



—— OSHC Policy and Procedure Manual ——

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Policy and Procedure Preamble

Philosophy

Payne Rd OSHC believes that each child has the right to be an active member of the community in which they live, to express their opinions and to have their views considered in decisions that affect them.

We believe 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 all decision making at the service and is visible in the actions, interactions and daily work with the children.

We encourage play which encompasses children's behaviour to be freely chosen, personally directed and intrinsically motivated. We understand this type of play is performed for no external goal or reward, though is a fundamental and integral part of healthy development - not only for individual children, but also for the society in which they live. We rely on the research that tells us the uncertainty and the challenge of much of children's play is a very large part of its appeal to them but also that it enhances the development of their brains, making them more adaptable and resilient as they grow.

We believe that children are active learners from birth and through rich, engaging environments and meaningful interactions, we can build a foundation for successful lifelong learning.

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

We acknowledge the important role that schools' play in children's education, learning and development and seek to develop complementary and supportive relationships based on collaborative partnerships.

We acknowledge through all aspects of service delivery, the intrinsic worth and strengths of all children and their families, and their right to equitable access and participation in the community.

We believe in the importance of community ownership as it brings families into governance of the service. This ensures a collaborative approach when actively making decisions for the children attending the service.

The service believes that children have the right to have their individual and cultural identity recognised and respected. We value Australia's Aboriginal and Torres Strait Islander cultures as a core part of the nation's history, present and future. We seek to embed Aboriginal and Torres Strait Islander perspectives in our day-to-day practice with children and families through our commitment to reconciliation.

We value ongoing learning and reflective practice as a way to inform and enrich the decisions made that continuously promote positive wellbeing, learning and developmental outcomes for children.

Required Policies Matrix (Regulation 168)

Policies and procedures are required in relation to the following—			
1		(i) nutrition, food and beverages, dietary requirements	1.5 Food and Nutrition & 2.12 Safe Food Handling, Preparation and Storage (Food Safety Program)
2	(a) health and safety, including matters relating to—	(ii) sun protection	2.11 Sun Safety
3		(iii) water safety, including safety during any water-based activities	2.6 Water Safety
4		(iv) the administration of first aid	2.5 Administration of First Aid
5		(v) sleep and rest for children	1.4 Sleep and Rest
6		(b) incident, injury, trauma and illness procedures complying with regulation 85	2.4 Incident, Illness, Injury and Trauma
7		(c) dealing with infectious diseases, including procedures complying with regulation 88	2.7 Infectious Disease - Prevention and Response
8		(d) dealing with medical conditions in children, including the matters set out in regulation 90	2.9 Children with Medical Conditions
9		(e) emergency and evacuation, including the matters set out in regulation 97	2.13 Emergency Evacuation and Lockdowns
10		(f) delivery of children to, and collection of children from, education and care service premises, including procedures complying with regulation 99	2.3 Arrivals and Departures
11		(g) excursions, including procedures complying with regulations 100 to 102	1.3 Excursions
12		(ga) if the service transports or arranges transportation of children other than as part of excursions, transportation including procedures complying with Division 7 of Part 4.2 of Chapter 4;	<i>N/A – the service does not provide transportation (as per 7.4 Leading Compliance and Quality Assurance).</i>
13		(h) providing a child safe environment	2.1 Providing a Child Safe Environment
14	(i) staffing, including—	(i) a code of conduct for staff members	4.4 Code of Conduct
15		(ii) determining the responsible person present at the service	7.2 Determining the Responsible Person
16		(iii) the participation of volunteers and students on practicum placements	4.3 Volunteers and Students
17		(j) interactions with children, including the matters set out in regulations 155 and 156	5.1 Interactions and Relationships with Children
18		(k) enrolment and orientation	6.2 Enrolment and Orientation
19		(l) governance and management of the service, including confidentiality of records	7.5 Appropriate Governance & 7.6 Information Handling (Privacy and Confidentiality)
20		(m) the acceptance and refusal of authorisations	6.4 Acceptance and Refusal of Authorisation
21		(n) payment of fees and provision of a statement of fees charged by the education and care service	7.10 Setting, Reviewing and Managing Fees
22		(o) dealing with complaints	6.7 Feedback and Complaints Handling

Taking ‘Reasonable Steps’ to Ensure Policy is Followed

[Education and Care Services National Regulation 170](#) sets out the expectation of approved providers to take *reasonable steps* to ensure nominated supervisors, staff members and volunteers at the service follow the required policies and procedures.

To operationalise the expectations of *reasonable steps*, the Regulatory Authority have developed [a six step, outcome-based, framework](#) for approved providers to adopt in—

- the development policies; and
- the discharging of their governance responsibilities.

These steps should be reflected in both the service’s policies and management actions. Likewise, services should seek to capture and document evidence to demonstrate their compliance around this framework, should enquires into a services compliance need to be demonstrated. These are important aspects around the continued demonstration of *management capacity* (as aspect of being a [fit and proper person](#) for provider approval).

The six-step outcome-based framework contains—

Step	Theme	Requirements
1	Accessibility	Policies and procedures are readily available and are accessible to all staff as required.
2	Induction and ongoing training	Staff are provided adequate induction and ongoing training on the service’s policies and procedures to ensure up-to-date knowledge and skills.
3	Quality assurance and governance	Policies and procedures are regularly reviewed and maintained.
4	Monitor and audit compliance	Implementation of policies and procedures is regularly monitored to ensure staff are following them correctly.
5	Reformative action	Non-compliance with policies and procedures is promptly addressed.
6	Resourcing and support	Adequate resources and time are allocated to enable staff to practically comply with the service’s policies and procedures.

Scope of Roles and Responsibilities

This policy and procedures contained within this manual cover the operational and governance duties for Payne Road OSHC.

The Employer, Payne Road P&C Association, expects all employees and volunteers will follow the instruction contained in this manual in the discharge of their duties.

Roles and Responsibilities

To remove any doubt, these terms have the following meanings to roles within the service:

Approved Provider	<p>The <i>Approved Provider</i> is the term used to refer to the Executive Committee of the P&C Association (i.e. the President, Treasurer, Secretary, Vice President etc). Collectively, these individuals hold the approval to provide the education and care service. The Approved Provider is also the employer of all OSHC staff members.</p> <p>The term has been chosen as it is consistent within the National Quality Framework, including the Education and Care Services National Law and Regulations.</p>
Nominated Supervisor	<p>The Nominated Supervisor is the person(s) nominated by the Approved Provider to hold the role as described within the National Law and Regulations. The Nominated Supervisor will typically refer to the Director position.</p> <p>Where the policy refers to the Nominated Supervisor, often in their absence the Responsible Person will assume these responsibilities, as so far it is relevant to day-to-day operations (see 7.2 Determining the Responsible Person for further clarification).</p>
Responsible Person	<p>The Responsible Person is the employee nominated (with consent) to be placed in day-to-day charge of the service, in the absence of a Nominated Supervisor or the Approved Provider being on the premises. Their key role is to ensure the service operates consistently with the National Regulations.</p> <p>The role is referred to within the National Regulations as a 'person in day-to-day charge'.</p>
Educational Leader	<p>The appointed Educational Leader is responsible for the development and implementation of the service's program.</p>
All Staff	<p>The expectations, duties and responsibilities for all employees, volunteers or other relevant personnel are illustrated in the points connected to the all staff heading.</p>

Definitions

- **Assessment and Rating** – process through which education and care services are assessed by the Regulatory Authority for compliance with national legislation and for the quality of practice against the National Quality Standard
- **Authorised Nominee** - means a person who has been given permission by a parent to collect the child from the education and care service.
- **Australian Children's Education and Care Quality Authority (ACECQA)** – the national administrative body that oversees the implementation of the National Quality Framework throughout Australia
- **[Workplace] Bullying** - is repeated oppression, psychological or physical harm. It may be manifested in many ways e.g. harassment verbal, sexual or psychological), victimisation, alienation, coercion, intimidation, exclusion, ostracism or discrimination.
- **Discrimination** - is treating an individual with a particular attribute less favourably than an individual without that attribute or with a different attribute under similar circumstances. It can also be seeking to impose a condition or requirement on a person with an attribute who does not or cannot comply while people without that attribute do or can comply.
- **Disciplinary action** - action taken by the organisation to deal with any actual, alleged or perceived breach of legislation, policies, codes or other standards of work performance and/or conduct.
- **Duty of Care** – obligation under common law and the rules of negligence for education and care services to protect children, families, staff and all visitors to the service from harm. Approved Providers, Nominated Supervisors, educators and staff need to understand their responsibilities under duty of care
- **Education and Care Service** – means the OSHC service operated by the P&C.
- **Employee Counselling** - The discussion and analysis of issues which affect an employee's conduct and/or work performance. Counselling is used as a management action to improve an employee's performance where their behaviour or performance doesn't meet required expectations.
- **Emergency** - 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 (e.g. flood, fire, a situation requiring a lockdown)
- **Equal Employment Opportunity (EEO)** - is ensuring that all employees are given equal access to promotion, appointment or other employment related issues without regard to any factor not related to their competency and ability to perform their duties.
- **Excursion** – An approved activity organised by the service located outside of the premises (school site) – i.e. an outing. Children must be authorised to attend an excursion prior to leaving the premises.
- **Fit for Work** - an employee is fit for work if they: Have a blood alcohol level of 0.00 and test negative for drug use: and Are physically able to carry out their duties, as per their job description.
- **Infectious Disease** - communicable diseases that requires a person with the disease to be excluded from the service. The service has a duty to ensure adequate mitigation efforts are implemented to protect from the diseases being spread by individual attending the service.
- **Incident** - any event resulting in or having potential for injury, illness, damage or other loss.
- **Misconduct** - When an employee breaches their obligations under their contract of employment. Examples of misconduct may include but are not limited to: breaches of policies, codes of conduct and other reasonable instructions; unauthorised absence from work.
- **My Time, Our Place: Framework for School Age Care in Australia** – The Approved Learning Framework for school age care in Australia. It outlines the principles and practices that support and promote learning outcomes for children over preschool age
- **National Quality Framework (NQF)** – a mosaic composition of regulatory and quality mechanisms that come together to drive quality education and care for children, families and services around Australia.

- **National Quality Standard (NQS)** – sets a national benchmark for quality in education and care services, including OSHC. The NQS is comprised of 7 Quality Areas, 15 Standards, and 40 Elements. It is the basis for an Assessment and Rating.
- **On duty** - An employee is on duty at any time they are undertaking the duties and responsibilities associated with their contract of employment.
- **Parent** – a legal guardian of the child and a person who has parental responsibility for the child under a decision or order of a court.
- **Premises** – the school site the OSHC operates from.
- **Program** - In the school age care setting 'all the interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children's wellbeing, development and learning.'
- **Quality Improvement Plan (QIP)** – must be developed by each service as part of a collaborative process of self-assessment of the quality of practice against the NQS and the national legislation
- **Regulatory Authority** – responsible for approvals, monitoring and quality assessment for education and care services in their state or territory. In Queensland, this authority is the Department of Education and Training - Early Childhood Education and Care
- **Serious Incident** – an incident or class of incident prescribed by the National Regulations. Serious Incidents are reportable and specific management and reporting actions are required by the service.
- **Serious Misconduct** – employee behaviour and action that are wilful or deliberate and are fundamentally inconsistent with the continuation of the employment relationship. It is conduct that causes serious and imminent risk to the health and safety of a person or to the reputation, viability or profitability of the employer's business. Examples of serious misconduct include: theft, fraud, assault, intoxication at work and the refusal to carry out lawful and reasonable instructions
- **Standards** – sets the benchmark for quality practice and are aligned to the seven Quality Areas of the NQS
- **Trauma** - an event or incident that causes physical, emotional or psychological harm.
- **Underperformance** – where the employee's performance is below the reasonable expectation set out by the employer

Policy Group 1

Program and Practice

The **educational program and practice** is the central element of operations that drives children's learning and development each day.

The program will be delivered to provide stimulation, engagement, and an opportunity to enhance children's wellbeing and growth. As we care for school-age children, our program nurtures the development of life skills and complements experiences, opportunities, and relationships at school, at home and in the community.

Our policies are written to ensure that educators' pedagogical practices and strategies are child-centred and maximise possibilities for advancing and extending each child's learning and development. They acknowledge that a high-quality program that builds on children's unique knowledge, strengths, ideas, cultures, abilities, and interests is likely to produce long-term outcomes for children and for wider society.

1.1 Educational Program Development and Implementation

Policy Statement

Payne Road OSHC recognises *My Time, Our Place* as the approved learning framework for school-age care under the National Quality Framework. In doing so, we support that the service's program includes all of the interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children's wellbeing, development and learning.

Payne Road OSHC understands the importance of a building a quality program as the foundation of the learning, development and support of a child's wellbeing. Payne Road OSHC is committed to ensuring their program should encourage self-directed play, relationship building, collaborative decision making and respect for diversity.

The appointed Educational Leader, in collaboration with educators, children and families, will lead the development and implementation of the educational program and assessment and planning cycle. Through this collaborative coordination, the service's program will be developed and implemented to contribute to the following outcomes for each child—

- the child will have a strong sense of identity;
- the child will be connected with and contribute to his or her world;
- the child will have a strong sense of wellbeing;
- the child will be a confident and involved learner;
- the child will be an effective communicator.

Related Policies

- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.6 Resources and Equipment](#)
- [1.7 Technology and Screen-Time](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [3.1 Space and Facilities Requirements](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [6.6 Community Communication and Participation](#)
- [7.3 Educational Leader](#)
- [7.16 Asset Management](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Must ensure that a program is delivered to all children being educated and cared for by the service that—<ul style="list-style-type: none">○ is based on an approved learning framework;○ is delivered in a manner that accords with the approved learning framework;○ is based on the developmental needs, interests and experiences of each child; and○ is designed to take into account the individual differences of each child
Nominated Supervisor	<ul style="list-style-type: none">• Will provide support and guidance to the delivery and development of the program.• Ensure the development and implementation of the program is compliant with agreed procedures and legislative frameworks.• Support the pedagogy and development of educators to assist with program delivery.
Educational Leader	<ul style="list-style-type: none">• Provide coordination and leadership of the services program through a collaborative planning cycle.

	<ul style="list-style-type: none"> Engage with the stakeholder group to gather ideas, wishes and feedback to inform program development.
All Staff	<ul style="list-style-type: none"> Collaborate in critical reflection, observation, documentation, planning, and program implementation. Facilitate programmed activities or experiences to support the outcomes of the program.

Procedures

Foundations of the Program

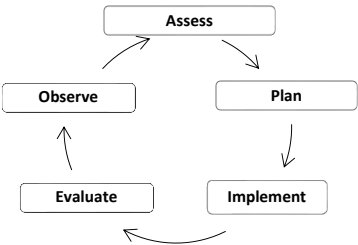
The development and delivery of Payne Roach OSHC's program will be:

- based on the *Principles, Practices and Learning Outcomes of My Time, Our Place*;
- formed from an ongoing cycle of planning, implementing, evaluating, observing, and assessing.
- Information around the content and operation of the program is displayed in a prominent location, to be accessible for addition input of children and families.
- reflect the developmental needs, interests and individual expression of children.
- organised so activities, events and resources are chosen to maximise the facilitation of learning through play and leisure, contribute to the outcomes of the program, and to support children's wellbeing and development.

Planning Cycle

Payne Road OSHC's **Educational Leader** is responsible for coordinating the design and implementation of the service's weekly program and ongoing development of educator practices. Their role is central to the service's planning cycle and delivery of the service's program.

The Educational Leader will engage educators to collaborate throughout the cycle of programming. The Educational Leader will role is to maximise the meaningfulness of evaluations, observations and critical reflection collated throughout the planning cycle.



Step	Purpose	Tasks
Evaluate	Educators collaborate with children to evaluate the implementation of plans. It is a collaborative process that identifies what has worked and what can be done differently in the future.	<ul style="list-style-type: none"> The experiences of children are captured by educators, either formally or throughout the course of play. Educators work with children to identify what aspects of the program work well? What benefits were found? And what can be done differently next time? Educators critically reflect on the learning possibilities in the future.

Observe	<p>This step captures the meaningful and relevant information around children's wellbeing, learning and development.</p> <p>Educators describe children's engagement in play and leisure, ensuring that children's voices and perspectives are sought and included.</p>	<ul style="list-style-type: none"> • Educators discuss and record observations of the children's experiences, learning and participation in the session of care. • Records provide a description of the events taken place throughout the program (both planned and unplanned), with particular importance in meaningful and relevant experiences/activities. • These documents collectively reflect a holistic view of children's learning and wellbeing.
Assess	<p>Drawing upon the observations, educators apply and interpret against their professional knowledge and understanding of literature to identify children's strengths and capacities. These are assessments consider the program's impact in delivering learning outcomes.</p>	<ul style="list-style-type: none"> • Applying an understanding of research, literature and theory, with a particular focus on child development, and play-based learning to enhance the planning and practice of the program. • Question and evaluate what has already been learned or expressed to understand further possibilities. • Consider holistic approaches support multiple aspects of a child's wellbeing and development – including physical, cognitive, social, emotional, cultural and spiritual learning or expression.
Plan	<p>Using the information and insights gathered from previous experiences, educators consolidate this insight to prepare activities and experiences that enrich and extend wellbeing, learning and development through leisure and play.</p>	<ul style="list-style-type: none"> • The Educational Leader, in collaboration with educators, is active in using the insights from observations and assessment, create and develop ideas for activities and experiences that aim to achieve the MTOP learning outcomes. • Program ideas are discussed and recorded for children and families to understand and further contribute. • Where possible, the program should support, allow and encourages children to complete long-term projects and build upon previous experiences. • There is a balance between planning and flexibility for the program to embrace spontaneity.
Implement	<p>Program plans and turned into action.</p> <p>Educators provide children with the inspiration, resources and platform to carry out the planned aspects of the program or to be spontaneous and contribute to learning, development and wellbeing through unplanned activities.</p>	<ul style="list-style-type: none"> • Educators bring plans into action by following the relevant instruction and guidance built for the purpose of achieving learning outcomes. • The activities are various and provide appropriate opportunities for children as individuals and small groups to follow and extend their interests as they choose. • Children engage in the various elements of play and leisure and have opportunities express themselves and their preferences. • Educators positively guide and support appropriate opportunities for children to develop a range of life skills such as establishing and maintaining meaningful relationships, working collaboratively with others and self-regulating their own behaviour.

Documenting the Program

Documentation – collecting evidence of children’s learning, development, experiences and collaboration – occurs at every stage of the planning cycle.

Complimenting spontaneous and visual documentation is the methodical systems used every session to evidence the collaboration and critical reflection of educators. Each session of care will document the significant activities and experiences children engaged with and the evaluations, observations and assessments resulted. For each area (inside/outside) or substantial programmed activity, at least one educator will complete the daily documentation template. This will include capturing information around:

- **Evaluations** – with an emphasis on children’s perspectives, what has worked well and what can be done differently?
- **Observations** – descriptions of children’s engagement in play and leisure activities.
- **Assessment (interpret learning)** – Identify the learning outcomes have been demonstrated in children’s play and leisure. Suggest opportunities to extend on learning and/or wellbeing.

Leading the Planning Cycle

Every week the Educational Leader will collate, review and consider the documentation created by educators. The Educational Leader will assess the learning outcomes achieved across the week and write a weekly evaluation noting significant and meaningful aspects of the program.

The documentation and Educational Leader evaluations will inform future programming decisions. The Educational Leader, in collaboration with all educators, children and families will create a plan for the week ahead. The program will be informed by the analysis and observations of the previous program, taking into account children’s preferences. Planned activities will reflect the diversity of children preferences and needs, with richness and variety.

A summary of the Educational Leader’s evaluation will be made available to families and promoted in the service’s newsletter. Additional learning stories and other reflection can be created by children and educators and will be displayed in a prominent location for families.

Continuous Improvement

The Nominated Supervisor, Educational Leader and educators will meet at least each term to review the service’s achievements and practices, evaluating the quality of the program and service delivery. These evaluations will guide the Quality Improvement Planning for Quality Area 1 and develop actions to enhance the program for children and families.

Taking into account all feedback received through these procedures, the Nominated Supervisor and Educational Leader will develop a quarterly report (each term) to the Approved Provider on the evaluation of the effectiveness of the service programs and areas of continued development.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.168 Offence relating to required programs
- Education and Care Services National Regulations:
 - R.73 Educational program
 - R.74 Documenting of child assessments or evaluations for delivery of educational program
 - R.75 Information about educational program to be kept available
 - R.76 Information about educational program to be given to parents
 - R.298A Programs for children over preschool age
- National Quality Standard:
 - QA1 – Educational program and practice

- QA4 – Staffing arrangements
- QA5 – Relationships with children
- QA6 – Collaborative partnerships with families and communities.
- My Time, Our Place - Framework for School Age Care in Australia.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Working With Children (Risk Management and Screening) Act 2000 (Qld)
- United Nations Convention on the Rights of the Child
- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
Version:	v.2023-1
Review Date	October 2024

1.2 Sharing the Program and Children's Progress with Families

Policy Statement

Adjacent to the development and implementation of the service's program is the collaboration and communication with parents, children and families. Engagement and participation from the service's stakeholder to guide the evaluation of the program is a critical element in both quality improvement and compliance of the national quality standards.

The service's documentation, critical reflection and planning will be created and maintained in a manner that is accessible to and displayed for families to understand the learning that Payne Road OSHC is creating for their child/ren. Payne Road OSHC is committed to providing meaningful opportunities to collaborate with families to extend on the learning activities and experiences for children accessing the service.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.5 Food and Nutrition](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [6.7 Feedback and Complaints Handling](#)
- [7.15 Social Media and ITC Usage](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the program is made available to families.• Support the service in sharing the learning and progress of children with the parents and families of the service.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor and support the implementation of the service program and the planning cycle.• Lead the communication and collaboration with parents and families.• Ensure the quality and consistency of communication is meeting the service's aims
Educational Leader	<ul style="list-style-type: none">• Drive the evaluation and communication processes for information sharing with families.• Support educators to participate in critical reflection and partnerships with families.• Ensure the standard of documentation being developed meets the needs of children, families and the service
All Staff	<ul style="list-style-type: none">• Collaborate in documenting, reflecting and planning in partnership with children and families.• Ensure the views, thoughts, wishes, progress and learning of children is captured in documentation and informs the planning of future programming.

Procedures

Collaboration and Communication with Children

Educators will regularly seek feedback and perspectives from children. These ideas, evaluations and wishes will be recorded in the program's documentation. Documentation completed by educators will facilitate opportunities for critical reflection and prompt opportunities for the Education Leader to collaborate in coordinating activities and experiences that build upon these learning extensions.

Additionally, children's comments, suggestions and feedback are collected through conversation, observations and the communication board. Communication board is displayed at various, inconsistent times of the year, for the purpose of seeking specific feedback. Children, families and staff are welcome to add their thoughts and comments on the communication board at any time.

Educators complete reflections and observations each week. These capture the experiences, conversations and learning of children. The educator documentation is collated by the Education Leader on a regular basis to demonstrate children’s learning and wellbeing and inform ongoing practice.

Communicating Children's Learning and Development

The Educational Leader will prepare an evaluation of the service's program, these include both the planned and spontaneous activities that children have engaged in. The communication to families contains a variety of evaluations including, critical reflection of learning/outcomes, as well as the progress of children and their experiences at Payne Road OSHC.

Information Sharing and Partnerships with Families

The invitation for families to contribute their thoughts, perspectives and wishes to inform the program is outlined in the enrolment information and can be made through:

- Conversations with educators
- Email correspondence and feedback
- Surveys and feedback prompts
- Contribution to the comments and suggestions/communication board.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations
 - R.73 Educational program
 - R.74 Documenting of child assessments or evaluations for delivery of educational program
 - R.75 Information about educational program to be kept available
 - R.76 Information about educational program to be given to parents
 - R.298A Programs for children over preschool age
- National Quality Standard—
 - QA1 – Educational program and practice
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities.
- My Time, Our Place - Framework for School Age Care in Australia

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

Policy Controls	
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1.3 Excursions

Policy Statement

Payne Road OSHC includes excursions as a valuable part of its overall program. Excursions aim to provide children with enjoyment, stimulation, challenge, new experiences and a meeting point between the Service and the wider community. Parents and stakeholders are encouraged to contribute ideas and perspectives to the planning of excursions and their activities. The Service will evaluate each excursion to ensure outcomes are meeting intended aims and needs of children and families.

The Service understand the inherent risk and matters of compliance associated with excursions. Therefore, the following steps will be taken by the service before any child will be permitted to leave the premises:

- Risk assessments will be completed for each excursion, identifying all relevant hazards, and ensuring these are appropriately managed/controlled;
- The Approved Provider is to confirm the approval of risk-assessments and activities with significant risk prior to the undertaking of any excursions; and
- Written authorisation from a parent (or relevant authorised nominee) will be obtained by the Service following the preparation and approval of the risk assessment.

Approved risks assessment developed for excursion will be made available to parents (or relevant authorised nominee). The Service recognises the Regulatory requirements for the conducting of excursion risk assessments. All risk assessment will use documentation that satisfies all the legislated requirements for excursions risk assessments, including the specific elements regarding travel. The Service is committed to ensuring the safety and protection of children is maintained.

Parent (or authorised nominee) authorisation will be obtained via the vacation care booking forms. These documents will outline excursion details, including all matters set out in the *Regulations*. All authorisations will be stored in a manner consistent with the Service's record keeping policy.

All travel for excursions will uphold high standards of safety and protection. Travel procedures contained in this policy only apply to excursion-related travel. To remove any doubt, Educators will not be permitted to transport children in their own private vehicle for excursions or otherwise.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(g), 99, 100-102*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)

Appendices and Forms

- [Excursion Permission Form](#)
- [Excursion Risk Management Plan](#)
- [Excursion Checklist Template](#)
- [Swimming Ability Form](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure risk-assessments address and manage all relevant risks and are conducted prior to the approval of excursions• Ensure the service is supported to understand their obligations for risk-assessment and parent consent to support compliance with regulations
Nominated Supervisor	<ul style="list-style-type: none">• Ensure procedures are followed so that risk-assessments and written parent consent is obtained before children are taken off-site.• Undertake a sound risk-assessment process that is collaborative in seeking the input of other educators.• Prepare and plan - having contingencies for unplanned events.
All Staff	<ul style="list-style-type: none">• Support a safe and enjoyable activity with children.• Follow instruction and risk-assessment plans.• Demonstrate responsiveness through positive support to children's behaviours as required.

Procedures

Excursion Planning and Approval

Children's age, interests and abilities will be taken into consideration when planning excursions. Comments, suggestions and feedback from children and families will also be taken into account. When planning excursions, venue and transport costs will be considered, to ensure that excursions are financially viable and accessible to families.

Alternative arrangements (contingency plans) will be planned in case of changed weather conditions or other unforeseen circumstances.

The Nominated Supervisor is responsible to consult, plan and investigate potential excursion activities prior to the development and approval from the Approved Provider. No excursion is permitted to be facilitated without the endorsement of the Approved Provider.

Each excursion will have a checklist completed (see [Excursion Checklist](#)) to record the steps taken to manage all the elements of planning and facilitating the excursion. Please note - aspects of the checklist template should be amended to suit the context of each excursion.

Excursions Risk Assessments

Both the Approved Provider and Nominated Supervisor are to ensure a comprehensive risk assessment has been documented and endorsed prior to families having the opportunity to book and authorise their child/ren to attend the excursion. Likewise, the Approved Provider and Nominated Supervisor will ensure all children have written authorisation (as expressed below) before they will be permitted to leave the Service's premises.

The Nominated Supervisor will be responsible for facilitating the initial risk assessment for approval. Where possible, the risk assessment should be developed in collaboration with Educators to ensure all identifiable hazards are identified and adequately controlled. All risk assessments will be prepared on a standardised form to ensure all required details are addressed.

Depending on the level of risk and previous experience, it may be necessary to visit the intended excursion site when conducting the risk assessment. Permission from the Approved Provider will need to be sought before staff are permitted to travel to a possible excursion location during work time.

Exceptions for Regular Outings

A newly developed risk assessment is not required for an excursion if—

- the excursion is a **regular outing**; and
- a risk assessment has already been conducted for the excursion; and
- that risk assessment has been conducted not more than 12 months before the excursion is to occur.

All excursions will:

1. identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion; and
2. specify how the identified risks will be managed and minimised.

And consider:

3. the proposed route and destination for the excursion;
4. any water hazards;
5. any risks associated with water-based activities;
6. the transport to and from the proposed destination for the excursion, including:
 - a. the means of transportation;
 - b. any requirements for seatbelts or safety restraints under Queensland law;
 - c. the process for entering and exiting
 - i. the Service's premises; and
 - ii. the pick location and/or destination
 - d. procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking/disembarking;
7. the number of adults and children involved in the excursion;
8. given the risks posed by the excursion, the number of educators or other responsible adults that is appropriate to provide supervision and whether any adults with specialised skills are required (e.g. lifesaving);
9. the proposed activities;
10. the proposed duration of the excursion; and
11. the items that should be taken on the excursion (e.g. mobile phone, emergency contacts).

All risk assessments for excursions will be completed by using the service's *Excursion Risk Assessment Template*.

Authorisation for Each Child's Participation

Written authorisation from a parent (or other persons named with authorisation on the enrolment form), will be held by the Service before the child is to be taken off-site. The Service's booking forms (typically the Vacation Care booking form) will be created in a manner to provide and collect all relevant details from the parent or authorised nominee.

The written authorisation for an excursion must contain:

1. the child's name;
2. the reason the child is to be taken outside the premises;
3. the date the child is to be taken on the excursion (unless the authorisation is for a regular outing);
4. a description of the proposed destination for the excursion;
5. the method of transport to be used for the excursion;
6. the proposed activities to be undertaken by the child during the excursion;
7. the period the child will be away from the premises;
8. the anticipated number of children likely to be attending the excursion;
9. the anticipated ratio of educators attending the excursion to the anticipated number of children attending the excursion;
10. the anticipated number of staff members and any other adults who will accompany and supervise the children on the excursion; and
11. that a risk assessment has been prepared and is available at the Service.

Carrying Out the Excursion

Viability of Excursion

Limited bookings impacting viability may result in the excursion being cancelled. Contingency plans should be created for all planned excursions. Communication with impacted families will occur at the earliest possible convenience. Any complaints and feedback can be handled as per the relevant policy.

Preparation

1. The Nominated Supervisor will ensure the excursion checklist has been reviewed at least one day prior to the excursion.
2. All educators attending the excursion must read and sign off on the relevant and specific excursion risk assessment/s, prior to attending on the day.
3. The Nominated Supervisor will ensure all elements of the excursion checklist have been actioned/addressed prior to departing for the excursion.

During the Excursion

There will be no changes to the notified itinerary except in an emergency and as would ensure the wellbeing and safety of the children.

Educator practices will reflect the actions outlined in the risk assessment, including plans to manage transportation safety.

The following items will be taken on all excursions and be readily accessible to educators at all times:

- First aid kit, medications and forms, medical management plans and medical devices as required;
- Attendance record/roll and staff roster;
- Emergency contact details and numbers for children and staff; and
- A telephone or access to one.
- The service phone/camera will be taken on the excursion for educators to record and document children's experiences.

Supervision

Unless otherwise specified in the risk assessment the following procedures will be practiced on excursion:

- Face counts will be made at regular intervals and when moving from one area to another.
- educators will provide active supervision, ensuring the appropriate educator to child ratios are maintained at all times.
- toilets and change rooms - where no male (or female) educator is available to supervise the boy's toilets (or girls toilets), female (or male) educators must satisfy themselves that it is safe for the child/ren to access the toilets and will remain in suitable proximity to the toilet area until all child/ren have returned.
- educators will satisfy themselves that all environments are safe for use before allowing the children access to it.
- children will not be left in the sole care and custody of bus drivers (unless the driver of the Bus is a paid employee/educator of the service) or any other persons during excursions.

In the event of injury occurring during an excursion, procedures as set out in the [4.3 - Incident, Illness, Injury or Trauma Policy](#) will be followed.

Excursion Evaluation and Reflection

Educators will inform the assessment of the evaluation of the excursion. Typical observations and documentation addressing the children's learning and wellbeing outcomes will be recorded. Additionally, at the next team meeting, the excursion and risk management plans will be evaluated collectively. Where improvements have been identified, these ideas will be recorded and implemented in future plans for excursions.

Transportation/Travel

The following transportation and travel procedures only relates to travel occurring as part of an excursion. The service does not provide or coordinate transportation outside of excursions ([7.4 Leading Compliance and Quality Assurance](#)).

Selecting Transportation

The Service will ensure any transportation of children upholds all relevant legislation and guidelines, including:

- Any vehicles used must be registered for the purpose and in suitable (roadworthy) condition.
- Drivers are to be suitably licensed to carry the required number of passengers.

Seatbelts and Restraints

In the case of children being transported in a bus (or car), the following legislative guidelines will be followed:

- Bus transport with 13 or more seats does not need to be fitted with seatbelts and child restraints are not required.
- Australian Standard (AS/NZS 1754) child restraints are required for four to seven-year old when traveling in a car (other than taxi) or a van/bus with 12 or less seats. In these circumstances all passengers have to wear seatbelts.
- Public transport - child restraints are not required on buses, trains, or personalised transport services such as taxi, limousine and ride-booking services.

Transitioning Between Transport, Premises and Destinations

- The risk assessment prepared for the excursion will illustrate the specific steps for children:
 - Entering and exiting the service's premises, pick-up location and destination
 - Embarking and disembarking the means of transport, including how children will be accounted for
- Generally, the service will be a face count or roll to account for children periodically throughout the excursion and for critical points such as transitioning between locations. Specific steps will be developed as per the context of the excursion.
- Locations for travel embarking and disembarking will consider the relevant risks, where possible the safety location will be selected for transitioning.
- Consideration will be made to appointing a particular educator to the role of accounting for children as they transition between the means of transport and relevant locations.

Vehicle Breakdown/Accident

- In the event of an incident occurring during an excursion, procedures as set out in the *Incident, Illness, Injury or Trauma* Policy be followed.
- In the event of a vehicle breakdown, while waiting for replacement transport/repairs, children will be kept safe, comfortable and occupied with suitable activities. The Nominated Supervisor or delegate will communicate the situation and remedies to families via relevant communication channels.
- In the event of a late return to the Service, every effort will be made to notify parents e.g. to arrange for a notice to be displayed at the Service or to contact parents individually.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.165 Offence to inadequately supervise children
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.99 Children leaving the education and care service premises
 - R.100 Risk assessment must be conducted before excursion
 - R.101 Conduct of risk assessment for excursion
 - R.102 Authorisation for excursions
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA2 – Children's health and safety;
 - QA4 – Staffing arrangements
 - QA 5 – Relationships with children;
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011
- Transport Operations (Passenger Transport) Standard 2010 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

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1.4 Sleep and Rest

Policy Statement

Payne Road promotes the welfare and comfort for children the service, this includes suitable access to sleep, rest and relaxation. The service will structure the environment, practices and program to ensure children needing or seeking calmer and quieter areas for play and leisure can access these when required.

The age, developmental stage and the individual needs of each child is a central component of the planning and structure of the program. We recognise that each child is unique and their requirements for sleep and rest will vary. The program will be developed to consider the variability and diversity of children's needs.

Parents are welcome and encouraged to discuss and contribute to the planning of the program to ensure their child's individual sleep, rest and relaxation needs are met.

The service's physical environment will be shaped to offer inviting areas for calm and restful play. Resources and facilities where children can lay down in comfort will be available during all sessions. If needed, children will be provided with a suitable area to sleep. Where resources such as bedding and line is used, these will be cleaned and appropriately stored after each occasion.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Support the service's planning, facilities and resources to promote a diversity of experiences including those that support a child's need for rest and sleep.
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with parents and families about children's needs for rest and sleep. Plan and support accordingly.• Lead reflection on the service's program and planning to facilitate a range of experiences and opportunities for children including those that support children's rest and relaxation.
All Staff	<ul style="list-style-type: none">• Support children to access opportunities for sleep, rest and relaxation as required.• Ensure physical spaces are configured and are made available for quiet and restful activities.

Procedures

Program to provide opportunity for rest

The development of the program will consider the holistic needs of children, including the need for rest, relaxation, and if needed, sleep. Ongoing consultation with children and families will identify the extent of children's needs for rest and sleep.

The service's leaders will also consider factors such as a child's background, (current and previous) routines, development and personal preferences when developing a structure for children's activities and routines.

Our rich and diverse educational program will include a mixture of active and calm play. Restful activities and downtime experiences will be an ongoing feature of the OSHC environment. There will be opportunities for children to access quiet spaces every session/day. Flexibility will be demonstrated in the program with opportunities for children to engage in sleep, quiet and/or downtime experiences as needed.

Environment to support rest (and sleep)

Physical spaces are thoughtfully configured and where possible, made available for children to freely access, that provide children with downtime, restful and quiet experiences accessed away from main activity areas.

Groupings of children are configured to minimise the risk of overcrowding and promote calming experiences and positive interactions. Educators will be observant of children's needs, supporting them to communicate their need for comfort, sleep and rest.

Collaborating with Families

Like all aspects of care and programming, families are encouraged to discuss their child's needs with the OSHC leadership team so these can be included in routines and practices. Where specific and intensive sleep and rest is required, individual plans will be created.

As part of the ongoing development of the program, educators will continue to consult with children around preferences for rest and relaxation at OSHC. Where preferences are identified, these will be documented and included in critical reflection and planning.

Protocols for Children Wanting Sleep

- 1. Where a child is seeking an area to sleep or rest, then a temporary bed will be laid out in the OSHC office.
- 2. The area will be kept free of active games or loud activities to be as reasonable quiet as possible.
- 3. Bedding that is stored under the couch can be used to make the child comfortable.
- 4. An educator will position themselves to supervise the general area where the child is resting.
- 5. Once the child has finished sleeping or resting all bedding will be placed in the hamper for washing.
- 6. All bedding must be washed after a single use. Clean bedding is returned back for storage.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities

Policy Controls	
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1.5 Food and Nutrition

Policy Statement

Payne Road OSHC provides food as part of the service's education and care. The service recognises and acknowledges the importance of providing food that is both nutritious and appropriate to the needs of the children. We encourage and promote the health and wellbeing of children by providing positive learning experiences during meal/snack times where good nutritional food habits are developed in a happy, social environment. Parents are supported to understand the benefits of this approach to nutrition for their children.

The food and meals provided by the service will be adequate for the situation. Where desired, children will also be able to access food they may have brought to the service in their lunchbox. Drinking water will always be available and accessible to children.

The service has strict procedures to ensure food prepared, stored and served by the service upholds food safety standards. The service has a food safety program in place to ensure this outcome.

Health and Nutrition Guidelines

The services menus and food available will be based on information from recognised health authorities, such as government health department and other organisations with recognised expertise in nutrition (e.g. Nutrition Australia, Heart Foundation, Queensland Health). The primary guidelines for menu items will be based on the National Health and Medical Research Council's '*Australian Dietary Guidelines*' and Queensland Education's Smart Choices strategy.

Importantly the service recognises the following key points from the Australian Dietary Guidelines:

- Children and adolescents need sufficient nutritious foods to grow and develop normally.
- In enjoying a wide variety of nutritious foods. Children and adolescents should be encouraged to:
 - eat plenty of vegetables, legumes and fruits
 - eat plenty of grain (cereal) foods, (including breads, rice, pasta and noodles), preferably wholegrain
 - include lean meat, fish, poultry and/or alternatives
 - include milks, yoghurt, cheese and/or alternatives
 - Reduced fat varieties should be encouraged.
 - choose water as a drink.
- Likewise, care should be taken to:
 - limit saturated fat
 - choose foods low in salt
 - consume only moderate amounts of foods containing added sugars.
- Prepare and store children's food safely.

The Eating Environment

Outside of the food provided by the service, we are committed to promoting healthy eating habits and providing nutritious food and drinks that meet the needs of children. We aim to influence children and families about making informed food choices and to create a positive and enjoyable eating environment. Educators will encourage and involve children in conversations and routines that promote healthy eating and good nutrition.

Programming

Cooking and preparing food with children also serves as a valuable program activity. Educators will ensure these activities reflect safe environment or children's participation and consumption.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(i), 77-80*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)

- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure the service has established sound food and nutrition practices.
Nominated Supervisor	<ul style="list-style-type: none"> • Monitor and respond to food safety issues. • Ensure food purchased, stored and served is consistent with risk-assessment and management plans. • Ensure communication with parents is effective. • Facilitate opportunities for child, parent and educator involvement in menu design and food ideas.
All Staff	<ul style="list-style-type: none"> • Source opportunities to involve children in the food and nutrition program. • Equip children with self-help and independence skills. • Monitor children for allergic reactions or safety issues relating to food. • Involve children in positive meal time experiences and encouragement of 'smart choices' and healthy foods. • Ensure food handling and storage practices are reflective of service policy and procedures, and relevant regulations. • Ensure children have access to and encouragement to consume to adequate drinking water, especially in hot weather.

Procedures

Understand Food and Nutrition

1. Service management will ensure that educators are provided with adequate training and instruction in relation to food handling and storage procedures, including induction processes to inform educator on the service's [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#).
2. The service will continually consider the additional training needs, and where relevant, educators will be encouraged to attend professional development on food and nutritional related issues.
3. Copies of relevant guidelines will be available for educators to engage with.

Menu Development

The service provides food – typically breakfast and afternoon tea – for the relevant sessions of care. A weekly menu is prepared to ensure the food provided reflects the relevant guidelines for nutrition and healthy eating:

1. In preparing the weekly menu, the educator responsible will demonstrate a wide variety of nutritious foods, including designing items to encourage plenty of desirable foods (vegetables, fruits, grain).
2. All menus will be planned in advance (the week prior).
3. As far as practical, the menu will include plenty of fresh foods, as opposed to pre-packaged and prepared foods.
4. Special dietary needs will be provided for with relevant alternatives or where otherwise impractical, the service will make individual arrangements with families.
5. Consideration will be given to cultural diversity and preferences of children.
6. Children, families and other educators are encouraged to contribute ideas for the menu.

The weekly menu will be displayed near the entrance of the OSHC and will accurately describe the foods to be served throughout the week.

