominated supervisor to seek:
        - medical treatment for the child from a registered medical practitioner, hospital or ambulance service.

- transportation of the child by any ambulance service.

- authorisation to take the child on regular outings [Reg. 102]
- authorisation for regular transportation of the child (if relevant) [Reg. 102D (4)]

HEALTH INFORMATION TO BE KEPT IN ENROLMENT RECORD: (Reg: 162)

- the name, address and telephone number or the child's registered medical practitioner or medical service
- the child's Medicare number if available
- details of any specific healthcare needs of the child including any medical conditions or allergies including whether the child has been diagnosed as at risk of anaphylaxis, including details of any medical management plan
- details of any dietary restrictions for the child
- the immunisation status of the child
- a notation that states that a staff member or approved provider has sighted a child's health record.

RECORDS TO BE KEPT IN RELATION TO THE SERVICE'S COMPLIANCE WITH THE LAW: (Reg: 167)

- Details of any amendments of the Service Approval made by the Regulatory Authority including:
    - the reason stated by the Regulatory Authority for the amendment
    - the date on which the amendment took, or takes, effect
    - the date (if any) that the amendment ceases to have effect
    - details of any suspension of the service (other than a voluntary suspension) including:
        - the reason stated by the Regulatory Authority for the suspension
        - the date on which the suspension took, or takes, effect
        - the date that the suspension ends.
- details of any compliance direction or compliance notice issued to the approved provider in respect of the service, including:
    - the reason stated by the Regulatory Authority for issuing the direction or notice.
    - the steps specified in the direction or notice.
    - the date by which the steps specified must be taken.
    - this information must not include any information that identifies any person other than the approved provider.
- the approved provider must ensure that the documents referred to above in relation to a child enrolled at the Service are made available to a parent of the child on request. Accordingly, if a parent's access to the kind of information referred to in this documentation is limited by an order of

a court, the approved provider must refer to the court order in relation to the release of information concerning the child to that parent.

- the record of compliance referred to above must be available for access on request by any person.

STORAGE OF RECORDS (Reg: 183, 184)

Records made by our OSHC Service will be stored in a safe and secure location for the relevant time periods as set out above and only made accessible to relevant individuals.

If the record relates to the death of a child while being educated and cared for by the Service or as a result of an incident while being educated and cared for by the Service, the records must be kept for 7 years after the death. Records related to an incident, illness, injury or trauma must be kept until the child is aged 25 years. Records related to child sexual abuse that has or is alleged to have occurred, are recommended to be kept for at least 45 years from the date the record was created.

In the case of any other record relating to a child enrolled at the education and care service, until 3 years after the last date on which the child was educated and cared for by the service. (See Appendix 2- ACEQCA image)

All records required to maintain approval as listed in *Child Care Providers Handbook*, must be kept for seven years. Written records include records that are made and stored electronically, as long as they are stored safely and any changes, apart from incidental changes related to their storage and display, are also recorded. (p. 56).

If a service is transferred under the law, documents relating to a child must not be transferred without the express consent of the child's parents.

CONFIDENTIALITY OF RECORDS (Reg: 182)

The approved provider will ensure that information kept in a record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates
- a parent of the child to whom the information relates, except in the case of information kept in a staff record
- the Regulatory Authority or an authorised officer

- as expressly authorised, permitted or required to be given by or under any Act or law- [Child Information Sharing Scheme (CISS)/ MARAM (Victorian service) or similar.
- with the written consent of the person who provided the information.

Our OSHC Service will ensure the following documents are available upon request by parents (unless restricted by a court order):

- education program documents including child assessments or evaluations
- incident, injury, trauma and illness records
- attendance records
- enrolment records

If the above documents contain personal information of any of the following persons, including home address, email address, phone number, date of birth, medical records, bank account details and tax file number, written consent MUST be obtained before the information is disclosed:

- a parent of a child enrolled at the service, other than the person requesting the documentation
- a person required to be notified of an emergency if a parent cannot be contacted
- an authorised nominee of a child
- a person authorised to consent to medical treatment or the administration of medication to a child
- a person authorised to authorise an educator to take a child outside the service premises
- a person authorised to authorise the service to transport a child or arrange transportation of a child.

INFORMATION TO BE DISPLAYED (Reg: 173)

Services must have the following displayed:

- in relation to the provider approval
    - the name of the approved provider
    - the provider approval number
    - any conditions on the provider approval.
- in relation to the service approval:
    - the name of the education and care service,
    - the service approval number,
    - any conditions on the service approval.
- the name of each nominated supervisor.
- in relation to the rating of the service:
    - the current rating levels for each quality area stated in the National Quality Standard, and

    - the overall rating of the service.
- in relation to any service waivers or temporary waivers held by the service, the details of the waivers including:
    - the elements of the NQS and the regulations that have been waived, and
    - the duration of the waiver, and
    - whether the waiver is a service waiver or a temporary waiver.