Purchasing Food Items

The service will follow [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#) to purchase foods from reputable businesses. The Nominated Supervisor will oversee menu preparation and purchasing to ensure adequate quantity.

Drinking Water

1. The Nominated Supervisor will ensure that children have ready access to cool drinking water.
2. Water will be the preferred drink, however, milk and other drinks may be available on occasions.
3. Educators will encourage children to drink extra water during the summer months or after/during vigorous activities.
4. Parents will be required to provide children with a water bottle to take with them on excursions.

The Eating Environment

Mealtimes and the interactions that occur when eating contribute to the learning outcomes and experience of children. The eating environment will be shaped to be a calm and enjoyable setting.

Safe and Pleasant Environment

1. Children must wash their hand prior to mealtimes following the steps contained in [2.8 Hygiene, Health and Wellbeing Practices](#)
2. Education will promote a calm and hygienic eating setting by encouraging children to sit whilst eating. To promote a suitable environment, meal and snack times will follow a daily routine.
3. Educators will sit with children during meals to provide supervision, encourage healthy eating, and promote positive behaviour.
4. When children are finished eating, they will follow routines to leave the area tidy and place items in the washing up.

Serving of Food

1. Independence will be fostered by encouraging children to serve themselves food, under supervision from educators, using appropriate equipment.
2. Anyone serving themselves or others food, will use tongs/utensils (or gloves if needed).
3. At meal/snack times, educators will encourage children to try a variety of foods. Children will never be forced into selecting particular foods.
4. An adequate quantity of food will be available, but children should take an appropriate initial portion and come back if more is required.

Diverse Cultural Experiences

1. Food provided includes food from various cultures particularly those represented in the service and local community.
2. Families from other cultures within the service or wider community may be invited to participate in the program, providing children with food experiences from their own culture.
3. Food awareness activities will be chosen from a variety of cultures and may include:
 - i. different ways of serving the food (ie chopsticks);
 - ii. different varieties of foods (eg feta cheese instead of cheddar);
 - iii. foods that may have significance within their culture (e.g. Anzac biscuits and their origin).

Allergies and Dietary Restrictions

1. Children with allergies or other dietary restrictions will have specific plans developed as per [2.9 Children with Medical Conditions](#).
2. Consistent with regulatory requirements, educators will be informed of any allergies, intolerances, or specific dietary needs of children and the plans prepared for their management.
3. Suitable alternatives will be provided for children with special dietary needs.
4. Educator's training will capture the management process to minimise cross contamination, with alternative foods kept separate from other foods.
5. Children with relevant allergies will be monitored throughout food service and eating to ensure their wellbeing and safety.

Food Experiences

Food will not be used in the service as punishment or reward for children.

Cooking, Food Preparation and Service with Children

1. Children's involvement with food preparation and serving will be promoted and explored as much as possible.

2. Play and learning activities surrounding food, such as cooking will be included as part of the program.

Safety around food activities

3. All times children are handling food, they must follow the service's hygiene practice, including handwashing.
4. Children will not be allowed in the kitchen or food preparation area unsupervised. Food activities that require heating and/or cooking will be fully risk assessed and supervised by an educator.
5. Children who are unwell will not be permitted to handle food consumed by others.
6. Risk assessments will be written to manage any significant risks associated with heat and knives.

Partnering with Families

Sharing Information

1. Parents are responsible for communicating any dietary needs or restrictions. Generally, this information is captured on enrolment. Parents can update the service at any time, should a condition emerge.

Food Provided by Parents

1. Where parents provide food for their children, the service will promote relevant nutritional information as well as suggestions for healthy food and drink choices,
2. Any issues will be addressed and planned with each individual family directly.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.77 Health, hygiene and safe food practices
 - R.78 Food and beverages
 - R.79 Service providing food and beverages
 - R.80 Weekly menu
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA4 – Staffing arrangements
 - QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- Food Act 2006 (Qld)
- Australian dietary guidelines - National Health and Medical Research Council's

Policy Controls

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1.6 Resources and Equipment

Policy Statement

The service recognises the importance of providing resources and equipment that are safe and suitable to the developmental and recreational needs of the children in care. The service is committed to ensuring resources are sufficient and developmentally appropriate for all children attending the service for the promotion of quality education and care.

The service's play resources and equipment are integral to the effective delivery of a meaningful learning and development opportunities - the nature of school-age education and care means inviting, suitable, and available resources are a critical element for the program and children's play-based learning. The service's budget and procurement activities will reflect the commitment to ensuring adequate and suitable resources.

Educators are also entrusted with the ongoing responsibility to maintain and inspect these resources for their continued suitability and safety. Daily checks ensure that all materials meet the service's health and safety expectations.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the resources and equipment used to provide education and care is adequate, developmentally appropriate and in good repair.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor and respond to any issues relating to the repair, hygiene and safety of resources and equipment.• Collaborate with the Approved Provider and educators to identify opportunities for improvement and extension to enhance the program and learning opportunities for children.• Lead the procedure for requesting and sourcing of additional or replacement resources and equipment.
All Staff	<ul style="list-style-type: none">• Monitor and report instances of issues relating to the repair, hygiene and safety of resources and equipment.• Supervise children to ensure resources and equipment are contributing to children safety, wellbeing and development.

Procedures

Education and Care Resources and Equipment

The service will ensure the resources and equipment provided for education and care are:

- Sufficient and in good working order.
- Are varied and diverse to support multiple aspects of the program including both indoor and outdoor equipment.
- Furniture, materials and equipment are selected to be developmentally appropriate, inclusive and adaptable to ensure participation by every child in the program.
- Where appropriate, equipment and resources displayed and stored in such a way that children can access them independently.
- The management team will ensure that a wide range of real, commercial, natural, recycled and simple homemade materials are provided to support the children's learning in a range of ways.
- Educators will be encouraged to work collaboratively with children and families to understand the needs and wishes to support access, utilisation and development of service resources.

Administration Resources and Equipment

The service will ensure adequate administrative resources are available to:

- Conduct and support the service's documentation and communication.
- Support efficient business practices and responsibilities in providing quality care.

- The service will gather information and resources for access to advice and support for parents and families.

Purchasing and Development

- The service will plan and budget for the continual development of resources and equipment to support the service's program and practice.
- Educators and families will be encouraged to identify suitable opportunities to purchase suitable equipment and resources.
- The QIP will also identify opportunities to identify resources to enhance the service's provisions
- Care will be taken when purchasing equipment to ensure it complies with relevant Australian Standards (available from Standards Australia) and is suitable for the purpose for which it is intended.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.73 Educational program
 - R.103 Premises, furniture and equipment to be safe, clean and in good repair
 - R.104 Furniture, materials and equipment
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA3 – Physical environment
 - QA7 – Governance and leadership.

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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1.7 Technology and Screen-Time

Policy Statement

The service recognises and acknowledges that technology and media viewing form part of a varied and balanced program, relevant to the needs and interests of children. Therefore, this policy aims to establish guidelines for children's media viewing while at their OSHC service.

The service recognises access to screens often competes with children's physical activity and movement. Payne Rd OSHC is reflective of the service's duties around health promotion and the nuance in balancing the needs of children.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.10 Children's Property and Belongings](#)
- [7.15 Social Media and ITC Usage](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish policies to reflect the standard of care expected for the service.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure the program and delivery of service meets the expectation of the policy, relevant guidelines and family wishes.
All Staff	<ul style="list-style-type: none">• Ensure any media viewed or accessed by children is consistent with the services standards for rating/classification.

Procedures

Service Responsibilities

The service will ensure that children's media viewing is incorporated as part of a varied and balanced program designed to enhance children's learning and experiences while in care. It will be reflective of a holistic assessment of the child day and opportunities for physical activity and their overall health promotion.

The service will collaborate with families and children in setting guidelines for media viewing within the program. Strategies implemented may include designated times for media and/or technology viewing.

The service will ensure that all material viewed by children as part of the educational program is age-appropriate and consistent with the Australian Film and Literature Classifications:

- (G) - The content is **very mild** in impact and is for general viewing. However, some G-classified films or computer games may contain content that is not of interest to children; or
- (PG) – The content is **mild** in impact, however, films and computer games may contain content that a parent or caregiver might need to explain to younger children as it may be confusing or upsetting to them.

Educator Responsibilities

Educators will ensure that all material viewed by children, whether provided as part of the service program or bought from a child's home, is age-appropriate and consistent with the Australian Film and Literature Classifications (G) or (PG). The service will request that children to only bring movies, games or music that are suitable for viewing.

Family Responsibilities

Parents/guardians will ensure that all movies, games or music bought to the service by their children are consistent with this policy - are G or PG-rated.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)

Policy Controls	
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Policy Group 2

Children's Health and Safety

The health and wellbeing of each OSHC child is **safeguarded and promoted**.

Children enrolled in OSHC have a right to receive high-quality education and care in a setting that **promotes their health and safety** are reinforced by the policies contained in this section. Fundamentally, the service must provide an environment that protects children and ensures learn in ways that are free from harm or injury.

To enhance the health and safety outcomes of the service, educators will also foster each child's wellbeing, healthy lifestyle choices, and the development of competence, confidence, and independence.

2.1 Providing a Child Safe Environment

Policy Statement

Statement of Commitment to the Safety and Wellbeing of Children

The service is committed to providing a quality school age education and care service. The Approved Provider, Nominated Supervisors and educators are aligned in their actions and values to promote the safety and wellbeing of children and young people and uphold the protection of children from harm and hazards.

As a service we recognise the elements that come together to ensure the safety and wellbeing of children. The premise of our policy is built of the requirements for:

- A safe and suitable physical environment
- The systems and practices that support children's safety and wellbeing
- Identifying children in need of protections.

The Approved Provider will ensure the promotion of safety and wellbeing of children through establishing a comprehensive framework to implement effective practices, including—

- setting out the policies and procedures to maintain expected standards, and
- providing guidance and support to staff to meet expectations and display appropriate conduct.

We recognise not only the physical safety of children but also our duty to ensure the psychological safety and wellbeing of children and staff. The Approved Provider will foster an environment of fairness, dignity and respect for all people. The practices endorsed will seek to be inclusive and free from discrimination. Safety and wellbeing will be enhanced by a culture that fosters embedding sound practices, including hazard identification and risk management.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Law Act 2011*, *Education and Care Services National Regulations 168 (2)(h)*, *Work Health Safety Act 2011*, *Working with Children (Risk Management and Screening) Act 2000*, and *Child Protection Act 1999 (Qld)*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.5 Food and Nutrition](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.1 Space and Facilities Requirements](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)

- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.7 Feedback and Complaints](#)
- [6.9 Childhood Immunisation](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Establish policy and management systems to monitor and promote safety and protection of children. •
Nominated Supervisor	<ul style="list-style-type: none"> • Will lead the service's culture and delivery of safety and wellbeing of children. • Will ensure suitable persons are recruited, inducted and supported to care and positively guide children. • Will respond to incidents with timeliness and professionalism.
All Staff	<ul style="list-style-type: none"> • Ensure conduct upholds the safety, wellbeing and best interest of children. • Supervise and monitor the environment and children's interactions. • Identify and respond to the needs of children. • Follow the guidance and support of management.

Procedures

The Approved Provider, Nominated Supervisor and educators will demonstrate their commitment to providing an environment that is safe and promotes the wellbeing of all children at all times through:

A Safe Physical Environment

- Following the [7.13 Workplace Health and Safety](#) policy to:
 - Establish a robust system of risk assessment to identify and control for harm and hazards likely to cause injury.
 - Embed routines and practices to monitor the physical environment to ensure it meets established expectations and standards to ensure safety.
- Following the [3.4 Children's Toileting](#) policy so children have safe and appropriately supervised access to hygiene facilities.
- Following the [1.3 Excursions](#), and where relevant, [2.6 Water Safety](#) policies to:
 - Ensure any public environment children access as part of their participation has considered relevant risks.
 - Parents have access to information for informed consent to their children's participation.
- Monitoring the compliance of the [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#) policy to ensure the environment is free from alcohol, smoking and illicit substances and where necessary, collaborate with the school community and take appropriate action.
- Ensuring the [2.7 Infectious Diseases – Prevention and Response](#) policy is followed to promote an environment, that so far as practicable, reduces occurrence of infection.

Practices to Support Children's Safety and Wellbeing

- Demonstrating their commitment to act consistently with the service's Code of Conduct ([4.4 Code of Conduct](#)), will relevant management systems to ensure employees are supervised to adhere to these standard at all times.
- Ensuring interactions and relationship with children are supportive and provide positive guidance. Children are to be cared for in an environment that demonstrates respect, upholds dignity and promotes a child's self-regard (see [5.1 Interactions and Relationships with Children](#)).

- Ensuring educator employment and training procedures support the recruitment and induction of suitable educators (recruitment and screening), including induction and orientation procedures that equip employees with relevant knowledge and skills to uphold their responsibilities (see [4.1 Recruitment and Employment of Educators](#), [4.3 Volunteers and Students](#) and [7.2 Determining the Responsible Person](#))
- Following the establishing ongoing procedures for the management, screening and monitoring of Blue Card (Working with Children Check) compliance for all relevant persons (see [4.2 Working with Children Check \(Blue Card\) Management](#)).
- Ensuring that staff are not alone at the service with a child, except in an emergency (See [2.2 Supervision of Children & Educator Ratios](#)).
- Children's individual medical and health needs are considered, planned for and managed via established practices for risk minimisation, response and communication ([2.9 Medical Conditions in Children](#))
- Communicate relevant risk management plans and activities to parents, staff and the school community annually through either displays, newsletters, training and meetings ([6.2 Enrolment and Orientation](#)).
- Reporting incidents and relevant notifications to the Approved Provider and communicating this to the Regulatory Authority as outlined in [2.4 Incident, Illness, Injury or Trauma](#), [2.5 Administration of First Aid](#) and [7.7 Managing Notifications](#).
- Following developed plans for the response to emergencies and includes as set out in [2.4 Incident, Illness, Injury or Trauma](#) and [2.13 Emergency Evacuation, Lockdown and Drills](#)
- Ensure formal protocols are established to encourage children and families to speak up about any concerns or discomforts they may have through the [6.7 Feedback and Complaints](#) policy.

Identifying children in need of protection

- Providing suitable training and instruction for staff on their duty as Mandatory Reporters to identify and respond to allegations or suspicion of harm and abuse (see [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National:
 - 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
 - s.170 Offence relating to unauthorised persons on education and care service premises
 - s.171 Offence relating to direction to exclude inappropriate persons from education and care service premises
 - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
 - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulations:
 - R.12 Meaning of serious incident
 - R.82 Tobacco, drug and alcohol-free environment
 - R.83 Staff members educators not to be affected by alcohol or drugs
 - R.84 Awareness of child protection law
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.88 Infectious diseases
 - R.89 First aid kits
 - R.90 Medical conditions policy
 - R.91 Medical conditions policy to be provided to parents
 - R.92 Medication record
 - R.93 Administration of medication

- R.94 Exception to authorisation requirement—anaphylaxis or asthma
- R.95 Procedure for administration of medication
- R.96 Self-administration of medication
- R.97 Emergency and evacuation procedures
- R.98 Telephone or other communication equipment
- R.99 Children leaving the education and care service premises
- R.122 Educators must be working directly with children to be included in ratios
- R.123 Educator to child ratios—centre-based services
- R.136 First aid qualifications
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- Child Protection Act 1999 (Qld)
- Department of Education and Training Child Care Provider Handbook
- United Nations Convention on the Rights of the Child

Policy Controls

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2.2 Supervision and Educator Ratios

Policy Statement

Payne Road OSHC will maintain its compliance with the *Education and Care Services National Laws and Regulations* in its operations and service delivery. In setting the roster for educators, the service will ensure ratios are maintained through sound planning, a commitment to quality and contingency planning for unexpected circumstances.

Additionally, in selecting ratios for special activities consideration will be given to the nature of activities undertaken, the ages and abilities of the children and any special needs that the children may have as well as the ongoing obligation to ensure effective supervision.

The safety of children is also upheld with effective supervision. It is a fundamental practice to ensure the safety and support of children while they attend the service. It is paramount all educators take a proactive approach to ensure the adequate and appropriate observation of children whilst participating in the service's program. Knowing and accounting for, the activity and whereabouts of each child in care and the proximity of educators to children at all times to ensure the immediate intervention of educators to safeguard a child from risk of harm is the expectation for all service to uphold the commitment to effective supervision.

The Approved Provider recognises its obligations for effective supervision to uphold its obligations under *Education and Care Services National Regulations 13, 83, 99-101, 115, 122, 123 (1)(d), 136 & 299*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure practices and budgets reflect quality care and sufficient staffing arrangement to cater for the needs of children.
Nominated Supervisor	<ul style="list-style-type: none">• Develop rosters and staffing plans to ensure regulations are maintained at all times.• Staffing arrangement reflect contingency planning to ensure ratios are consistent with Regulations and risk-assessments• Lead the risk assessment planning to identify suitable staffing ratios for high-risk activities.
All Staff	<ul style="list-style-type: none">• Will support the development of rostering through effective communication of absences and unavailability.

Procedures

Supervision Expectations

- Ensuring child-to-educator ratios are maintained at all times. These educators counted in the ratios are directly working with children.
- There will be at least two educators at all times on the premises whilst children are in care, one of whom will be a responsible person in the day to day charge of the service.
- The planning of activities will reflect supervision requirements, the Nominated Supervisor (or delegate) will ensure consideration is given to the design and arrangement of the environment, the nature, and coordination of activities to ensure it supported by adequate supervision by educators.
- The number of supervising educators for activities will be determined through consideration of:
 - The type of activity (e.g. excursion, swimming);
 - The age and capabilities of the children undertaking the activity;
 - The area in which the activity will be conducted; and

- The skill and capacity of educators.
- Personal mobile phones are not to be used by educators when supervising children. However, in extenuating circumstances and with the prior consent of the Nominated Supervisor, personal mobile phone usage may be permitted.
- During excursions, children will not be left unsupervised any other persons (including bus drivers etc.); educator ratios for the service will continue to apply throughout excursions.
- Children will be adequately supervised supported during access to toilets through educators following the procedures outlined in [2.8 Children's Toileting](#).

Effective Supervision Skills

- Scanning – regularly looking around (and beyond the immediate area) to observe all the children in the vicinity;
- Positioning and Proximity – being strategically positioned in order to best observe and/or interact with children;
- Listening – assists in using additional sensory skills to respond to signals children may require added support or attention;
- Diligence and engagement – being aware of children, their traits, moods, and characteristics to anticipate and promptly respond to children's needs, skills and capabilities; and
- Coordination and teamwork - communicating with others to align supervision activities.

Educators Supervision Practices

To ensure effective supervision of all children participating in their area/activity, educators will be:

- Given guidance and instruction when setting up the environment and/or activities;
- Instructed on the use of various staff communication methods (e.g. use of walkie talkie);
- Aware of the procedures for children accessing the toilet;
- Made aware of children's individual health and or medical needs and any relevant emergency management plans;
- Made aware of any identified hazards and/or risks to children and the control measures in place;
- Made aware of the children in care, the group dynamics and behaviour strategies that may be useful; and
- Made aware of any children in care with special/additional needs.

Educators will be required to do regular headcounts and use educator communication methods when supervising activities indoor or outdoor activities. Where there is a discrepancy or incident with a child's whereabouts the procedures outlined in [2.4 Arrivals and Departures of Children](#) and/or [2.4 Incident, Illness, Injury or Trauma](#) will be followed.

The Nominated Supervisor will be made aware of children involved in behaviour incidents who may require further support, consistent with [2.4 Incident, Illness, Injury or Trauma](#).

Educators (or volunteers) under eighteen years of age who are supervising children will be fully supervised by a qualified educator who is eighteen years or over.

Child-to-Educator Ratios

In setting educator to child ratios, management will be guided by the Education and Care Services National Regulations 2011, which set out the following:

- A maximum of 15 school-age children to 1 educator (Regulation 123 (1)(d));
- Educators must be working directly with children to be included in the ratios (Regulation 13 & 122); and
- At least one educator, with first aid qualifications, anaphylaxis management training, and emergency asthma management training will be in attendance and immediately available in an emergency (Regulation 136).

Children who may require additional support, assistance or attention are considered. This may include extra educators in accordance with funding and support arrangements for that child.

Composition of Qualified Staff

Minimum qualification requirements must be applied when calculating ratios (Regulation 299)

- One person with a 2-year qualification (Diploma level) will be present at all times that education and care is being provided. During vacation care, the 2-year qualified person needs to be present for a minimum of 7 hours and 15 minutes.
- Thereafter, for every 30 children in attendance, one educator with a 1-year qualification (Certificate III level) will be present.
- Aside from the above, educators in ratio under 18 years of age must be working towards an approved qualification

Volunteers

Volunteer workers may be counted towards the educator to child ratios for the service provided the qualification requirements are met. Volunteers under the age of 18 must be fully supervised. Risk assessments will be conducted, as necessary, when utilising volunteers.

Excursions and Special Activities

For excursions or activities that pose an additional risk, educator to child ratios will be determined once a full risk assessment of the activity has been conducted. When setting ratios consideration will be given to the level of risk and hazards identified, the nature of the activities, transportation, and any other relevant matters (Regulation 101(f)).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National:
 - s.162 Offence to operate education and care service unless responsible person is present
 - s.169 Offence relating to staffing arrangements
- Education and Care Services National Regulations:
 - R.13 Meaning of working directly with children
 - R.122 Educators must be working directly with children to be included in ratios
 - R.123 Educator to child ratios—centre-based services
 - R.136 First aid qualifications
 - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Policy Controls	
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2.3 Arrivals and Departures of Children

Policy Statement

The service recognises its responsibility to provide quality care for children, and this includes practices and procedures to ensure they are attending and supervised. Children's arrival, departure and attendance are critical processes for the service. Clear communication and expectation of roles are essential elements to ensure children are cared and accounted for at all times. Where unexpected events occur, the service will have plans and procedures in place to respond in a timely and collaborative manner, upholding the paramount principle of the safety of children.

The service will ensure departure including persons collecting children from the service will be reflective of regulations and parental consent. Sound documentation and records will reflect the services practices.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011* 168 (2)(f), 12, 99, 158 & 161.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Appendices and Forms

- [2.4.1 Arrival and Accountability Flowchart](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure employees are provided with procedures that will support the service to account for care and respond to children's attendance, collection and departure.• Ensure relevant notifications are provided to the Regulatory Authority, as relevant.
Nominated Supervisor/Responsible Person	<ul style="list-style-type: none">• Will be responsible to ensure children are accounted for, collected and depart as parents have expressed in writing or in response to an emergency.• Ensure records are maintained that documents the details and persons dropping off and collecting children• Will collaborate with the school community to respond to children who are not accounted for in a timely manner.• Will respond and lead critical incidents, liaising with police as required.
All Staff	<ul style="list-style-type: none">• Will provide quality supervision and support to children, responding to needs to ensure children feel secure to remain in attendance at the service.• Respond to critical incidents in a timely manner, providing clear and concise information to the Nominated Supervisor for response and management.

Procedures

Hours of Operation

Before School Care	6:45am – 9:00am	After School Care	2:30pm – 6:00pm
Vacation Care	7:00am – 6:00pm	Pupil Free Days	7:00am – 6:00pm

Principle Guidance for children leaving the service (Regulation 99)

The child may only leave the relevant premises if the child:

- is given into the care of—
 - a parent of the child*; or
 - an authorised nominee named in the child's enrolment record; or
 - a person authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises; or
- leaves the premises in accordance with the written authorisation of the child's parent or authorised nominee named in the child's enrolment record; or
- is taken on an (approved) excursion, as outlined by policy
- is 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.

Please note: a parent does not include a parent who is **prohibited by a court order from having contact with the child.*

Arrivals - Before School Care and Vacation Care

1. All children are to be signed in by parent, guardian, or authorised nominee.
2. Absences and non-signature sessions will be initialised by a Responsible Person and verified by the parent/carer.

Collection and Sign-in - After School Care

1. An assigned educator will collect the Prep students from their respective classrooms at 2:50pm each day.
2. Prep students will be walked to the OSHC room where they will be signed in by the educator escorting them.
3. Year 1 - 6 students will make their own way to the OSHC room and be signed in by an educator greeting them at the door.
4. Children will put away their bags in the allocated area and transition to the afternoon tea.

Confirming Absences

See [6.3 Bookings and Cancellations](#) for notifications for absences.

1. At approx. 3:00pm it is expected all children have arrived at OSHC. Any child who has not arrived by 3:00pm will be accounted for by contacting relevant people to confirm location and/or absence.
2. The educators signing in children is responsible for confirming the whereabouts of children that have not arrived. The delegated person will always be supported by the Nominated Supervisor.
3. The first step in locating a child is to call the school office to confirm children who may have been absent from school (due to illness etc.).
4. The priority is then to confirm the children who would be expected to be attending by calling parents and/or emergency contacts. Students who have been notified of be absent at school will be confirmed as non-attending by contacting a parents or person named in the enrolment form. Correspondence with families will always be respectful. The educator may provide a gentle reminder to notify OSHC when the confirmation phone call is made.
5. The Nominated Supervisor will, if necessary, communicate persistent non-notification issues with the parent in a different forum.
6. Where a child's location cannot be confirmed, the following actions will be taken to locate the child and expected attendance by
 - a) checking immediate proximity,
 - b) communicating with the school office, and
 - c) phoning all parents/emergency contacts.
7. Where a child cannot be located after reasonable effort to identify their whereabouts and where parents/emergency contact cannot be contacted the Police will be notified. These steps and decision-making are illustrated in [Arrival and Accountability Flowchart](#).

Departures - Before School Care

1. Children who participate in sport or music programs within the school and where a parent has signed a permission for early release (recorded in the enrolment form/file), may be signed out early as the written parent permission indicates.
2. The responsible person will sign children out at 9:00am.
3. All Prep students will be transitioned to their relevant classroom by an educator at 8:30am.

Departures - After School Care and Vacation Care

1. All authorised nominees and parents sign children out via the equipment located in front of the OSHC office. All visitors and authorised nominees are requested to report directly to the OSHC office
2. All persons signing a child out must be registered with signed authority to collect the child (except in an emergency):
 - parent (unless parent is prohibited by a court order),
 - authorised nominee (as recorded on enrolment form), or
 - where the parent has provided written authorisation and the departure is in accordance with the parent authorisation
3. Where the departure relates to an emergency a record of the departure will be recorded in an incident report or a note attached to the child's enrolment form (by the Responsible Person) outlining the details.

Authorised Nominees

1. All authorised persons collecting children must be listed in the enrolment form or otherwise have written authorisation (where the collection is not related to an emergency). Evidence of the identity of the person collecting a child may be requested by the centre, where the person is not known.
2. Where staff are unsure of the authorisation, they are to contact parent/guardian to seek clarification and advice. Notwithstanding any verbal direction, unless an emergency, the parent (or authorised nominee) must provide written advice before the child can leave the service.
3. All relevant authorisations are to be kept in the enrolment record and any updates attached to this documentation (Regulations 161).

Written authority (e.g. an email) is required for authorisation to collect a child unless an emergency.

4. If parent/s are not contactable, contact an authorised nominee (if enrolment permission allows) to seek advice and authority to release the child (written authority required).
5. If parent (or relevant authorised nominee) does not provide written authority, inform the unauthorised person that the centre cannot release the child – children may **only** leave the centre in accordance with procedures contained within this policy.

Departures due to Emergency (Regulation 99(4)(d))

A child may leave the premises where they have been given into care of a person because:

1. the child requires medical, hospital or ambulance care or treatment
2. another emergency

The centre will record and report the details of any instances where a child has left the premises due to an emergency. Notification to the Regulatory Authority will be required (*Incident, Illness, Injury or Trauma & 7.7 Managing Notifications*)

Late Departures

Staff will contact parents if child has not been collected by 6:00pm. A late fee charged will be added to the account (see [Fees Policy](#)). In the event a child has not being collected a half-hour after closing time (6:30pm) **and** there is no response from a parent, authorised nominee or emergency contact, advice will be sought from the police and an incident report completed (*Incident, Illness, Injury or Trauma & 7.7 Managing Notifications*).

Incident Management – Children arrivals and departures

Children who arrive without a booking

A child(ren) is known to the service

1. Where a child(ren) presents to the service without a booking and is known to the service (i.e. enrolled), the service will contact the parent/s in the first instance and inform/resolve the absence of care and supervision.
2. At no time is an OSHC employee to send a child away in instances where the whereabouts of the parent/caregiver is unknown, and a child is seeking assistance.
3. When contact is made with a parent and there has been confusion about attendance and if it is possible to include a child (being mindful of ratios and capacity) and at the parent's request, then the child may be signed in and participate in the service's program.

A child(ren) is not known to the service

1. Where a child(ren) is not known to the service, the Nominated Supervisor or Responsible Person will make communication with the school.
2. Where the school cannot be contacted, the service will then attempt to contact the parent/caregiver directly.
3. Where the school office is unattended or parents are uncontactable, the child will be asked to sit in the OSHC office. The service will ensure the child(ren) are safe, secure and comfortable but are not participating in the activities or program of the service.

Parents/caregivers are unable to be contacted

1. Where no contact can be made with a parent/caregiver in a reasonable time, then the service must call the police for support and guidance.
2. The service will complete an incident report and communicate details with the school for additional management.

Child Leaving without Permission

1. If a child leaves the centre without permission or without the authority described above (including being collected by an unauthorised person), the staff will assess the situation immediately and will call the police and a parent as soon as reasonably possible.
2. Staff will not leave the centre to follow a child if:
 - It will or may leave the other children in the centre with insufficient supervision.
 - It will or may expose that staff member to an unacceptable risk of personal harm
3. Where both possible and practice, a staff member will document relevant details such as details of any person collecting the child and/or their vehicle.
4. As soon as practical the Approved Provider will be notified of the incident.
5. A notification will be made to the Regulatory Authority of the incident
6. Following the incident, Consultation with parents, the Approved Provider and Nominated Supervisor will direct the plan of action moving forward. Temporary suspension from the Centre may be considered where there is a risk to safety.

Children Unaccounted for During the Program

1. In the event that a child is unaccounted for during the operating hours of the program, the Nominated Supervisor will be notified immediately by the educator as soon as the disappearance is discovered/identified.
2. A role call will be facilitated to document the children in attendance and confirm the absence of the particular child/ren.
3. The Nominated Supervisor / Responsible Person will undertake a rapid and comprehensive search of the centre's premises to locate the child. In the event that the child is not located, the child's parent/guardian will be notified and the police will be called.
4. The Nominated Supervisor will advise the Approved Provider immediately upon calling the police and the Regulatory Authority will be notified using the appropriate forms.

An incident report will be completed and will include information such as:

1. Date, time and location of the child when they were last accounted for;
2. Details of the supervising educator, and the circumstances surrounding their disappearance; inc. how many educator's vs children where in the space and where the educators were located
3. Details of actions instigated to locate the child;

4. What the child was wearing and any distinguishing features; and
5. Time parent/guardians and other agencies were contacted.

Report details of incident to Regulatory Authority through the procedures outlines in [7.7 Managing Notifications](#)

Arrival and Accountability Flowchart provides illustration of the following two critical incident procedures and decision-making

Legal and Regulatory Foundation

- Education and Care Services National Regulations:
 - R.12 Meaning of serious incident
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.99 Children leaving the education and care service premises
 - R.158 Children's attendance record to be kept by approved provider
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard
 - QA2 – Children's health and safety
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

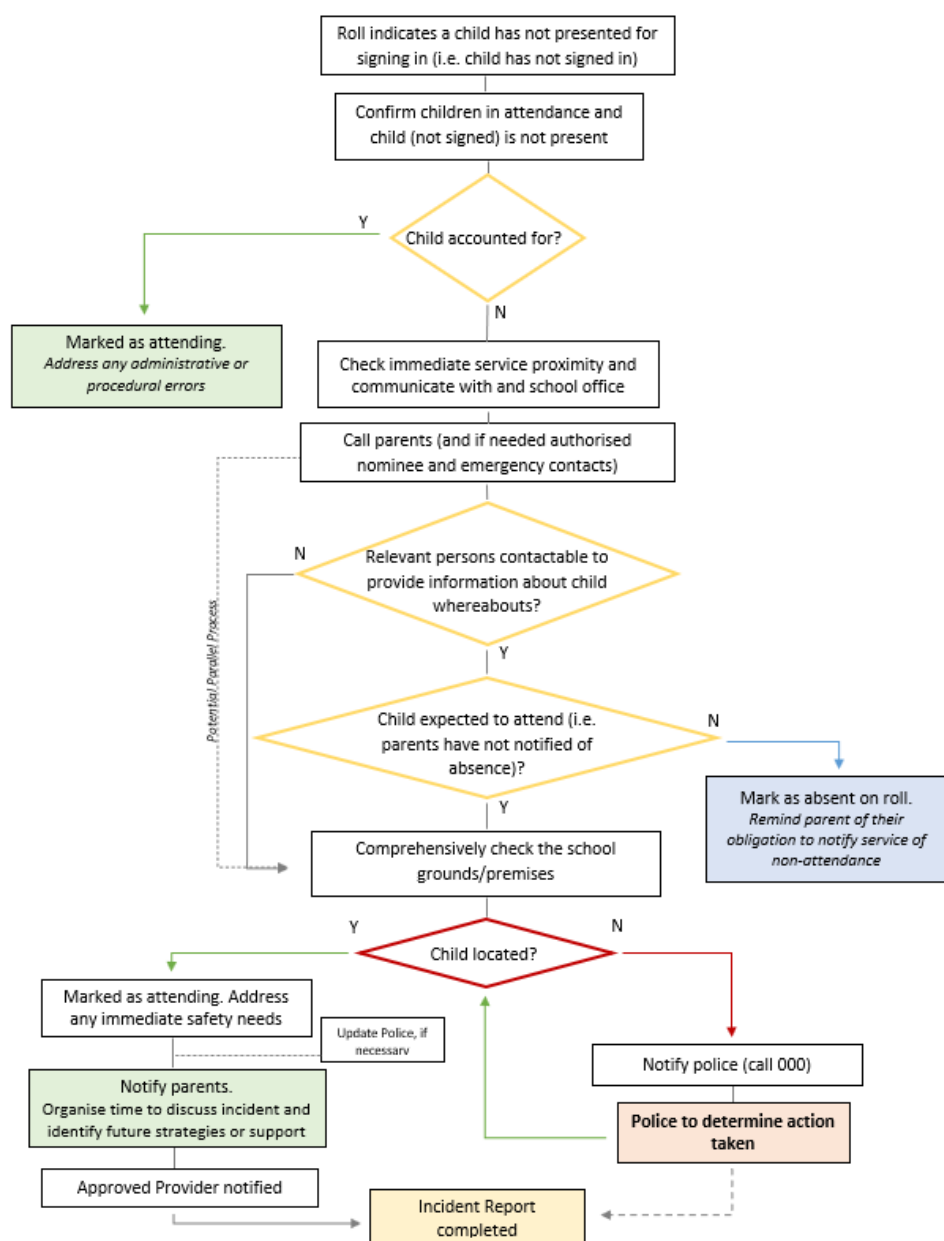
- Work Health Safety Act 2011 (Qld)
- Child Protection Act 1999 (Qld)
- Queensland Criminal Code 1899
- Department of Education and Training Child Care Provider Handbook

Policy Controls

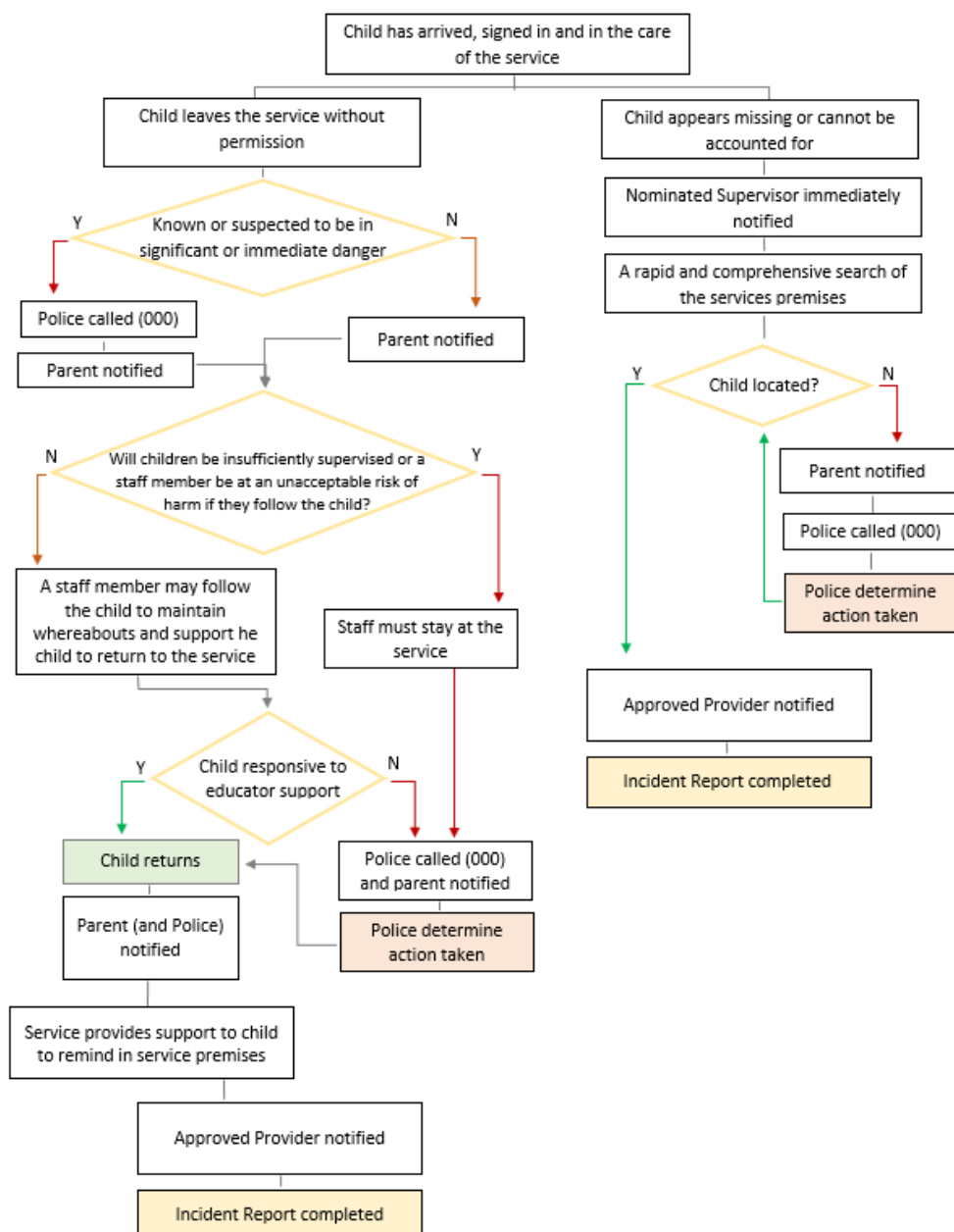
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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Review Date	October 2024

2.3.1 Arrival and Accountability Flowcharts

ASC – Non-Arriving Child



Child Unaccounted For or Leaving without Permission



2.4 Incident, Illness, Injury or Trauma

Policy Statement

The purpose of this policy is to ensure the health, safety, and welfare of all children, staff, and visitors at the service. The policy outlines the procedures for managing incidents, illnesses, injuries, and trauma events effectively and swiftly to ensure the wellbeing of all individuals involved. Notwithstanding the service's efforts to proactively prevent injuries or trauma occurring at the service, where it occurs, the service will take action to minimise the impact of injuries, illnesses and trauma.

The Nominated Supervisor will typically lead the response to any significant events, in their absence the Responsible Person will take charge. All appropriately qualified educators will support in the initial response to any incidents occurring at the service. All other educators will provide support within their training and capacity, raising the alarm for additional help.

The service recognises that parents must be informed of all significant and serious matters impacting their children. Records that are created to document incidents and events will be accurate and concise. These documents and all relevant information will be provided to parents in a timely manner.

In addition to ensuring a suitable response to managing critical events, the Service has a duty to notify any **Serious Incidents** to parents and the Regulatory Authority. The service will follow the procedures outlined in the policy [7.7 Managing Notifications](#) for reporting *Serious Incidents*.

Definition of Serious Incident

Serious Incidents (as defined in National Regulation 12), includes the following occurrences:

- the death of a child
 - while that child is being educated and cared for by an education and care service; or
 - following an incident occurring while that child was being educated and cared for by an education and care service;
- any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service
 - which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - for which the child attended, or ought reasonably to have attended, a hospital; Example— A broken limb.
 - any incident involving serious illness of a child occurring while that child is being educated and cared for by an education and care service for which the child attended, or ought reasonably to have attended, a hospital; Example— Severe asthma attack, seizure or anaphylaxis reaction.
- any emergency for which emergency services attended (This means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person/s at an education and care service. It does not mean an incident where emergency services attended as a precaution¹.);
- any circumstance where a child being educated and cared for by an education and care service
 - appears to be missing or cannot be accounted for; or
 - appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or

is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(b), 12, 85-87, 90, 97, 99, 158, 160-162*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [3.5 Emergency and Safety Equipment](#)
- [5.2 Positive Behaviour Support Practices](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Appendices and Forms

- [Incident, Injury, Illness, or Trauma Report](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure all significant events (incident, illness, injury or trauma) occurring at the service are responded to with timeliness and responsiveness.• Ensure all responses are compliant with relevant regulations or legislation.• Staff are equipped with knowledge and training to fulfil their duties.
Nominated Supervisor	<ul style="list-style-type: none">• To lead the response to any significant events occurring at the service.• To provide timely notification to parents and the Approved Provider and no more than 24 hours after the events.• Provide instruction to staff and volunteers on incident, illness, injury and trauma management.• Ensure record of events are recorded as soon as practicable and at least written in less than 24 hours after the event.• Ensure records are maintained and stored according to service procedures.
All Staff	<ul style="list-style-type: none">• To provide immediate care and support to any significant event.• Accurately record events in a timely manner and inform the Nominated Supervisor of any significant issues as soon as practicable.

Procedures

Managing and Responding to Critical Events

The Nominated Supervisor (or Responsible Person) will lead the response to any critical events to ensure the safety and wellbeing of children attending the service. The management of emergency or critical situations will adopt the following principles:

- Staff providing comfort and reassurance to the child;
- Actively seeking the assistance of a first aid qualified educator;
- All first aid qualified educators administering care within the bounds of their training;
- Ensure all other children are appropriately supervised, actioning an emergency evacuation or lockdown, if required.
- Uphold the dignity and comfort of children, removing them to quiet or private areas of the service (as needed);
- Providing timely information and notification to parents/guardians as so far as practicable; and
- Ensure the child(ren) is/are actively monitored and supervised with the intention to escalate the response, if needed (i.e. additional emergency support).

Injury Responses and Management (i.e. First Aid and Medical Support)

The first steps in responding to a child's physical injury or illness will be first aid. Qualified educators will respond with immediate treatment as outlined by their training. Notification to the Nominated Supervisor (via walkie-talkie etc.) will occur as soon as practicable.

As a guide the following steps will be taken, as necessary:

1. Staff will address any immediate dangers or hazards (to ensure no further injury/harm occurs).
2. Staff will address any life-threatening circumstances as a priority, communicating the need for support. A call to emergency services (000) should occur immediately if the situation is critical or serious.
3. Once and if in a stable condition, staff will seek to comfort and calm the child.
4. The Nominated Supervisor (or Responsible Person) will be notified as soon as practicable.
5. If possible, the parents will be contacted by the Nominated Supervisor or delegated educator to advise of events, seek any emergency authorisations and/or coordinate a plan of action.
6. Dependent on authorisations and circumstances, the following may occur:
 - o Medication administered
 - o Transportation to hospital
 - o Parents collect the child for medical treatment
 - o Relevant treatment outlined in medical action plan, or guided by training or emergency services
7. As soon as practicably possible, the parent will be called by an available educator to notify of the injury and action taken to manage the circumstances, where appropriate.
8. The child's condition will be continue to be monitored by an qualified educator, any changes to the health or condition of the child will be suitably escalated.
9. The child will continue to be monitored until appropriate medical care has arrived or until the parent's arrival (i.e. child's departure).

Actions for managing the response to an anaphylaxis, asthma or diabetic emergency can be found in [Children with Medical Conditions](#) Policy.

Once the circumstances have stabilised, the educator providing care will be documenting the events.

Illness Response and Management

Where a child presents or has been identified as suffering from an illness, the following actions will be taken:

1. Staff are to address any immediate hazards (containing solid/contaminated areas etc.) and notify the Responsible Person or Nominated Supervisor as soon as reasonably practicable.
2. Staff should attend to the child's needs and apply (or call for) first aid treatment, if relevant.
3. Where a child's illness relates to a medical condition, the relevant Medical Management Plan must be followed.
4. The child will be cared for in the OSHC office or other suitable space. Management actions should be consistent with the Infection Disease policy and limit the potential exposure to infection.
5. The Responsible Person/Nominated Supervisor will assess the child's illness and make contact with the parent (or where unavailable, emergency contacts) to discuss a plan for the immediate care and collection.
6. In the interim of being collected the child will be suitably comforted and monitored for change in symptoms or escalation of emergency response.
7. Where a child's illness is significant the Responsible Person/Nominated Supervisor will call 000 for an ambulance or relevant alternative medical treatment.
8. Where possible the details of the illness will be noted to support the completion of illness records.

Once the circumstances have stabilised, the educator providing care will be documenting the events.

Trauma Response and Management

Signs of trauma could include but are not limited to:

- Emotional distress or disassociation
- Sudden or significant changes in behaviour
- Physical injury
- Aggression or avoidance

Where a child/ren experiences a traumatic event while being educated and cared for the following steps will be taken:

1. Staff will seek to manage the immediate situation, addressing any presenting hazards.
2. Children will be offered emotional and social support suitable to the nature of the situation, with staff engaging in actively listening and emotional validation.
3. Staff should attend to any presenting immediate needs, including the awareness of child protection actions.
4. Depending on the circumstances, the child may be invited to a quiet area, such as the OSHC office, while escalation or immediate support is occurring.
5. The Responsible Person/Nominated Supervisor will be informed of the details as soon as reasonably practicable.
6. The parents (or where unavailable, emergency contacts) of the child will be called to be notified of the matter.
7. The Responsible Person/Nominated supervisor will be responsible for coordinating a suitable response, where relevant addition or emergency services response may be applicable and called upon.

Once the circumstances have stabilised, the educator providing care will be documenting the events.

A Child Missing or Unaccounted For

See [2.3 Arrivals and Departure of Children](#)

A Child Mistakenly Locked In or Out of the Service

In an instance where a child has been mistakenly locked in or out of the service, staff should look to immediately address the situation by opening the locked area. Staff should then:

1. Support the child's immediate wellbeing to ensure they are emotionally supported by the incident.
2. As soon as practicable, the Nominated Supervisor (or Responsible Person), should notify the parent of the event.
3. An incident report will be completed by the staff member initially responding, with support of the Nominated Supervisor.
4. The details of the incident will be reported to the Approved Provider as soon as practicable.
5. The Nominated Supervisor and Approved Provider will coordinate the preparation and submission of the notification, following the steps outlined in [7.7 Managing Notifications](#)
6. Following the submission of the notification, the Approved Provider will coordinate an appropriate investigation into the circumstances of the incident, outlining steps of improvement to mitigate future occurrences.
7. The Approved Provider and Nominated Supervisor will collaborate any necessary additional response as determined by the Regulatory Authority.

Death of a Child

Should the death of a child occur while being cared for or as the result of an incident while being care for, then staff members should:

1. Immediately call emergency services.
2. Evacuate children to the appropriate area (evacuation or lockdown, depending on circumstance).
3. As soon as practicable, the Nominated Supervisor (or Responsible Person), should notify the parent of the event.

Becoming aware a child has died as the result of an incident while being care for by the service:

4. An incident report will be completed by the staff member initially responding and any witnesses, with support of the Nominated Supervisor.
5. The details of the incident will be immediately reported to the Approved Provider.
6. The Approved Provider will lead the coordination of reporting, including correspondence with the Regulatory Authority, parents, and police.
7. The Nominated Supervisor and Approved Provider will coordinate the preparation and submission of the notification, following the steps outlined in [7.7 Managing Notifications](#)

Other Actions

1. Where specific circumstances do not outline procedures for educators to follow, educators must look to protect the safety and wellbeing of children as a first priority. Possible actions include:
 - a. Emergency evacuation procedures

- b. Lock-down/harassment procedures
 - c. Notifying emergency services (police etc.)
- 2. Where the nature of the event involves disaster response, educators should seek advice from emergency services, other professional(s) relevant to the circumstances, and/or parents; in order to manage the immediate actions/treatment.
- 3. Following the incident/events being controlled, educators then need to notify management
- 4. If not already actioned, the Nominated Supervisor (or delegate) should communicate events to parents.

Notification to Parents (or Authorised Nominee)

Any illness, injury or trauma which occurs while a child is being educated and cared for by the service, must be documented as per the [Incident, Illness, Injury or Trauma Report](#) requirements, and parents notified.

The Approved Provider/ Nominated Supervisor must ensure that a parent of a child being educated and cared for by the service is notified as soon as practicable, but not later than 24 hours after the occurrence.

Depending on the circumstances, a proportion response – i.e. an immediate phone call in a critical situation, or in-person at collection/email for minor injuries, will be used to communicate the details of these events with families.

If the Approved Provider becomes aware of an incident after the fact from a parent, they should notify the Regulatory Authority within 24 hours of being notified that the incident was serious. e.g. a child has hurt their leg, but is not in serious pain and continues to play, the next day the parent advises that the child has sustained a fracture.

Documenting an Incident, Illness, Injury or Trauma Event

An [Incident, Illness, Injury or Trauma Report](#) must be completed, as soon as reasonably possible after a child is involved in any incident, suffers an injury, illness or trauma, by the educator who administered care (or first aid etc) to the child.

The information contained in the incident, accident, injury or trauma report forms must not be used for any purpose except strictly in accordance with this policy, the [7.6 Information Handling \(Privacy and Confidentiality\) Policy](#) and any other relevant BBASC policies.

The incident, injury, trauma and illness record must include (National Regulation 87):

- details of the incident/event, including:
 - the name and age of the child; and
 - the circumstances leading to the incident, injury or trauma; and
 - the time and date the incident occurred, the injury was received or the child was subjected to the trauma; or
- details of any illness which becomes apparent while the child is being educated and cared for including—
 - the name and age of the child; and
 - the relevant circumstances surrounding the child becoming ill and any apparent symptoms; and
 - the time and date of the apparent onset of the illness
- details of the action taken by the service, including—
 - any medication administered or first aid provided; and
 - any medical personnel contacted;
- details of any person who witnessed the incident, injury or trauma;
- the name of any person whom the service notified (or attempted to notify), and the time and date of the notifications or attempted notifications
- the name and signature of the person writing the record, and the time and date report was created

An [Incident, Illness, Injury or Trauma Report](#) must be written as soon as practicable, but no later than 24 hours after the incident, illness, injury or trauma.

Any Serious Incidents must be reported to the Approved Provider as soon as practicable. A copy of the report will also be forward to the Approved Provider, once completed.

Authority to Provide Medical Attention

Written consent from the child's parent/authorised persons will be sought through the enrolment process for the Nominated Supervisor and/or staff member qualified in first aid, to obtain medical attention, in keeping with the policies and procedures of the service, if required. Should the child have a relevant health condition, they will be required to have a management (action) plan, risk minimisation assessment and communication plan. (see [2.9 Children with Medical Conditions Policy](#)).

Written consent will also be obtained from the parent/authorised persons for the use of all health and other personal information which the service has relating to the child, for the purpose of enabling the service to:

- Administer care and assistance to the child, including by obtaining emergency or other medical assistance or care for the child in accordance with this policy; and
- Report any incident, injury, illness or trauma as required by law.

To remove any doubt, all costs incurred in obtaining medical attention for a child will be met by the parents/authorised persons (i.e. the account holder). Under the Community Ambulance Cover Act 2003, all Queensland residents are covered for ambulance transport services anytime, anywhere across Australia. Families who are not Queensland residents must seek cover at their own cost.

Facilities and Resources

Disposable gloves will be worn when administering first-aid, and will be disposed of immediately after use, in accordance with the [2.5 Adminstration of First Aid Policy](#).

The Nominated Supervisor will, or delegate a qualified educator to, ensure that the following are kept at the service at all times, and are accessible to the educators but not to children:

- A fully maintained and equipped first aid kit, adequate for the number of children attending the service, and that items stored in the first aid kit are within the identified use by date (where applicable)
- Service Phone²;
- A recognised and current first-aid manual;
- A cold pack and/or ice ready for use in the administering of first aid;
- A store of disposable gloves; and
- Current emergency contact telephone numbers.

Quality Improvement

Following any significant event, the Nominated Supervisor will debrief the events with educators, identifying any area of learning of improvement. The actions identified will be reported to the Approved Provider.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.12 Meaning of serious incident
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.90 Medical conditions policy
 - R.97 Emergency and evacuation procedures

- R.99 Children leaving the education and care service premises
- R.160 Child enrolment records to be kept by approved provider and family day care educator
- R.161 Authorisations to be kept in enrolment record
- R.162 Health information to be kept in enrolment record
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.174 Time to notify certain circumstances to Regulatory Authority
- R.174A Prescribed information to accompany notice
- R.177 Prescribed enrolment and other documents to be kept by approved provider
- R.181 Confidentiality of records kept by approved provider
- R.183 Storage of records and other documents
- National Quality Standard:
 - QA2 – Children’s health and safety

Additional Regulatory Context and Guidance

- Child Protection Act 1999 (Qld)
- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
Version:	v.2023-1
Review Date	October 2024

2.5 Administration of First Aid

Policy Statement

The service acknowledges its responsibility to ensure appropriate procedures are in place for managing all incidents requiring first aid treatment. A proactive approach is taken in ensuring all educators are aware of their responsibilities, are suitably trained in first aid response and have access to appropriate first aid resources and equipment.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(iv), 89, 136*.

Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will support employees to have access to regular training to exceed qualification requirements.• Ensure the service is stocked and has access to ample first aid supplies and equipment.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor established routines to ensure first aid supplies are stocked and available.• Coordinate training opportunities for educators.• Monitor staff qualifications and rostering requirements.• Support responses to injuries and incidents.
All Staff	<ul style="list-style-type: none">• Ensure personal first aid kits are restocked after use.• Respond to injuries and incidents in accordance with training and qualifications.• Report any identified issues with first aid management to the Nominated Supervisor for resolution.

Procedures

First Aid Kits and Supplies

The Approved Provider recognises their responsibility under Education and Care Services National Regulation 89 to ensure:

- an appropriate number of first aid kits must be kept having regard to the number of children being educated and cared for by the service; and
- suitably equipped; and
- easily recognisable and readily accessible to adults, having regard to the design of the education and care service premises.

The Nominated Supervisor is supported to ensure the first aid supplies are well-stocked. Checks on supplies occur weekly and a comprehensive re-stock is completed at least each term. The service is committed to ensure resources exceeds any identifiable needs. As well as a large comprehensive first aid kit located in the OSHC building, additional smaller kits are available to have on hand.

Guided by the [First Aid in the Workplace Code of Practice 2021](#), the central first aid kit will contain as a minimum:

Quantity	Item	Use/Purpose
1	Instructions for providing first aid – including CPR flowchart	in the event CPR is required, proper technique is applied.
5 (various sizes)	Adhesive strips (assorted sizes)	for minor wound dressing.
3	Splinter probes (single use, disposable).	for removing foreign bodies.
2	Hypo-allergenic micropore adhesive tape	for securing dressings and strapping.
3	Eye pads	to protect eye injuries.
2	Triangular bandage	for slings, support and/or padding.
6 (various sizes)	Crepe and conforming bandage	to hold dressings in place and provide support and compression.
3	Wound/combine dressings	to control bleeding and for covering wounds.
5	Non-adherent dressings/pads	for wound dressing.
5	Safety pins	to secure bandages and slings.
1	Scissors	for cutting dressings or clothing.
1	Kidney dish	for holding dressings and instruments.
1	Small dressings' bowl	for holding liquids.
5 packets	Gauze squares	for cleaning wounds.
2	Forceps/tweezers (one metal, one plastic)	for removing foreign bodies.
10	Disposable nitrile, latex or vinyl examination gloves	for infection control.
1	Sharps disposal container and tongs	for infection control and disposal purposes.
8	Sterile saline solution or sterile water	for emergency eye wash or for irrigating eye wounds. The solution must be discarded after opening.
1	Resuscitation mask	to be used by qualified personnel for resuscitation purposes.
3	Antiseptic solution	for cleaning wounds and skin.
4	Plastic bags	for waste disposal.
1	Note pad and pen/pencil	for recording the injured or ill person's condition and treatment given.
5	Re-usable ice-pack	for the management of strains, sprains and bruises.
2	Emergency rescue blanket	for shock or hypothermia.
	Access to 20 minutes of clean running water or, if this is not available, hydrogel sachets	for managing burns.
1	Digital thermometer	to assess for illness/infection.
2	Emergency asthma puffer	to be given in emergency asthma situation
2	Asthma Spacer (disposable preferred)	to be used when administering emergency asthma medication
1	Emergency EpiPen	to be given in emergency anaphylaxis situation

Risk assessments will be undertaken to identify the likelihood and adequate controls for relevant injuries and illnesses to the school age care context, such as burns, eye injuries and/or poisoning occurring. Where additional requirements are identified, the first aid supplied will be updated to include relevant items.

Payne Road OSHC will have at least one central first aid kit kept in the OSHC Office. The cupboard will be appropriately marked with a highly visible first aid signage. Educators will be shown the location of the first aid kit during induction.

First Aid Information and Training

First aid information will be made accessible to educators, with a variety of resources and displays to be onsite. Additionally, educators will be supplied with pertinent information including verbal instruction and/or demonstrations, videos and posters during orientation and induction.

While the service would typically exceed qualification requirements, the Approved Provider and Nominated Supervisor will ensure that, at least one educator with the required first aid qualification, and anaphylaxis management and emergency asthma management training, as prescribed under the Education and Care Services National Regulation 136, is in attendance at any place children are being cared for, and immediately available in an emergency, at all times children are being cared for (e.g. if children go to an oval or park then a qualified first aid person must go with them). The staff member must meet the minimum requirements which includes (Regulation 136):

- Approved and current anaphylaxis management training; and
- Approved and current emergency asthma management training; and
- Approved and current first aid training.

In this instance, “approved” means a qualification in line with the [NQF approved qualifications list](#). Details regarding staff member’s first aid qualifications will be kept on file in their employee record.

THE SERVICE will keep a register of educator qualification to ensure the currency of educator first aid qualifications in accordance with the requirements for accredited training refresher updates including general first aid, CPR, asthma and anaphylaxis (refer to [NQF approved qualifications list](#)). Staff member records will hold evidence of the approved training completed by educators (*Regulation 147*).

Information about BABSC first aid procedures and provisions shall be provided to educators through the induction process on commencement of employment. Current information about specific risks in the workplace and any changes affecting the provision and use of first aid will be provided to educators on a regular basis.

Applying First Aid – Critical Incidents

Only suitably qualified educators are to apply first aid to children. All administration of first aid will be consistent with the level training and competency of the educator’s qualification. Any child who sustains (or suspected to have sustained) an injury will be attended to by a first-aid qualified educator, this may require an educator to seek the appropriate assistance.

When a need is identified to give first aid, the person will ensure that ill or injured persons procedures for administering first aid will be in accordance with the [Injury, Illness, Incident or Trauma Policy](#) of this service. The first aid procedures developed and implemented at the service are designed to:

- Preserve life;
- Ensure the person is stabilised and comforted until medical help intervenes;
- Monitor ill or injured persons in the recovery stage
- Apply further first aid strategies if the condition does not improve; and
- Ensure that the environment is safe and that other persons are not in danger of becoming ill or injured.

In the event a staff member is required to provide first aid, all other educators should immediately seek the support of their team members to ensure that supervision of children remains paramount. Educators should consider either an emergency evacuation or lockdown to ensure the safety of children, where circumstances are critical.

The following incidents are a non-exhaustive list of examples of where critical first aid is required: Emergency services (000) must be called immediately for any critical events, including of the following situations:

- When an individual has stopped breathing or is choking;
- When an individual is unconscious or any serious head injury;

- Where there is deep cut with serious bleeding;
- Where there is a suspicion of anaphylaxis; or
- Where there is a significant injury (fracture, dislocation etc.).

It is expected that in the event of any injury, the person providing first aid will assess the situation and determine the need for an ambulance - in situations other than those listed below. Where in doubt, emergency services should always be called for support.

In the event that an ambulance is called;

- Families must be informed as soon as practicable that their child has required an ambulance (emergency first aid to be administered first);
- Management must be informed as soon as practicable that a child has required an ambulance (emergency first aid to be administered first);
- The Approved Provider will inform the Regulatory Authority within 24 hours that a child has required an ambulance;
- Staff/Educators are to accompany child in an ambulance in the absence of the parent/guardian where possible; and
- Families are required to pay any costs associated with the ambulance.

Not all injuries will require additional medical treatment, children receiving minor first aid can be supported in an appropriate location at the service e.g. the office while being comforted and treated.

Injury Reporting

Where first aid is applied because the child has sustained an injury, an [Incident, Illness, Injury or Trauma Report](#) must be completed. Parents must be notified of any injury as soon as practicable, but within 24 hours.

For **Serious Incidents** additional reporting is required – see [2.4 Incident, Illness, Injury or Trauma](#) (National Regulation 86 & 87). For details pertaining to the timeframes associated with notification please see [7.7 Managing Notifications](#).

For information pertaining to the management of specific medical conditions, refer to [2.9 Children with Medical Conditions](#).

First Aid Waste Management

Payne Road OSHC acknowledges the need to manage first aid waste effectively to prevent cross infection or contamination from waste materials. Such materials will include, but not be limited to protective adhesive strips, bandages, swabs, cotton buds/balls and ice packs.

A clearly labelled first aid waste bin will be supplied and maintained in the following way:

- Fitted with a bag that can be sealed and removed each day (if required);
- Cleaned and sanitised daily (if required); and
- Located in a suitable place that is not readily accessible to children.

Educators will thoroughly wash hands using specified hand washing procedures before and after implementing first aid and they are to wear disposable gloves to manage incidents of first aid involving waste materials as identified.

When conducting first aid, educators will:

- Remove required items to be used to manage first aid from the first aid kit;
- Place items in/on a non-contaminated dish or surface;
- Clean the injured area of the person using principles of first aid as per the [First Aid Policy](#) and training e.g. wiped with sterile swab etc;
- The used swab or like will be placed in the lined first aid waste bin; and

- Change gloves if changing the type of activity they are managing with first aid e.g. cleaning to bandaging. These gloves should also be placed in the first aid waste bin.

Injuries to Employees or Visitors

Any employee (or adult) injuries will follow steps outlined in this procedure. Any injury requiring medical treatment will be managed in collaboration with the Nominated Supervisor or Responsible Person.

Where an injury requires greater response than first aid and ambulance will be called.

Documentation of educator or visitor injuries will be recorded on the appropriate form. Please note: reporting to Work Health Safety Queensland (WHSQ) may be required; these details are outlined in [7.7 Managing Notifications](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.89 First aid kits
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.136 First aid qualifications
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.174 Time to notify certain circumstances to Regulatory Authority
 - R.183 Storage of records and other documents
- National Quality Standard
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)
- Work Health Safety Act (Qld)
- First Aid in the Workplace Code of Practice

Policy Controls	
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2.6 Water Safety

Policy Statement

The service acknowledges that water activities are a significant part of both our Queensland culture and typical leisure activities for children, therefore, to facilitate experiences for children that positively contribute to their wellbeing with fun and safety the Approved Provider has developed the following procedures. The service recognises that the safety of children in and around water is of the highest priority.

A fundamental aspect to safety for swimming activities, is the adequacy of supervision. Throughout any water-play activities, especially swimming, children will be closely supervised at all times. To complement thorough risk assessment and supervision practices is the requirement to have an understanding of children's swimming abilities to provide proportionate support during the activity.

The scope of this policy includes swimming activities, water play and excursions in or near water. The safe consumption of water is addressed in [1.5 Food and Nutrition](#).

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(iii)*, 100-102.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.9 Children with Medical Conditions](#)
- [2.11 Sun Safety](#)
- [3.5 Emergency and Safety Equipment](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

Appendices and Forms

[Swimming Ability Form](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure policy and procedures support the safety and wellbeing of children.• Ensure risk-assessment identify and manage identifiable hazards.
Nominated Supervisor	<ul style="list-style-type: none">• Provide information and guidance to educators and families on the importance of children's safety in and around water.• Conduct a comprehensive risk assessment prior to any water activities taking place. The risk assessment will identify the educator to child ratios required to ensure children's safety.• Ensure parents are informed of the swimming details and risks involved. Parents will provide written consent for the activity.• Ensure all parents have indicated the swimming ability of their children before participating in the excursion
All Staff	<ul style="list-style-type: none">• Encourage children to play in or near water safely, giving appropriate instructions and guidance.• Understand and be willing to act in accordance with the relevant risk-assessment.

Procedures

Identifying Hazards and Assessing Risk

Generally speaking, the service's premises will be free from water hazards, unless specific activities are planned and appropriately risk assessed. For swimming activities, the service will require to carry out an excursion, including risk assessment and authorisation will be followed (see [1.3 Excursions](#)).

Additional Practices for Swimming Activities

The choice to and where swimming will occur by the assessment of the service's capacity to ensure the activity can be carried out safely. All bodies of water present a significant risk to children, therefore, the implementation of swimming activities will also ensure the following procedures are followed:

Risk Assessment and Supervision

A comprehensive risk assessment of the swimming venue and activity will be conducted to determine the required educator to child ratio and skills/qualifications required. A plan for supervision in and out of the water will also be developed. It is expected that during the swimming activity educators will be positioned both in and out of the water to promote a complete, coordinated and active level of supervision of children in and around the pool area.

The service will also consider the needs for first aid and CPR trained educators beyond the minimum regulation requirements.

Safety Equipment and Inspection of Environment

Consideration will also be given to the capacity of educators to rescue children from water and any relevant equipment required. A list required items will be created within the risk assessment. On the day of the swimming activity a suitably experienced educator will inspect all listed safety equipment and the pool area to ensure all required elements are available and in good repair.

Understanding Children's Ability

Parents/guardians must complete a 'Swimming Ability Form' for each child attending a swimming activity. Information gained through this form will identify children's swimming competence and assist educators to manage their safety while in the water:

- The swimming ability form will direct the supervision, support and water depth of the children will access throughout the activity.
- Parents will be informed of any the practices to support the safety of children as a result of their ability.

To remove any doubt, the Service will ensure children requiring any additional support are considered. The service will collaborate with parents to address specific support plans, where relevant. Swimming will not occur unless it can be carried out safely.

Sun Safety

The service's [2.11 Sun Safety](#) policy will be followed throughout. This includes the use of sunscreen and sun-safe swimwear. Educators will role-model the same expectations.

Parents will be required to supply the appropriate swimwear, including swim shirts, for any swim/water-play activities. The service will ensure relevant vacation care (or otherwise) information sets out and reminds parents of any particular requirements.

Practices for Other Non-Swimming Water Activities

While non-swimming water activities are far less likely to contain the same level of drowning risks, consideration will be given to any relevant hazards. Should an activity present with increased risk to health and safety, a risk assessment will be created and followed.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s167
- Education and Care Services National Regulations:
 - 168 (2)(j).
- National Quality Standard:
 - QA2 – Children’s health and safety

Policy Controls	
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2.7 Infectious Diseases – Prevention and Response

Policy Statement

The service addresses risks to the health and spread of infectious disease to children and families by adopting appropriate procedures to manage exposure proactively. The service believes children and educators who are unwell should stay at home. The best place for an ill child is to rest and recover with someone who cares for them.

Accordingly, all people (including children, educators and parents) with or potentially exposed to an infectious disease will be excluded from the service as itemised in the NHMRC '*Staying Healthy in Childcare*' resource and/or the Queensland Health's '*Time Out: keeping your child and other kids healthy*'.

The day-to-day practices of the service will also uphold high standards of hygiene to reduce the likelihood of transmission and additional infection. Where there has been an instance of infectious disease present at the service, the Approved Provider is committed to ensuring parents (and other authorised persons where relevant) are notified of the occurrence as soon as practicable.

The service acknowledges the need for a coordinated approach to dealing with situations of infectious diseases in the community. The service may implement a response strategy as per government health guidelines for Infectious Disease Pandemic.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations, 12, 85, 88, 168 (2)(c) & 172(f)(g)(i)*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [6.9 Childhood Immunisation](#)

Appendices and Forms

- [Incident, Injury, Illness or Trauma Report](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the services is guided by sound preventative and reactive measures to control infectious disease.• Support relevant reporting as required.
Nominated Supervisor	<ul style="list-style-type: none">• Consult with families and the Approved Provider for cases of infectious disease.• Report relevant information to Queensland Health as required.• Establish a culture of good hygiene practices, instructing staff on techniques to reduce the possible spread of infection.
All Staff	<ul style="list-style-type: none">• Inform the Nominated Supervisor of relevant illness (or infectious disease in the immediate household).• Model and supervise good hygiene practices• Monitor children for symptom of infectious disease, report as required

Procedures

Monitoring

The Nominated Supervisor will ensure they keep up to date with information on infectious diseases within the community through accessing the Commonwealth Government Department of Health (see www.health.gov.au) and Queensland Health (www.health.qld.gov.au).

The current NHMRC resource 'Staying Healthy in Childcare' will be referred to when making decisions in regard to communicable diseases and/or exclusion periods. Fact sheets may also be accessed through Queensland Health website.

Informing the service of Infectious Disease

It is the responsibility of parents/guardians to inform the Nominated Supervisor of any infectious disease that their child, or other immediate family members may be suffering. Parents/guardians are advised through the enrolment process and the Parent Information Sheet that children who are ill are not to be brought to the service.

It is the responsibility of educators to inform the Nominated Supervisor of any infectious disease that the staff member, or their other immediate family members, may be suffering. The Nominated Supervisor, Approved Provider and staff member will consult on risk and suitable management plans (including exclusion, if necessary).

Notification to Parents

Where the service has been informed of an instance of infectious disease being potentially exposed to children attending the service, a notice stating this occurrence will be displayed at the service in a prominent location. In circumstances where additional information is either necessary or beneficial, the Nominated Supervisor will send an email directly to all parents. No private or confidential information will be contained in any notice.

Responding to Occurrences

Where there has been a significant occurrence of an infectious disease (one which may require exclusion of those who have been in contact), the Nominated Supervisor will notify the Approved Provider (P&C President in the first instance) to inform of the occurrence. The Nominated Supervisor will also provide details of the service's response including relevant guidelines to prevent the spread of the infectious disease. The Approved Provider will express any additional action to be undertaken to ensure all reasonable steps have been followed.

Reporting

Payne Road OSHC is responsible for reporting to Queensland Health all notifiable diseases (and to report this to parents of others through a notice of an infectious disease being prominently displayed for families at the service).

The Nominated Supervisor will notify the Approved Provider when intending to report an infectious disease case to Queensland Health. Additionally, the Nominated Supervisor may be required to follow the [2.4 Incident, Illness, Injury or Trauma](#) policy and report a notification to the Regulatory Authority.

Records of infectious disease will be compiled and retained by the Nominated Supervisor ([2.4 Incident, Illness, Injury or Trauma](#)). These records will include:

- the child's name
- age
- symptoms
- date and time when educators first noticed the illness
- date and time the record was written
- what action was taken
- details of notification to parents

This record will be stored confidentially (see [Policy 7.6 Information Handling \(Privacy and Confidentiality\)](#)).

Exclusion

- All people, including children and educators, who are suffering from any infectious diseases need to be excluded from the service to prevent others from being introduced to the infection. When any such person is found to be showing signs of any infectious disease:
- For children, their parents/guardians will be asked to immediately collect their child and seek medical advice;
- For educators and staff, they will immediately be released from work in order to seek immediate medical attention and for the period of the infectious disease;

- For parents or other adults, they will be required to leave the premises of the service immediately and not re-enter the premises until they are no longer suffering from the infectious disease; and
- If a medical practitioner diagnoses an infectious disease, the child/educator may be excluded for the recommended period (as per NHMRC guidelines).
- For diseases which are published as requiring a doctor's certificate clearing the child/educator, the doctor's certificate will be provided before the child/educator is re-admitted to the service.

Immunisation

All children must meet the Australian Federal Government's immunisation requirements or have a valid exemption for the family to be eligible for Child Care Subsidy (CCS). Parents will be asked to verify their child's immunisation status.

Children and educators will be excluded from the service if there is an outbreak of an infectious disease against which they have not been immunised. The period of exclusion will be in accordance with the National Health and Medical Research Council's recommendations (see [6.9 Childhood Immunisation](#))

Hygiene Practices

Payne Road OSHC will ensure basic hygiene practices are routine to prevent the spread of infectious disease including routine hand washing, covering any cuts or abrasions with a waterproof dressing, and the use of gloves for touching items/area containing bodily fluid/mucus (see [2.8 Hygiene, Health and Wellbeing Practices](#))

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.77 Health, hygiene and safe food practices
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.88 Infectious diseases
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.173 Prescribed information to be displayed
- National Quality Standard:
 - QA2 – Children's health and safety

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Public Health Act 2005 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

Policy Controls

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2.8 Hygiene, Health and Wellbeing Practices

Policy Statement

The service will uphold the health and wellbeing of children through promoting quality hygiene practices and self-care skill development. Payne Road OSHC is committed to fulfilling its obligations to provide a safe and healthy environment for its children and educators.

There is shared recognition that the practices promoted and adopted by the service directly impacting the spread of infectious disease and other contagious conditions. The Approved Provider is committed to fulfilling its obligations to provide a safe and healthy environment for its children and educators. Additionally, children should be encouraged by educators to adopt sound hygiene practices to embed healthy behaviours.

Practices and procedures contained in this policy are not necessarily exhaustive. Where additional recommendations promote further or alternative action, then these will be adopted. The service will be guided by reputable information and guidelines.

The Approved Provider recognises the service's duty to comply with Education and Care Services National Regulations 77 & 109 in providing a healthy, safe and hygienic environments and facilities.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish sound hygiene, health and wellbeing practices to support the service and its users.• Ensure facilities and resources adequacy meet the needs of the service.
Nominated Supervisor	<ul style="list-style-type: none">• Collaborate and review practices to ensure they support the health, safety and wellbeing of children and educators.• Role-model and monitor practices of educators and children.• Feedback and request any identified issues to the Approved Provider for support or management.
All Staff	<ul style="list-style-type: none">• Role-model and support the practices of children.• Use incidental opportunities for support and teaching, enhancing the skills, knowledge and practices of self-care for children.• Immediately address any apparent issues of hygiene and health.

Procedures

All educators are expected to role-model the practices set out this procedure at all times. Educators play a crucial role in strategically prompting children to adopt practices at vital moments of the day, i.e. sneezing or coughing into an elbow or using a tissue at the appropriate moment. Educators should use the opportunity not just to keep the environment hygienic but teach children healthy behaviours.

Hand Hygiene

A very effective method to prevent the transmission of disease and illness is through effective hand hygiene. In doing so, people remove both dirt and germs/viruses from their hands. Educators encourage and promote the use of effective hygiene skills through modelling and prompts. Additionally, the service ensures hand hygiene via—

Hand Hygiene Facilities

- The Approved Provider will ensure adequate handwashing facilities are available for children and educators to wash their hands readily.

- The Nominated Supervisor will manage supplies and resources. The service will ensure enough stock is kept on-site to replace items like soap and paper towel as needed.
- Appropriate signage will be displayed near the handwashing facilities to reinforce effective handwashing behaviours.

Hand Hygiene Practices

- Educators and children will wash and dry their hands with soap, water and disposable towel when:
 - Handling, preparing and eating of food;
 - Before and after giving first aid;
 - After toileting, handling of animals or other activities which could lead to the spread of infection;
 - After coughing, sneezing or blowing their nose; and
 - After contact with/cleaning of body fluids (blood, mucus, vomit, urine, faeces etc.).
- Routine hand washing will be implemented daily by all children before possible contamination activities (e.g. eating breakfast or afternoon tea)
- In the first instance, soap and running water is the preferred method to ensure clean hands.
- Hand washing (scrubbing hands) should last at least 20 seconds

Gloves

- Gloves will be used.
 - When coming into contact with bodily fluids (e.g., blood, mucus, vomit, urine, faeces etc.)
 - Food preparation – gloves will be used as required for the food safety practices.
 - Cleaning – Gloves will be made available for cleaning.
- Used gloves are to be disposed of immediately after use to be inaccessible from children or others.

Hand Sanitisers

- Hand sanitisers will not typically replace soap and running water, however, in certain situations such as on excursions when soap and running water are not available a hand sanitiser may be used:
 - Apply the recommended amount onto dry hands;
 - Rub hands together so the hand rub comes in contact with all parts of the hands; and
 - Keep rubbing until the cleaner has evaporated and hands are dry.
- Hand sanitisers will only be available with adult supervision.

Personal Hygiene

- Everyone (children and educators) should cover their mouth and nose with a tissue, sleeve or a flexed elbow when coughing or sneezing.
- Children will be reminded to avoiding touching their eyes, nose or mouth.
- Children who become sick will be isolated from other children, while the parent is called to collect them.

General Cleanliness and Hygiene

- Work health and safety practices, including daily routines and checklists will support the service's commitment to maintain a hygienic and clean environment for children.
- This will be additionally be supported by:
 - Educators ensuring all toys, dress-up clothes, paint shirts and other materials and resources are maintained to be clean and functional.
 - Tables, benches, floor surfaces and toilets will be cleaned daily.
 - The kitchen and eating areas will be cleaned and swept before and after each session.
 - The refrigerator and pantry area will be cleaned weekly.
 - The premises will be routinely treated for the control of pests.
 - Educators will ensure that contaminated items (e.g. tissues) are disposed of immediately after use.
 - There will be suitable bins available for waste disposal. These are emptied daily.
 - Recycled items (e.g. toilet rolls for craft activities) will not be used if they were or may have been used in a non-hygienic environment.
 - There will be suitable disposal facilities for first aid waste.

- There will be suitable facilities for the storage of soiled clothing. Soiled clothing will be placed inside a plastic bag and sealed. Soiled clothing will be returned to the family when the child is collected.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.77 Health, hygiene and safe food practices
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.88 Infectious diseases
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.173 Prescribed information to be displayed
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Work Health Safety Act

Policy Controls

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2.9 Children with Medical Conditions

Policy Statement

The service recognises the prevalence of children attending the services who have health needs and relevant medical conditions including asthma, diabetes or at risk of anaphylaxis, requiring sound practices and planning to ensure their health and wellbeing are cared for. The service is committed to a planned approach to the management of relevant medical conditions, and one that meets the legislative compliance of an education and care service (*Education and Care Services National Regulations 77, 90-96, 160-162, & 168 (2)(d)*).

Importantly, the service recognises some children attend the service with both highly sensitive and potentially life-threatening conditions. Management and responsiveness of these medical needs is a critical aspect of their care. All children with additional health needs or relevant medical conditions will have medical management plans provided and displayed. Additionally, the service will work collaboratively with parents and families to ensure the service understands and address risks associated with a child's need/condition (risk minimisation plans). Embedded within these plans are the outlined procedures to update information and actions as required (communication plans).

The service is committed to ensuring our educators are equipped with the knowledge and skills to support children's medical needs. The Approved Provider will seek to ensure all children in attendance receive the highest level of care and protection. Where relevant, additional training, resources and knowledge will be provided to educators to support the practices of the service to attend to relevant health and medical needs.

Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Appendices and Forms

[Medical Risk Minimisation and Communication Plan](#)
[Medication Administration and Authority Form](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure staff are equipped to respond to children medical needs through collecting relevant information, obtaining medical plans, accessing relevant training.• Ensure parents receive relevant information and collaboration in managing children's needs.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure medical needs of children are collected, planned and communicated effectively.• Ensure parents who indicate children with medical needs are informed of the service's obligations and their duties.• Respond to medical needs as required to uphold the safety of children attending the service.• Ensure staff are suitably trained and instructed on the management of relevant medical conditions.
All Staff	<ul style="list-style-type: none">• Maintain knowledge on the relevant condition and action plans of children accessing the service.• Respond to the medical needs of children.• Communicate relevant information to parents and children as required.

Procedures

The procedures to manage children's medical conditions are contained within the following documents:

- Individualised Medical Management (Medical Management, Risk-Minimisation and Communication Plans)
- Practices for the Management of Specific Medical Conditions
 - Asthma Management Practices
 - Managing Children at Risk of Anaphylaxis
 - Diabetes Management Practices
- Self-administering of Medication

Individualised Medical Need Management (Medical Management, Risk-Minimisation and Communication Plans)

Any child enrolled in the service who has been identified with a health need, allergy or relevant medical condition will require:

- A **medical management plan** to be supplied by the parent (*Regulation 90(c)(i)*);
- The development of a **risk-minimisation plan** in consultation with a parent; and
- The development of a **communication plan** (for staff members to be informed of the health and medical needs of children and for parents to understand how to update health/medical information and/or relevant plans).

Medical Management and Risk-Minimisation Plans (*Regulation 90(c)(iii)*)

The service's enrolment forms will outline a child's medical needs. Where the parent indicates a child has an additional medical need, the Nominated Supervisor will communicate with the family to identify the need for a **medical management**, **risk-minimisation and communication plan**. A parent may notify the service at any time of a change in a child's medical needs. Where a parent indicates a child has the following, a medical management plan risk-management will be requested/developed:

- one of the following conditions:
 - asthma,
 - diabetes
 - diagnosed at risk of anaphylaxis
- any allergy or health care need requiring
 - specific action to be taken during an incident
 - the development of a risk-minimisation plan
 - relating to food safe handling, preparation, and consumption

The Nominated Supervisor will:

- Require a current **medical management plan** be provided to the service by the parent with consent that this is made accessible in a visible location to all educators.
- Require plans to be prepared in collaboration with a relevant health professional.
- Request parents to review medical management plans annually or as suggested by a health professional/medical authorities.
- Ensure all educators are adequately trained and rehearsed in the service's emergency medical management procedures and the administration of emergency/rescue medication;
- Collaborate with parents/guardians of children with specific health needs, allergies or other relevant medical conditions to develop a **risk minimisation plan**; and
- Inform all educators and volunteers, of children with specific health needs, allergies or other relevant medical conditions and the risk minimisation procedures for these.

Medical Management Plans must be followed in the event of an incident relating to the child's specific health care need, allergy or relevant medical condition (*Regulation 90(c)(ii)*). The medical management plan should be developed in consultation with the child's registered medical practitioner with the procedures to follow from the medical practitioner documented in the medical management plan. The medical management plan should include the following:

- A photo of the child;
- Details of the specific health care need, allergy or relevant medical condition including the severity of the condition;

- Any current medication prescribed for the child;
 - What may trigger the allergy or medical condition (if relevant);
 - Signs and symptoms to be aware of as well as the response required from the service in relation to the emergence of symptoms;
 - Any treatment/medication required to be administered in an emergency;
 - The response required if the child does not respond to initial treatment;
 - When to call an ambulance for assistance; and
 - Contact details of the doctor who signed the plan.
- **Medical Risk-Minimisation Plans** are developed in consultation with parents of the child. They are to ensure:
 - the risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised;
 - if relevant, the safe handling, preparation, consumption and service of food;
 - if relevant, the parents are notified of any known allergens that pose a risk to a child and strategies for minimising the risk;
 - to ensure all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication; and
 - if relevant, the child does not attend the service without medication prescribed by the child's medical practitioner in relation to the child's specific health care need, allergy or relevant medical condition.

Communication Plans (*Regulation 90(c)(iv)*)

Embedded within the Medical Risk-Minimisation Plan will be procedures outlined of how communication of the plan will be undertaken to ensure staff and visitors are aware of relevant risks and strategies.