THE OSHC SERVICE MUST ALSO DISPLAY:

- the hours and days of operation of the education and care service
- the name and telephone number of the person at the education and care service to whom complaints may be addressed
- the name and position of the responsible person in charge of the service at any given time
- the name of the educational leader at the service
- the contact details of the Regulatory Authority
- if applicable, a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service
- if applicable, a notice stating that there has been an occurrence of an infectious disease at the premises
- information relating to the educational program (Reg. 75)
- the weekly menu is displayed (Reg. 80)
- emergency and evacuation floor plans and instructions are displayed (Reg. 97 (4))
- the certificate issued by the regulatory authority displaying the current rating levels of the National Quality Standards and the overall rating of the service. If applicable display the certificate stating the highest rating level (i.e., excellent rating). (Reg. 173 (3))

ADDITIONAL RECORDS TO BE KEPT FOR FAMILY ASSISTANCE LAW: (if applicable)

- a Complying Written Agreement (CWA) for all enrolments registered to claim Child Care Subsidy (CCS). Updated CWAs must be signed if there are changes to the original enrolment conditions.
- documentation relating to an Additional Child Care Subsidy (ACCS) claim.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Record Keeping and Retention Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	4.9.2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
VERSION NUMBER	September 2025/1		

STUDENT, VOLUNTEER AND VISITORS POLICY

Our OSHC Service values the participation of students and volunteers. Having students and voluntary workers within the Service helps to inform the community about our program and the value of the work we do. Students, voluntary workers and visitors are welcome at the Service; however, the children's care and safety are our first priority.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members'' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
S. 170	Offence relating to unauthorised persons on education and care service premises
S. 175	Offence relating to requirement to keep enrolment and other documents
83	Staff members and family day care educators not to be affected by alcohol or drugs
84	Awareness of child protection law
120	Educators who are under the age of 18 to be supervised

145	Staff Records
149	Volunteers and Students
168	Policies and Procedures
170	Policies and procedures to be followed
172	Notification of change to policies or procedures

RELATED POLICIES

Code of Conduct Policy
Child Protection Policy
Child Safe Environment Policy
Dealing with Complaints Policy
Family Communication Policy
Interactions with Children, Families and Staff Policy
Privacy and Confidentiality Policy

PURPOSE

Our OSHC Service supports participation of work placement students (including work experience students) and volunteers wanting to develop professional skills and knowledge in their effort to become Early Childhood Professionals. Our OSHC Service aims to ensure the safety and wellbeing of all children enrolled at the service by having a process in place to accurately and securely record information about visitors, students and volunteers. To ensure a professional and pleasurable learning experience, students and volunteers will be encouraged to participate in the centre's daily routine and assist in accordance with their qualification level to work with children under the National Quality Framework requirements. Our OSHC Service will ensure no child or children are left alone with a visitor, student or volunteer.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

We have a strong commitment to provide a range of opportunities for volunteers, students and visitors to participate in programs and activities while adhering to clear guidelines regarding appropriate interactions and communication with staff, and other adults and children at the OSHC Service. As a child

safe organisation, we embed the National Principles for Child Safe Organisations and implement child safe policies and procedures to ensure child safety is paramount. In addition, our Service has adopted the National Model Code and Guidelines for taking images or videos of children which applies to volunteers, students and visitors [optional].

A visitor may include, but is not limited to:

- Families looking to enrol their child/ren and are provided with an opportunity to view the service
- Inclusion support workers/ Allied Health Workers
- Trades person (plumber, carpenter, electrician)
- Community members contributing to the educational program such as through story or music
- Authorised Officer (Department of Education, regulatory authority, SafeWork, Police)
- Students or Volunteers
- Educators visiting from another service
- Tafe/Uni/RTO Teachers
- Performers/ Entertainers/ Presenters

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL:

- ensure all educators, staff, students, volunteers and visitors have knowledge of and adhere to this policy
- ensure all volunteers, students and visitors follow the centre's Policies and Procedures around the use of personal electronic devices whilst at our centre.
- ensure the student or volunteer completes a *Student and Volunteer Application Form* prior to commencement of work placement recording their full name, address, and date of birth
- ensure a *Visitor Register* is maintained, including
    - date
    - reason for visit
    - full name
    - time of arrival and departure
    - company (if applicable)
    - Working With Children Check (where applicable, best practice)
- ensure visitors provide ID if required
- If required, conduct a visitor induction program to provide information about the Service's policies and procedures and use of personal devices
- ensure the *Visitor Register* is kept in a safe and secure location

- ensure all visitors complete and sign the *Visitor Register*
- appoint an educator to be the 'Student Supervisor/mentor' for the duration of the placement
- provide the student/volunteer with a copy of the centre's *Employee Handbook*
- negotiate with the student or volunteer the times/hours to be worked, and dates of the placement
- advise students or volunteer to bring in a poster with a photo introducing themselves and outlining the reason for their placement
- inform families, children, and educators when work experience students and volunteers are present at the OSHC Service, including their role and hours they will be attending the Service.
- ensure work placement students or volunteers are never included in the ratio of adult to children
- ensure students or volunteers are aware that they must not discuss concerns, issues or complaints with parents, guardians and/or visitors
- introduce the student or volunteer to educators (and their supervising educator if appropriate)
- show the student, volunteer or visitor where they can access the OSHC Service's policies
- ensure the student or volunteer has signed a confidentiality agreement prior to commencing their placement
- discuss any relevant important information about specific children to the student or volunteer (i.e., court orders, additional needs, dietary needs) so that the student or volunteer is aware of potential issues
- liaise with learning institutions and accept suitable student placements under the institution's supervision
- assist learning institutions to place suitable students with individual educators
- ensure student's/volunteer's paperwork and insurances are current
- ensure each student or volunteer holds a current Working with Children Check prior to commencing their placement
- record and verify each student or volunteers Working with Children Check where required
- ensure that no student, volunteer or visitor is affected by or under the influence of drugs or alcohol while on the service premises when children are being educated and cared for