Additionally, the plan will document how a parent may update any relevant details to the management of or details regarding a child's medical condition. This can include reviewing details of the *medical risk-minimisation plan*.

To remove any doubt, a child's parent can at any time communicate any changes to the medical management plan and risk-minimisation plan for the child. While each plan will outline specific steps, the parent can also direct any of these changes to the Nominated Supervisor.

Copy of Policy Provided (*Regulation 91*)

Parents will be provided copies of the *medical risk-minimisation plan* and asked to confirm their approval. Attached to all each *medical risk-minimisation and communication plan* will be a copy of this policy ([2.9 Children with Medical Conditions](#)). These records will be stored with the child's enrolment.

Communication of Plans and Policies

- Medical Management Plans are located in the OSHC office. All staff are shown the specific location on induction and are provided with opportunity to read and understand the content of each plan. The specific location of plans will be made with the agreement of parents. Any location will be discreet from public view and accessible for all educators of the service.
- In addition, any children enrolled with medical needs are communicated to staff in team meetings and daily communication. The Nominated Supervisor is responsible for ensuring all educators, other staff and volunteers are able to identify a child with a specific health care need, allergy or other relevant medical condition and be able to locate their information, plans and medication/s easily.
- Risk-Minimisation Plans will be stored with enrolment forms. All risk-minimisation plans will be communicated with staff. Educators will be asked to sign acknowledgement of reading the risk-minimisation plan. This will document the communication and subsequent understanding of what is required

Practices for the Management of Specific Medical Conditions (Regulation 90(1)(b))

Induction and instruction of this policy will be provided to every staff member or volunteer engaged at the service. Each person must acknowledge they have been trained, read the policy and understand the practices required to support children's health and medical needs.

- Individual children's relevant health needs and corresponding plans will be discussed on a regular basis with all educators at team meetings to ensure staff have sound knowledge of practices and emergency management actions.

The service will ensure that at least one educator with a current first-aid and CPR qualification, anaphylaxis management and emergency asthma management training is in attendance at any place children are being cared for, and immediately available in an emergency, at all times that children are being cared for by the service. The service is committed to exceeding the required minimum standards through providing asthma management training for all educators at least annually.

Educator Training and Qualifications

- The Nominated Supervisor will ensure that educators have appropriate education or training to enable them to undertake basic support of the health needs of children, including administering medications, responding to allergic reactions, basic first aid and adhering to special dietary requirements.

Additionally, children who are enrolled in the service with medical conditions and needs requiring specialist knowledge or training will be supported. Educators will have access to training relevant to children's medical needs.

Asthma Management Practices (Regulation 90 (1)(a))

All children diagnosed with asthma must have a medical management plan outlining what to do in an emergency. A risk minimisation plan must be developed in consultation with the parent of a child diagnosed with asthma to identify the triggers and how these will be managed and monitored within the service (procedures outlined above). The action outlined in a medical management plan should be followed in the first instance.

Responding to Emergency Asthma Incidents

The procedure outlined in the child's medical management plan should be followed in the first instance (Regulation 90(c)(ii)). However, if this does not alleviate the asthma symptoms, or where a child is not known to have asthma (therefore no plan has been provided), an educator will provide first aid following the steps outlined by Asthma Australia. If the treating educator is not trained in emergency asthma management, the emergency asthma qualified educator should be immediately sought by any persons identifying symptoms in a child and/or suspecting a child may be suffering from an asthma flare-up (sometimes referred to as an asthma attack).

Asthma Flare-Up Symptoms

The most common symptoms of asthma are:

- Wheezing – a high-pitched sound coming from the chest while breathing
- A feeling of not being able to get enough air or being short of breath
- A feeling of tightness in the chest
- Coughing

Practices to Respond to an Asthma Flare-up:

- Sit the child upright.
- The educator will be calm and reassuring;
- Give four (4) puffs of blue reliever medication with slow and deep breathing in after each puff. If using a spacer, follow each of 4 puffs with 4 breaths in and out following each puff;
- Wait four (4) minutes. If there is no improvement, give four (4) more puffs as above;
- If there is still no improvement, **call emergency services**; and
- Keep giving four (4) puffs every four (4) minutes until the emergency services arrive.

Authorisation for administering asthma medication is not required in an emergency. Educators should administer medication, then notify the parent and/or emergency services as soon as practicable (Regulation 94)

In the case of any emergency event, the parent of the child is to be contacted and informed once reasonably practicable to do so. Reporting will follow the practices outlined in *4.5 Incident, Illness, and Injury and Trauma policy*.

Emergency Asthma Equipment

The service's first aid kit contains Ventolin (blue puffer) and a spacer. Expiry dates of all puffers used will be closely monitored and replaced when expired. Puffers and spacers from the emergency asthma first aid kit must be thoroughly cleaned after each use to prevent cross contamination.

All asthma medication provided by families and administered by educators and/or self-administered by the child with the condition, must be in accordance with the Medication Policy (see [Policy 4.6](#)) of this service.

Managing Children at Risk of Anaphylaxis (Regulation 90 (1)(a))

Authorisation for administering adrenaline autoinjector (Epipen or similar) medication is not required in an emergency. Educators should administer medication, then notify the parent and/or emergency services as soon as practicable (Regulation 94)

- The service will take appropriate action to minimise, as far as reasonably practicable, exposure to known allergens where children have been diagnosed with anaphylaxis. These specific actions will be identified through the risk minimisation planning procedure.
- In recognising food allergies are a common (but not the only) source of allergy, in order to minimise the risk of exposure of children to foods that might trigger a severe allergy or anaphylaxis in susceptible children, our service will adopt the following practices:
 - Educate children about food allergies and ways to keep people safe;
 - Actively discourage children to trade or share food, utensils or food containers;
 - Ensure all food handling supports children's medical management plans;
 - Request families to label all drink bottles and lunch boxes with their child's name;
 - Consider the contents of food and non-food items for inconspicuous triggers;
 - Monitor attendances to ensure that meals/snacks prepared at the service do not contain identified allergens when those children are in care; and
- Where a child is known to have a susceptibility to severe allergy or anaphylactic reaction to a particular food, the service will develop policy and implement practice for the management of children, educators or visitors bringing foods or products to the service containing the specific allergen (e.g. nuts, eggs, seafood).

Symptoms of Anaphylaxis

Can include any one of the following:

- Difficult/noisy breathing.
- Swelling of the tongue.
- Swelling/tightness in the throat.
- Difficulty talking and/or hoarse voice.
- Wheeze or persistent cough.
- Persistent dizziness and/or collapse.
- Pale and floppy (in young children).

In some cases, anaphylaxis is preceded by less dangerous allergic symptoms such as:

- Swelling of face, lips and/or eyes.
- Hives or welts.
- Abdominal pain and vomiting (these are signs of anaphylaxis for insect allergy).

Responding to Symptoms

All children diagnosed with being at risk of anaphylaxis must have a medical management plan outlining what to do in an emergency. This plan will be followed in the first instance (*Regulation 90(c)(ii)*). Additionally, a risk minimisation plan must be developed in consultation with the parent of a child diagnosed with being at risk of anaphylaxis to identify any triggers/allergies and how these will be managed and monitored within the service (procedures outlined above). The action outlined in a medical management plan should be followed in the first instance.

In the case of a child who has not been previously diagnosed with being at risk of anaphylaxis but is displaying symptoms, the following actions will be taken. The emergency anaphylaxis management qualified educator should be immediately sought by any persons identifying symptoms in a child and/or suspecting a child may be suffering an anaphylactic episode.

1. Lay the person flat – do NOT allow them to stand or walk.
2. Give adrenaline autoinjector (Epipen).
3. Phone emergency services (ambulance).
4. Phone parent (if practicable).
5. Further adrenaline doses may be given if no response after 5 minutes.
6. Transported to hospital by ambulance (for observation).
7. **If in doubt give adrenaline autoinjector (Epipen).**
8. Commence CPR at any time if person is unresponsive and not breathing normally.

In the case of any emergency event, the parent of the child is to be contacted and informed once reasonably practicable to do so. Reporting will follow the practices outlined in *4.5 Incident, Illness, and Injury and Trauma policy*.

Emergency Medication

The service will always have an in-date adrenaline autoinjector (Epipen or similar) in their first aid kit for emergency use. This will be in addition to (and not a substitute for) the prescribed devices for individual children with a diagnosed anaphylactic allergy.

This device will be used where

- A child who is known to be at risk of anaphylaxis does not have their own device immediately accessible or the device is out of date;
- A second dose of adrenaline is required before an ambulance has arrived and emergency services have advised the use;
- The child's prescribed device has misfired or accidentally been discharged; and/or
- A child not diagnosed/identified as at risk of anaphylaxis is symptomatic

Each child will have the appropriate medication i.e. Epipen (or similar) accessible to educators. Appropriate medication will be stored at the service for each relevant child. These will be stored in a clearly labelled and marked containers. All expiry dates of this medication will be recorded in a replacement schedule, which will be actively monitored by the Nominated Supervisor. Parents will be advised of expiry 3 months before expiry date. **Children will not be allowed to attend the service without their medication being available.**

In circumstances where a child requires an Epipen (or similar) the service will request an additional device is stored at the service rather than being transported. If these arrangements are not suitable, personalised arrangement and risk-minimisation plans will be identified in collaboration with the Nominated Supervisor, Approved Provider and parents.

Diabetes Management Practice (Regulation 90 (1)(a))

Children with type 1 diabetes are at most risk from hypoglycaemia (hypo) which occurs when blood sugar levels are too low. Elements that can cause a hypoglycaemia include:

- A delayed or missed meal, or a meal with too little carbohydrate
- Extra strenuous or unplanned physical activity
- Too much insulin or medication for diabetes; and/or
- Vomiting.

Hypoglycaemia Symptoms

- headache,
- trembling,
- looking pale,
- feeling hungry,
- sweating,
- lethargy,
- crying,
- being irritable,
- hunger; or
- feeling/acting confused.

Action to manage this should be outlined in management plans. Educators will follow the steps identified in the plan (*Regulation 90(c)(ii)*). However, where the plan does not specify actions, the educator will inform the Nominated Supervisor/Responsible Person. The service will phone parents, and if needed, support the child to ingest some sugar and rest. The child will be actively monitored while resting.

Symptoms of **severe hypoglycaemia** include being

- extremely drowsy or disorientated and completely refusing food,
- unconscious,
- having a fit/convulsion, or
- unresponsive.

Any child presenting with these symptoms will require emergency medical attention. The Nominated Supervisor (or Responsible Person or any relevant educator) will respond by calling **emergency services (000)** for an **ambulance** immediately. Relevant first aid practices will be used in the absence of emergency service advice and/or treatment.

Hyperglycaemia (hyper) occurs when blood sugar levels are too high. It can be caused by not enough insulin administered, eating too many carbs, stress, hormones, weather and physical activity.

Hyperglycaemia Symptoms

- Feeling excessively thirsty,
- Frequently passing large volumes of urine,
- Feeling tired,
- Blurred vision,
- Infections (e.g. thrush, cystitis, wound infections),
- Weight loss.

Action to manage this should be outlined in management plans (*Regulation 90(c)(iii)*). Where this has not been identified educators will inform the Nominated Supervisor/Responsible Person. The service will phone parents. It is likely the child will require medication. If needed the service will call emergency services.

Where diabetic management is required, the service will ensure that educators are adequately and appropriately trained in the use of insulin injection devices (syringes, pens, pumps) used by children at the service with diabetes. In the event of major concerns regarding insulin levels of a child, the Nominated Supervisor (or Responsible Person or any relevant educator) will respond by calling **emergency services (000)** for an **ambulance** immediately.

Children's Self-administering Medication (Regulation 90 (2)&(3))

The service can permit children over preschool age to self-administer medication however [the relevant authority form](#) must be completed by the parent/authorised person, prior to the child administering the medication.

This information about the symptoms and actions to be taken to support a child will be detailed in the child's medical management and risk-minimisation plan. Plans for the management of medication must also outline how the storage of the medication will be secure, safe and accessible. Children cannot attend the service without access to required medication.

Despite authority to self-administer, educators should be aware of any relevant signs and symptoms or schedules relating to a child's medication administration. Where relevant, educator should prompt/remind children to administer their medication on this basis.

Where a child intends to self-medicate, they must:

- Inform an educator of their intention to take medication
- Collect the medication from where it has safely been stored

Educators will then:

- supervise the child who is self-administering medication/s
- ask the child when medication was last administered (and record this information)
- ensure each child follows all administration of medication, health and hygiene procedures.

Self-Administration Records (Regulation 90 (3))

The service will record all instances of supervised self-administration of medication. [A self-administration record will be kept for the child](#). Details of the date, time and dosage of the medication administration will be recorded by the educator who witnessed the administration.

A copy of the self-administration record can be provided to the parent at any time.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.90 Medical conditions policy
 - R.91 Medical conditions policy to be provided to parents
 - R.92 Medication record
 - R.93 Administration of medication
 - R.94 Exception to authorisation requirement—anaphylaxis or asthma
 - R.95 Procedure for administration of medication
 - R.96 Self-administration of medication
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.161 Authorisations to be kept in enrolment record
 - R.162 Health information to be kept in enrolment record
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.174 Time to notify certain circumstances to Regulatory Authority
 - R.174A Prescribed information to accompany notice
- National Quality Standard:
 - QA2 – Children's health and safety

Additional Regulatory Context and Guidance

- Work Health Safety Act
- Anti-Discrimination Act 1991 (Qld)
- Food Act 2006 (Qld)
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

Policy Controls

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2.10 Medication Administration

Policy Statement

In the support of children and their health and medical needs, the administration of medication can be necessary for providing care. The service is committed to upholding a high standard of safety in managing the medical needs of children. In the interests of the health and wellbeing of the children and compliance with legislation, the service will only permit medication to be given to a child if it is in its original packaging with a pharmacy label attached.

Self-administration of medication will be facilitated in working collaboratively with parents/caregivers. Self-administration of medication is only authorised with written authorisation from the parent/caregiver.

Children's medical needs may be broadly categorised into two types:

- Short-term - which may affect their participation in activities while they are on a course of medication. Short-term medical needs are typically an illness that the child will recover from in a short period (e.g. tonsillitis, chest infection, etc.)
- Long-term - potentially limiting their participation and requiring extra care and support. Long term medical needs are typically ongoing (e.g. asthma, diabetes, anaphylaxis, epilepsy, celiac disease).

A copy of this policy is to be provided to the parent/caregiver where there is awareness that the child has a specific health care need, allergy or other relevant medical condition.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(d), 90-96, 158, 162*.

Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Appendices and Forms

- [Medical Risk Minimisation and Communication Plan](#)
- [Medication Administration and Authority Form](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish practices that support the needs of children and uphold safety in the administration of medication.• Ensure the service has suitable facilities for the storage of medication.
Nominated Supervisor	<ul style="list-style-type: none">• To collaborate with families to ensure children's health and medical needs are supported including the establishment of practices to ensure safe transportation.• Ensure educators are aware of their role and duties in supporting the administration of medication for children.• Ensure establish practices are maintained and report issues to the Approved Provider and address concerns with families.
All Staff	<ul style="list-style-type: none">• Support the safe administration of medication for children, including medication is labelled, transported and stored correctly.• Witness medication administration including documenting correct dosage, labelling and child's identity.

Procedures

Permission/Authority (Regulation 92-93)

Upon enrolment, parents and families are provided with information explaining the expectations for notifying the service of health, medical or other relevant care needs, including any changes to these. Parents can communicate the need for children to be administered medication at any time during the child's enrolment at the service – either for ongoing requirement or for a fixed time.

A parent (or persons with relevant authority named in the enrolment form) are required to complete a [Medication Authority and Administration Form](#) when medication must be administered by or at the service.

Within the Medication Authority, parents (or other relevant authorised person) will be required to advise:

- Name(s) of medication(s) to be administered:
- Time and date the medication(s) were last administered
- The time and date [or the circumstances under which,] the medication should be next administered.
- Dosage of medication to be administered
- Method (e.g. oral) medication to be administered
- Any additional instructions or information (i.e. medication required to be refrigerated).

Additionally, the record is required to contain:

- The name of the child
- The signature of the parent (or person named in the enrolment records) authorising the administration of the medication

Administration of Medication (Regulation 93 & 95)

Except for an emergency, staff members will only be permitted to administer medication to a child if it is:

- In its original package/container
 - Where the medication is prescribed - with a pharmacist's label which clearly states the child's name, dosage, frequency of administration, date of dispensing and is within the expiry date period
 - Where over-the-counter medication - bearing the original label and instructions and before the expiry or use by date
- Has been authorised by a parent (or person named in the child's enrolment form),
- In accordance with the details outlined in the Medication Authority and Administering Form completed by the parent (or person named in the enrolment form).
- In accordance with any written or verbal instructions provided by a registered medical practitioner

All medication will be administered by the Nominated Supervisor/Responsible Person or a delegated educator nominated by the Nominated Supervisor or Responsible Person. An additional educator will also be required to witness the administration of medication.

Administration of medication will be recorded in a [Medication Authority and Administration Form](#). The person administering medication and the witnessing educator must complete the following details:

- the dosage that was administered
- the method/manner in which the medication was administered
- the time and date the medication was administered
- the name and signature of the person who administered the medication
- the name and signature of that educator who witness the medication administration.

Upon collection of the child from the service, the parent will be informed of the medication being administered and sign the record to acknowledge this notice.

All medical authorisations/authorities and/or administration records will be stored securely with the child's enrolment records (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).

Emergency Administration of Medication (Regulation 93-95)

In the case of an emergency, authorization to administer medication can be given verbally, when:

- a parent (or a person named and authorised in the child's enrolment record) consents to administration of medication; or
- if a parent (or person named in the enrolment record) cannot reasonably be contacted in the circumstances, a registered medical practitioner or an emergency service.

Where medication is administered in an emergency, the Nominated Supervisor/Responsible Person must notify the parent of the child as soon as practicable. Written notice (an [Incident, Illness, Injury or Trauma Report](#)) is must be supplied to a parent (or other authorised person) as soon as practicable (but within 24 hours)

Anaphylaxis or Asthma Emergency

- Medication may be administered to a child without authorisation in the case of an anaphylaxis or asthma emergency.
- Where emergency anaphylaxis or asthma medication has been administered to a child, the Nominated Supervisor/Responsible Person must notify the parent of the child and emergency services as soon as is practicable.

Where medication is administered to a child in an emergency, step contained in [2.4 Incident, Illness, Injury or Trauma](#) may be required, including but not limited to reporting and notifying the incident (also see [7.7 Managing Notifications](#))

Medication Storage and Transport

Storage

Unless subject to self-administration procedures, all medication will be stored in a locked cupboard or lockable refrigerated container. Storage should prevent unsupervised access and/or contamination to medicines.

Transporting Medication

The Nominated Supervisor (or Responsible Person) will discuss with parents and agree to relevant plans for the safe transportation of medication. Ideally, all medication will be transported in the care of a responsible adult. All transportation must uphold the service's commitment to the safety and protection of children.

Any medication no long required to be administered to the will be returned to the parent.

Children's Self-Administering Medication

See [2.9 Children with Medical Conditions Policy](#), which sets out the steps for children's self-administration of medication and how this is recorded.

The service can permit children over preschool age to self-administer medication, however, the relevant authority form must be completed by the parent (or authorised nominee), prior to the child administering the medication. The service will consider all relevant risks when permitting the self-administration of medication, including but not limited to, storage, access and transportation (Regulation 90 (2)&(3), 92 & 95- 96).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.90 Medical conditions policy
 - R.91 Medical conditions policy to be provided to parents

- R.92 Medication record
- R.93 Administration of medication
- R.94 Exception to authorisation requirement—anaphylaxis or asthma
- R.95 Procedure for administration of medication
- R.96 Self-administration of medication
- R.160 Child enrolment records to be kept by approved provider and family day care educator
- R.161 Authorisations to be kept in enrolment record
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Work Health Safety Act
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

Policy Controls

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2.11 Sun Safety

Policy Statement

The service's sun safety policy is to ensure that all children attending the service are protected from the harmful effects of the sun (UV radiation). We also recognise the opportunity to promote and establish excellent health and safety practices for children - the service views its sun safety practices as a chance to form good life-long habits and educate children about sun smart behaviour. Likewise, the Service expects that all children, staff and visitors attending our service are protected from skin damage caused by harmful UV radiation from the sun and will follow the Service's procedures.

The rationale for this policy was provided by the Queensland Cancer Council and is consistent with their Sun Smart Policy Guidelines for Education and Care Settings. Our sun safety policy ensures the approach is integrated – there is alignment between procedures, the program and the environment.

The scope of our sun-safe practices is intended to support–

- all children, educators and staff are protected from damaging to UV radiation.
- the outdoor environment provides shade for children, educators and staff.
- children are encouraged and supported to develop independent sun protection skills; and
- compliance with regulatory requirements, and workplace health safety responsibilities.

Due to our location and the sustained levels of UV radiation throughout the year, our sun-safe practices are adopted all year round, regardless of season. The dominant guide for the level of sun protection is the relative UV rating. The service will ensure proportionate sun protection is utilised where the UV rating is above Level 3 or more.

Where activities are held outdoors, the service will maximise the opportunity to access shade. Where shade is unavailable (i.e. excursions), higher levels of sun protection will be adopted.

Families are required to meet their responsibilities, including their child is equipped with the appropriate sun safe items for the activities (hats, sleeved shirts etc.). These expectations may vary based on session of care (i.e. vacation care) and the nature of activity (i.e. swimming). Parents will be kept fully informed of specific requirements. At a minimum, hats must be brought to every session of care.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(ii)*

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.9 Children with Medical Conditions](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure plans and routines support children sun safe behaviours and education.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure practices are role-modelled and followed by all children, educators and visitors.• Ensure suitable resources and equipment is available and accessible (spare hats, sunscreen etc.).• Ensure the routine and program identified opportunities to reduce exposure to high-levels of UV radiation.

All Staff	<ul style="list-style-type: none"> • Encourage and educate children on safe sun practices. • Role-model desired behaviours. • Address instances where services policies are not being followed through supportive interactions.
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Procedures

Understanding Daily UV Rating

The service will monitor daily UV rating times via BOM. For periods of the day at or above UV Level 3, sun-safe practices must be strictly followed.

Practices for UV Rating 1 and 2

Some form of sun protection (typically shade or hats), to promote embedded sun-safe behaviours, will be expected when UV ratings are at non-damaging levels. This expectation is balanced with the benefits of physical activity.

Practices for UV Rating 3 and above

The service will adopt proportionate sun-safe measures where UV ratings are at potentially damaging levels. Generally, this will mean multiple sun-safe measures appropriate to the circumstance.

The utility and school expectation of wearing a hat means that it is a requirement for outdoor play during sun protections times (UV Rating of Level 3 or more). Where UV ratings are Level 6 (high) and above, all accessible sun-safe measures will be expected to be used.

Sun Safe Measure	Directions
Hats	<ul style="list-style-type: none"> • No hat – no outdoor play (where there is a risk of sun damage) will be enforced. Children without a hat can play in shade where UV Rating are Level 1 or 2. • Children must bring their own hats to the service. However, in emergency cases only, spare hats are available. Borrowed hats must be placed in OSHC laundry basket at the end of the session. • Wide-brimmed or bucket hats are the preferred hat. Caps will be accepted during vacation when sunscreen is also applied.
Shade	<ul style="list-style-type: none"> • Where possible, educators will operate outdoor activities, including excursions, in shaded areas. • The availability of shade is considered when planning all outdoor activities. • Children are encouraged to choose and use available areas of shade when outside. • Play activities will be set up in the shade and moved throughout the day to take advantage of shade patterns. • Children who do not have appropriate hats or outdoor clothing are asked to choose a shady play space or a suitable area protected from the sun.
Sunscreen	<ul style="list-style-type: none"> • Children and staff will be provided with minimum SPF30 sunscreen. Parents can supply a suitably alternative (e.g. where a child is sensitive to sunscreen). • All sunscreen will be applied as per manufacturer's directions, including time before entering sun and re-applying. • Sunscreen must be worn for outdoor activities between 10am and 3pm or where UV Levels are 6 or above. • Generally, children will be expected to apply their own sunscreen with the supervision of educators. Assistance from educators may be offered, where required.
Clothing	<ul style="list-style-type: none"> • Children and staff must wear a top with sleeves to the service – ideally, covering as much skin as possible. • Singlets or sleeveless tops are not permitted. Spare shirts with sleeves are available in spare clothing drawer in case of emergency.

Swimwear	<ul style="list-style-type: none"> For swimming and water play activities, a sleeved swim top (i.e. a rashie) must be worn over swimwear that does not cover an equivalent area. A Lycra top is preferred option.
Sunglasses	<ul style="list-style-type: none"> The use of sunglasses is accepted (where children/parents wish these to be worn). However, the service recognises sunglasses often aren't practical for children.

Supporting Sun-Safety and Policy Compliance

The service, where possible, will attempt to have spare items available. When parents do not provide appropriate clothing and equipment for children, the first step is for the Nominated Supervision/Responsible Person to have a gentle 'prompting' conversation with the parent. Where this does not impact a change, the Nominated Supervisor will correspond formally with the parent to address the concerns. Ongoing enrolment is subject to parents complying with the Service's expectations for health and safety.

Role-Modelling

Educators will ensure that all themselves, children and visitors attending the service are protected from the harmful UV effects of the sun during periods of increase UV rating. This includes adopting the same practices expected of children. Educators will be supplied with hats as part of the uniform and are expected to wear them while outdoors.

Excursions and Swimming Activities

Potential exposure of UV radiation will form part of the service's risk assessment. Where possible, plans for access to shade will be created. However, the Service recognises that there are often limitations during these types of activities. Where shade is not readily available, the service will mitigate risks by selecting more appropriate times of the date (where possible) or using strictly using all available sun protection measures (hats, sunscreen, appropriate clothing/swimwear).

Promoting Learning and Skill Development

Opportunities to incorporate sun protection into the program will be continually explored. Displays will reinforce the expectations and positive sun-safe messaging.

Children are encouraged to be involved in initiatives to promote and model sun protection measures at the service including taking leadership roles in managing sun protection e.g. accessing daily UV levels and sun protection times, hat reminders and management of sunscreen

Physical Environment – Quality Improvement

The service will continue to explore opportunities to enhance the environment for additional shade. Where aspects of the environment are in the control of the service (i.e. use), the most sun-safe option to carry out activities will be selected.

Collaboration with the school to seek further development of shaded play spaces to enhance the environment will be continually explored.

Engaging Families and the Community

Enrolment information will provide information around the Service's Sun Safety Policy. Parents wishing further information can contact one of the Service's leaders.

Ongoing feedback and support will be sought from parents/guardians and the school community for the sun safety policy and its implementation through newsletters and, parent meetings etc.

Where possible, alignment with school expectations will be sought, to ensure a consistent message and expectation for children.

The sun safety policy will be reviewed periodically with children, staff, parents and the Approved Provider.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.114 Outdoor space—shade
 - R.155 Interactions with children
 - R.161 Authorisations to be kept in enrolment record
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA2 – Children’s health and safety

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Cancer Council Queensland’s SunSmart Policy Guidelines – Early Childhood Cancer Council Australia

Policy Controls	
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
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Review Date	October 2024

2.12 Safe Food Handling, Preparation and Storage (Food Safety Program)

Policy Statement

The service recognises the need for effective food handling and storage practices to ensure that the food provided is safe for consumption. Payne Road OSHC recognises its obligation to ensure foods prepared and provided must be done so in a way that is safe for children in our care. All food served is to be handled, prepared and stored in a manner that is consistent with quality food handling and storage guidelines, including the Australian and New Zealand Food Standards Code and other relevant guidelines including Staying Healthy in Childcare.

The service recognises its obligation to implement adequate health and hygiene practices and safe practices for handling, preparation and storage to minimise risks to children. Payne Road OSHC is committed to ensuring access to appropriate water and food appropriate to the individual needs of children and that the food served.

To ensure compliance with the preparation, service and storage of food for children, a food safety program has been developed to document the system that identifies food safety hazards and sets out the way the hazards will be controlled. While the service is not required to be food safety licenced, adopting a food safety program ensures the objective of ensuring safe food service.

The food safety program identifies steps to control for hazards across the following aspects:

1. Purchasing and receiving
2. Storage
3. Thawing
4. Preparation
5. Cooking
6. Cooling
7. Reheating and hot holding
8. Allergens
9. Cleaning program and schedule
10. Food recall

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.9 Children with Medical Conditions](#)
- [3.1 Space and Facilities Requirements](#)
- [4.7 Fit for Work](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish sound food handling, preparation and storage procedures.• Ensure facilities and equipment support the safe preparation, handling and education of food.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor and support safe food handling practices.• Coordinate with the Approved Provider to ensure the practices and equipment meets the needs of the service and children.• Ensure educators are provided with suitable training and instruction to handle food as described in the outlined procedures.
All Staff	<ul style="list-style-type: none">• Ensure procedures are followed at all times.• Support children in preparing and handling food to guide learning, development and safe practices.

Procedures

1. Purchasing and Receiving

Purchasing and Procurement

The service will purchase food products from reputable food businesses. Ideally, suppliers will be limited to those whose services and products have been found to be reliable. Largely, the service will purchase grocery items from supermarkets.

Where alternative arrangements are needed, products will be sourced from appropriately licenced food businesses.

Receiving food

1. Food should be covered or packaged (without damage) on arrival.
2. The educator collecting the food or products should inspect to ensure no food or product is spoiled, has damaged packaging or past used-by date.
3. The educator should check the temperature of the food including –
 - a. At or below 5°C for chilled food,
 - b. Frozen hard (not partly thawed) for frozen foods, or
 - c. Above 60 °C for hot foods.
4. Food not meeting these requirements should be rejected.
5. The food or product should be immediately placed in the appropriate storage location –
 - a. Freezer for frozen foods,
 - b. Fridge for chilled foods, or
 - c. Pantry for shelf-stable foods.

2. Storage

Food must be stored in an appropriate environment to protect it from contamination and to maintain the safety and stability of the food.

Area	Controls	Remediated Action
Dry Storage	<ul style="list-style-type: none">• Ensure the physical environment does not contain holes, cracks or crevices where pests may enter or breed.• Routinely inspect for signs of pests where dry products are stored and the premises is regularly treated by a licensed pest controller.• Store opened packaged products in clean, sealed food grade containers (or re-seal packaging)• Store products as the oldest stocks is most accessible and that weekly inspections identify out-of-date stock.• Ensure that chemicals are stored away from food stock.• Do not overcrowd the storage area. Food must be stored off the floor.• Food is stored in accordance with manufacturer's specifications.• Dry food storage area is cleaned in accordance with the cleaning schedule.	<ul style="list-style-type: none">• Food is discarded when –<ul style="list-style-type: none">○ There are signs of pest infestation.○ Food has been contaminated or unsuitable.○ Identification that packaging is damaged.• Clean the area when unclean or overcrowded
Cold Storage	<ul style="list-style-type: none">• All food which ought to be stored in a chilled manner (raw and cooked meat, dairy products, seafood, processed fruits and vegetables, cooked rice and pasta or foods that contain these foods)	<ul style="list-style-type: none">• If cold storage equipment is operating above 5°C, adjust the Temperature controls and recheck the temperature again within one hour.

	<p>should be stored in a temperate controlled area (cold room, fridge etc).</p> <ul style="list-style-type: none"> Food should be checked at least daily with a thermometer to ensure it is colder than 5°C. These checks must be recorded. All foods need to be stored in a clean and covered food grade container or wrapped in a protective covering. The fridge (or cold room) should not be overcrowded. Raw foods must be separated from cooked or ready-to-eat foods. With ready-to-eat foods ideally stored above raw foods. Check water and condensation from raw foods will not drip onto ready-to-eat food. Identifying and date marking the food to ensure it does not stay in the fridge for a period that may render the food unsuitable. check that the inside of cold storage equipment is clean and free from mould. clean refrigerators in accordance with the cleaning schedule. 	<ul style="list-style-type: none"> if cold storage equipment is found to be unable to keep food at 5°C or below, have the equipment serviced/repaired. Throw away potentially hazardous food that has been above 5°C for four (4) hours or more. Throw away ready-to-eat food that has been 'cross contaminated' by raw food. Throw away food that is past its 'use by' date or food that is damaged, deteriorated or perished. Throw away contaminated food or food that has been identified as unsafe or unsuitable. Service refrigerators in accordance with manufacturer's instructions or when required.
Frozen Storage	<ul style="list-style-type: none"> Frozen food needs to be stored frozen hard (not partially thawed). Frozen food must be stored and covered in clean containers. It should be clearly labelled and dated to allow for stock rotation. Frozen storage areas must not be overcrowded. Ensure that packaging isn't damaged. Freezers must be kept clean. Check the food in your freezer regularly (weekly) to see if food is contaminated, damaged, deteriorated or perished. Clean freezers in accordance with the cleaning schedule. 	<ul style="list-style-type: none"> Service freezer if it can't keep food frozen hard. If the freezer stops working and food partly thaws, place the food in the refrigerator until it is completely thawed, then use as a refrigerated food. If food is completely thawed, but is colder than 5°C, place food in the refrigerator and use as a refrigerated food, or use straight away. If you're not sure how long the freezer hasn't been working properly, or you are unsure about the safety of any food, throw the food away. Throw away contaminated, damaged, deteriorated or perished food.

3. Thawing

Thawing frozen potentially hazardous food may pose a food safety risk if the temperature of the food is between 5°C and 60°C during thawing, allowing food poisoning bacteria to grow. It is important that, if the food is thawed at room temperature the time that the food is at temperatures between 5°C and 60°C needs to be noted to ensure that safe time limits are not exceeded.

Controls for thawing

- Plan ahead - allow sufficient time to thaw potentially hazardous food in the refrigerator.
- Alternatively, thaw potentially hazardous food in the microwave.
- Thaw raw frozen food on a shelf below ready-to-eat food.
- Keep all food protected, covered, wrapped or in a food grade container while thawing;
- Do not re-freeze thawed food;

- Small portions of raw frozen meat and fish may be able to be safely cooked without complete thawing, however, large portions of food should be completely thawed before cooking.

Remediated Actions

- Do not use potentially hazardous food until it is completely thawed.
- Throw away thawed potentially hazardous food that has been left to stand at above 5°C for more than four (4) hours.
- Throw away food that has been contaminated during thawing.
- Throw away any food that has been frozen more than once.

4. Preparation

When preparing and handling food, there is risk of contamination and bacteria causing food-borne illness. There are three main hazards which are controlled during food preparation –

- Biological – bacteria growing to unsafe levels.
- Physical – things like dirt, hair, glass or other food product entering meals.
- Chemical – things like cleaning products etc. contaminating food.

Steps for food preparation

1. Food handlers will have appropriate skills and knowledge for each food preparation task.
2. Clean and inspect food preparation surfaces, equipment and utensils before use.
3. Food handlers must be wearing (or change) into clean clothes before preparing food.
4. Wash hands properly before starting food handling.
5. Ready-to-eat food is kept apart from raw ingredients during preparation.
6. Use separate utensils and cutting boards when preparing raw food and ready-to-eat food or alternatively, prepare ready-to-eat food and raw food separately, washing, sanitising and thoroughly drying cutting boards and utensils between use.

Additional controls for food preparation

- Fruit and vegetables intended for immediate consumption must be washed before preparing, including those where the skin is not intended to be eaten.
- minimise the time that potentially hazardous food is above 5°C and return food to the refrigerator during any break in preparation/
- wiping cloths should be replaced daily and cleaned, rinsed and dried between uses.
- throw away single use items after one use.

Remediated actions

- Throw away any food contaminated by dirty equipment.
- Throw away food where there is any chance that contamination or cross contamination has occurred.
- Re-train food handlers that have been found to be mishandling food.
- Remind people preparing food of good hygiene practices and retrain where necessary.
- Throw away food that has been between 5°C and 60°C for more than four (4) hours.

5. Cooking

Hot food must be fully cooked to a sufficient temperature to achieve a safe temperature for consumption. Potentially hazardous foods, which are not fully cooked, will not be safe to eat, as bacteria will not be killed;

Where the food handler is unsure of the temperature of potentially hazardous foods, they must use a thermometer to check the internal temperature has reached **a minimum of 74°C**. If the temperature in the centre of the potentially hazardous food does not reach at least 74°C, continue cooking until the internal temperature is achieved.

The 2 hour/4 hour guide

Maintain potentially hazardous food at a temperature of 5°C or below or 60°C and above. If food is kept between 5°C and 60°C, this temperature must be monitored and recorded.

- Potentially hazardous food that has been kept between 5°C and 60°C for **less than two hours** must be **refrigerated or used immediately**.
- Potentially hazardous food that has been kept between 5°C and 60°C for **longer than two hours but less than four hours** must be **used immediately**.
- Potentially hazardous food that has been kept between 5°C and 60°C for **longer than four hours** must be **thrown out**

6. Cooling Food

Hazardous food that is intended to be cooled and use later, needs to reach a temperature of 5°C or colder as quickly as possible. There may be food poisoning bacteria in the food even though it has been cooked. Faster cooling times limit the time when these bacteria are able to grow or form toxins.

When cooling cooked potentially hazardous food, cool the food within the following timeframes—

- from 60°C to 21°C within two hours; and
- from 21°C to 5°C within a further four hours.

This means you have a maximum of six hours to cool food from 60°C to 5°C or below.

If the speed of cooling is unknown, a thermometer to measure the warmest part of the food – usually in the centre should be used. To chill food quickly, break it up into smaller portions in shallow containers. Care must be taken to not to contaminate the food as this is done.

Remediated Actions

- throw away food if the above cooling times and temperatures have not been reached.
- if refrigerator temperatures rise above 5°C during the cooling of food, review and modify cooling practices to ensure that temperatures remain below 5°C.
- discard any potentially hazardous food that may have been contaminated during cooling.

7. Reheating and hot holding

Bacteria can grow in food that is reheated too slowly. Holding food at temperatures where bacteria can multiply can also cause a food-borne illness. If you reheat previously cooked and cooled potentially hazardous food, you must reheat it rapidly to 60°C or hotter.

Food must be reheated **to 60°C within a maximum of two hours**.

Controls for reheating and hot holding

- Check that the temperature at the centre of potentially hazardous food being reheated reaches at least 60°C in two hours or less.
- Maintain reheated potentially hazardous food at 60°C or above.
- Hot holding equipment (such as a bain marie) should never be used to cook or reheat food.
- Potentially hazardous food that has been cooked and cooled should only be reheated once.
- Use a temperature setting on hot holding equipment that keeps the food at or above 60°C.
- Do not overload hot holding equipment.
- When re-stocking potentially hazardous food in hot holding equipment, never add new batches of food to old batches of food, remove the old batch and replace with new batch.

Remediated Actions

- Discard potentially hazardous food if the temperature at the center has not reached 60°C in two hours or less.

- Use immediately any potentially hazardous food that has been held between 5°C and 60°C for more than 2 hours, but discard food that has been held between 5°C and 60°C for more than four (4) hours.
- Discard reheated food if left over.
- If hot holding equipment cannot maintain food temperatures above 60°C, check whether this is because too much food is being held in the unit.
- Repair equipment fails to work correctly.

8. Allergens

Certain foods can cause some people to have an allergic reaction which can vary in severity from mild upsets to severe anaphylactic reactions. It is important food handlers are able to identify which products contain allergens.

Controls for allergens

- Children with known allergens and dietary requirements have individualised plans.
- Prepare special meals separately from normal meals.
- Food handlers should be aware of sensitivities, especially children who severity is significant.
- Check packaging for –
 - damage and use only clean uncontaminated packaging materials.
 - Ingredients to identify potential allergens.

9. Cleaning Program

Anything that comes into contact with food must be cleaned and sanitised. Items which do not come into contact with food need only be cleaned.

Steps for cleaning utensils and equipment

1. **Pre-clean:** scrape, wipe or sweep away food scraps and rinse with water.
2. **Wash:** use hot water and detergent to take off any grease and dirt. Soak if needed.
3. **Rinse:** rinse off any loose dirt or detergent foam.
4. **Sanitise:** use a sanitiser to kill any remaining germs (read sanitiser's instructions to see if a second wash is required).
5. **Dry:** allow to drip-dry if not possible, dry with a clean tea-towel.

Items to be cleaned and sanitised	Items to be cleaned
Plates and bowls Utensils for preparing and serving food Cutting boards Preparation benches Storage containers	Floors Walls Ceilings Rubbish bins Windows Refrigerators

A commercial sanitiser is used for sanitising activities. Educators are to follow the manufacturer's instructions.

Cleaning procedures

- Start at the back and work towards the front. Start high and work your way down.
- Single-use paper towels are better than cloths. If you use cloths, they must be washed in hot water and allowed to dry after every use.
- Use food-grade detergents and sanitisers, always following the manufacturer's instructions.
- Clean as you go.
- Make sure the containers for garbage and recycled matter are large enough for the amount of waste you produce and are capable of being easily cleaned.
- Ensure that all equipment used for cleaning (eg. mops, buckets, cloths, brooms etc) are also kept clean.

Cleaning and Maintenance Schedule

Daily	Used equipment Floors Rubbish bins
Weekly	Fridges Cupboards and shelves
Monthly	Freezers Dry food storage area
Quarterly	Windows Walls Ceilings Ovens
Annually	Light fittings

10. Food Recall

- The service will monitor foods purchased for recall alerts. Recall alerts may be distributed via retail and public communication from the manufacturer or recognised health authority.
- Any foods recalled will be returned or destroyed according to advice.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.77 Health, hygiene and safe food practices
 - R.78 Food and beverages
 - R.79 Service providing food and beverages
 - R.80 Weekly menu
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements

Additional Regulatory Context and Guidance

- Food Act 2006 (Qld)

Policy Controls	
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
Version:	v.2023-1
Review Date	October 2024

2.13 Emergency Evacuation, Lockdown and Drills

Policy Statement

The Service recognises the timely and controlled response to emergency events, such as a fire, bomb threat or lockdown contributes significantly to upholding the safety and wellbeing of children, staff and any other relevant individuals onsite. The service is committed to ensuring safety of all relevant persons through sound preparation, rehearsal, evaluations and the actual undertaking of an emergency response.

The scope of this policy and procedure applies to both the:

- the response to emergency events while on the school premises
- the ongoing review, preparation and development of risk-assessed responses to emergency events

In preparing this policy, the Approved Provider also recognises their duties to comply with *Education and Care Services National Regulations 2011* (regulations 97 and 168 (2)(e)).

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [3.5 Emergency and Safety Equipment](#)
- [5.2 Positive Behaviour Support Practices](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensuring policy and procedure provide all staff are instructed and trained in the emergency evacuation and lockdown plans.• Ensure emergency evacuation action plans have been developed through risk-assessment practices that identify potential emergencies.• Ensuring plans are displayed in a prominent location near entry and exit points.• Ensure emergency and evacuations plans are rehearsed and documented.• Ensure processes are developed to monitor the function and working order of fire equipment.
Nominated Supervisor	<ul style="list-style-type: none">• Support the Approved Provider in facilitating the collaborative ongoing review and development of emergency and evacuation plans.• Instruct all new staff and/or volunteers of the emergency and evacuation plans.• Ensure the relevant drills are undertaken in accordance with the Service's procedures.• Communicate emergency drill evaluations and any identified concerns to the Approved Provider.• Ensure the Service environment is maintained to support the safe response to emergency events (doorway are kept clear, workplace health and safety items addressed) and that plans and resources are maintained and displayed as outlined in the procedure.• Monitor and regularly coordinate the maintenance of fire safety equipment.
Responsible Person	<ul style="list-style-type: none">• Initiate and lead the emergency evacuation or lockdown response including undertake drills as required.• Provide feedback and guidance to staff and children of their response to emergency and evacuation drills.
All Staff	<ul style="list-style-type: none">• Respond to hazards or potential signals or an emergency event• Immediately alert other staff of the emergency situation.

- | | |
|--|---|
| | <ul style="list-style-type: none"> • Support children and other individuals onsite to follow the emergency and evacuation plans. • Understand your role and responsibilities in an emergency or evacuation response. • Participate in planning and review of emergency plans and drills. |
|--|---|

Procedures

Development of Emergency Plans

- As an outcome of emergency risk assessment, the service has the following plans prepared for the event of an emergency:
 - Emergency Evacuation Plan
 - Lockdown Plan
 - Bomb-Threat Response
- All plans will be based on an assessment of hazards and the types of emergency situation that may arise, including the possible consequences and controls to manage the identified risks.
- Plans will outline:
 - Allocation of roles and responsibilities
 - Lines of communication to coordinate the emergency response.
 - Activation of alarms and/or communication channels for staff
 - Floor/site plans with clear identification of a safe route to assembly point
 - Storage and access to role and emergency contact information
 - Instructions on responding to hazard (i.e. use of fire equipment)
- All staff are encouraged to inform the development of these plans. Consultation and feedback with educators will sourced following each drill
- The ongoing review, management and display/communication of these plans will be outlined the procedure below

Principles for Emergency Response

For emergency where the source of the hazard is located inside or onsite (e.g. a fire, chemical spill, gas leak etc.) the Emergency Evacuation Plan will be initiated.

Emergency Evacuation Plans will be clearly displayed near the entrance of each room at the Service. Evacuation plans written and displayed to be accessible by child. In addition, a list of emergency telephone numbers will be clearly displayed within the Service.

Educators must ensure that all exits are kept clear and unlocked to enable a quick departure. This will be included on the daily safety checklists and will be marked each day if compliant. Any comments or issues relating to these preventative measures will be noted on the checklist and brought to the attention of the Nominated Supervisor.

In an emergency situation, the educator who first discovers the emergency will raise the alarm using the service's emergency equipment. Attempts to extinguish fires will occur *only* if the fire is very small, and the person has been trained in using the fire equipment. As outlined in the evacuation plan, the priority is to evacuate.

The **Nominated Supervisor**, or in her/his absence the **Responsible Person** will lead the response.

No one will re-enter, nor be permitted to re-enter, a building in which there is or has been a fire, under any circumstances, unless and until the emergency service advises that it is safe to do so.

In the event of prolonged waiting the Educators will attend to the needs of the children ensuring they are comfortable and their needs are met.

The Regulatory Authority will be notified, through the [7.7 Managing Notifications](#) policy, of any events in which an emergency evacuation was undertaken.

A lockdown emergency response is initiated where the threat or hazard is in the external environment (a harassing parent/adult, dangerous person on/near premises) the Nominated Supervisor/Responsible Person will initiate the lockdown procedure. Unlike the emergency evacuation plan, the lockdown plan due to the discreet intention is not displayed, therefore rehearsal is an essential activity to ensure effective preparation.

At no time will any educator try to physically remove an unwanted or harassing individual.

All threatening situations will be evaluated as soon as possible after the event and any necessary modifications or enhancements to these procedures made accordingly.

The Regularity Authority will be notified, through the [7.7 Managing Notifications](#) policy, of any events in which an emergency evacuation was undertaken.

Managing Education and Care in an Emergency

The Nominated Supervisor will be guided by Emergency Services at all times. Where the relevant authority has deemed it safe to return to the service, the education and care will return as was prior to the evacuation. Where it is not safe to return to the service, and there is no other suitable approved learning environment for the children to gather, the Nominated Supervisor will call parents to collect their child from the emergency assembly location at the earliest convenience. The Nominated Supervisor will notify the Approved Provider and Regulatory Authority via [7.7 Managing Notifications](#) procedures.

Special Considerations

In each type of emergency situation there is potential for children to be unaccounted for. Depending on when this is realised there are steps that must be taken to ensure that either all children are accounted for or an investigation is underway to confirm the whereabouts of any unaccounted for child. If an unaccounted-for child is still considered missing when emergency services arrive they should be immediately notified of the situation.

Bomb Threat Response

A copy of the [bomb threat checklist](#) will be kept in an accessible location in the OHSC office.

In the event of a bomb threat, the following information will be recorded by the person who answers the call, on the 'bomb threat checklist':

- a) Time and date of the call.
- b) the wording of the threat;
- c) Other specific details.

The staff member **should NOT hang up the phone**. Without alerting the caller indicate for another person implement an **emergency evacuation** of the building according to the services' emergency evacuation procedure.

A staff member can then use a separate phone to **call 000** (police) to report the threat. The Regularity Authority will be notified, through the [7.7 Managing Notifications](#) policy, of any events in which an emergency evacuation was undertaken.

Emergency Drills

- Emergency evacuation and lockdown procedures will be carried out at least once a term.
- Both the emergency evacuation and lockdown drill will occur during either a BSC session, ASC session, and at the beginning of each Vacation Care program.
- In order to maximise the exposure to the widest range of children, families and staff in attendance, a drill will occur on different days of the week.
- The service may conduct an unannounced drill.
- Feedback and guidance will be provided to the children at the conclusion of each drill.
- Each practiced drill will be documented and recorded by the Nominated Supervisor or Responsible Person ([Emergency Drill Evaluation Template](#)). Each record will include an evaluation of the drill

against the service's plans and responses by staff and children. Any concerns will be communicated to the Approved Provider along with the Nominated Supervisors plans to address these concerns.

Records & Evaluation

As per the Drill and Evacuation Policy, all emergency evacuation and lockdown procedures will be carried out at least once a term for either Before and After School Care and at the beginning of each Vacation Care program (Reg 97(3)(a)). This drill will occur on different days of the week so that all educators and children are familiar with the procedures.

Every drill will be documented and evaluated Regulation 97 (3)(a&b)). These records will contain detail of:

- the names of:
 - staff members,
 - volunteers, and
 - children present on the day,
- and include the details of the person responsible for the drill.

Any issues identified in a rehearsal will require the risk assessment to be reviewed. Any review will require endorsement from the Approved Provider. The Nominated Supervisor will be responsible for facilitating this procedure. All records of emergency drills will be maintained by the Nominated Supervisor.

Evacuation Plan

Principles for Evacuation Plan Response

- R** – Remove children and others from danger
- A** – Alert, call out in a loud voice, sound alarm and call 000
- C** – Confine the fire. Close doors and windows, if safe
- E** – Evacuate to the Assembly Area

Steps to follow in the event of a fire or other relevant danger		
Step	Responsible Person	Instructions
1	All educators	Identify hazard and determine type (i.e. fire, animal etc.)
2	All educators and children	Sound alarm to alert all students, teachers, educators, and school visitors. Every educator needs to evacuate all children located in their supervised area. Direct children to gather at the nearest exit point, ready to leave. Once all children are gathered the group will calmly transition to the Assembly Point (as marked on the Evacuation Floor Plan), with a relevant educator taking the lead.
3	Nominated Supervisor (or Responsible Person)	Put on warden hat and high visible vest, gather emergency medication, and sign in/out record.
4	Educator	One educator will stay behind the group of children to ensure all children make their way to the Assembly point.
5	Nominated Supervisor (or Responsible Person)	Check all rooms (including toilets) to ensure no children have been left behind. If safe to do so, close doors (leave unlocked) and windows, turn off air conditioners and TV. Meet children and educators at assembly point.
6	Nominated Supervisor (or Responsible Person)	Once at assembly point, delegate an educator to call 000. Roll call – go through sign in/out record to ensure all children are accounted for.
7	All educators	Wait for emergency services to attend and follow instructions given by them. Nominate and educator to meet emergency services in a prominent location
8	Nominated Supervisor (or Responsible Person)	Never re-enter a building until emergency service have attended and deemed it safe to do so. Children will be cared for, supervised, and comforted at the Assembly Area until it is safe. Should the building be unsafe or the time to return presents as extensive, parents will be called to collect their children.

No one will re-enter, nor be permitted to re-enter, a building in which there is or has been a fire, under any circumstances, unless and until the emergency service advises that it is safe to do so.



IN CASE OF FIRE

REMOVE PEOPLE FROM IMMEDIATE DANGER
ALERT THE FIRE SERVICE AND NEARBY STAFF
CONFINE FIRE AND SMOKE
CLOSE DOORS
EVACUATE TO THE ASSEMBLY AREA

EVACUATION

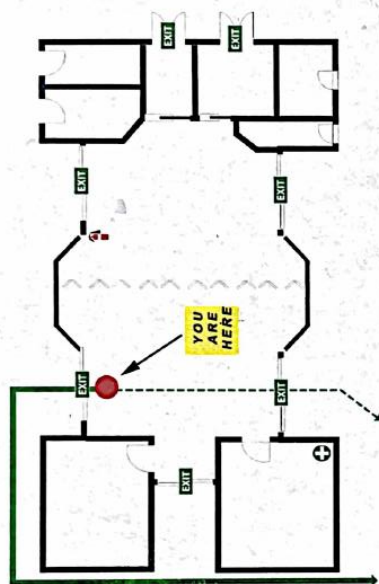
- Follow all instructions given by Warden or attending Fire Officers.
- Leave immediately by the nearest safe exit.
- If possible, close doors behind you. DO NOT OBSTRUCT the Exit path for others.
- Report to your designated ASSEMBLY POINT.
- Move quickly - DO NOT RUN.
- Advise a Warden immediately if you are aware of people trapped in the building.
- DO NOT LEAVE THE ASSEMBLY POINT until the Principal or Warden gives consent.
- If any injuries are sustained notify a Warden.

EVACUATION DIAGRAM

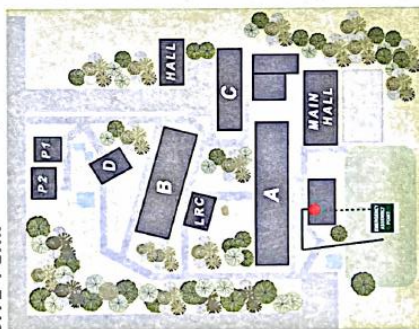
Payne Road State School
171 Payne Rd
The Gap QLD 4061
(07) 3511 3111

OHSC BLOCK

FIRE EVACUATION ALARM - FIRE ALARM



SITE PLAN



LEGEND

- EXIT
- EMERGENCY ASSEMBLY POINT
- Assembly Area
- Fire Extinguisher
- First Aid Kit
- Switchboard
- Fire Alarm
- Fire Hose
- Fire Blanket
- Evacuation Route
- Secondary Evacuation Route

SAFE METHOD FOR FIRE EXTINGUISHERS

- Pull the pin at the top of the extinguisher.
- Note: Hold the extinguisher by the bottom handle to allow easy removal of the pin.
- Aim the nozzle towards the base of the fire.
- Squeeze the handle to discharge the extinguisher.
- Sweep the nozzle from side to side aiming at the base of the fire.

SAFE PRINCIPALS QLD
www.safeprincipalsqld.com.au

Lockdown Plan

In the event of harassment or unauthorised persons refusing to leave the premises the Nominated Supervisor, or in their absence, the Responsible Person will initiate the following drill:

- The educator or child (if appropriate) being harassed, or the closest observer of the child or other educator being harassed, will state 'HELP', which is made known to all educators, to initiate a lockdown procedure;
- The Nominated Supervisor or other staff member, who receives the signal, will calmly and quietly inform other educators of the need to move the children to an identified safe place. If the threat is inside, children will be escorted outside by educators to a designated safe place. If the threat is outside then children will be escorted inside by educators; and
- The Nominated Supervisor/Responsible Persons, will immediately obtain and if possible record relevant information (e.g. physical descriptions, car registration etc.) on a service incident report.

An educator will witness and provide back-up for the Nominated Supervisor/Responsible Person but only if it does not place that person in a position of unacceptable risk or harm to themselves, to any child or to others, or leave children unsupervised.

In the event of an internal threat (intruder, bomb and/or behaviour issue) where children are to be escorted to an outside area, once the prearranged signal has been acknowledged:

- An educator will telephone the relevant emergency number.
- An educator will check and evacuate all rooms including the toilets, storage rooms and near-by buildings on the premises.
- An educator will collect iPad with sign in details and parent contact numbers; and
- An educator will close and lock all doors and windows (only if appropriate and able to do so).
- Once at the designated assembly area, an educator will check the roll to make sure that all children and educators are accounted for including children who have already been signed out and have been collected.
- When the threat is removed the children are to be taken inside and debriefed before returning to their activities.
- Notify parents, the Approved Provider and the Regulatory Authority.

In the event of an external threat (storm, intruder, fire, bomb, gas leak) where children are to be escorted inside, once the prearranged signal has been acknowledged, the following drill will be initiated:

- Educators will calmly and quietly move the children to safety inside the room, checking the toilets, storage rooms and near-by buildings.
- An educator will telephone the relevant emergency number if required.
- All doors, windows and curtains will be shut and locked (if safe to do so).
- An educator will check the roll to make sure that all children and educators are accounted for including children who have already been signed out and have been collected; and
- Educators will encourage children to sit quietly.
- When the threat is removed the children are to be debriefed before returning to their activities.
- Notify parents, the Approved Provider and the Regulatory Authority.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.87 Incident, injury, trauma and illness record
 - R.97 Emergency and evacuation procedures
 - R.98 Telephone or other communication equipment

- R.99 Children leaving the education and care service premises
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.173 Prescribed information to be displayed
- R.176 Time to notify certain information to Regulatory Authority
- R.177 Prescribed enrolment and other documents to be kept by approved provider
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Fire and Emergency Service Act 1990 (Qld)
- Building Fire Safety Regulation 2008 (Qld)
- Managing the Work Environment and Facilities Code of Practice

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
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2.14 Handling Disclosures and Reporting Suspicions of Harm (Including Mandatory Reporting)

Policy Statement

In addition to the service providing all children with a safe and suitable environment, it has an obligation to report reasonable suspicion of significant harm or at risk of significant harm. The service recognises that early childhood education and care professionals are in a unique position to identify concerns about a child's safety and wellbeing.

The *Child Protection Act 1999 (Qld)* outlines Education and Care professional and mandatory reporters. In the event that an educator (or the Approved Provider) forms a reasonable suspicion either through observations or disclosed information the service is required to respond and ensure that this information is managed appropriately and that all suspicions of significant harm are reported.

Children are identified in needing protection where they have suffered, are suffering or are at an unacceptable risk of suffering from significant harm. Under the *Child Protection Act 1999 (Qld)* significant harm is identified as any detrimental effect of a significant nature on the child's **physical, psychological or emotional wellbeing**. Harm occurs as a result of abuse and neglect. Types of abuse and neglect include:

- **Physical abuse** – non accidental injury including beating, shaking, burning, biting, causing bruise or fractures by inappropriate discipline, giving children alcohol, drugs or inappropriate medication.
- **Emotional abuse** – hostile parenting, constant yelling, insults, swearing, criticism, bullying, scapegoating, exposure to domestic violence.
- **Neglect** – failure to provide basic needs including food, clothing, enough sleep, hygiene, medical care, and supervision.
- **Sexual abuse** - exploitation, penetration, sexual touching, sexual talk/conversations and/or exposing children to pornography.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Child Protection Act 1999 (Qld)*, *Education and Care Services National Regulations 12, 84, 85-86, 168 (2)(b), 175 (2)(d)&(e)* and *Working with Children (Risk Management and Screening) Act 2000*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.5 Interactions and Communication with Families](#)

Appendices and Forms

- [Information Sheet for Mandatory Reporting by Education and Care Service Professionals](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure staff receive appropriate training and induction to be able to identify and respond to indicators of significant harm.• Consult, support and plan appropriate courses of action when suspicions of abuse and harm arise.• Seek advice, guidance and resources to support decision-making.
Nominated Supervisor	<ul style="list-style-type: none">• Respond to concerns and issues raised by staff.• Direct serious concerns and possible suspicions to an appointed officer of the Approved Provider for consideration.• Document concerns and ensure these records are handled with privacy.• Where appropriate, collaborate with parents to identify preventative supports.
All Staff	<ul style="list-style-type: none">• Be equipped to respond to indicators of harm and disclosures.• Listen and observe children with sensitivity and empathic understanding.• Share your concern with the Nominated Supervisor, or where relevant, other professionals.

Procedures

Protection of Children While Being Cared For By The Service

1. The service is committed to ensuring the safety and wellbeing of children, all educators will be expected to follow the instruction and procedures to ensure the safety and protection of children being cared for by the service.
2. Where the respondent of an allegation of abuse is an educator (where an educator or staff member is suspected to have harmed a child/ren), any educator being aware or holding suspicion will immediately report to the Nominated Supervisor (or responsible person), who will notify the Operations Manager.
3. The educator (responded) will be immediately relieved of their duty and relevant workplace investigations and (if relevant) appropriate disciplinary actions will occur ([4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)), including notification to the police for criminal charges, where relevant.
4. The procedures outlined in the [Incident, Illness, Injury or Trauma](#) and this policy will be followed. Notification to the Regulatory Authority will occur as per [7.7 Managing Notifications](#) policy.

Child Protection Act 1999 (Qld) (13E)

Outlines that **early childhood education and care professionals** including **approved providers, nominated supervisors and educators** of approved education and care services (under the Education and Care Services National Law (Queensland) are **mandatory reporters**. Requires **reportable suspicions** of significant harm to a child are reported to Child Safety.

Mandatory Reporting Requirement (Child in Need of Protection)

1. The Approved Provider will ensure the Nominated Supervisor provides instruction for each educator to understand either responsibilities of notifying of reasonable suspicion of harm and, where possible, periodic training so all educators are equipped with relevant skills and knowledge to fulfil their duty of the *Child Protection Act 1999 (Qld)* (Regulation 84).
2. On initial employment all educators (and other relevant staff will be provided with a copy of the [information sheet on Mandatory Reporting](#) as a minimum. Additional training, support and resources will be coordinated as assessed by the Approved Provider.
3. The Nominated Supervisor will ensure that educators are aware they will be supported (and where possible guided) on how to handle situations where information is disclosed to them by a child, by a member of the child's family, or other persons.
4. At all times educators will have access to the service's policies and procedures manual to refer to in instances where they are uncertain of their responsibilities or required actions. Additionally, staff are supported to discuss child protection concerns with their management.
All staff are to monitor children's presentation, behaviour, play, interactions and any other indication they may be exposed to harm or potential harm.

Responding to Disclosures

5. Where a child discusses information relating to their experience of trauma and harm with an educator (a disclosure); educators are guided to:
 - a. **Listen** – try to be in a suitable environment, be calm and patient, let the child use their own words and avoid quizzing. Don't be afraid of saying the 'wrong thing'. Listening supportively is more important than the words you use.
 - b. **Reassure** – address the concern about the child's safety and reassure the child it's okay that they have told you what's been happening. Reassure the child it is not their fault for any distress.
 - c. **Respect** – the child may only reveal some details. Acknowledge bravery and strength. Explain in order to keep them safe you'll have to tell someone and avoid making promises you can't keep.

Developing a Reasonable Suspicion

6. An educator, Nominated Supervisor, or relevant other staff member may develop concern about a child's wellbeing and safety from a variety of sources – observations, discussions, the child's presentation, behaviour, or interactions with the parents etc.
7. A reasonable suspicion might not develop from one single event but rather a number of indicators combining to result in a concern developing about a child's safety and wellbeing.

Allegations of Staff Member Abuse

8. Where the respondent of an allegation of abuse is an educator (where an educator or staff member is suspected to have perpetrated the act of abuse), any educator being aware or holding a suspicion will immediately report to the Nominated Supervisor (or responsible person), who will notify the Approved Provider.
9. The educator (responded) will be immediately relieved of their duty and relevant workplace investigations and (if relevant) appropriate disciplinary actions will occur [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#).
10. The procedures outlined in the [Incident, Illness, Injury or Trauma](#) and this policy will be followed. Notification to the Regulatory Authority will occur as per [7.7 Managing Notifications](#) policy.

A **reportable suspicion** about a child is a reasonable suspicion that the child has suffered, is suffering, or is at unacceptable risk of suffering, significant harm caused by physical or sexual abuse; and may not have a parent able and willing to protect the child from the harm. Mandatory reporters should also report to Child Safety a reasonable suspicion that a child is in need of protection caused by any other form of abuse or neglect.

Consultation and Decision-Making

11. Indications of significant harm are not always clear. All staff should be prepared to discuss their suspicions openly to ensure a child is supported and reporting obligations are met.
12. Educators (or all other staff) will promptly advise the Nominated Supervisor of any concerns relating to a child's safety or wellbeing.

All staff including the Approved Provider, Nominated Supervisor and educators are free from liability or breaching Privacy Principles when sharing confidential information, if they are acting honestly and if their actions in doing so are consistent with the purpose of information sharing under the *Child Protection Act 1999 (Qld)*.

13. The Nominated Supervisor, in either being told of or themselves developing concerns relating to a child's safety or wellbeing are to advise the Approved Provider.
14. The Nominated Supervisor and Approved Provider will consult on a plan of action, which could include:
 - a. discussing concerns with parent/s
 - b. seeking further advice and support from:
 - i. Child Safety;
 - ii. Family and Child Connect;
 - iii. Child Protection Guide [online tool] <https://secure.communities.qld.gov.au/cpguide/engine.aspx>; or
 - iv. the school Principal/relevant other professional
 - c. directly report notification to Child Safety.
15. Please note: Education and Care professionals cannot disclose personal information to Child and Family Connect without the parent's permission.

Documenting the Decision-Making

16. The Nominated Supervisor is to ensure that the reports and documentation of a disclosure/suspicion is written and recorded by the staff/educator involved as soon as practical. The report should include:
 - a. any relevant background information
 - b. a factual description of the events/observation/incident
 - c. statements of the child (or others)

- d. educator/service response to events
 - e. any parent involvement or discussion
 - f. any other matters considered relevant
17. These reports or other documentation will be stored by the Nominated Supervisor in a password-protected file on the service's computer (consistent with [7.6 Information Handling \(Privacy and Confidentiality\)](#))

Non-Reportable Suspicion

18. Where advice has been received that the suspicion does not meet a threshold for reporting to Child Safety, the relevant person should follow and document any recommendations (e.g. talking to parents about access to support services)
19. However, the following matters should also be considered and if necessary actioned:
- a. Could the events be considered a [Regulatory Authority] reportable incident; has the allegation of harm occurred while a child has been educated and cared for ([2.4 Incident, Illness, Injury or Trauma](#))?
 - b. What action could or should be provided to support the child/ren ([5.3 Supporting Complex Behaviours](#))?
 - c. Have or how should parents be notified ([6.5 Interactions and Communication with Families](#))? Can additional support be offered to parents?

Reporting Reasonable Suspicions

20. Where report to Child Safety has been decided, the most appropriate methods can be selected:
- If the child is in immediate Danger – **QLD Police Service** – 000
 - During business hours – **Child Safety Regional Intake Service Brisbane** - 1300 682 254
 - After Hours – **Child Safety After Hours** – 1800 177 135
 - Online Reporting Form via Child Protection Guide - <https://secure.communities.qld.gov.au/cpguide/engine.aspx>
21. Mandatory Reporters are required to make a written report. If the initial notification is made via phone, the corresponding report can be guided by Child Safety.

Documentation and Records

22. Any record relating to suspicions of significant harm are to be kept separate from general incident reports. Child protection concerns will be filed within the password protected folder on the service's computer.
23. In circumstances where it is consistent with protecting a child from significant harm, relevant information can be shared with the school Principal. The preference is the Approved Provider will inform this decision-making, however, in extenuating circumstances the Nominated Supervisor will have delegation to decide.
24. All persons involved in a case of suspected child abuse will be treated with sensitivity and respect, and all information to the case will remain confidential unless required to protect a child from harm [see [Policy 7.6 Information Handling \(Privacy and Confidentiality\)](#)].
25. For matters also relating to [2.4 Incident, Illness, Injury or Trauma](#) notification will also be required to be reported to the Regulatory Authority via the procedures in [7.7 Managing Notifications](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.12 Meaning of serious incident
 - R.84 Awareness of child protection law
 - R.85 Incident, injury, trauma and illness policies and procedures
 - R.86 Notification to parents of incident, injury, trauma and illness
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.174A Prescribed information to accompany notice
 - R.175 Prescribed information to be notified to Regulatory Authority

- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Child Protection Act 1999 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- Criminal Code Act 1899 (Qld)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
Version:	v.2023-1
Review Date	October 2024

Policy Group 3

Physical Environment

The services physical environment is **safe, suitable and provides a rich and diverse range of experiences** which promote children's learning and development.

Ensuring the physical environment suitable for play-based learning is critical to:

- contributing to children's wellbeing, creativity and developing independence
- engage children and support educators to facilitate a wide range of experiences
- keeping children safe
- creating/organising spaces to reduce the risk of injury.

The policies contained in this group set out the service's expectations for the physical environment and how educators can use practices to enhance it for children's learning and safety.

3.1 Space and Facilities Requirementss

Policy Statement

Payne Road OSHC will ensure the space and facilities used for the OSHC program are safe, stimulating and enable the provision of quality education and care. The service will work collaboratively to ensure the environment accessible to all children will positively contribute to their safety, wellbeing and development. The service recognises is the responsibility to ensure the environment and equipment used in providing care and education is safe, clean and in good repair.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.4 Sleep and Rest](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.5 Administration of First Aid](#)
- [3.2 Authority to Occupy Premises](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.12 Insurance](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• To establish the arrangement of space and facilities with the school is adequate to provide quality education and care.• Ensure the space and facilities used in providing education and care is consistent with Regulations.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor and respond to any issues relating to the repair, hygiene and safety of the facilities and the environment.• Collaborate with the Approved Provider, school and educators to identify opportunities for improvement.• Lead the procedure for requesting, comparing and sourcing of additional, repair of or replacement facilities.
All Staff	<ul style="list-style-type: none">• Monitor and report instances of issues relating to the repair, hygiene and safety of the facilities and the environment.• Supervise children to ensure the environment is contributing to children safety, wellbeing and development.

Procedures

Education and Care Facilities

The service will ensure the areas provided for education and care are:

- Reflective of the agreed indoor and outdoor spaces identified in the Service Approval.
- The spaces will be routinely monitored for comfort and safety, with educator and the Nominated Supervisor addressing any immediate issues to ensure children's safety and wellbeing.
- Adequate toileting and handwashing facilities for children and educators are readily available.
- Available and adequate facilities to cater for soiled clothing including hygienic storage.
- Adequate, safe and accessible drinking water and/or food will be provided at all times.
- Sufficient furniture and the environment will be organised in a manner that is developmentally appropriate for all children, it will be inclusive and adaptable to ensure participation by every child in the program.
- Areas located to display children's artwork and promote notices and communication for parents.
- Adequate space for children to engage in rest and/or quiet experiences.
- Indoor spaces are monitored for adequate ventilation, natural light and temperature that ensures the safety and wellbeing of children.

Fire Safety

The service will ensure the environment supports the protection of children from fire by:

- Keep emergency exits clear and unlocked at all times while the service is operating.
- Ensure emergency evacuation signs and posters are displayed, including the emergency evacuation floor plan displayed at each exit.
- Ensure all relevant fire safety equipment is maintained regularly (see - [3.5 Emergency and Safety Equipment](#))

Administration Facilities

The service will ensure adequate administrative space and facilities are available for the purposes of:

- Conducting the administrative functions of the service.
- Private and personal conversations with families.
- Providing rest area for staff and/or volunteers.
- A telephone being always accessible.
- Suitable storage space for valuable and personal items
- Adequate lockable storage facilities for equipment, tools, first aid kit, medication and relevant hazardous substances.
- Lockable cupboard or filing cabinet for all child and family information (including enrolment forms), educator records and any other confidential records.

Purchasing and Development

- Educators and families will be encouraged to identify suitable opportunities to address concerns with the facilities.
- The QIP will also identify opportunities to enhance the service's provisions and utilisation of their spaces.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.81 Sleep and rest
 - R.103 Premises, furniture and equipment to be safe, clean and in good repair
 - R.155 Interactions with children
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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Review Date	October 2024

3.2 Authority to Occupy Premises

Policy Statement

Payne Road OSHC must hold permission from Payne Road OSHC to occupy a premises for the purpose of conducting a centre based OSHC service, approved under the Education and Care Services National Law Act and Regulations. The permission to occupy the premises will be outlined in the documented Occupancy Agreement.

Related Policies

- [3.1 Space and Facilities Requirementss](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Coordinate the development and finalisation of the agreement between the service and the school administration.• Facilitate review of agreement as required.
Nominated Supervisor	<ul style="list-style-type: none">• Follow agreed arrangement and communicate issues to the Approved Provider

Procedures

The Approved Provider has the been proved with the authority to occupy the premises by the Principal of the School. The Approved Provider will maintain an occupancy agreement with the school for the continuation of service approval.

Where revision and updating of a licence agreement or other authority to occupy the premises is required, the P&C President will principally liaise with the school around these arrangements.

The authority to occupy and licencing agreements will follow Departmental guidelines and expectations.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.32 Condition on service approval—entitlement to occupy premises
 - R.103 Premises, furniture and equipment to be safe, clean and in good repair
 - R.107 Space requirements—indoor space
 - R.108 Space requirements—outdoor space .
 - R.109 Toilet and hygiene facilities
 - R.110 Ventilation and natural light
 - R.111 Administrative space
 - R.113 Outdoor space—natural environment
 - R.114 Outdoor space—shade
 - R.115 Premises designed to facilitate supervision
- National Quality Standard:
 - QA3 – Physical environment
 - QA7 – Governance and leadership.

Policy Controls	
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
Version:	v.2023-1
Review Date	October 2024

3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment

Policy Statement

To maintain the ongoing health and wellbeing of children, families, educators and community members, the service actively encourages and provides a smoke, drug and alcohol-free environment. This policy reflects the service's commitment to the health and wellbeing of all who persons who use or access the service.

The Approved Provider recognises its obligation to uphold *Education and Care Services National Regulation 82* in providing a tobacco, illicit substance, and alcohol-free environment.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [3.1 Space and Facilities Requirements](#)

Roles and Responsibilities

Approved Provider	• Ensure the service's environment meets the regulatory standard for the environment provided to children accessing the service.
Nominated Supervisor or Responsible Person	• Will provide day-to-day monitoring of compliance and respond to any instances of policy breaches.

Procedures

Service information for stakeholders (i.e. welcome information and handbooks) will include information regarding the service's *Non-Smoking, Illicit Substance and Alcohol-free Environment* requirements.

Appropriate no smoking and alcohol signage will be displayed in prominent locations around the school site to promote the expectation and law. As needed, visitors to the service will be informed about service's *Non-Smoking, Illicit Substance and Alcohol-free Environment* policy.

It is unlawful for any persons to be smoking within 5m of the school premises. The service will take appropriate action, including notifying the police should there be instances of non-compliance.

Managing Alleged Intoxication

To remove any doubt, no persons will be allowed to smoke on the school site. Likewise, all persons interacting with children will be free from the effects of any substances (illicit or otherwise). Any educator suspicious of the influence of any persons should report this information to the Nominated Supervisor immediately.

Where the Nominated Supervisor reasonably believes person may be intoxicated or otherwise under the influence of a substance, they will be immediately removed from duties and the Approved Provider notified. The specific procedures to manage these circumstances is set out in [4.7 Fit for Work](#) and [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations
 - R.82 Tobacco, drug and alcohol-free environment
 - R.83 Staff members educators not to be affected by alcohol or drugs
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA3 – Physical environment

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Tobacco and Other Smoking Products Act 1998 (Qld)

Policy Controls	
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
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Review Date	October 2024

3.4 Children's Toileting

Policy Statement

The service recognises the need to uphold the safety and dignity of all children whilst accessing toilet facilities. The service manages this with the acknowledgment that from time to time it may be developmentally appropriate that children may require additional support and assistance. The service's leadership seeks to ensure that the personal health, hygiene, safety and dignity of children and educators are supported.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [3.1 Space and Facilities Requirements](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure appropriate facilities and practices are established.
Nominated Supervisor	<ul style="list-style-type: none">• Collaborate with the Approved Provider to address any additional requirements to support the needs of children.• Monitor practices to ensure the safety, protection and dignity of children is maintained.• Ensure educators are supported to understand the practices and duties in support and supervising children's toileting practices and hygiene needs.
All Staff	<ul style="list-style-type: none">• Ensure practices are consistent with established procedures.• Respond to the needs of children to support hygiene and uphold each child's dignity and safety.• Ensure facilities are safe and hygienic through adequate cleaning and the sanitary storage of solid items.

Procedures

Educators will check the toilet facilities for safety and hygiene prior to the commencement of each session including before school, after school and vacation care. Education will ensure the facilities are hygienic, functional and free from any identifiable hazards ([Outdoor Safety Checklist](#)).

Access

Payne Road OSHC has separate staff and child toilets available. Educators (and any other relevant adult) are not permitted to use the children's toilet facilities during operating hours. Likewise, children are only permitted access to the staff toilets by request.

Children may access toilets on the outside of the Activities Building at any time. If necessary, children may need to access additional toilets in the main block.

General Supervision and Transitioning to Toilets

- The design of the school site and OSHC building allows reasonable visual supervision of the toilet block around the Activity Building.
- Educators will escort and supervise children by escorting them to the main school toilet area, if necessary. Children will be escorted in small groups.
- Educators will monitor and communicate the transition of children to and from the toilet block.

Supporting Children

- Educators may be required to support the personal hygiene of children with toileting when it becomes known to them that a child is in need of assistance.

- Educators will notify the Nominated Supervisor (or Responsible Person) when they become aware a child has a personal hygiene incident (i.e has soiled themselves). In the first instance the parent/caregiver will be notified via phone and will have the opportunity to collect the child.
- There are suitable shower and cleaning facilities available when required. Children will be encouraged to be independent in self-care. However, where a personal hygiene incident necessitates assistance and, where possible, a second educator will be called to be present during the toileting support.
- Educators will ensure a child's dignity, wellbeing and safety are supported when managing personal hygiene incidents. Communication and conduct will be reflective of respect and discretion. Gender and developmental consideration should be given to the situation to ensure the most appropriate educator manages the situation.
- Any soiled clothing will be placed in a plastic bag and temporarily stored in the appropriate container until the child is collected from the service.
- Families may be requested to provide spare clothes or other product if routinely necessary to support a child's hygiene.

Additional Support Needs

- Educators should understand their role and have suitable skills to support children and uphold their safety and dignity. Staff will be provided with training in the support of children with toileting issues, particularly in the case of children with high support needs. Training and instruction can be delivered through written communications, direct training and/or meetings. Educators should discuss any concerns or requests for additional training with the Nominated Supervisor.

Escorting children to the toilet (during excursions)

- At times, additional toilet facilities outside of the service building may need to be accessed (or on excursions).
- Educators will ensure these have been inspected for hygiene and hazards prior to any children's access.
- Educators will observe practices to ensure that they are not placing themselves in a compromising situation while escorting children to the toilet area and will ensure that a minimum of two children are escorted at any one time.
- Educators will ensure that the service communication procedures are followed when escorting children to the toilet in another area.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.109 Toilet and hygiene facilities
 - R.115 Premises designed to facilitate supervision
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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3.5 Emergency and Safety Equipment

Policy Statement

Personal safety and security of children, educators, volunteers and all persons on the premises, are of prime importance whilst in attendance at the service. Payne Road OSHC, therefore, takes a proactive approach to managing emergencies, developing emergency procedures and equipping educators and children with sound knowledge of adequate response and resources to support a response.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the service is equipped with adequate and risk-assessed equipment to respond in the event of an emergency.• Ensure mechanisms to support the maintenance is developed and actioned.
Nominated Supervisor	<ul style="list-style-type: none">• Manage the inspection of emergency and safety equipment.• Coordinate the replacement of any used or damaged equipment in a timely manner.
All Staff	<ul style="list-style-type: none">• Report any concerns or signs of wear or damage to the Nominated Supervisor• To follow the instructions provided around the use of relevant emergency and safety equipment.

Procedures

The purchasing and selection of safety and emergency equipment will occur as the result of legislative requirements (fire blankets, extinguishers etc.) or as identified in the risk-assessment of emergency plans.

Emergency Equipment

- Any equipment used in responding to an emergency (alarms, communication devices etc.) will be checked for function and working order each month by the Nominated Supervisor or delegate.
- Emergency equipment resources will only be used to respond to an emergency situation.
- Replacement or repair of any faulty equipment will be a priority. The Nominated Supervisor is responsible for coordinating this task. Any ongoing issues or alternative equipment should be communicated to the Approved Provider for approval or support.

Fire Safety Equipment

- School administration will coordinate the inspection of any regular maintenance of fire safety equipment (fire blankets, extinguishers etc.).
- Fire Safety equipment will only be used in the manner instructed (or trained) and only if safe to do so.
- Any staff noticing equipment that has been used, broken or if they suspect its full function has been impaired will report this concern to the Nominated Supervisor. All equipment will be replaced or repaired as a priority.
- Any fire safety equipment used to respond to a fire will be decommissioned (single use only) and replaced by new, or where possible, recharged equipment.

Monitoring and inspection of safety equipment will be documented and recorded in the Health and Safety Register. Any issues will be reported to the Approved Provider immediately with an action plan to address the concern raised. Typically the Nominated Supervisor will be appointed to ensure any actions are carried out as planned.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations
 - R.89 First aid kits
 - R.97 Emergency and evacuation procedures
 - R.103 Premises, furniture and equipment to be safe, clean and in good repair
 - R.104 Furniture, materials and equipment
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld) 2011
- Building Fire Safety Regulation 2008
- Managing the Work Environment and Facilities Code of Practice
- First Aid in the Workplace Code of Practice
- Fire and Emergency Service Act 1990 (Qld)
- Building Fire Safety Regulation 2008 (Qld)

Policy Controls	
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Policy Group 4

Staffing Arrangement and Employment

Staffing arrangements foster **friendly, courteous interactions** and give children access to **a secure and predictable setting**.

Children are encouraged to actively participate in the learning programme by qualified and experienced educators. An atmosphere where children feel emotionally safe, secure, and happy is influenced by the connections among all staff members.

The emphasis of Quality Area 4 is on providing educators with the knowledge and training necessary to build trusting, respectful relationships with children, establish predictable learning environments, and motivate children to actively participate in the program. An excellent service thrives on a cooperative, ethical culture where professional norms govern all elements of operations.

Adjacent to arranging staff are the matters that govern the employment relationship. This policy group combines both Quality Area 4 requirement and employment expectations.

4.1 Recruitment and Employment of Educators

Policy Statement

Payne Road OSHC educators are central to the quality of education and care provided to children to attend the service and therefore, recruitment and selection practices should uphold the importance of this critical process. Payne Road OSHC is committed to being an equal opportunity employer, ensuring fair and equitable employment practices are undertaken to recruit and select its employees. Recruitment decisions will be lawful, transparent and non-discriminatory. Selections will be based on merit with candidates' suitability demonstrated through identifying their level of knowledge, skills and ability against pre-determined selection criteria.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Appoint suitable persons for employment at the service.• Ensure processes for selection are fair and meritorious.
Nominated Supervisor	<ul style="list-style-type: none">• Work collaboratively with the Approved Provider to ensure suitable candidates are recommended and selected for appointment.• Lead the orientation and induction of educators/employees.• Maintain records and documentation related to recruitment and employment.

Procedures

Pre-Recruitment Assessment

Job Analysis

1. Position descriptions will be developed for all employment position.
2. Position descriptions will outline the key functions of the roles and identify essential and desirable selection criteria.
3. The composition, quantity and engagement of the service's staffing arrangements will be decided by the Approved Provider.
4. Where possible recruitment activities will be as a result of workforce planning, identifying the upcoming needs of the service.
5. All employment and recruitment activities will be instigated with the Approved Providers expressed approval.

Recruitment Activities

6. The Approved Provider will ensure a fair and lawful (non-discriminatory) recruitment procedure is undertaken for all employment.
7. Promotion and advertisement of available position can include:
 - Local newspapers,
 - Job seeking website,
 - Job boards on university or QCAN website, or

- In the school newsletter.
- Advertisements will include a description of the position, and an outline of the selection criteria. Candidates will be asked to write a cover letter addressing the selection criteria and provide a copy of their resume.
 - The service will acknowledge receipt of all applications and communicate an expected timeline on when a short-list will be made.