EDUCATORS WILL:

- maintain open communication with work experience students and volunteers along with their practicum teachers about their performance
- support all student's and volunteer's practicum requirements to the best of their ability during the placement
- work as a team sharing appropriate skills and knowledge with each student and volunteer

- ensure all colleagues are provided with relevant information about tasks the student is required to complete in the OSHC Service as part of their practicum
- be aware of student and volunteer expectations
- have the time and proficiencies to support each student and volunteer in their placement
- encourage students or volunteers to seek help and advice as required
- be a positive role model, showing appropriate behaviour and conduct themselves in a professional manner
- guide the students or volunteers throughout the day
- make the student or volunteer feel welcome and a valued member of the team
- ensure the student, volunteer or visitor is not left alone with a child or children whilst at the OSHC Service under any circumstance
- ensure students, volunteers and/or visitors are under the direct supervision of the approved provider, nominated supervisor, responsible person or educator at all times whilst at the OSHC Service
- refer to the Service's *Managing an Aggressive Person or Visitor Policy* for guidance if a visitor becomes hostile or aggressive.

THE SUPERVISING EDUCATOR AT OSHC WILL:

- discuss the progress of written work and performance with the student or volunteer
- discuss any concerns raised by the student with the Student Supervisor
- encourage students/volunteers to use their initiative
- ensure the student/volunteer remains up to date with their assessments/tasks to be completed
- discuss concerns with student/volunteer with management
- never leave the student/volunteer alone with a child or children
- provide honest and accurate feedback to the student's training institution supervisor as required

WORK EXPERIENCE STUDENTS AND VOLUNTEERS WILL:

- provide Working with Children Check details prior to placement (unless the person is under 18 years of age)
- not be in possession of personal electronic devices that can take images or videos while providing education and working directly with children
- learn about the children through interaction and practical experience
- develop the skills and knowledge needed to care for and educate children

- learn about the importance of working as part of a team in the School Aged education and care professional
- learn strategies for working in a team environment
- learn and accommodate the expectations of qualified educators in the OSHC Service
- inform the Student Supervisor in writing of what will be expected of them by their training body, University or school, or any other training organisation, and provide time sheets and evaluation forms
- keep up to date with all written work requirements
- work a variety of shifts to gain knowledge of different aspects of OSHC Service operations
- bring in a poster introducing themselves that will include:
    - Name
    - Photo
    - Course they are studying
    - RTO/university they are studying with
    - Dates and times, they will be at the OSHC Service
    - The focus of their study.
- discuss any problems the student may be experiencing with the Student Supervisor
- adhere to all OSHC Service policies and procedures
- never remove a child from direct staff supervision
- participate in the induction process and assist to complete the *Student and Volunteer Induction Checklist*

PROBITY CHECKS

- All students, volunteers and visitors will supply identity details to the nominated supervisor
- All students and volunteers will have a meeting with the Nominated Supervisor to receive information regarding the following service policies:
    - Child Protection
    - Child Safe Environment
    - Privacy and Confidentiality
    - Dealing with Complaints
    - Work, Health and Safety
    - Code of Conduct
    - Safe Transportation
    - Photograph

- Social Media

STUDENTS AT RISK

If educators feel that the student is at risk of failing their practicum, the following steps will be taken:

1. the educator supervising the student/volunteer will alert the Student Supervisor of any concerns regarding the student
2. both the Student Supervisor and the educator will discuss concerns with the student
3. the Student Supervisor will arrange for the student's training institution teacher to visit the OSHC Service and discuss concerns that have ascended
4. the student's educational institution and nominated supervisor will govern the outcome of the practicum.

TERMINATION OF PRACTICUM OR VOLUNTEER PLACEMENT

Termination of student's or volunteer's placement will occur if the student/volunteer:

- harms or is at risk of harming a child in their care
- is under the influence of drugs or alcohol
- fails to notify the OSHC Service if they will not be attending the Service
- does not adhere to starting times or break times
- is observed using repeated inappropriate behaviour at the OSHC Service
- does not comply with all policies and procedures addressed in the student package
- does not provide the photo with an introduction on commencement
- does not keep up to date with their work placement tasks
- removes any child or children from the direct supervision of an educator.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Student, Volunteer and Visitor Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

REVIEW

POLICY REVIEWED BY	Michael Donnelly	Director	4.9.2025
POLICY REVIEWED	September 2025	NEXT REVIEW DATE	September 2026
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