Short-listing Candidates

- Unless otherwise stipulated, the Nominated Supervisor will be responsible for coordinating the short-listing of candidates with support from key service leaders.
- Candidates failing to be shortlisted will be provided communication on this at the earliest possible convenience.
- Applicants will be given a fair and equitable chance to compete for an appointment based on their merit. The selection of candidates will be lawful at all times, ensuring protected attributes are never the basis for decision-making (i.e. discrimination), this includes the following characteristics:
 - sex, age, race, gender identity or sexuality
 - relationship status
 - pregnancy, breastfeeding, family responsibilities or parental status
 - impairment
 - religious belief or activity
 - political belief or activity
 - trade union activity
 - status as a legal sex worker.
 - It is also illegal to discriminate against someone on the basis of an association with a person identified by one of these characteristics.

Interviewing

- Short-listed candidates will be notified to their progression and be invited to interview for the position.
- Interview will be conducted by the Approved Provider or a relevant delegate.
- Interview questions based on the selection criteria for the position will be developed and reviewed prior to the interview date and agree to by the selection panel and/or Approved Provider.
- Interviews will be held in a manner to be fair and equitable.

Selection

- Unless directly appointed by the Approved Provider, the delegates conducting interviews will make a recommendation to the Approved Provider outlining their reason for selection.
- Before offering the position to the preferred candidate, if not already completed, a delegated person will confirm the suitability of the candidate via at least one, preferably two, referee checks.

Appointment

- Once endorsed by the Approved Provider, the selected candidate will be offered the position and negotiate starting dates.
- The newly appointed employee will be sent:
 - a letter of offer (employment agreement),
 - code of conduct,
 - a request for copies of relevant qualifications, and
 - relevant blue card forms (application or link form), including a request for copies.
- Unsuccessful interviewees will be notified as soon as possible by a nominated person from the selection panel.

Orientation and Induction

- All new employees will be given (at least) a 2 hours induction to ensure they are equipped and supported to understand and fulfil their role.
- Induction will cover, but is not limited to:
 - Receiving the Payne Road OSHC Employee Welcome Information Pack, containing:
 - Employee Handbook.
 - Employee Record Form.
 - Position Description.

- Details and location of the Award.
 - National Employment Standards Information Statement
 - Union Information.
 - Confidentiality/Privacy Agreement.
 - Child Protection Information Sheet.
- Location and orientation of:
 - The service's policies and procedures.
 - National Quality Standard for Education and Care Services.
 - My Time, Our Place - Framework for School Age Care in Australia.
- A walk-through of the service, outlining the key facilities and emergency plans.
- A discussion with the Nominate Supervisor (or delegate) to outline and introduce:
 - The other educators in the service and their roles.
 - Duty of care responsibilities and supervision practices.
 - Rostering and communication procedures.
 - Programming and documentation procedures.
 - Work Health and Safety procedures and responsibilities.
- Each educator's first shift will be paired with a suitably experienced educator to 'shadow' them through the role and expectation. The Nominated Supervisor will meet with the new educator at the end of the shift to debrief.

Conflicts of Interest and Recruitment

The service may at times employ family members or personal friends of employees. The following procedures will apply in addition to the above employment procedures:

1. There will be no preferential treatment for family members/personal friends in the employment relationship; such conduct will be taken seriously, and disciplinary action will be followed if a conflict of interest has not been managed transparently or according to procedure.
2. No appointment of a family member or personal friend will be made without following the agreed recruitment process.
3. All candidates will be asked to disclose any actual or perceived conflicts of interest as part of routine interviewing questions.
4. Persons with responsibility in decision-making are additionally responsible for disclosing any actual or perceived conflicts of interest prior to undertaking interviews of the candidate. These disclosures are to be made to the Approved Provider. The Approved Provider will appoint a suitable alternative delegate where they see relevant.
5. Any subsequent appointment processes will not involve the relevant employee and all reference checks will be made by a nominated person who is independent of the relationship.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.169 Offence relating to staffing arrangements
 - s.170 Offence relating to unauthorised persons on education and care service premises
- Education and Care Services National Regulations:
 - R.145 Staff record
 - R.147 Staff members
 - R.149 Volunteers and students
 - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Industrial Relations Act 2016 (Qld)

- Child Employment Regulation 2016 (Qld)
- Parents and Citizens Associations Award – State 2016

Policy Controls

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4.2 Working with Children Check (Blue Card) Management

Policy Statement

The service must ensure individuals associated with the operations and working directly with children hold a positive notice (or exemption) Blue Card (Working with Children Check). The service will maintain records to ensure the probity of all relevant persons and compliance with statutory obligations.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure a blue card register is maintained at the service.• Report relevant notification to Blue Card Services.
Nominated Supervisor	<ul style="list-style-type: none">• Maintain the service's blue card register• Support personnel with lodging relevant forms and notifications, including warning persons that it is an offence to apply for a blue card if they are a disqualified person.
All Staff	<ul style="list-style-type: none">• Must report changes of police information to the service

Procedures

Positive Notice Requirements for Employees, Volunteers and Governance

All employees, volunteers and executive members (Approved Provider members) of management must hold a current and valid Positive Notice for Child Related Employment Blue Card before starting any engagement.

All prospective paid employees will not be engaged to work at the service without being in receipt of a current blue card. Evidence of a valid 'paid' blue card / or a valid volunteer blue card with receipt that a form has been submitted to transfer from Volunteer to Paid, must be submitted to the service before being engaged in any employment.

Linking Blue Cards to the Organisation

All individuals requiring a Blue Card will be linked to the organisation. Once set-up with an Organisation Portal, the Approved Provider or Nominated Supervisor will be able to link an employee to the organisation.

This must be done prior to starting at the service.

The Approved Provider or delegate will be responsible for allowing and managing Organisation Portal access.

Blue Card Register

A blue card register will be maintained via the Blue Card Organisational Portal. The register will be referred to by the Nominated Supervisor/Administrator on a regular basis to track expiry dates.

Renewal Monitoring

The Nominated Supervisor will confirm the upcoming Blue Card expiries on the first day of each month. By using either the Organisation Portal or phoning Blue Card Services (1800 113 611) all Blue Card with expiries

within the next 8 weeks will have the renewal status confirmed. As long as an individual submits their renewal application before their current card expires, they will be able to continue in their relevant role.

Police History Changes

It is no requirement for organisations to notify Blue Card Services of employee policy history changes, Blue Card Services will notify Employers when appropriate.

Exiting Employees and Volunteers

The Nominated Supervisor (or where relevant, the Approved Provider) will notify Blue Card Services when a person leaves their engagement with the service via the Organisational Portal (or other appropriate means in the absence of portal access)

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.169 Offence relating to staffing arrangements
 - s.170 Offence relating to unauthorised persons on education and care service premises
- Education and Care Services National Regulations:
 - R.145 Staff record
 - R.147 Staff members
 - R.149 Volunteers and students
 - R.151 Record of educators working directly with children
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook

Policy Controls	
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4.3 Volunteers and Students

Policy Statement

Volunteers, includes students who are in an unpaid role and volunteering for skill development (i.e. on practicum placement) can be a highly valued resource. These individuals can add a positive contribution to the care and education provided by the service. The Approved Provider is committed to providing quality management all people in a child related to roles, including those in a volunteer capacity. The Service also recognises the importance and duty to ensure all individuals engaged in child related work should be a suitable persons to do so.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011* 168 (2)(i), 149 and 177.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure procedures are created to monitor and maintain suitable management on volunteers to uphold the safety and wellbeing of children.• Ensure records are maintained to demonstrate compliance.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure compliance with organisational and legislative standards.• Lead a suitable suitability assessment and induction to support a volunteer's engagement, learning and development.• Complete documentation and maintain relevant records.
Responsible Person	<ul style="list-style-type: none">• Monitor the conduct of volunteers and interaction with children.• Support learning and development.
All Staff	<ul style="list-style-type: none">• To support interactions with children and guide learning and development.• Ensure the safety and wellbeing of children through supporting volunteer's understanding of procedures, expectations and interactions.• Report any concerns immediately.

Procedures

Blue Card (Working With Children Check)

Volunteers must hold a blue card before they begin at the service in any capacity. An application to 'Link a cardholder to the organisation' will be lodged to Blue Card Services upon commencement.

Suitability and Induction

The Nominated Supervisor will meet with any persons interested in volunteering before agreeing to their engagement. The Nominated Supervisor will be satisfied the volunteer is suitable (demonstrates expected knowledge, skill and abilities) to care for children attending the service.

An induction process will be undertake prior to participating in the service and interaction with children. The topics covered in the induction include (but are not limited to):

- The Service's Philosophy including its commitment to an environment which is safe and friendly to children;
- The location of the Service's Policy and Procedure Manual, including an outline of key procedures;

- Procedures to follow when harm is disclosed or identified;
- Feedback and Complaints procedures;
- Emergency and Evacuation Plans
- Work Health Safety Manual

Conduct and Engagement

1. All Volunteers will be asked to acknowledge their understanding and commitment to the Code of Conduct. Volunteers will be held to the same standard of behaviour as all employees.
2. Volunteers will be supported and guided by other Educators while participating in the service, especially during the initial orientation shifts. Where possible the Service will pair the volunteer with an Educator to mentor and model the role and expectations.
3. If assessed as being both suitable and competent, volunteer workers may be counted towards the Educator-to-child ratios for the service, provided they meet the qualification requirements.
4. Volunteers under the age of 18 must be fully supervised at all times.

Record of Volunteer Details

The Nominated Supervisor is to record the personal details of all volunteers including – full name, address, and date of birth.

The Nominated Supervisor is to request and keep a volunteers timesheet of attendance (recording the details of the date and time each day the volunteer or student participated).

Legal and Regulatory Foundation

National Quality Framework

- *Education and Care Services National Law:*
 - s.169 Offence relating to staffing arrangements
 - s.170 Offence relating to unauthorised persons on education and care service premises
- *Education and Care Services National Regulations:*
 - R.145 Staff record
 - R.149 Volunteers and students
 - R.151 Record of educators working directly with children
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA4 – Staffing arrangements

Additional Regulatory Context and Guidance

- *Working with Children (Risk Management and Screening) Act 2000*
- *Work Health Safety Act 2011 (Qld) 2011*

Policy Controls

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4.4 Code of Conduct

Policy Statement

The Approved Provider expects that all people connected to the service, in particular employees and other individuals interacting with children to conduct themselves in a manner that is consistent with a high standard of professionalism and ethical practice. Our Code of Conduct serves as a roadmap for professional and ethical behaviour. It is more than just a set of rules; it's a statement of our collective values, the principles that guide our interactions, and the standards against which we measure all conduct. By adhering to this code, personnel are not merely complying with a set of rules, but actively contributing to a culture of respect, integrity, and high-quality care and education.

Why a Code of Conduct is Essential

In the fast-paced and diverse world of education and care, it is crucial to establish a foundational framework that fosters a nurturing, inclusive, and secure environment for all involved. A Code of Conduct serves as this essential framework, outlining the behaviour standards and ethical considerations that underpin a positive and productive community. From employees to volunteers, from parents to the children we serve, everyone benefits from clear guidelines that delineate what is expected, what is encouraged, and what is unacceptable.

Additionally, the protection of children and the contribution to their wellbeing is a fundamental principle of the service. The nature of being a stakeholder to an education and care service means the fostering of positive relationships between adults, children and their families. It is critically important that in forming and maintaining these relationships and interactions we do not compromise children and young people's welfare. Therefore, the service has developed a clear outline of expected behaviour to support positive interaction and safety.

The Code of Conduct also captures the behaviours when interacting with children and young people, as required by the Child and Youth Risk Management Strategy. The service's operations positions educators and others to build professional relationships with children. There is a duty with this responsibility that the interactions foster children's safety and wellbeing.

A Shared Responsibility

Creating a respectful, supportive, and safe environment is a responsibility that we all share. It requires active participation and collaboration from every individual. While high standards of behaviour are expected for all employees, those in manager/advisory roles have even higher expectations to lead a culture that reflects a positive and professional attitude of their work, act collegially, and support the needs and safety of the children and families accessing the service.

Compliance and Accountability

Adherence to this Code of Conduct is not optional; it is mandatory for all staff, volunteers, students on placement, and where relevant, parents. Failure to comply exposes families to risks, undermines the service's values, and impacts the quality of the educational and care we provide. The service maintains systems to ensure compliance, including but not limited to reporting mechanisms, investigation processes, and disciplinary actions.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011* (168 (2)(i)) and the service's *Child and Youth Risk Management Strategy*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • To establish a Code of Conduct of the service's employees and relevant people that will have the opportunity to interact with children and young people • Ensure all employees are communicated and supported to meet the expectations of the Code of Conduct • Investigate instances where the Code of Conduct has not been upheld by employees.
Nominated Supervisor	<ul style="list-style-type: none"> • Orientate staff to the Service's Code of Conduct when beginning employment. • Monitor Educator and staff behaviour, guide reflection of the Service's expectation for employees and respond in instances where there are concern about employee conduct • Model appropriate standards of behaviour • Advise the Approved Provider of concern or allegations of employees not meeting the Code of Conduct
Responsible Person	<ul style="list-style-type: none"> • Monitor Educator and staff behaviour and respond to instances of concern about employee conduct, following reporting guidelines. • Model appropriate standards of behaviour • Advise the Approved Provider of concern or allegations of employees not meeting the Code of Conduct
All Staff	<ul style="list-style-type: none"> • Monitor the behaviour of peers, report any concerns identified. • Ensure behaviour is consistent with the expectations of the Code of Conduct

Procedures

Employee Code of Conduct Application

1. Employees will be provided with both relevant copies of the service's Code of Conduct prior to commencing employment or where the policy is updated.
2. Employees must demonstrate an understand and commitment to the Codes of Conduct as they will be expected to consistently uphold the agreement during their employment with the service.
3. The Nominated Supervisor will be primarily responsible for monitoring and immediately addressing the concern of educator and volunteer conduct.
4. Issues relating to educator conduct will be notified to the Approved Provider.
5. Staff with concern about a manager's (Nominated Supervisor) conduct are encouraged to communicate directly with the Approved Provider.
6. Breaches to a Code of Conduct will be taken seriously. Allegations of breaches of the Code of Conduct by employees will be managed through underperformance and misconduct proceedings ([4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)), which may result in action taken by the Approved Provider up to and including termination.

Conduct for All Persons Interacting With Children

- The service expects all persons interacting with children connected to the service will display the highest level of professionalism, respect and safety.
- While aspects of the Code relate to employment, anyone with paid or unpaid responsibilities for the care of children, will be expected to act consistently with the aspects of interaction.
- Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or discipline (as appropriate) up unto and including suspension or exclusion from the service.

Compliance Breaches

The service expects all persons must comply with the conduct outlined in this policy. Likewise, any persons suspecting breaches of this code are to report details to the Nominated Supervisor or Approved Provider for a response.

Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or discipline (as appropriate) up unto and including suspension or exclusion from the service, as relevant to their role.

Code of Conduct

1. General Obligations

The conduct of managers, employees and volunteers (personnel) should uphold the P&C's commitment to safety and professionalism. In doing so, all relevant persons should:

- Comply with the organisation's policies and procedures and legislative requirements and obligations.
- Perform duties in a responsible and professional manner.
- Promote the organisation's reputation and the value to the broader community.

2. Interactions and Relationships with Children

Personnel are expected to act in a manner that upholds the safety, protection, and respect of children, including:

- Maintaining children's dignity and rights.
- Guiding and supporting children toward acceptable behaviour and choices.
- Not compromising professionalism and boundaries of children and their families, including pursuing interactions and relationships with families that might compromise the integrity of your position.
- Never expose children to
 - Inappropriate, harsh or sexualised language, or
 - physical punishment.

3. Professional Relationships and Interpersonal Behaviour

Personnel are expected to foster sound working relationship, as they will:

- Treat everyone with courtesy, respect, consideration throughout their interactions and communication with others.
- Be sensitive and responsive to the dignity and rights of others.
- Refraining from display of behaviour that impacts on the rights, health or safety of others, including not engaging in any form of:
 - Harassment
 - Discrimination (e.g. based gender, age, race, impairment, disability, religious beliefs, political beliefs, sexual orientation or identity)
 - Bullying
 - Victimisation
- Act in good faith and honesty within the level of responsibility and delegation placed within your position.

4. Teamwork

Personnel are expected to build cooperation and partnership, and should:

- Foster teamwork and collegiality among all internal stakeholders, expressing gratitude to the effort and contribution others bring.
- Consider the impact on your decision and behaviour on the wellbeing of others – refrain from acting in a manner that would reasonably distress, intimidate, undermine or threaten a colleague or stakeholder.
- Display a constructive attitude when navigating conflict and grievances with others.
- Refrain from acting in any way that would unfairly harm the reputation or position colleagues.

5. Privacy and Confidentiality

Personnel are expected to maintain the organisation's commitment to privacy and confidentiality, particularly around the organisation's sensitive and personal information, and should:

- Not share or disclose information that is not consistent with a fair, just or reasonable purpose.
- Ensure that information collected by the organisation is only used for the purpose intended.
- Ensure the security of information is maintained.

6. Stewardship

Personnel are expected protect the resources and finances of the organisation, and should:

- Use the organisation’s resources properly and responsibly for legitimate purposes only
- Strive to obtain value for the organisation’s purchases and spending.
- Avoid waste and secure organisation’s belongings against theft or fraud.

7. Professional Judgement

Personnel are expected to be professional and should:

- Perform duties diligently, conscientiously and with integrity to the best of your ability.
- Maintain knowledge of professional and ethical standards relevant to your area of expertise — engaging learning and development opportunities to enhance your capacity to perform, as required.
- be punctual, dressed appropriately, respect the responsibilities of your role

8. Conflicts of Interest

Personnel are expected to act ethically for the best interest of the organisation and should:

- Not take improper advantage of any official information gained in the course of our employment.
- Ensure that financial or non-financial interest does not conflict, or appear to conflict, with or compromise the obligations and requirements of your duties and performance.
- Avoid actual or perceived conflicts of interest through transparency in decision-making and declaring potential conflicts of interest for impartial management.

9. Safety and Health

Personnel are expected to uphold a safe and healthy environment and should:

- Uphold a duty of care, especially where services care for the needs of children.
- Take responsibility for the health and safety of yourself and others when carrying our duties.
- Present to your role with adequate fitness, alertness and hygiene to perform the duties.

10. Fairness and Resolution

Personnel are expected to deliver a fair and reasonable response to concerns of others and should:

- Facilitate a fair process for responding to compliance, grievances and disputes.
- Uphold ethical decision-making to promote fairness, justice and collaborative partnerships for stakeholders.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.155 Interactions with children
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - Quality 2 – Children’s health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership

Policy Controls	
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Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000 (Qld)
- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations

4.5 Employee Performance Review and Support

Policy Statement

Payne Road OSHC is committed to delivering quality education and care through providing supportive management to continually develop the performance and practice of its educators. Ongoing and collaborative evaluation of employee's performance will support planning that is focused on building upon the strengths and individual contributions of each employee. Employee performance will be formally and regularly reviewed and evaluated. These formal procedures will be enhanced through informal support and feedback throughout the employee's engagement.

The service also recognises its role in developing employees as part of the National Quality Standards, Quality Area 7 – Governance and Leadership. Individual plans will be created and implemented to support effectively direct every employee's learning and development opportunities.

Related Policies

- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.17 Self-Assessment and Quality Improvement](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Lead the performance review and professional support of the Nominated Supervisor.• Establish procedures to ensure all Payne Road OSHC have plans to enhance their knowledge, skills and ability relevant to their individual performance.
Nominated Supervisor	<ul style="list-style-type: none">• Coordinate and undertake regular and ongoing supervision and developing planning of employees.• Collect and collate relevant observations and examples to provide relevant feedback to the performance of staff.• Ensure supportive and collaborative plans are implemented as agreed.
All Staff	<ul style="list-style-type: none">• Complete self-evaluation of performance and collaborate with service leaders in the planning and implementation of professional development activities.

Procedures

The procedures outlined in this policy apply to further developing the performance and practice of educators (and other relevant employees). Instances of misconduct and underperformance are managed through the steps outlined in the policy and procedure, but rather – **4.8 Employee Counselling and Disciplinary Actions**.

Performance Supervision Preamble

The Nominated Supervisor will be responsible for coordinating performance supervision meetings (review and planning meetings) to ensure all educators (or other relevant OSHC staff) receive an opportunity to understand and contribute to their performance. It may be appropriate that other service leaders are delegated the task of facilitating performance supervision meetings.

Employees will receive information on the service's performance supervision and management practices in their employee handbook.

The procedures to develop and support performance should empower employees to identify their unique contributions to the service and highlight methods their practices can be enhanced. Payne Road OSHC will actively seek to undertake a process that builds and empowers employees, rather than delivering a remedial or corrective approach to developing performance and skills.

Employee performance and their practices will be framed by their position description, the OSHC Professional Standards and any other relevant document or framework.

Performance Evaluation

Initial Performance Review and Planning

1. The Nominated Supervisor will inform the employee of a time to meet to discuss their employment, their performance and development opportunities. Communication will be positive and time set aside should be adequate for feedback, collaboration and a discussion in identifying development opportunities.
2. The initial performance review and planning meeting will occur between 2 to 3 months after initial employment - once induction learning material has been completed and as a function of finalising an employee's initial probation. Where there are concerns around an employee's performance and their suitability to be engaged beyond the probation period – policy [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#) will be followed.
3. In preparation of the performance supervision meeting, each employee will be provided with a copy of the OSHC Professional Standards Self-Assessment Tool to complete and forward to the Nominated Supervisor (or delegate) prior to the meeting.
4. A performance meeting will be coordinated to discuss the employee's performance and induction.
5. The meeting will be facilitated in a manner that provides discussion and collaboration. The Nominated Supervisor will come prepared with relevant feedback, including observations and examples. The format of each meeting will have three broad topics:
 - i. Identifying the person's area of strength, skills, and ability ('what has gone well?')
 - ii. Identifying areas of development, growth or vulnerability ('what are the opportunities for development?')
 - iii. Collaborating a plan for learning, development and support ('what needs to happen?')
6. The Nominated Supervisor (or delegate) is responsible for documenting the main points of the meeting and the agreed actions into a plan.
7. Action items should be specific and should outline who is responsible for coordinating specific steps. Approval for paid professional development session will need to be approved by the Approved Provider.
8. Each plan will state a date of review. Typically this will be six months. However, this may be negotiated to an alternative timeline where needed.
9. The educator will have an opportunity to review the draft and add any comments before being signed and agreed.

Interim Review

1. The interim review will be planned to occur around the midpoint of the plan's implementation.
2. The plan will outline an interim review date, where the educator and a service leader will have the opportunity to amend any action items if there has been significant change or actions are not meeting their intended aim.

Ongoing Performance Reviews and Planning

1. Employee performance will be monitored through implementing an ongoing review process to reflect and support performance.
2. Each ongoing review will provide an opportunity to reflect and evaluate the previous learning and development opportunities, as well as current performance.
3. The ongoing supervision meetings will include:
 - Self-assessment prior to a supervision meeting
 - Feedback and work examples
 - Supervision meeting identifying of strengths, aspirations and areas for improvement; and
 - A written learning and development plan

Nominated Supervisor Review and Planning

- 1. The Approved Provider will appoint an appropriate delegate to lead the review and planning of the Nominated Supervisor.
- 2. The Nominated Supervision's performance review will follow a similar procedure as all other employees.

Privacy and Confidentiality

- All plans will be stored securely in the respective employee file (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).
- Employees will be provided with a copy of each of their plans, once signed and finalised.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Policy Controls	
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4.6 Employee Qualifications – Monitoring Progress

Policy Statement

The service seeks to ensure that all employees enrolled and studying towards relevant qualifications are monitored and supported as they progress through their studies. This ensures that the service strives towards providing a suitably qualified level of educators and maintain compliance with Education and Care Service National Regulations (10 & 299A) for rostering of staff working directly with children.

Related Policies

- [2.2 Supervision and Educator Ratios](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.17 Self-Assessment and Quality Improvement](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish processes to monitor and record the progress of employees' qualifications.
Nominated Supervisor	<ul style="list-style-type: none">• Coordinate the recording of progress of employees and maintenance of documented evidence.• Liaise with employees and the Approved Provider where issues relating to the progress of employees arises.
All Staff	<ul style="list-style-type: none">• Submit relevant evidence of qualification progress to the Nominated Supervisor.

Procedures

Employee Qualification and Study

- Employee records gathered during recruitment and induction will document the employee's current qualification enrolment.
- An employee's suitability and employability may be dependent on their continual progress (*actively working*) towards completing their relevant qualification.
- Employees are to notify the Nominated Supervisor when there has been a change in their study/qualification commitment or status. The Nominated Supervisor will notify the Approved Provider of any significant issues or relevant changes.
- Failure to reasonably notify the Nominated Supervisor will be treated seriously, and disciplinary action may be taken (see [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)).

Evidencing Progress

- All employees will be required to evidence the progression of their study and work towards their qualification.
- Typically, this will be through providing a copy of the transcript at the conclusion of each semester (every six months).
- Where this is not suitable, alternative agreements will be arranged with the Nominated Supervisor before the anticipated date that qualification progress would be supplied.

Addressing Changes in Qualification Progress

- Employees who are unable to fulfil their role due to change in their qualification status through no longer being classed as 'actively working towards' (*National Regulation 10*), may be subject to a review of their engagement with the service (see [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)).

Records

- All records and evidence supplied to the service will be stored and maintained securely in the respective employee file (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.10 Meaning of actively working towards a qualification
 - R.147 Staff members
 - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Parents and Citizens Associations Award – State 2016

Policy Controls	
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4.7 Fit for Work

Policy Statement

The service seeks to uphold the safety of all children, community members and employees. To ensure the health, safety and compliance, the service will require all employees are fit and competent to fulfil their duties. The Approved Provider recognises there are common elements that can impact and employee's capacity to safely attend work, including being affected by:

- fatigue
- alcohol and/or other substance(drug) use
- medical fitness (if required for a specific role)
- mental health and wellbeing

All employees are required to report to their relevant manager if they are not in a state (sufficient level of fitness) to attend work. Any employees who present as unfit for work will be stood down with management action to identify the concerns.

The Approved Provider recognises their obligation to comply with Education and Care Services National Regulations 82 & 83.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure established expectations and processes are in place to ensure employees are fit for duty.• Manage and oversee concern about employee presentation and suspension from work.
Nominated Supervisor	<ul style="list-style-type: none">• Be responsible for fairly monitoring and assessing the fitness for work of employees• Immediately stand down any employee suspected to be under the influence of alcohol, other drugs, or where it is not safe for them to continue their role.
All Staff	<ul style="list-style-type: none">• Ensuring they do not present for work in an unfit capacity including under the effects of alcohol, other drugs, or fatigue.• Immediately notifying the Nominated Supervisors of concerns of their fitness for work• Notifying the Nominated Supervisors, or Responsible Person of suspicions colleagues or other individuals are believed to be unfit for work

Procedures

Fatigue

The Nominated Supervisors is responsible for ensuring roster cycles are monitored and reviewed to address the potential for fatigue, especially among employees engaged in split shifts and/or potentially hazardous activities.

Where an employee is not fit to present to work due to fatigue, they are required to notify the Nominated Supervisor or Responsible Person immediately for the management of the roster. Employees should not present to work where they believe they do not have the capacity to fulfil their duties.

Alcohol and Substances

An employee must not be under the influence of alcohol or any other substance while engaged in their duty. The Approved Provider expects that all employees will not present themselves for work after consuming alcohol or other influencing substance (illicit or not).

Where the employee cannot fulfil their role because they have consumed alcohol, they are to immediately notify the Nominated Supervisor, Responsible Person, or the Approved Provider. The relevant manager will follow the roster contingency to find a replacement staff member. Under no circumstances is an employee who has consumed alcohol or influencing substances present for work.

Suspicion of Employee Being Under the Influence

Any employee being suspicious of a colleague (or relevant personnel) being under the influence of alcohol or other substance should report this concern to the Nominated Supervisor or Responsible Person immediately.

Indications of a person being under the influence include:

- Slurred or impaired speech;
- Being aggressive in manner;
- Staggered, jerky movements, could seem uncoordinated;
- Heavy eyes and/or flushed face; and/or
- A dull, tired appearance

The Nominated Supervisor or Responsible Person will assess the presentation of the employee (or relevant person). Where the Nominated Supervisor or Responsible Person holds a reasonable suspicion an employee is under the influence they are to immediately stand down the employee and notify the Approved Provider

The Approved Provider determine if the employee should be directed to take an oral or urine test for alcohol or substance at a medical centre. Costs of this test will belong to the Approved Provider.

Where an employee refuses to complete the drug or alcohol test, the Approved Provider will view this as a failure to follow a reasonable and lawful instruction, which may result in disciplinary action up to and including termination.

Prescription Medication

Any drugs prescribed by a medical practitioner must be used in accordance with medical advice. Any non-prescription drugs must be used in accordance with manufacturers' recommendations. If an employee is taking prescription or non-prescription drugs, which could cause drowsiness or otherwise affect their fitness for work, they must advise the Nominated Supervisors so that their ability to work safely can be monitored. If necessary, medical opinion may be obtained.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
 - R.82 Tobacco, drug and alcohol-free environment

- R.83 Staff members educators not to be affected by alcohol or drugs
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- National Principles for Child Safe Organisations

Policy Controls

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4.8 Employee Underperformance, Misconduct and Disciplinary Actions

Policy Statement

The service acknowledges the need to adequately manage employees to ensure quality care and high standards of safety for children. When responding to instances of employee underperformance or misconduct, the Approved Provider and respective service leaders will respond to performance issues promptly, and in a manner that supports the principles of fairness, natural justice and is compliant with legislative and relevant industrial instruments. The service recognises performance management and/or disciplinary action may be undertaken by the Approved Provider to address underperformance and misconduct issues.

Reasons for underperformance can include, but not limited to:

- Unclear expectations or behavioural standards.
- Interpersonal differences and conflict.
- A mismatch between the capability of the employee and the job they are required to undertake.
- Poor motivation or low morale in the workplace.
- Personal issues, including stress, physical or mental health problems.
- Cultural misunderstanding.
- Workplace bullying.

Not every underperformance issue requires a structured process; continuous feedback and guidance can promptly address issues relating to the performance of employees. The Approved Provider and relevant service leaders should, where possible, encourage feedback and an open discussion in an understanding and supportive environment.

The service recognises there can be a need for formal mechanisms to manage and understand performance and misconduct issues, including workplace investigations and disciplinary actions. In all instances, a fair and just process will be provided to employees to manage a resolution.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish fair and reasonable procedures for managing underperformance and misconduct.• Undertake fair and lawful actions in response to employee performance and conduct.• Ensure adequately skilled and capable persons are delegated to handle and investigate instances of underperformance and misconduct.• Ensure disciplinary actions are fair and reasonable.
Nominated Supervisor /Manager	<ul style="list-style-type: none">• Respond to underperformance or behaviour concerns of employees in a timely and professional manner.• Report significant concerns to the Approved Provider for management and response.

Procedures

Employee Underperformance

Underperformance (or inappropriate conduct) can be exhibited in the following ways:

- unsatisfactory work performance - a failure to perform the duties of the position or to perform them to the standard required.
- non-compliance with workplace policies, rules or procedures
- unacceptable behaviour in the workplace
- disruptive or negative behaviour that impacts on co-workers.

Underperformance and **misconduct** are separate and distinct management concepts. Misconduct is a very serious behaviour (including behaviours such as theft or assault), which may warrant summary dismissal or disciplinary action. Whereas underperformance is less serious and requires counselling and potentially performance management planning to support improvement.

The service's counselling and performance procedures will have three distinct (but not necessarily sequential) components:

- Casual conversation (informal counselling and feedback)
- Formal counselling; and
- Performance agreement (or direction).

Responding to Underperformance

Casual Conversation

1. Understanding the reasons for underperformance through a casual conversation (informal counselling and feedback) will be the typical first step. Where an employee can be gently guided to correct any performance issues it the preferred option.
2. The Nominated Supervisor (or appropriate alternative manager) should invite the employee for a discussion to provide feedback on the issues related to the employee's performance/conduct. Before meeting the manager should prepare to develop an understanding of the seriousness of the problem, length the problem has existed and the gap between expectation and what is being delivered.
3. Typically, the casual conversation with the employee should:
 - a. establish the service's expectations;
 - b. identify any reasons for the underperformance; and
 - c. potentially, identify any relevant supports required to improve performance
4. The conversation will be documented by the Nominated Supervisor (or relevant manager). These records should be stored confidentially in the employee's employment file (see [7.6 Information Handling \(Privacy and Confidentiality\)](#))
5. On occasions where a casual conversation has not suitably impacted the employee's performance, the employee will be invited to attend formal counselling. The Approved Provider will be notified of any intention to proceed with formal counselling.

Formal Counselling

6. Proceeding with formal counselling should occur where a casual conversation has not satisfactorily improved performance or where the significance of the underperformance or conduct is serious enough to require a formal response.
7. The employee will be notified in writing of the intention to meet for formal counselling. Written communication with the employee should also include:
 - a. Time, date and location of counselling discussion;
 - b. The matter/s that will be discussed (i.e. specific details of the alleged underperformance/ conduct);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
8. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.

9. At the meeting, the relevant manager/employer (as agreed by the Approved Provider) and the employee will review and discuss the matter/s that prompted formal counselling, and the employee will be provided an opportunity to respond. The meeting should be an open discussion, and the employee should have an opportunity to have their point of view heard and duly considered. The employer should listen to the explanation of why the problem has occurred or to any other comments the employee makes.
10. The employer (manager) should discuss the outcomes wish to achieve from the meeting and, where possible, a joint solution should be devised. Emphasis should be placed on common ground with a focus on positive possibilities.
11. Assistance and support, such as further training, mentoring or redefining roles and expectations may be highly effective in employer promoting adequate performance and appropriate conduct.
12. A clear plan of action should be developed with the employee to implement a solution. This can be in the form of a performance agreement or improvement/action plan. This plan should be agreed to by the employer and employee. The document will be stored confidentially (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).
13. Where there are strong disputes over the matters being raised, it may be appropriate to escalate to a workplace investigation (see below) to the established facts.
14. All persons involved with the counselling proceeding must maintain the confidentiality of the matters.

Employee Misconduct

It is generally held that the definition of 'misconduct' involves something more than inappropriate conduct, negligence or error of judgement/an innocent mistake. Misconduct would typically imply an act done wilfully with a wrong intention. Example of misconduct could include:

- Using abusive, harassing or insulting language
- Wilfully contravening workplace policies
- Excessive and ongoing lateness
- Knowingly disclosing confidential information
- Misuse of workplace-owned equipment or resources.

Serious misconduct is more clearly defined. It is conduct that is wilful and deliberate, and that is inconsistent with the continuation of the employment relationship. It is also conduct that causes serious and imminent risk to the health and safety of a person or to the reputation, viability or profitability of the employer's business. Serious misconduct includes:

- theft or fraud,
- assault
- intoxication at work; and
- the refusal to carry out lawful and reasonable instruction consistent with the employment contract.

Responding to Misconduct Allegations

1. All allegations of misconduct will be reported to the Approved Provider. The Approved Provider will delegate a relevant person to handle the matters, including the appointment of an investigator. The Approved Provider reserves the right to appoint an external party to undertake support and complete the investigation.
2. The Approved Provider (or delegate) will take steps to understand the allegations, where these are unclear, including through contacting potential witnesses to the alleged events.
3. The Approved Provider (or delegate) will notify the employee of the allegations in writing. The Approved Provider will request the employee to attend an investigation meeting to provide a response to the allegation/s. The written communication with the employee should also include:
 - a. Time, date and location of misconduct meeting;
 - b. The matter/s that will be discussed (i.e. specific details of the alleged misconduct);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
4. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). The amount of notice given to employees to prepare will depend on the severity of the allegations. However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.

The purpose of a **workplace investigation** is to establish the facts and obtain accurate information in relation to a complaint of misconduct and then form a judgement to what happened. The investigation should determine if allegations actually occurred and identify any mitigating circumstances of the alleged incident/s.

Workplace Investigations

1. The Approved Provider must ensure the person conducting the investigation is not associated or involved in the allegations. An additional person to support the interview through note-taking may also be requested. This person should also not have had any involvement or association.
2. The interview should prepare by gathering all available evidence of the allegations being presented. Additionally, copies of relevant documents (policies, position descriptions, employment contract, and supporting evidence) should be collated.
3. A record of the interview will be maintained by the appointed investigator or note-taker.
4. The meeting will begin by confirming the roles of participants (in particular, the duties and scope of the support person) and the agenda.
5. The employee will be provided with an opportunity to respond to the allegations presented to them. The employee should be provided with sufficient details of the allegations to adequately and fairly respond. The investigator may ask questions to clarify and draw out relevant information.
6. The employee may identify if relevant, additional witnesses that can be interviewed to provide additional information or evidence.
7. Once the employee has provided their response to allegations, the meeting will conclude.
8. Where additional information is required/available or specific witnesses have been identified, the investigator should coordinate the collection of this evidence (*please note: specialist advice should be sought when deciding not to interview named witness*).
9. Witness statement/s should be collected by the investigator in a formal manner. Witness requested to give a statement may invite a support person to the interview. Once the witness has provided a statement, the witness will be asked to sign a copy of the statement. All parties must maintain confidentiality in the investigation. All witness statements will be handled and stored confidentially ([7.6 Information Handling \(Privacy and Confidentiality\)](#)).
10. Where new and relevant information has been obtained, the employee must be provided with an additional opportunity to respond (following items 1-5 above).
11. It is critical the employee has had their responses to all allegations against them considered before a decision is made to the findings.
12. Once all relevant information has been collected, the investigator must consider it is more probable than not the allegations being investigated have occurred (known as the Briginshaw principle). Therefore each allegation must conclude one of the following:
 - a. **Substantiated** (behaviour/allegations found to have occurred)
 - b. **Unsubstantiated** (there is not sufficient evidence to conclude the behaviour/allegation had occurred)
 - c. **Rejected** (there is clear evidence the behaviour/allegations did not occur).
13. The investigator will outline the investigation and their findings in a report that will be submitted to the Approved Provider. The report will remain confidential ([7.6 Information Handling \(Privacy and Confidentiality\)](#)).
14. The findings of the investigation will be presented to the employee in an outcome meeting. The employee will be offered an opportunity for a support person at this meeting. The notification of this meeting will be made in writing.
15. Where the investigation has substantiated allegations of misconduct (or serious underperformance), the employer (Approved Provider) will consider the appropriate outcome, and if relevant, disciplinary action/s.

Disciplinary Actions

The term 'disciplinary action' means the actions taken by an employer in response to misconduct (or ongoing underperformance) in order to correct the employee's behaviour. The purpose of disciplinary action is to turn performance and/or conduct problems around by addressing problems, causes, and solutions.

Before disciplinary actions are taken, the Approved Provider should consider mitigating circumstances and if appropriate opportunity to improve performance has been taken. The Approved Provider should ensure their actions are fair and reasonable in the circumstances. Potential disciplinary action that can be undertaken includes but is not limited to:

- Warning/s
- Change in duties
- Termination

Performance Improvement Plans

1. Where it has been determined the employee has engaged in misconduct (or ongoing underperformance), the Approved Provider will establish a performance improvement plan (PIP) to support the employee to address the issues that have been identified. The PIP will include:
 - a. The desired **outcomes** for the employee's behaviour.
 - b. The **strategies** the employee can use to reach the desired outcome.
 - c. The **support** that can be accessed to assist.
 - d. An outline of **responsibilities** for the employee and employer.
2. The PIP will outline timeframes for the improvement in behaviour to occur. All PIPs will be supported by ongoing counselling by the employer to provide relevant feedback and support.

Any disciplinary action undertaken by the Approved Provider will be communicated in writing. The employee will be provided with relevant information to the decision of the employer (Approved Provider).

Termination

Where the Approved Provider seeks to terminate an employee's employment, the employee will be requested to attend a **Show Cause Meeting**. The purpose of this meeting is to ask the employee to provide a rationale (i.e. mitigating factors) as to why their employment should not be terminated.

Summary dismissal (instant dismissal) is the most severe form of termination of employment. Summary dismissal is implemented without any notice or payment in lieu of a period of notice (immediate effect). Summary dismissal can only be undertaken when **serious misconduct** by the employee has been substantiated.

Show Cause Meeting

1. Any termination should be considered as a final resort. The Approved Provider should ensure the action is fair and reasonable in the circumstances.
2. Notification for an employee to attend a show cause meeting will be made in writing, outlining:
 - a. Time, date and location of misconduct meeting;
 - b. The matter/s that will be discussed (i.e. outlining the intention to terminate their employment);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
3. At the meeting, the employee will be provided with an opportunity to respond to the intention to terminate their employment.
4. Once the employee has stated their case, the meeting will adjourn. The Approved Provider will consider the response of the employee and make a decision.
5. On recommencement of the meeting, the Approved Provider will outline the decision to the employee and steps moving forward.

In considering termination, the Approved Provider needs to ensure the employee is:

- Not being unfairly dismissed.
- Is given the right notice of termination.
- Is given the right final pay.

Termination Entitlements

Except in the case of summary dismissal, employees terminated as a result of misconduct or enduring underperformance will be given notice as outlined in the Award (or relevant agreement) and will receive any outstanding leave and/or entitlements (where applicable).

A statement of service can be provided, but only on the request of the terminated employee.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- Industrial Relations Act 2016 (Qld)

Policy Controls	
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4.9 Workplace Bullying, Discrimination and Sexual Harassment

Policy Statement

All employees have the right to work in a place free from harassment and bullying. Payne Road OSHC is committed to establishing a culture where all employees are valued, respected and appreciated by their colleagues, supervisors and employers. Workplace bullying, discrimination and sexual harassment can have a significant detrimental impact to the ongoing health and wellbeing employees. Workplace bullying is a psychological hazard that has the potential to harm a person, and it also creates a psychological risk as there is a possibility that a person may be harmed if exposed to it. The following guidelines will be implemented by Payne Road OSHC to ensure effective reporting and management of allegations of bullying and harassment in the workplace place, therefore reducing the risk of it becoming an acceptable workplace behaviour.

Payne Road OSHC is an equal opportunity employer. At all stages of the employment relationship (recruitment and selection, terms and conditions of work, training and professional development opportunities, promotion and transfer, retirement, retrenchment and termination) staff will be treated on their merits and valued according to how well they perform their duties.

Payne Road OSHC believes that all staff should be able to work in an environment free from bullying, discrimination, victimisation, sexual harassment, and vilification. We consider these behaviours unacceptable and they will not be tolerated.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure employees are instructed on suitable conduct for interactions with colleagues or relevant others.• Monitor and respond to instances of inappropriate conduct.• Oversee investigation and response to allegations of harassment, discrimination or bullying.
Nominated Supervisor	<ul style="list-style-type: none">• Collaborate with the Approved Provider in responding to allegations of harassment, discrimination or bullying.• Support employees to access mechanism to report concerning conduct.• Provide instruction to employees about appropriate interactions with colleagues and others.
All Staff	<ul style="list-style-type: none">• Ensure interactions with colleagues and others is respectful and free from harassment, victimisation, discrimination or bullying.• Report any instances of concerning conduct to Nominated Supervisor (or relevant other persons with management responsibilities).

Procedures

Workplace bullying is repeated and unreasonable behaviour directed towards a worker or a group of workers that creates a risk to health and safety.

Unreasonable (Bullying) Behaviour

- Means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening
- Examples of behaviour, whether intentional or unintentional, that may be workplace bullying if they are repeated, unreasonable and create a risk to health and safety include but are not limited to:
 - abusive, insulting or offensive language or comments
 - aggressive and intimidating conduct
 - belittling or humiliating comments
 - victimisation (treated unfavourably because they have made or supported a complaint)
 - practical jokes or initiation
 - unjustified criticism or complaints
 - deliberately excluding someone from work-related activities
 - withholding information that is vital for effective work performance
 - setting unreasonable timelines or constantly changing deadlines
 - setting tasks that are unreasonably below or beyond a person's skill level
 - denying access to information, supervision, consultation or resources to the detriment of the worker
 - spreading misinformation, malicious rumours or submitting vexatious complaints/allegations
 - changing work arrangements such as rosters and leave to deliberately inconvenience a particular worker or workers.
- If the behaviour involves violence, for example, physical assault or the threat of physical assault, ***it should be reported to the police.***
- Unreasonable behaviour may involve unlawful discrimination or sexual harassment which, by itself, is not bullying. This behaviour (discrimination and sexual harassment) does not need to be repeated to be unlawful.

Reasonable Management Action

- An employer may take reasonable management action to effectively direct and control the way work is carried out. It is reasonable for managers and supervisors to allocate work and give feedback on a worker's performance. These actions are not workplace bullying if they are carried out in a lawful and reasonable way, taking the particular circumstances into account
- A manager exercising their legitimate authority at work may result in some discomfort for a worker. The reasonableness of the behaviour is viewed through the actual management action rather than a worker's perception of it. It can also include the degree to which there has been a significant departure from established policies or procedures, and whether the departure was reasonable in the circumstances.
- Examples of reasonable management action taken in a reasonable way include:
 - setting realistic and achievable performance goals, standards and deadlines
 - fair and appropriate rostering and allocation of working hours
 - transferring a worker to another area or role for operational reasons
 - deciding not to select a worker for a promotion where a fair and transparent process is followed
 - informing a worker about unsatisfactory work performance in an honest, fair and constructive way
 - informing a worker about unreasonable behaviour in an objective and confidential way
 - implementing organisational changes or restructuring,
 - taking disciplinary action, including suspension or terminating employment where appropriate or justified in the circumstances.

Unlawful Discrimination

- Discrimination on the basis of a protected trait in employment is unlawful (also see [4.1 Recruitment and Employment of Educators](#)).
- Unlawful discrimination can include where a person or group of people are treated unfairly or less favourably than others because they have a particular characteristic or belong to a particular group of people.
- Protected traits include:
 - sex, age, race, gender identity or sexuality

- relationship status
- pregnancy, breastfeeding, family responsibilities or parental status
- impairment
- religious belief or activity
- political belief or activity
- trade union activity
- status as a legal sex worker.
- It is also illegal to discriminate against someone on the basis of an association with a person identified by one of these characteristics

Sexual Harassment

- Sexual harassment includes unwelcome sexual advances, requests for sexual favours or other unwelcome conduct of a sexual nature that could be expected to make a person feel offended, humiliated or intimidated.
- Sexual harassment in the workplace can take many different forms and can include:
 - Staring, leering or unwelcome touching;
 - Suggestive comments or jokes;
 - Unwanted invitations or requests for sex;
 - Intrusive questions about a person's private life or body;
 - Insults or taunts based on sex;
 - Sexually offensive communications (phone, email, SMS or other social media).
- Sexual harassment doesn't have to be repeated or continuous to be against the law.

Payne Road OSHC treats all instances of **unreasonable behaviour, bullying, discrimination and sexual harassment** very seriously. Employees found to be engaging in this type of conduct (breaching this policy) will undergo disciplinary action, which can include action up to and including termination of employment.

Reporting Bullying, Discrimination and Sexual Harassment

- Incidents of unreasonable behaviour, discrimination, or sexual harassment are to be treated seriously, and immediate action must be taken to report allegations.
- If an employee feels they are a victim of this type of behaviour, they should tell the other person directly that their behaviour is harassing and unacceptable. Any person told their behaviour is harassing or unacceptable should immediately stop this behaviour.
- Employees may inform either the Approved Provider, Nominated Supervisor or relevant other person with management responsibilities in person or writing using the [6.7 Feedback and Complaint procedure](#) (where relevant) of the alleged conduct.
- Staff who make a complaint of bullying, discrimination or sexual harassment will not suffer any victimisation for making the complaint (where the complaint/allegation is made in good faith, i.e. not vexatious). This also applies to staff who agree to be a witness in a complaint/investigation or have a complaint made against them.

Respectful Conduct and Relationships

- Payne Road OSHC Code of Conduct ([4.4 Code of Conduct](#)) guides employee's expected standard of behaviour in the workplace and with colleagues.
- The service's culture and outcomes for children are improved through building respectful relationships with each other. Additionally, it reduces the risk of employees finding unreasonable behaviour acceptable.
- Examples of respectful and behaviour that should be promoted includes:
 - Being polite and courteous to others
 - Being inclusive of individuals and the diversity they bring to the workgroup
 - Raising issues of conflict before escalation, and pursuing these conversations constructively
 - Maintain an individual's privacy and confidentiality
 - Support fair and transparent decision-making

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Industrial Relations Act 2016 (Qld)
- Work Health Safety Act 2011 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Racial Discrimination Act 1975 (Cth)
- Sex Discrimination Act 1984 (Cth)
- Human Rights Act 2019 (Qld)
- Guide for Preventing and Responding to Workplace Bullying (Worksafe Australia)

Policy Controls	
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Policy Group 5

Relationship with Children

OSHC is a social environment. The practices of educators to shape the **respectful and reciprocal relationships** between them and children is central to children learning and belonging. Likewise, OSHC is a place for children to develop connections with one another. Play invites children to collaborate and learn from each other. It gives opportunity to develop life-long social skills.

Relationships are built from upholding the dignity and rights of every child. As children learn and play, they rely on various support for educators, including positive behaviour guidance. Educators are expected to engage in best practice to meet the needs of children. Where there are additional or complex needs, the service will explore what are the appropriate supports to address these.

5.1 Interactions and Relationships with Children

Policy Statement

The service will ensure all educators build positive, supportive relationships with children that make them feel safe, secure and included in the service's community. The service encourages interactions with children to be authentic and responsive and be based on fairness, equity, acceptance, empathy and respect for the child's culture, rights and community. These values are reflected across the culture of the school and within the Service Philosophy.

The rights of the child will be paramount when interacting and building relationships. Children will be encouraged, where possible to enhance their sense of agency through empowered decision-making. Children's dignity will be upheld at all times, to feel valued and supported.

Practices to support behaviour will be consistent with positive guidance; recognising the goal of self-regulation and pro-social behaviours are enhanced through learning, a supportive environment, secure relationships and positive self-regard.

The service, through its program and the practices of educators, provide experiences and opportunities for children to interact and immerse themselves in play with their peers. Through experiences and activities fostering group interaction children will enhance their capacity to interact and develop respectful and positive relationship with each other.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(j), and 155-156*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the Service Philosophy establishes a framework to support the collective practices of the service.• Ensure staff are equipped and suitable to positively guide and support children who attend the service.• Support decision-making, program design and environment considerations that are consistent with empowering children and establishing nurturing relationships
Nominated Supervisor	<ul style="list-style-type: none">• Model and encourage positive interactions which lead to supportive, trusting and respectful relationships.• Ensure children are provided with opportunities to participate in decision-making processes.• Ensure children's views are actively sought and discussed with their responses and perspectives planned into the program with respect and authenticity.• Address conduct and behaviours that are not consistent with policy and procedures.

	<ul style="list-style-type: none"> • Ensure parents and relevant others receive communication of the service's policy and procedures to support relationships. • Address behaviour that requires additional support with responsiveness and dignity.
Educational Leader	<ul style="list-style-type: none"> • Guide educator's professional development and practice to promote interactions with children that are positive and respectful. • Establish practice guidelines that ensure interactions with children are given priority and those interactions are authentic, just and inclusive irrespective of difference. • Facilitate children's meetings, recording and documenting their conversations and ideas in a children's meeting book. Educators or other children will act as a scribe for what children say, making notes for further follow-up.
All Staff	<ul style="list-style-type: none"> • Ensure child-initiated, shared-decision making happens across all aspects of the service. • Empower children to access and learn from their own life experiences as well as those of their peers and adults around them. • Be active listeners, observers, scribes and advocates for children. • Respond to behaviour with positive guidance, re-direction and encouragement. • Seek additional support from the Nominated Supervisor where children's behaviour continues to pose a risk of harm to safety or wellbeing.

Procedures

A positive atmosphere and the wellbeing of children attending the service is promoted through attentive and nurturing care and quality interactions between educators and children. Children's emotional development and social relationships are supported by role-modelling and enhanced by educators through conversation, discussion and promotion of children's language and effective communication.

Central to the interaction and engagement between children and educators is the delivery of the service's program. The service's program will reflect [\(1.1 Educational Program Development and Implementation\)](#):

- Opportunities for children to engage in diverse experiences
- Exploring and engagement with culture, having regard to the community of families
- Support for a range of ages, physical and intellectual developmental stages
- The choice, agency and decision making of children, including contributing to the aesthetics and physical environment.

In designing the program and activities for the service, educators will consult children about how their input will be used and advised of the outcomes of the decisions made, ensuring children have a voice in their level of participation including:

- areas of interest they would like to explore;
- where and how they would like to play, with others, or alone;
- what they would like to use;
- the adults with whom they feel comfortable and secure;
- when and what they would like to eat; and
- how they prefer to sleep or rest.

Resources and activities will be sourced as to encourage:

- Expression and creativity
- Participation and collaboration
- Reflect and cater to the interests and abilities of children
- Satisfy for the range of ages and developmental abilities
- Accessibility to children allowing for independence and development of mastery

Behaviour Support and Guidance

Educators will receive suitable instruction, support and training to respond to various developmental stages of the differing ages of the children who attend the service. Educators will apply appropriate behaviour support and guidance techniques which will be consistent with the Philosophy Statement of the service.

Educators will involve the children as far as reasonably possible in developing behaviour expectations for the service. These behaviour expectations will be clear, child-focused, based on supporting the safety and wellbeing of children and others, easy to understand and will be on display throughout the service. This information is also provided in the relevant parent information issued to all parents/guardians on enrolment.

Educators are required to:

- Model appropriate behaviour, including the use of positive language, and tone of voice;
- Monitor children's play, pre-empting potential conflicts or challenging situations and directing children to consider alternative behaviours;
- Use positive guidance and encouragement towards acceptable behaviour when prompting the service behaviour expectations;
- Support children to make choices, accept challenges, manage change, cope with frustration and to experience the consequences of their actions;
- Consider how the environment is impacting on a child

Educators are not permitted at any time to use physical force/restraint or physical, verbal or emotional punishment and practices that demean, humiliate, frighten or threaten a child.

Where exceptional support is required for children to behave in a manner to uphold the safety or wellbeing of themselves or others, the Nominated Supervisor will follow the procedures outlined in [5.3 Supporting Complex Behaviours](#).

Social Interactions

Educators will encourage children to promote their social skills and interaction with each other, including support children to develop self-regulation skills. Where there are instances of a child displaying a pattern of behaviour that impacts on the wellbeing or safety of others, the service will meeting with parents/caregivers to gain a better insight into the drive and best response to the behaviour of concern (see [5.3 Supporting Complex Behaviours](#)).

Cultural Inclusion

The service will collect information about the diversity of culture and linguistics of the family attending the service at enrolment. The Nominated Supervisor will follow up on any request for considerations and ensure these matters are actioned in the appropriate way.

The service's program will celebrate a wide variety of cultures, paying particular attention to the cultures identified in the local community. The educators of the service will be supported to enhance their cultural competency through shared learning and a respectful workplace environment.

The service recognises the unique contribution Aboriginal and Torres Strait Islander people make to our Australian communities. The service is committed to acknowledging and respecting the rich history of our first nations people give to our country. In doing so, the service looks to provide opportunities for children to experience and develop their understanding of the customs, traditions, and respect for the land Aboriginal and Torres Strait Islander culture upholds.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
 - R.155 Interactions with children
 - R.156 Relationships in groups

- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities.
- My Time, Our Place - Framework for School Age Care in Australia.

Additional Regulatory Context and Guidance

- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations

Policy Controls

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5.2 Positive Behaviour Support Practices

Policy Statement

Payne Road OSHC is committed to ensuring all educators' practice and skills are consistent with positive guidance and encouragement towards acceptable behaviour when interacting and supporting children. The service will ensure educators are supported to respond to behaviour with strategies and techniques that promote secure, reciprocal relationships, build a strong sense of wellbeing and upholds a child's dignity and rights.

The service recognises social and self-regulation (emotional) skills are learned. Learning takes place when children have warm confiding relationships with adults who care for them, when children understand which behaviours are acceptable, when feedback and positive reinforcement for acceptable behaviour is consistent, and where children are immersed in engaging learning activities.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Law section 166 & Education and Care Services National Regulations 155-156*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure that the principles and expectations for responding to and supporting children's behaviour are established and communicated effectively.• Ensure the established practices are consistent with legislation and regulations.• Provide opportunities to support the practices and capacity of educators to respond to children's behaviours.
Nominated Supervisor	<ul style="list-style-type: none">• Provide supervision and direct support to educators.• Liaise with families to address concerns and relay incidents.• Role-model and guide effective positive behaviour support practices.• Ensure the program is achieving the identified aims and effective in supporting the behaviour of children.
All Staff	<ul style="list-style-type: none">• Ensure their practices are consistent with the principles of the service's policies and code of conduct in responding to children's behaviour.• Access learning and developmental opportunities to enhance the care and support provided to children.• Communicate with the Nominated Supervisor or Approved Provider where additional support for children is emerging as a need.• Collaborate in delivering and developing the service's program to meet the needs of children.

Procedures

Educators will receive suitable instruction, support and training to understand how they are best to respond to support children's development and individual needs. In responding to children's behaviour and needs, educator's interactions, behaviour support and guidance practices will be consistent with the Philosophy Statement, the service's Code of Conduct, and Education and Care Services legislation at all times (see [2.1 Interactions and Relationships with Children](#)).

Program

The service recognises the relationship between the design of, and engagement in, the service's program and the behaviour of children of the program. The service is committed to develop a quality and considered program to meet the needs of children and families. All children will be provided with opportunities to guide the development of the program and the Educational Leader will work collaboratively to ensure it aims to meet the needs of all children attending the service.

The service's program will support children behaviour through:

- Promoting routines that are relaxed and comfortable, children should not be rushed to transition abruptly or wait for unreasonable timeframes.
- Designing for flexibility in routines to maximise choices and child-initiated experiences
- Being engaging, diverse, challenging and stimulating to cater for the wide developmental needs of children, including:
 - social (group) and independent (solitary) play, and
 - robust and quiet play.

Positive Guidance Strategies

The relationship and interaction between educators and children is critical to effectively supporting and guiding behaviour. The following principles will be used by educators to establish an environment and culture in which the behaviour of children is best supported:

- Role model behaviour that demonstrates the service's expectations to children.
- Build secure, reciprocal relationships with children through listening with warmth and being available and responsive to needs.
- Communicate with the child to enable them to express their needs and help you to talk about the service's expectations.
- Use positive reinforcement and praise to communicate to children when they are behaving in ways that meet expectations.
- Create a calm, fun and safe environment to reduce anxiety and stress for children and educators.

Educators will respond to children's behaviour with support, care and teaching. Educators should use positive guidance strategies that include but are not limited to:

Caring gesture/ hurdle help	<ul style="list-style-type: none"> • Encouragement, support, and/or assistance offered by an educator to prevent a child from becoming frustrated or disengaged with a task or activity. The help can take many forms such as– asking for other children to support, supplying additional materials or information, providing alternative equipment, or assisting with completing some of the initial tasks. • A caring gesture could also include warm attention to help coping with a stressful or difficult situation. Strategic use can help a child whose own self-control is deteriorating to support in gaining composure. • A caring gesture may include using humour to reduce immediate tension and allow a child to avoid a power struggle.
Changing the environment and proximity	<ul style="list-style-type: none"> • Educators should identify the impact on the environmental factors on children's behaviours (space, noise, routines, level of engagement, social influence). • Identify the factors and issues that could prevent, reduce or modify the situation, to help reduce problematic behaviour. • Likewise, the physical distance between an educator and children can impact on behaviour. Controlling the distance between educators and children can provide be an inconspicuous influence. An educator might approach a child when they are using inappropriate behaviour with the aim of prompting a child to use more appropriate behaviour.

Prompting	<ul style="list-style-type: none"> • Reminding a child of the service's expectations or encouraging the child to use a skill or certain behaviour. • Prompting is effective when a child is having difficulty with responding to an instruction or cue. • Prompts can be verbal (directions or suggestions), visual (pictures or photos), a gesture (pointing to objects or a direction), modelling (teaching the skill).
Emotional validation	<ul style="list-style-type: none"> • Engaging the child in conversation to support them to understanding of their behaviour and communication. • The educator should be present and engaged with the child. Central to emotional validation is an accurate reflection, e.g.: <ul style="list-style-type: none"> ○ "...it looks[or seems] like you are (insert emotion) because I can see (trigger/rationale/observation)". ○ "I hear what you are saying, you seem angry because... let's see what we can do to help." • Recognising the child's emotions are normal in the circumstances - that they are understood, can drain off emotions to allow constructive dialogue to be facilitated. • The conversation may explore the trigger, problem or concern for the child identifying the motivation and drive (interpret events).
Redirection	<ul style="list-style-type: none"> • Redirection can involve distracting a child when a trigger or behaviour occurs. Its intention is to guide a child's behaviour from inappropriate to appropriate. • An easy way to alleviate a child's inappropriate behaviour is to provide something else to engage them with. The substitution could be anything from a learning resource, a toy, a pen and paper for drawing, or it could be an educator's attention until the child is ready to transition to something independently.
Behaviour specific praise (reinforcing desired behaviour)	<ul style="list-style-type: none"> • Appealing to cognitive behaviour influences to space thoughts, feeling and behaviours. • Social reinforcement (authentic praise) is a powerful reward. Aligning this feedback to include the specific positive aspects of the behaviour increases the effectiveness e.g. <ul style="list-style-type: none"> ○ "(child's name), I really like the way you are sitting quietly and waiting." ○ "That was great you helped pack up without being asked, (child's name)" • Identify those behaviours you wish to promote, prepare children with information about this, identify children displaying the behaviour, describe behaviour in the form of praise

Conflict Resolution

The service recognises the significant opportunity group activities play in encouraging learning and the development of social skills. The service's program will seek to include many opportunities for shared experiences for children that promote cooperation and collaboration between children. The service recognises that children will, at times, require support to navigate collaborative play. The role of the service's educators is to mediate, role-model and guide children to understand the meaning of their interaction to learn life-long skills for positive social interaction.

Supporting Positive Interactions and Relationships

Mediate	<ul style="list-style-type: none"> • Facilitate shared understanding by supporting children to express their perspectives. • Create an environment where children can communicate constructively.
Role-model	<ul style="list-style-type: none"> • Demonstrate social interactions that are warm, respectful, secure and reciprocal. • Interactions with children and colleagues demonstrates active listening, self-regulation and collaborative partnerships.
Guide	<ul style="list-style-type: none"> • Prompt children to support their understanding and salience of the service's expectations and their own coping strategies in managing conflict. • Proactively support children by teaching using intentionality to support the development of interpersonal skills.

Additional Support

Where a child’s behaviour poses a significant risk to safety of themselves or others and every reasonable attempt to deescalate has been ineffective, the child’s parents or emergency contact will be called to collect the child from the service. Procedures outlined in [5.3 Supporting Complex Behaviours](#) will then be followed.

Educators will complete recording and reporting procedures outlined in [2.4 Incident, Illness, Injury or Trauma](#) when a child has been prematurely collected from the service due to their behaviour.

Prohibited Actions

Educators are not permitted at any time to use physical force/restraint or physical, verbal or emotional punishment and practices that demean, humiliate, frighten or threaten a child. Discipline must be reasonable in the circumstances. Additionally, corporal punishment must never be used as a disciplinary measure.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
 - R.155 Interactions with children
 - R.156 Relationships in groups
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations

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5.3 Supporting Complex Behaviours

Policy Statement

The service is committed to ensuring children receive positive behaviour support as they learn and develop. Payne Road OSHC recognises, at times, children display behaviour that is unsuitable for the setting. The behaviours of serious concern are those that risk the safety of the child or others and/or risk the wellbeing of the child or others. On these occasions, the service is committed to plan, support and reflect on opportunities for individual consideration for the best outcomes for children and families.

In responding to behaviours that the service recognises as complex, parents will be invited to collaborate with the Nominated Supervisor (or delegate) to identify strategies to ensure the safety and wellbeing of everyone. Planning will focus on actions to support the child to learn new behaviours (e.g. appropriate communication, social skills and emotional regulation) and reduce the risk of further incidents.

Where opportunities to support the child have been exhausted or where the risks to safety are too extreme, the service may exclude the child from attending either temporarily, or in some cases, permanently.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.1 Access](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Appendices and Forms

- [Positive Behaviour Support Plan](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establishing processes to ensure children are provided with an opportunity to be supported to learn and enhance behaviours and skills that support them to meet the service's expectations.• Ensure educator's practices support each child's wellbeing and rights in responding to their behaviour.• Provide mechanisms for constructive and collaborative partnerships to identify effective strategies for supporting children's behaviour.• Ensure the safety and wellbeing of all children accessing the service.
Nominated Supervisor	<ul style="list-style-type: none">• Facilitate a collaborative planning process to understand a child's behaviours and identify suitable strategies and responses to support learning and wellbeing.• Monitor the effectiveness of the developed support plans and communicate areas for further support.• Coordinate plans, including relevant resources and training with the service's educators.• Provided open and supportive ongoing communication with parents/caregivers.• Consult with the Approved Provider where planning and support is not addressing the behaviour needs of the service.

All Staff	<ul style="list-style-type: none"> • Support the preparation, implementation and delivery of positive behaviour support plans. • Followed the developed strategies and communicate relevant information on the effectiveness.
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Procedures

Following a significant incident or where it has been identified a child's experience will be improved through intentional behaviour support planning, the Nominated Supervisor (or delegate) will invite the parent/s (or caregivers) of the child to meet to discuss strategies for supporting the child. Depending on the level of risk, the Nominated Supervisor may suspend a child attendance until a positive behaviour support plan is developed.

Initial Intensive Behaviour Support

Depending on the level of support required and the significance of behaviour, the Nominated Supervisor may choose to coordinate some initial intentional support strategies to effectively support a child before needs require escalation to a fully developed positive behaviour support plan. Monitoring the support provided to children will determine the progress to collaboration with parents/caregivers (formal Positive Behaviour Support Planning).

Initial support planning may be a range of options chosen by the Nominated Supervisor and could include:

- an informal discussion to prompt educators to be intentional in how they respond to a child's needs.
- development of specific strategies to engage the child and positively impact behaviour
- an internal meeting with keys staff members to draft an initial plan to support a child's behaviour.

The Nominated Supervisor will communicate the intentions and actions with parents and caregivers, ensuring transparent and collaborative communication in supporting children to meet the service's expectation. Any plans developed to support a child will be an extension of the service's positive behaviour support practices ([5.2 Positive Behaviour Support Practices](#)).

Positive Behaviour Support Planning

Positive behaviour support plans have three main components: understanding the child/behaviour, a plan to support the child, steps to assist with implementation.

Understanding the child/behaviour

1. The Nominated Supervisor will invite the parent/s or caregiver/s of the child to meet to discuss the child's behaviour and strategies to support the child
2. The intention of the support plan is to focus on developing the child's skills and learning. Identifying the child's strengths and interests will frame how the service can best support the child's development.
3. Any relevant information about diagnoses, history, health or environmental impacts should be identified.
4. The central to developing strategies to respond to behaviour is understanding the drive and function of any behaviours of concern. The Nominated Supervisor, educators and parents/caregivers should identify any indications to what might be triggers.

Support strategies

5. The service's planned actions are developed to promote and encourage acceptable behaviours. Proactive strategies are those that can set the environment up for success.
6. Response strategies are those actions educators will use to de-escalate a child's behaviour in a crisis/incident. There will be an emphasis on early de-escalation.

Implementation

7. Any additional resources, support or training that the effectiveness of the plan is contingent will be identified and assigned responsibility.
8. Parent/s or caregivers are encouraged to collaborate throughout the planning and implementation of positive behaviour support plans. There will be continual monitoring of the effectiveness and any identified concerns will prompt a re-evaluation of the content and additional supports.

Exclusion

1. Where the Nominated Supervisor reasonably believes:
 - the risk to safety or the impact on the wellbeing of a child(ren) exceeds the capacity (or potential capacity) of the service; and
 - where the opportunity to support a child's behaviour has been exhausted,
2. Either temporary or permanent exclusion can be considered in consultation with the Approved Provider.
3. The Nominated Supervisor will review relevant reports and plans with the Approved Provider and explore an action plan up to and including the possibility of suspending a child's attendance.
4. Any decision to exclude a child will be communicated to the parent/s in writing and will outline the conditions for re-enrolment, where relevant.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
 - R.155 Interactions with children
 - R.156 Relationships in groups
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety; and 5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
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5.4 Supporting Additional Needs with Inclusive Practices

Policy Statement

Payne Road OSHC recognises that additional support may be required for some children depending on their individual needs. The service is committed to ensuring children are able to be supported in accessing the service regardless of their ability or needs. When required the service will partner with the relevant Inclusion Agency to address any barriers of a child's participation within the program.

The service is committed to building the capacity to be inclusive of children with additional needs. The service recognises the value of having children with additional needs participating and belonging to Payne Road OSHC, and the impact to families of the school community in being able to access quality education and care services for their children.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.1 Access](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Support the development of inclusive practices and the capacity of educators to meet the needs of children.
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with the Approved Provider and families to ensure appropriate planning, support and service are delivered to meet the needs of children accessing (or seeking to access) the service.• Engage and coordinate with the Inclusion Agency to access resources and funding to support the service to meet the needs of children.
All Staff	<ul style="list-style-type: none">• Ensure practices support the inclusion, participation and belonging of all children, regardless of individual needs and ability.• Engage in relevant professional development and/or access to professional resources to support the capacity of the service to meet the needs of individual children.

Procedures

Enrolment

The service's enrolment practices will elicit opportunities for parents and/or caregivers to identify any additional needs of the child, and then provide an opportunity to collaborate on how the service will cater for any individual needs of the child.

Where the service recognises further capacity building would be beneficial for a child's participation in the program or additional needs have been identified, the service will request to meet with the parents/caregivers to discuss inclusion support opportunities.

Inclusion Support Practices

Inclusion is a practice where environments and programs are planned and delivered to ensure meaningful participation for all children. Inclusive practices are about actively seeking solutions and strategies to address barriers to children's participation and engagement. Barriers that can impact children include the physical environment, the educators' beliefs and skills, design and structure of the program, and a family's engagement, understanding and expectation of the service.

An essential competent of inclusive practices is the relationship building with stakeholders, including children, families and the wider community. Inclusive practices are about the participation and connection with all children who access and use (or potentially use) the service.

- Inclusive practices:
- Foster independence and agency
 - Provide a voice to children and an opportunity to be heard
 - Are respectful and responsive
 - Build collaboration and provide teamwork response
 - Are meaningful, build on strengths and are enhanced by reflective practice

Inclusion Agency Engagement

The service will seek to address any barriers for a child’s participation through capacity building, where the service requires access to additional resources, support or training they will contact the relevant Inclusion Agency (Inclusion Support Queensland) for professional support.

Inclusion Support QLD (KU Children’s Services) Contact Details
1800 811 039
inclusionsupportqld@ku.com.au
www.inclusionsupportqld.org.au

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- Disability Discrimination Act 1992 (Cth)
- Anti-Discrimination Act 1991 (Qld)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)
- United Nations Convention on the Rights of the Child

Policy Controls	
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5.5 Promoting Protective Behaviours

Policy Statement

The service considers its role in the protection of children of paramount importance and therefore takes a proactive approach in supporting families and children through promoting protective behaviours to ensure children's ongoing safety, wellbeing and protection.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [2.1 Providing a Child Safe Environment](#)
- [5.1 Interactions and Relationships with Children](#)
- [6.5 Interactions and Communication with Families](#)

Roles and Responsibilities

Approved Provider	• Establish effective policies to promote the protective behaviours of children.
Nominated Supervisor	• Provide clear communication to families on opportunities to engage with culturally competent protective behaviour strategies
All Staff	• Follow the service's policies to promote children's development of protective behaviours.

Procedures

Foundations of Protective Practices

Opportunities to incorporate protective behaviour messages will occur both formally within the program and incidentally as the occasion arise.

On induction, educators will be instructed on the key messages and skills communicated to children to support their ability to act protectively. Central to all promotion is:

- Children understanding the concept of safety and the practicalities of being safe
- Children understand what to do (and who they can go to) when they do not feel safe

Behaviours Promoted at the Service

The Nominated Supervisor and educators will reinforce the protective behaviours of children through the following principles and messages:

- We all have the right to feel safe all of the time;
- Nothing is so awful that we can't talk to someone about it;
- Encouraging children to interact and/or physically touch other children in a safe and non-threatening way; and
- Building on children's problem solving, reasoning and communication skills (e.g. brainstorming safe strategies for unsafe situations).

The Nominated Supervisor and educators actively encourage opportunities to build children's personal safety behaviours/strategies, including:

- While they are playing and interacting in their environment;
- Accessing their community;
- Understanding privacy and personal boundaries; and
- Who to go to for help when feeling unsafe.

The Nominated Supervisor and educators will collaborate with families to support children's learning about personal safety and uphold a culturally competent approach. Collaboration will include the service liaising with school administration to maintain an awareness of additional protective behaviour programs provided within the school setting.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- National Principles for Child Safe Organisations
- eSafety Commissioner - Best Practice Framework for Online Safety Education

Policy Controls	
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Policy Group 6

Collaborative Partnerships with Families and Communities

Quality Area 6 focuses on **supportive, respectful relationships with families** which are fundamental to achieving quality outcomes for children. Community partnerships that are based on active communication, consultation and collaboration also contribute to children's inclusion, learning and wellbeing.

By involving families and communities, education and care services create a supportive network that enriches children's learning experiences and promotes their overall wellbeing. Insights and information gathered through partnership influences the service's ability to extend the quality of education and care to exceed the National Quality Standard through meaningful engagement.

6.1 Access

Policy Statement

Payne Road OSHC will support families exploring education and care service for their children through providing fair access and relevant information to parents and caregiver. Payne Road OSHC is available to all eligible school age children, with a primary focus to meet the needs of parents who work or study and for children who attend Payne Road OSHC. The service is non-discriminatory and provides education and care to children and families irrespective of background, culture, religion, gender, sexuality, disability, marital status or income.

All members of the community will receive respectful interactions with Payne Road OSHC employees and the Approved Provider. Payne Road OSHC will work collaboratively with potential families to understand and cooperate in planning to meet the needs of children intending to enrol in the service.

Payne Road OSHC will prioritise children and families who are at risk of serious abuse or neglect or where working (or study) needs of families require the provision of care.

Related Policies

- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.9 Childhood Immunisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish equitable procedures to support fair access for families to utilise the service.
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with parents to collate enrolment and waitlist information.• Manage any potential waiting list, including communication with families and prioritising access.

Procedures

Priority of Access and Waiting List

A priority of access is developed where demand for places provided Payne Road OSHC exceeds those available. In this instance a waiting list will be created and managed by the Nominated Supervisor (or relevant delegate). The priority of access will be given based on:

- the vulnerability of families (risk of serious abuse or neglect)
- the working (or study) needs of families - a child/ren of a sole parent who satisfies, or parents who both satisfy, the activity test through paid employment.
- students of Payne Road OSHC will be given priority over children who attend other schools.

The Nominated Supervisor (or relevant delegate) will provide information to families about the position on any waiting list when requested.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) (Administration) Act 1999
- Australian Government Child Care Provider Handbook

Policy Controls

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6.2 Enrolment and Orientation

Policy Statement

The Service acknowledges its duty to ensure accurate and relevant information relating to the specific needs of each child is recorded and available. The Service enrolment process upholds its responsibility to obtain information in relation to the provision of quality education and care.

In addition to collecting enrolment information, the entry of a family into the Service is supported by a welcoming orientation process. The Service recognises that this is a critical step in forming a collaborative partnership with parents, children and families. The Service is committed to ensuring families are provided with relevant information and knowledge to the Service's program, routines, policies and practices.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Service National Regulations 2011* 168 (2)(k) and 160 -162.

Related Policies

- [6.1 Access](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure enrolment records are kept for each child and contains the information set out in the <i>Regulations</i>• Ensure enrolment and orientation procedures are inviting and provide key information to new families.• Assess feedback and complaints in reviewing enrolment and orientation procedures.
Nominated Supervisor	<ul style="list-style-type: none">• To liaise and coordinate enquiries for new enrolments, providing relevant information to parents and caregivers exploring OSHC services.• Undertake a re-enrolment process each year, where existing families update enrolment and booking information.• Collaborate with the Approved Provider to develop orientation practices, including communicating any feedback or complaints raised.
Responsible Person	<ul style="list-style-type: none">• Understand the enrolment form contains key information to the care and wellbeing of children accessing the service.• Ensure privacy and confidentiality of enrolment information.• Support children's orientation of the service prior to or on their first arrival.
All Staff	<ul style="list-style-type: none">• Access enrolment information as required for the provision of care and education of children accessing the service.• Support the orientation of families through active interaction and communication.

Procedures

Contact and Communication

The Nominated Supervisor is the key contact for parents and caregivers interested in accessing and enrolling into the Service. All new parents and families will be invited to meet with the Nominated Supervisor (or other delegate) to discuss the Service's operations and program before commencing with the service.

Family Handbook – is a summary of the Service’s information helpful for families using the service. It outlines the Services program routines and key policies. A copy of the *Family Handbook* can be provided to prospective and new parents.

Families wishing to enrol their child/ren into the service will be provided with a copy of the *Family Handbook*, which outlines key information for families when using the service. Families will be directed to information on how they can begin the enrolment process.

Enrolment Process

The enrolment process will commence when a new family completes an enrolment form through the Kidsoft portal or by filling out enrolment forms on <https://payneroadpandc.com.au/services/oshc/>. Once the enrolment form is submitted, an automatic email is sent to the Director for approval. The Nominated Supervisee will contact the family, typically via email and offer an opportunity for further communication.

The enrolment records will contain the following information:

The enrolment form must be completed in full and contain the following for each child being educated and cared for. Details to be completed are:	
<input type="checkbox"/> Full name, date of birth and address of the child; <input type="checkbox"/> Gender of the child	
<input type="checkbox"/> Name, address and contact details of:	<input type="checkbox"/> each known parent of the child <input type="checkbox"/> any person who is to be notified of an emergency (if any parent cannot be immediately contacted) <input type="checkbox"/> any person who is an authorised nominee ¹ <input type="checkbox"/> any person who is authorised to consent to medical treatment or medication
<input type="checkbox"/> Details of any court orders, parenting orders ² or parenting plans ³ 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 <input type="checkbox"/> 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;	
<input type="checkbox"/> Language used in the child’s home <input type="checkbox"/> Cultural background of the child and, if applicable, the child’s parents	
<input type="checkbox"/> Any special considerations for the child, for example any cultural, religious or dietary requirements or additional needs <input type="checkbox"/> Details of any dietary restrictions for the child	
<input type="checkbox"/> Authorisations for (regulation 161):	<ul style="list-style-type: none"> • medical and hospital treatment • transportation by ambulance service • any regular outings
<input type="checkbox"/> Health and medical information including (regulation 162): <ul style="list-style-type: none"> • The name, address and telephone number of the child’s registered medical practitioner or medical service; and <input type="checkbox"/> if available, the child’s Medicare number;	
<input type="checkbox"/> Any medical management plan , anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy referred to above <ul style="list-style-type: none"> • specific healthcare needs of the child, including any medical condition; and • allergies, including whether the child has been diagnosed as at risk of anaphylaxis 	
<input type="checkbox"/> The immunisation status of the child <input type="checkbox"/> If a staff member has sighted a child health record for the child, a notation to that effect	
The terms of use will also include authorisation for the staff to:	
<input type="checkbox"/> Administer first aid; <input type="checkbox"/> Obtain medical treatment from a medical practitioner, hospital or ambulance;	

- ☐ Transport a child by an ambulance;
- ☐ Apply/assist to apply SPF+30 sunscreen; and
- ☐ Take and/or display children's photographs
- ☐ The opportunity to access the service's policy and procedures

¹**Authorised nominee** - means a person who has been given permission by a parent or family member to collect the child from the education and care service

²**Parenting Order** - means a parenting order within the meaning of section 64B(1) of the *Family Law Act 1975*

³**Parenting Plan** - means a parenting plan within the meaning of section 63C(1) of the *Family Law Act 1975*, and includes a registered parenting plan within the meaning of section 63C(6) of that Act.

A child's enrolment **cannot be accepted** if all relevant information (as outlined above) is not completed by parents/caregivers.

Nominated Supervisors should consider the [6.9 - Childhood Immunisation](#) policy prior to accepting any bookings and enrolment.

The Nominated Supervisor is to contact **parents** of children indicating an additional need for further clarification, follow-up and planning. The Nominated Supervisor is to ensure [2.9 Children with Medical Conditions](#) is followed for children with additional medical needs (risk assessment, minimisation and communication plan development).

All enrolment records will be stored securely as outlined in the [7.6 Information Handling \(Privacy and Confidentiality\)](#) policy. All information is only to be used for the purpose of which it is obtained. Parents may access their enrolment information at any time.

Orientation

Understanding of the service's environment, routines, care and education practices are important for new families to develop. The Nominated Supervisor on accepting a new enrolment will extend an invitation to parents and families to visit the service for a guided orientation. The Nominated Supervisor will outline key elements (including but not limited to):

- explain the routine and program
- indicate key facilities like toilets, bag racks, hand washing basins etc.
- explain the roles and responsibilities communicating with the service and collecting children
- discuss and medical or additional needs, and/or individual considerations to support the child
- answer any questions or concerns

During a child's first attendance at the Service the Nominated Supervisor/Responsible Person will sensitively support and welcome the child and take time to demonstrate the service's expectations, routines and facilities (including access to toilets, personal items, food, water etc.) in a manner that reflects the child's needs. This may be completed in large groups, such as at the start of the year with a new cohort of younger children.

Children will be shown who they can approach and talk to if they have a concern. All staff will be encouraged to ensure all children are supported as they build their engagement and orientation into the Service.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.161 Authorisations to be kept in enrolment record
 - R.167 Record of service's compliance
- National Quality Standard:
 - QA2 – Children's health and safety

- QA6 – Collaborative partnerships with families and communities

Additional Regulatory Context and Guidance

- Department of Education and Training Child Care Provider Handbook

Policy Controls

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6.3 Bookings and Cancellations

Policy Statement

Payne Road OSHC is committed to delivering an efficient and effective service for children and families. Management of the bookings and cancellation is critical in providing a quality and efficient service for the community. Parents and families have a role in communicating bookings and cancellations with the service to ensure effective business practices are supported. The service will ensure the booking administration meets the needs of families through effective communication of clear process and expectations.

Related Policies

- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure administration practices support the provision of quality care, including compliance with law, regulations and CCS obligations.
Nominated Supervisor	<ul style="list-style-type: none">• Provide effective communication to families to ensure their responsibilities and obligation in notifying the service of obligations.• Monitor and support the application of the service's fees and booking management procedures.
All Staff	<ul style="list-style-type: none">• Support the administration of bookings and cancellation, including documenting notification as required.

Procedures

A child must be fully and actively enrolled at Payne Road OSHC before any requests for booking can be processed or accepted (see [6.1 Access](#)). This includes:

- Enrolment paperwork completed in full.
- Relevant supporting documentation (including but not limited to, medical information/action plans, inclusion support plans and immunisation records) provided to the service.

Before and After School Care

Permanent Bookings

Bookings for Before and After School Care session can be made by the account holders (typically the child's parents) or an authorised nominee, where consent has previously been obtained. Where the service has reached or exceeded requests for bookings beyond the maximum number of children stipulated in the service approval the procedures outlined in [6.1 Access for Families](#) (management of waiting lists) will be followed.

Care needs for those parents/caregivers that work a rotating roster

Parents with shift-working employment can have their needs addressed on a case-by-case basis. Parents with these circumstances will need to liaise the Nominated Supervisor to negotiate this arrangement. Bookings of this nature are considered a permanent booking. Therefore, these arrangements have the same conditions as permanent bookings.

Cancellations of Bookings

- Any changes to bookings will require notice as follows:
 - Cancellations Before School Care: All fees associated with routine bookings, should the child not attend care due to any reason (including illness), shall be required to be paid in full if the

service is not notified by 6:00pm on the working day prior to the booking. CCS will apply in accordance with allowable and approved absence provisions.

- Cancellations After School Care: All fees associated with routine bookings, should the child not attend care due to any reason (including illness), shall be required to be paid in full if the service is not notified by 9:00am on the day of the booking. CCS will apply in accordance with allowable and approved absence provisions.
- All changes must be requested via **Kidsoft app** or **phone** or **email**.

Casual Bookings

- Casual bookings will only be available where Payne Road OSHC has approved places available. Permanent bookings will take a priority over casual vacancies.
- Casual booking requests may be made via Kidsoft app or phone or email, any agreements of changes that have occurred outside of the email process will not be acknowledged.
- If placement is not available at the time the request is made, the request will be placed on a waiting list. An offer of placement may be made if a position becomes available closer to the requested date.
- If placement is not available at the time the request is made, the request will be placed on a waiting list. An offer of placement may be made if a position becomes available closer to the requested date.

Cancellations (Advising of Absences)

Should the child not attend a booked (either permanent or casual), OSHC session for any reason, without advising within the cancellation period, fees for the session are still payable. CCS will apply in accordance with allowable and additional absence provisions.

It is the responsibility of parents (account holders) to advise the service of absences for any reason. The notification must be prior to the start of the session, (i.e. before 2.30pm for ASC).

It is preferred that cancellations are notified in writing. Parents (or authorised nominees) should notify the service before the sessions of any planned absences. Notification of a child's absence can be made via:

- Phone
- SMS
- Email
- In-person
- Kidsoft app

Any educator receiving a notification of a child's absence will be required to note this in the services booking diary.

Vacation Care

Program and Forms

Vacation Care bookings can be booked using the relevant platform (Kidsoft app) or email.

Pupil Free Day bookings will have individual booking forms (when offered). The planned program and relevant information will be attached to booking forms. Details including fees, timelines for booking, and session capacities will be noted on the program/form. Unless stated otherwise, Pupil Free Days will have the same conditions as vacation care.

All vacation care bookings will be confirmed via the account holders statement after the booking is received. In the event that a requested day is not available, the family will be notified and given the option of going on a waiting list for that session. An offer of placement may be made if a position becomes available closer to the requested date.

All vacation care bookings remain open until the maximum occupancy has been reached.

Vacation Care Cancellation and Changes to Bookings

All fees associated with bookings, should the child not attend care due to any reason (including illness), shall be required to be paid in full if the service is not notified by giving 3 working days' notice. (eg Cancel Monday for Thursday; Tuesday for Friday etc). CCS will apply in accordance with allowable and approved absence provisions.

Cancellation, where extra charges apply, will be charged the full fee for the session (including the extra cost).

Child Care Subsidy

Accessing CCS

It is the responsibility of the parents/caregivers to communicate with Centrelink about their child/ren attending a care service. When the booking is added to the system and the child/ren have attended their first session, a Complying Written Arrangement (CWA) is generated. This requires parents/guardians to approve the booking through their Centrelink online account (accessed through MyGov or the Centrelink app), prior to any CCS being payable to the service as a fee reduction for the family.

Reporting Absences (CCS)

Child Care Subsidy is payable for up to 42 absence days for a child in a financial year for sessions of care a child is enrolled in and did not attend and where there is still a liability to pay a fee for the session.

Once 42 absence days have occurred in a financial year, *Child Care Subsidy* can only be paid for any additional absences where they are taken for a reason set out in Family Assistance Law. These reasons are:

- the child, the individual who cares for the child, the individual's partner or another person with whom the child lives is ill and the service has been given a medical certificate by a medical practitioner
- the child is attending preschool
- alternative arrangements have been made on a pupil-free day
- the child has not been immunised against an infectious disease, the absence occurs during an immunisation grace period and a medical practitioner has certified that exposure to the infectious disease would pose a health risk to the child
- the absence is because the child is spending time with a person other than the individual who is their usual carer as required by a court order or a parenting plan, and the service has a copy of the relevant court order or parenting plan for the child
- the service is closed as a direct result of a period of local emergency
- the child cannot attend because of a local emergency (for example, because they are unable to travel to the service), during the period of the emergency or up to 28 days afterwards
- the individual who cares for the child has decided the child should not attend the service for up to seven days immediately following the end of a period of local emergency

Child Care Subsidy and *Additional Child Care Subsidy* is payable for all additional absences and there is no limit on the number of additional absence days a recipient may claim, providing the absence days are taken for specified reasons and supporting documentation, where required, is provided.

The Nominated Supervisor (or relevant delegate) will liaise with families to ensure relevant supporting documentation is received from families where this is required. Families failing to produce a valid reason and/or supporting documentation may not receive a subsidy payment and will, therefore, be liable for the full fees for the absent session.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.99 Children leaving the education and care service premises
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.161 Authorisations to be kept in enrolment record
- National Quality Standard:
 - QA2 – Children's health and safety

- QA3 – Physical environment
- QA6 – Collaborative partnerships with families and communities
- QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) (Administration) Act 1999
- Australian Government Child Care Provider Handbook
- Competition and Consumer Act 2010 (Cth)

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
Date implemented:	1 November 2023
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Review Date	October 2024

6.4 Acceptance and Refusals of Authorisation

Policy Statement

The Approved Provider acknowledges the importance of ensuring parents/guardians/authorised nominees are aware of the process for authority to be given and/or refused for children to participate in relevant aspects of the program through the initial enrolment procedure. Such authorisations and/or refusals must be received in writing and will be handled in accordance with the service's Information Handling (Privacy and Confidentiality) Policy.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(m), 158, 160-162*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [6.9 Childhood Immunisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure parents have the opportunity to authorise or decline relevant elements of the service's programs• Ensure these requests are followed by the service
Nominated Supervisor	<ul style="list-style-type: none">• Lead the service authorisation and record keeping practices to ensure information is received and collate information in a manner that ensures authorisations are followed as parents have requested.• Communicate with parents and support flexibility of amending authorisations.

Procedures

Through the service enrolment process parents will have opportunity to give and/or refuse authority for the following (including but not limited to) the following:

- Sharing of information, relevant to the care of their child (e.g. health, wellbeing and/or cultural requirements) amongst educators and/or support workers who are working within OSHC;
- Provision of emergency medical treatment including obtaining any medical, hospital and/or ambulance service in the case of an accident or emergency involving their child;
- Service educators to liaise with other health/medical professionals in relation to the care of their child;
- Service educators to assist their child to apply a SPF 30+ sunscreen prior to outdoor activities; and
- Service educators to take photos of their child to record important events and special activities as part of the program.
- Any personal information shared on social media/publications.

Parent authority, in writing, will be required before any child will be allowed to leave the approved area of the service. This includes (but is not limited to):

- excursions;
- extra-curricular activities; and
- Regular outings.

The service will waive compliance with this policy where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. The service can administer medication without authorisation in these cases, provided they contact the parent/guardian as soon as practicable after the medication has been administered.

Procedures for parents/guardians/authorised nominees to give and/or refuse authority for children's participation is contained within the relevant policies of this service (e.g. Arrivals and Departures, Excursions and Extra-curricular Activities Policy).

Parents/guardians are responsible for and have the right at any time to change authorisations given to the service in relation to their child and their child's participation in the program. This may be done through completion of an updated enrolment form or other written authorisation.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
 - R.93 Administration of medication
 - R.94 Exception to authorisation requirement—anaphylaxis or asthma
 - R.99 Children leaving the education and care service premises
 - R.102 Authorisation for excursions
 - R.102D Authorisation for service to transport children
 - R.158 Children's attendance record to be kept by approved provider
 - R.160 Child enrolment records to be kept by approved provider and family day care educator
 - R.161 Authorisations to be kept in enrolment record
- R.162 Health information to be kept in enrolment record
- National Quality Standard:
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

Policy Controls	
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6.5 Interactions and Communication with Families

Policy Statement

The service acknowledges the importance of effective communication with families and strives to encourage their participation and involvement to enhance the service provided.

Families are welcome to attend the service and talk to educators during its operations. The Approved Provider encourages families to voice their views in a way that will assist the service to be inclusive and responsive to individual's needs and wishes.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [6.7 Feedback and Complaints Handling](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establishes a culture of openness, transparency and respectfulness.
Nominated Supervisor	<ul style="list-style-type: none">• Be approachable and responsive to families, including making time for discussion.• Ensure relevant communication methods are established with families to support meaningful information sharing.
All Staff	<ul style="list-style-type: none">• Are to be inviting, courteous and respectful in all interactions with families.

Procedures

Parents will be able to access their child anytime they are in attendance at OSHC. Parents and caregivers will have access to meet with the Nominated Supervisor throughout daily sessions and/or by pre-arranged appointment to discuss any issues or concerns with respect to their child and/or the service.

On enrolment, a *Family Handbook* will be provided as part of the service enrolment package. The information contained in the handbook is to guide parents on the expectations for themselves and their child(ren) while they access the service. It will also summarise important aspects of the operations and highlight key policies.

Information for parents will also be communicated through:

1. Emails;
2. Office signage;
3. Meetings between Nominated Supervisor/educators and parents/guardians;

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA6 – Collaborative partnerships with families and communities

Policy Controls	
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6.6 Community Communication and Participation

Policy Statement

The service acknowledges the importance of its local community and seeks to act both in the interests of its community and in enhancing the experience of children as members of the community. The service is committed to practice that reflects Quality Area Six of the National Quality Standards, in particular, building and engaging strong relationships with the community.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure the service's practices reflect the National Quality Framework, including the Service Philosophy reflects the views and wishes of the community.
Nominated Supervisor	<ul style="list-style-type: none">• Establish local connection with individuals and groups and seek out engagement opportunities• Collect and maintain relevant community resources to assist in facilitating and extending connection between families and their community.• Respond to community members with professionalism and in a manner that upholds the service's reputation and philosophy.
Educational Leader	<ul style="list-style-type: none">• Develop a program that is shaped by meaningful engagement with families and the community.
All Staff	<ul style="list-style-type: none">• Display conduct that is inclusive, respectful and inviting to the community.• Respond to opportunities for community connection/engagement with professionalism

Procedures

Engagement through the Program

The service will seek out opportunities for the service to connect and maintain relevant relationship with their local community. The service's planning will reflect opportunities to explore and experience the community surrounding OSHC, and where possible, invite individuals into the service to establish partnerships for children.

Families of the service will be encouraged to suggest suitable and appropriate community venues that may be considered for excursions, incursions etc.

The Educational Leader will be supported to ensure the service's practices are shaped by meaningful engagement with families and the community. The Education Leader will be encouraged to facilitate educators to actively engage in dialogue, open communication and partnerships with families.

Service Delivery and Engagement

The service is committed to upholding a philosophy and program that reflects the needs and worldview of the families that attend and participate. The service will review the Service Philosophy as needed. Opportunities for feedback and information gathering to reflect on the service's connection to the community will be an embedded practice in the quality improvement processes of the service.

Community Services and Resources

The service will retain a collection of helpful resources to support their community of families. The Nominated Supervisor is responsible for collecting and maintaining this catalogue of information and contacts.

Responding to the Community

The Nominated Supervisor will treat all enquiries and concerns seriously. All interactions with community members are to be respectful and courteous. Questions, answers and required information should be responded to promptly and with integrity.

Any concerns about the service which are identified can be managed through [6.7 Feedback and Complaints](#) policy.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.170 Offence relating to unauthorised persons on education and care service premises
- National Quality Standard:
 - QA1 – Education Program and Practice
 - QA6 – Collaborative partnerships with families and communities
- My Time, Our Place - Framework for School Age Care in Australia

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

Policy Controls	
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6.7 Feedback and Complaints Handling

Policy Statement

The service recognises feedback and complaints can be essential to ensuring a high standard of education and care is provided to children accessing the service as well as the broader community. These mechanisms inform quality improvement practices, promote inclusive access to services required to meet the needs of individuals and uphold the rights of children and families.

The service acknowledges the right of children, parents, and others to raise a complaint about any issues that impact the service delivery or the quality of care provided. All individuals will be provided with accessible complaint procedures and information on opportunities to raise a complaint.

Concerns held by stakeholders can range in their level of severity/seriousness. The service's policy reflects this, recognising that **feedback** can be either positive, affirmative communication or alternatively observations about possible suggestions or improvements, whereas **complaints** are a more serious view that something is unsatisfactory or unacceptable. The service is committed to ensuring all claims are handled in a manner consistent with principles of natural justice. Individuals should be free to raise a complaint without fear of retribution or victimisation. The Approved Provider is committed to leading a culture that reflects an openness to address concerns held by stakeholders in a fair and reasonable manner.

In preparing this policy, the Approved Provider also recognises their duty to comply the *Human Rights Act (Qld) 2019* and when relevant follow Departmental policy in handling complaints relating to potential violations of any human right, additionally the Approved Provider recognises duties to comply with *Education and Care Services National Regulations 168 (2)(o) and 173(2)b*.

Related Policies

- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)

Appendices and Forms

- [Complaint Record](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure information about how to provide feedback or make a complaint is provided through enrolment information and staff induction.• Will support the Nominated Supervisor in handling any complaints raised by parents and staff by providing guidance and advice as required.• Periodically review the register of complaints to identify systemic issues not being addressed.• Ensure complaints are managed in a fair manner, giving an opportunity for issues to be managed free from bias.• Provide opportunity for complaints to be raised directly with the Approved Provider where the complainant feels it necessary to do so.
Nominated Supervisor	<ul style="list-style-type: none">• Lead a culture of fairness and ethical practice, supporting individuals to raise a complaint without fear of retribution or victimisation.• Be the initial point-of-contact for most parent, community and employee raised complaints.• Demonstrate a willingness to constructively address feedback raised by stakeholders.
All Staff	<ul style="list-style-type: none">• Be open to accept feedback and complaints raised by children and parents (or other stakeholders).

	<ul style="list-style-type: none"> • Communicate complaints through reporting lines described in the procedure. • Demonstrate a willingness to access complaints mechanisms, raising concerns or complaints as outlined in the procedure where appropriate. • Acknowledge the opportunity to develop practice as a result of feedback and complaints.
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Procedures

Children

1. Children should be supported to express and raise concerns freely. Sensitivity may be required to fully understand the Children's perspectives and interests. Educators should demonstrate proactive openness to hear and understand the concerns and feedback raised by children.
2. All issues and concerns expressed by children will result in support and guidance by Educators, who will seek a timely and fair resolution.
3. Educators will communicate resolved and unresolved concerns to the Nominated Supervisor.
4. Where a resolution isn't immediately found, educators will model constructive behaviours and skills by assisting children to define the problem, its cause, discuss options and solutions, assess strategies and arrive at an agreed course of action.
5. Issues of a serious nature will be dealt with by the Nominated Supervisor and/or Approved Provider and in the appropriate forum.
6. Serious concerns raised by children will be communicated to parents at the earliest possible convenience, ensuring this is completed by the Nominated Supervisor or Responsible Person within 24 hours.
7. Serious concerns reaching the threshold for complaint may require incident reporting and notification to the Regulatory Authority (see [2.4 Incident, Illness, Injury or Trauma](#) policy and [7.7 Managing Notifications](#)).

Parents, Stakeholders and Employees

Parents will be advised of the Feedback and Complaints Policy on enrolment. Details will be contained in the OSHC *Family Handbook*. Information about the name and position of the person to whom complaints may be directed will be displayed in a prominent location. This will also include their contact information including telephone number and email address..

Feedback

Parent feedback is welcomed and encouraged. Parents are welcome to communicate their feedback constructively at any point. Where concerns cannot be immediately addressed, the Nominated Supervisor will follow up with the parents for discussion and steps to resolution. The person taking the feedback (Nominated Supervisor, educator etc.) should clarify if the person is indeed expressing *feedback* or if they would like to raise a *complaint* for further management and/or resolution.

Complaints Process

1. Parents, stakeholders and employees may raise their complaint either verbally or in writing. Any staff member can receive a complaint. Details of the complaint should be directed to the Nominated Supervisor for initial handling.
2. The Nominated Supervisor will be the preferred contact for initial complaints. However, the complainant will have the ability to raise concerns with the Approved Provider directly.
3. The Approved Provider should be the contact for complaints where:
 - a. the complaint is about the conduct of the Nominated Supervisor.
 - b. the complainant is not comfortable to take the complaint to the Nominated Supervisor.
 - c. the complainant is not satisfied with the Nominated Supervisor's handling of the complaint.
 - d. the complaint is regarding a matter of administration, management or governance.
4. Any complaints relating to misconduct of a staff member will be handled in accordance with relevant underperformance or misconduct procedures.

5. All complaints raised are to be documented on the 'Complaints Record' and recorded in the 'Complaints Register'. These records are stored in accordance with the service's information handling policy – securely, maintaining privacy and confidentiality through password protection.
6. The Nominated Supervisor will notify the Approved Provider of any complaints. The Approved Provider and Nominated Supervisor will discuss and plan who is most suitable to fulfil the role of complaint handler. They should be free from bias, impartial, have the capacity to manage the complexity and conflict, and be suitable within the criteria listed above (item 3).

Where a complaint relates to the possible violation or restriction on a **human right**, the Approved Provider will report the details to the Principal for handling. Where the complaint is referred for Departmental handling, the service will be directed by Departmental representatives before proceeding further.

7. Matters of a complaint relating to compliance with the *Education and Care Services National Law and/or Regulations* or the quality of care provided are required to be notified to the Regulatory Authority. If in doubt, a representative should refer to the Regulatory Authority for further guidance and/or assistance.
8. Where the nature of the alleged complaint is suitable to be managed by the Approved Provider (internally), the complaint handler will contact the complainant to discuss (within 48 hours), seeking to identify:
 - a. the nature and details of the complaint
 - b. the resolution sought
9. Where a resolution can be easily addressed, the complaint handler will collaborate an action plan with the complainant and confirm the resolved status of the complaint. These items will be documented by the complaint handler and the complaint will be considered finalised.
10. Where resolution is not easily sought due to:
 - a. strong dispute of the nature of the complaint or objection to the allegations,
 - b. the conclusion will benefit from procedural fairness,
 - c. previous resolutions have been unsuccessful, or
 - d. there is a conflict of interest;

the Approved Provider will take steps to either mediate between the relevant parties (if appropriate) or investigate the matter to conclusion.
11. The complaint handler will notify the complainant of the intention to either undertake mediation or investigation. The complaint handler will also outline anticipated timelines of either process with the complainant at this point. All anticipated timelines should be reasonable in the circumstance.
12. The mediation or investigation may be facilitated by the Approved Provider or outsourced to a third-party. Any mediator or investigator appointed should be free from bias, impartial and have the capacity to undertake the task.
13. Where an investigation is undertaken - the investigator will gather relevant information, including statements from the complainant and/or additional information from relevant parties. The investigator's role is limited to establishing the facts based on the evidence at hand and the balance of probability. The investigator will report back to the Approved Provider addressing if they have found the allegation to be either substantiated or unsubstantiated.
14. The Approved Provider will review the findings of any investigation and provide an outcome to the complainant.
15. All finalised documentation and reports will be stored confidentially (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).

Quality Improvement

The Nominated Supervisor and Approved Provider will review the complaints register periodically to identify opportunities to enhance the quality and address systemic issues not yet identified.

Legal and Regulatory Foundation

National Quality Framework

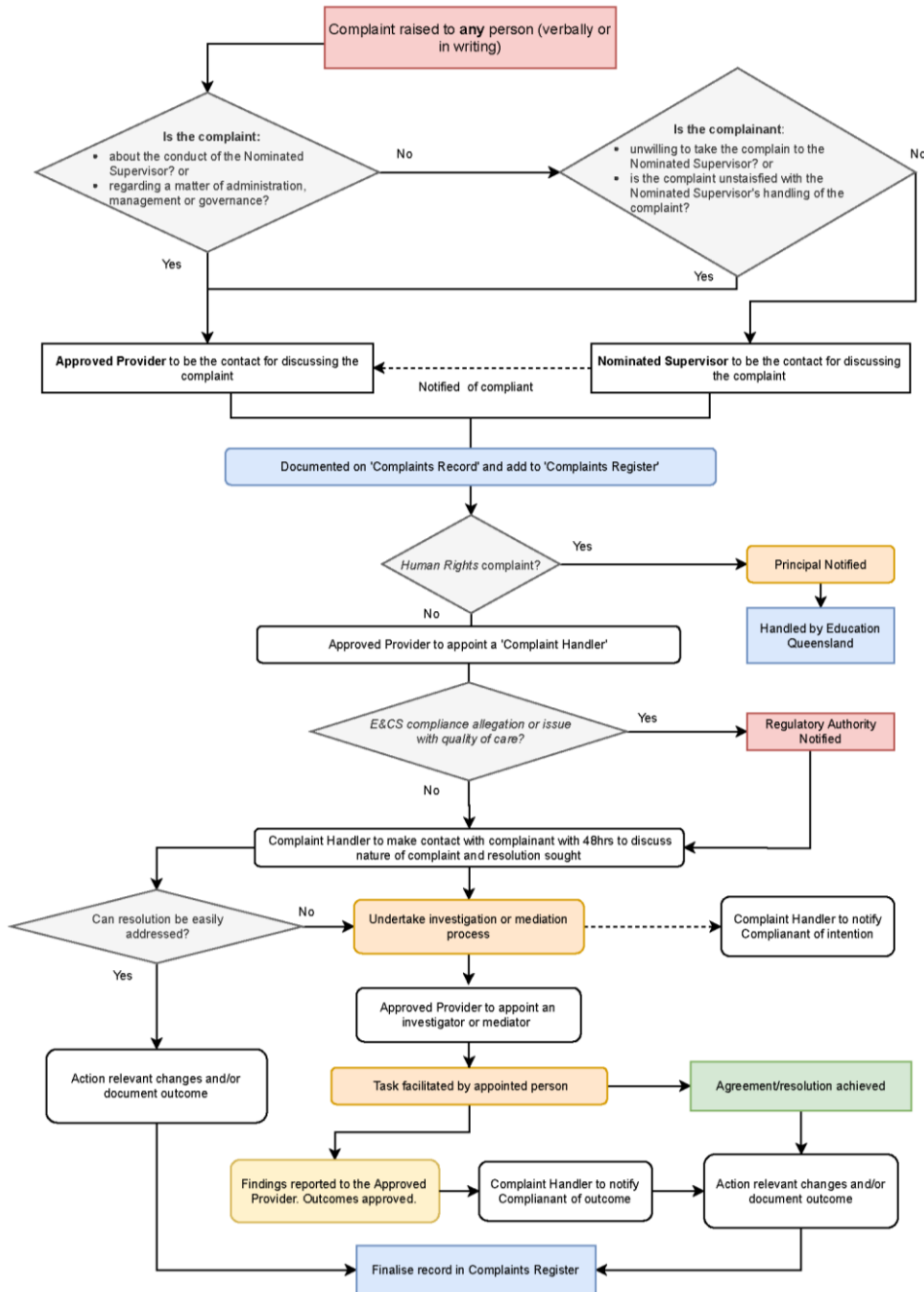
- Education and Care Services National Law:
 - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
- Education and Care Services National Regulations:
 - R.157 Access for parents
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.173 Prescribed information to be displayed
 - R.174 Time to notify certain circumstances to Regulatory Authority
 - R.174A Prescribed information to accompany notice
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- National Principles for Child Safe Organisations
- Department of Education and Training Child Care Provider Handbook
- Human Rights Act 2019 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

Policy Controls	
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6.7.1 Complaint Handling Flowchart



6.8 Visitors

Policy Statement

The service seeks to provide an open and friendly environment, which values and actively encourages community participation and inclusion. In doing so, the service will remain compliant with education and care service legislation providing a safe and supervised environment for children. All visitors (and non-authorised persons) will remain in direct supervision by an educator while children are attending the service.

Visitors are defined as all people other than:

- Employees;
- Children enrolled and attending the service; and
- Parents, caregiver, or authorised persons delivering or collecting children from the service.

The service recognises its obligations to comply with section 170 of the *Education and Care Services National Law*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish effective procedures to ensure suitable persons interact directly with children being cared for by the service.• Establish mechanisms to uphold the safety and protection of children being cared for by the service.
Nominated Supervisor	<ul style="list-style-type: none">• Provide supervision and leadership to ensure established procedures are followed.
All Staff	<ul style="list-style-type: none">• Ensure children are not left unsupervised with visitors or unauthorised persons.• Support all visitors to present to the OSHC office to be signed in/identified.• Monitor for and respond to situations that might risk the safety and wellbeing of children.

Procedures

Any persons unknown to educators of the service will be requested to present to the OSHC office in order to identify themselves. The Nominated Supervisor or Responsible Person will confirm their identity with enrolment records.

Invited Visitors

Other visitors to the service could include incursion staff members or other community members supporting the service's program. All invited visitors will be asked to document their visit in the **Visitor Record**. Regardless of their engagement, where children are being provided care and education, an educator will remain in direct supervision of visitors at all times.

Community Members

At times teachers or other relevant school community members may be in the vicinity of the service's activities. Educators welcome collaboration and participation by the school community but will ensure that where children are being provided care and education, an educator will remain in direct supervision at all times.

Suspicious or Harassing Persons

Any persons who does not have a valid or suitable reason for being on the premises will be respectfully asked to leave by the Nominated Supervisor, or where this is not practicable any other educator.

Where any educator is suspicious or reasonably believes there may be a potential threat to safety or wellbeing for any persons will initiate the service's [Lockdown Plan](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law Act
 - s.170 Offence relating to unauthorised persons on education and care service premises
 - s.171 Offence relating to direction to exclude inappropriate persons from education and care service premises
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA6 – Collaborative partnerships with families and communities.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- Information Privacy Act 2009 (Qld)
- Work Health Safety Act 2011 (Qld)

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6.9 Childhood Immunisation

Policy Statement

The service acknowledges their obligation under the Education and Care Services National Law to ensure the safety and protection of children. This extends to limiting exposure to health and safety risks that may arise from the incidence of vaccine-preventable diseases. Upon enrolment, the service will request parents/caregivers to provide their child's immunisation history statement, in order to determine if enrolment and subsequent attendance will be accepted.

Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [6.2 Enrolment and Orientation](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish procedures to document children's immunisation status to manage the outbreak of infectious disease.
Nominated Supervisor	<ul style="list-style-type: none">• Collaborate with families in the collection of immunisation history information.• Ensure records are maintained and stored to protect the privacy of families.• Communicate the policy and potential exclusion of children in the event of an outbreak of infectious disease.

Procedures

Through the service enrolment procedures, parents/caregivers will be requested to provide a copy of their child's immunisation history statement. This information will be recorded with the children enrolment details and stored in accordance with the procedures outlined in [7.6 Information Handling \(Privacy and Confidentiality\)](#)

This policy will be available to parents/families on request. Information will also be provided to families via the service *Family Handbook*. The service's communication will detail the potential impacts on their child's enrolment or attendance if their child's immunisation status is deemed not up to date.

The service will establish risk management procedures relating to monitoring and managing the spread of vaccine-preventable diseases at the service, this is outlined in *4.2 Infectious Disease*. Procedures will include but not limited to:

- Monitoring and recording children immunisation status through enrolment;
- Monitoring and recording staff immunisation status;
- Communication regarding infectious disease outbreak and management; and
- Limiting attendance for vulnerable children during times of infectious disease outbreak (if enrolment has been accepted).

Immunisation History Statement

The Nominated Supervisor (or delegate) will request copies of each child's immunisation history upon enrolment. Where a family chooses to refuse to provide a copy of the immunisation history, it will be assumed the child has no immunisation history and may be excluded from the service in the event of an infectious disease outbreak (see [2.7 Infectious Diseases – Prevention and Response](#))

An immunisation history statement says whether a child's immunisation status is up-to-date or not up-to-date. This can be:

- an official record issued by the Australian Immunisation Register
- a letter from a recognised immunisation provider (e.g. a GP or immunisation nurse).
- The Personal Health Record (the 'red book') from Queensland Health is not acceptable proof of immunisation because it only contains handwritten updates.

Vulnerable Children

For child/ren who do not have a current immunisation history statement on file, their immunisation status will be considered 'unknown' or 'not up-to-date', until such time as the correct immunisation documentation is provided.

If the parent/guardian does not provide the child's immunisation history statement within the reasonable timeframe allowed, the child's enrolment may be:

- Refused or cancelled;
- Accepted with conditions, such as attendance refused until an Immunisation History Statement or other documentation from a recognised immunisation provider demonstrates full immunisation status; or
- Accepted, with specific conditions in place. Specific conditions may include restricting care during an outbreak of infectious disease at the service.
- Families of vulnerable children (i.e. those children whose immunisation status is deemed 'not up to date') whose enrolments have been accepted (with or without conditions) will not be eligible for Child Care Subsidy (CCS)

Medical Contraindication

Enrolment and/or attendance for a child cannot be refused on the basis of their immunisation status if they have a medical contraindication to some or all scheduled vaccines. Whilst not technically vaccinated, these children are still classified as having an 'up-to-date' immunisation status and this should be indicated on their immunisation history statement.

Conscientious Objection

Children of families who have recorded a conscientious objection to vaccination through the 'Australian Childhood Immunisation Register' will have their immunisation status registered as 'not up-to-date'. Acceptance or refusal of enrolment will be as per the procedures of this policy relating to vulnerable children.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.88 Infectious diseases.
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999
- Public Health Act 2005 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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6.10 Children's Property and Belongings

Policy Statement

The service acknowledges that children will bring to the service or carry with them certain items of personal belongings. This policy details the types of belongings that children may bring with them on a regular basis and the level of responsibility associated with bringing those belongings.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [6.5 Interactions and Communication with Families](#)

Roles and Responsibilities

Approved Provider	• Establish effective policies to manage the expectations of belongings
Nominated Supervisor	• Provide clear communication to families on the expectations for personal belongings.
All Staff	• Follow the service's policies to guide children's' management and care for personal items.

Procedures

Children's Required Belongings

The family will be responsible for providing the child with appropriate belongings and property required for active participation in the service. Such property may include (but is not limited to):

- Footwear;
- Clothing;
- Hats (and sun safety equipment); and
- Bags, lunch boxes and water bottles.

Parents/caregiver will be asked that all personal property and belongings should be clearly named/labelled.

Additional/Special Items

The service will inform parents/caregivers through relevant communication of any additional appropriate personal belongings required at the service for special events etc. Additionally, the service will provide clear communication on any items that might interfere with the program and will guide families for these items to remain at home.

Throughout special program times, i.e. Vacation Care or Pupil Free Days, the children be able to bring with them personal belongings other than typical items (e.g. games and toys). This will be done solely at the discretion and responsibility of the family. No responsibility will be taken whatsoever for any items brought to the service which become lost or damaged as a result.

Care for Belongings

The service will not take responsibility for any of the children's personal property or belongings but will endeavour to:

- Actively encourage children to care for their belongings;
- Remind children when belongings need to be placed in storage, e.g. lunch box into bag;
- Provide suitable storage to keep safe (at parent/family or child request) any item of personal belonging which is either special, expensive or at risk of being damaged;
- Ensure that participation in service activities and experiences does not wilfully damage belongings; and
- Provide protective equipment such as painting smocks for relevant activities.

Families will be asked to label all their child's belongings clearly and consider leaving excessive or non-essential belongings at home.

Lost Property

- Un-named items will be placed in a central location for families to check and take items that belong to their child.
- Lost property unclaimed after three months will be used by the service as spare clothing or given to charity.
- Parents/guardians are asked to let staff/educators know if an item belonging to their child is missing or return items that do not belong to their child.
- Staff/educators will undertake a search for the missing item and place a notice up for other parents/guardians, asking if they have taken the item home by mistake.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety

Policy Controls	
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Policy Group 7

Governance, Leadership and Administration

The service will implement **quality leadership and management systems** to deliver quality care environments for children's learning and development. Well developed, procedures, well-maintained records, shared values, clear direction and reflective practices enable the service to function as a learning community.

An ongoing cycle of review and improvement, including engagement with families, creates a platform for best practice and excellence.

7.1 Nominated Supervisor

Policy Statement

The Approved Provider acknowledges its obligation to appoint at least one suitable person as the Nominated Supervisor at the service. The appointment of the service's Nominated Supervisor will review all relevant elements of suitability and qualification. The Nominated Supervisor will be delegated with the responsibility for managing the day-to-day operations and compliance of the service. Where the Nominated Supervisor is absent from the service, another suitably qualified and competent educator will act as the Responsible Person.

The Approved Provider recognises its responsibility to comply with *Education and Care Services National Regulations 24, 35 145 & 146*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.7 Technology and Screen-Time](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)

- [6.7 Feedback and Complaints Handling](#)
- [6.8 Visitors](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.15 Social Media and ITC Usage](#)
- [7.17 Self-Assessment and Quality Improvement](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure the service operates with a suitable Nominated Supervisor appointed. • Maintain records of the appointment and suitability assessment of each Nominated Supervisor. • Provide notification to the Regulatory Authority where a change in Nominated Supervisor has occurred.
Nominated Supervisor	<ul style="list-style-type: none"> • Agree to their appointment in writing

Procedures

Responsibilities and Function

The Nominated Supervisor is responsible for overseeing the overall operations and management of the service. They are to supervise the day-to-day events of the service and coordinate relevant management activities.

Appointment of the Nominated Supervisor

In determining a person's suitability hold the role of Nominated Supervisor, the Approved Provider will ensure that the person/s:

- Be 18 years or over;
- Adequate knowledge and understanding of the provision of education and care to children;
- Ability to effectively supervise and manage an education and care service;
- Compliance history with the National law and other relevant laws; and
- Prohibition history.

Each person offered the role of Nominated Supervisor/s will be deemed suitable by the Approved Provider. The following documents will be completed and retained as evidence suitability and consent of the appointment:

- [Nominated Supervisor Determination Checklist](#)
- [Nominated Supervisor Compliance History Statement](#)
- [Nominated Supervisor Prohibition Notice Declaration](#)
- [Nominated Supervisor Consent Form](#)

If uncertainty or concern arises about a candidate's compliance history the Approved Provider will contact the Regulatory Authority and enquire if the person is subject to a prohibition notice in any state or territory.

Suitability Review

Where the Approved Provider has concerns impacting the Nominated Supervisor's ability to meet the requirements of their role, a reassessment will be made of the person's suitability to hold the position of Nominated Supervisor of the service. The re-assessment will review previous determinations and other

relevant information and evidence of suitability. The Nominated Supervisor Determination Checklist will be used to review and evidence any suitability reviews.

Notification to the Regulatory Authority

- When changes occur to Nominated Supervisor appointments at the OSHC service the Regulatory Authority will be notified through the NQAITS System (see [7.7 Managing Notifications](#)).
- Written consent will be attached and submitted to the Regulatory Authority via the NQAITS System.

Records

All relevant information relating to the appointment of the Nominated Supervisor will be retained by the Approved Provider (see [7.6 Information Handling \(Privacy and Confidentiality\)](#) including employee details and consent for appointment (*Regulation 145 & 146*).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.161 Offence to operate education and care service without nominated supervisor
 - s.161A Offence for nominated supervisor not to meet prescribed minimum requirements
- Education and Care Services National Regulations:
 - R.117C Minimum requirements for a nominated supervisor
 - R.145 Staff record
 - R.146 Nominated supervisor
 - R.173 Prescribed information to be displayed
- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000

Policy Controls	
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7.2 Determining the Responsible Person

Policy Statement

The Approved Provider must ensure that the education and care service has a Responsible Person in day to day charge of the service. This policy outlines the process for determining the Responsible Person.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(i)(ii), 150, 117A&B*.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
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- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.7 Feedback and Complaints Handling](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)

Appendices and Forms

- [Responsible Persons Determination Checklist and Consent](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the suitability and capacity of persons identified to fulfil this duty.• Ensure relevant documentation is completed and stored.• Monitor and respond to issues relating to conduct, suitability or underperformance.
Responsible Person	<ul style="list-style-type: none">• Lead and support the team of educators to provide quality education and care.• Report to the Approved Provider as required.• Develop a sound working relationship with the Nominated Supervisor debriefing relevant information for further management and support.

	<ul style="list-style-type: none"> • Demonstrate ability to understand and apply the service's policies and procedures. • Report to critical events with diligence and timeliness. • Notify any circumstances that might impact on their suitability or capacity to the Approved Provider.
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Procedures

A Responsible Person must be present at all times when the service is educating and caring for children. If the Approved Provider or Nominated Supervisor is absent, an appointed Responsible Person will be placed in day to day charge of the service.

The Nominated Supervisor of the service must meet the requirements/conditions of the *Education and Care Services National Law Act 2010 and Regulations 2011*.

In the absence of the Nominated Supervisor, the Approved Provider or Nominated Supervisor will designate an educator, with their written consent, to be placed in the day to day charge of the service. This person must meet the requirements/conditions of the *Education and Care Services National Law 2010 and Regulations 2011* with regard to ensuring suitability and that they are not prohibited under the *National Law*.

In determining the Responsible Person, the Approved Provider and/or Nominated Supervisor must determine if that person is suitable. This means considering the capacity of this person to ensure children's safety and wellbeing, having regard to their qualifications, skills, knowledge, work experience and age. This includes the person's:

- understanding of the *Education and Care Services National Law Act 2010 and Regulations 2011 and compliance*;
- understanding of other Legal and Regulatory Foundation such as Child Protection, Confidentiality, Grievance Management, Work Health, Food Handling, etc.;
- capacity to implement emergency and evacuation procedures;
- ability to attend to parent inquiries (either directly or by referral);
- capacity to supervise, manage and lead other educators;
- ability to respond to incidents involving children's health and safety;
- ability to respond to incidents involving the health and safety of educators, volunteers and family members present at the service;
- knowledge (extensive) of service policies and procedures including opening/closing procedures;
- capacity to ensure the safety and wellbeing of all children being educated and cared for while they are the Responsible Person;
- ability to effectively make written records of incidents;
- ability to effectively communicate with children, families, staff, school and relevant authorities;
- ability to reflect and evaluate their performance as the Responsible Person; and
- Ability to understand and articulate practice.

The Approved Provider (or Nominated Supervisor on their behalf) will maintain a record with sufficient evidence of the educator's assessed capability and keep it on file to demonstrate compliance to the Regulatory Authority (e.g. Determining the Responsible Person Checklist, Delegation and Consent form). This will help to show that reasonable steps have been taken to comply with obligations under the *National Law*.

The Approved Provider (or Nominated Supervisor on their behalf) will maintain a staff record including the name of the Responsible Person at the service for each time that children are being educated and cared for by the service (National Regulation 150).

In accordance with regulatory requirements, a sign stating the name and position of the Responsible Person must be displayed at all times children are being educated and cared for (Regulation 173).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.162 Offence to operate education and care service unless responsible person is present
- Education and Care Services National Regulations:
 - R.117A Placing a person in day-to-day charge
 - R.117B Minimum requirements for a person in day-to-day charge
 - R.145 Staff record
 - R.147 Staff members
 - R.151 Record of educators working directly with children
 - R.150 Responsible person
 - R.173 Prescribed information to be displayed
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA7 – Governance and leadership.

Policy Controls	
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7.3 Educational Leader

Policy Statement

The service acknowledges the need to establish a suitably qualified and experienced educator or service leader be responsible for the development and implementation of the program. This role should enhance the practices of educators and be focused on building a collaborative approach to incorporate the ideas and suggestions of a wide range of stakeholders to inform the development of the program.

The service recognises the requirement to maintain records of the designated Educational Leader.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.7 Technology and Screen-Time](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the suitability of the Educational Leader has been documented and the Educational Leader's appointment has been agreed to in writing.
Nominated Supervisor	<ul style="list-style-type: none">• Support the Educational Leader to develop and implement the service's program.• Maintain the records for the designation of the Educational Leader.
Educational Leader	<ul style="list-style-type: none">• Agree to their appointment in writing.• Undertake their role collaboratively and with professionalism.
All Staff	<ul style="list-style-type: none">• Support the development and implementation of the service's program through completing their duties in the programming cycle - adding to the service's documentation and critical reflection to their capacity.

Procedures

Educational Leader Appointment

The appointment to the Educational Leader position will be based on identifying a suitably qualified and experienced educator (or another suitable individual) to fulfil the role for the service. The Nominated Supervisor will coordinate with the Approved Provider to identify and assess a suitable candidate. The Nominated Supervisor (or other appointed persons) will document their assessment of the person's suitability. This will be retained in the appropriate records, including their employee file.

The Approved Provider will ensure the designated Education Leader has confirmed their role in writing. The written evidence will be maintained by the service records, including in the employee file (see [7.6 Information Handling \(Privacy and Confidentiality\)](#)).

Programming Cycle Responsibilities

The Educational Leader will be responsible for:

1. Leading the development of the service program, using the My Time, Our Place: Framework for School Age Care in Australia to inform and guide children's learning and development, and ensure that clear goals and expectations have been established;
2. Ensure that curriculum decision making is informed by the context, setting and cultural diversity of the families and the community;
3. Ensure that the foundation for the program is based on the children's current knowledge, ideas, culture and interests;
4. Ensure that each child's learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluating;
5. Ensure that critical reflection and evaluation of children's learning and development is used for planning and to improve the effectiveness of the program;

6. Mentor educators in the implementation of the program, providing professional support to assist with further skills and knowledge and provide opportunities for ongoing reflection and feedback on current practices.
7. Ensure that families have opportunities and support to be involved in the program and service activities as well as contributing to the review of service policies and decisions.

The Approved Provider and Nominated Supervisor will ensure rostering and resources and adequate for the Educational Leader to fulfil their responsibilities.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.168 Offence relating to required programs
- Education and Care Services National Regulations:
 - R.73 Educational program
 - R.74 Documenting of child assessments or evaluations for delivery of educational program
 - R.75 Information about educational program to be kept available
 - R.76 Information about educational program to be given to parents
 - R.118 Educational leader
 - R.145 Staff record
 - R.148 Educational leader
 - R.173 Prescribed information to be displayed
 - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.
- My Time, Our Place - Framework for School Age Care in Australia.

Policy Controls

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7.4 Leading Compliance and Quality Assurance

Policy Statement

The Approved Provider is committed to ensure every aspect of Payne Road OSHC's operations is compliant with all relevant legal obligations through the various roles as a business, employer and Education and Care Service.

The Approved Provider will be assisted by the service's management to develop sound procedures and systems to meet the outcomes and expectations required. The Approved Provider is committed to ongoing quality improvement and will routinely review and assess the efficacy of implemented action to achieve compliance. All employees will be supported and encouraged to communicate issues or concern of legal compliance to their manager or the Approved Provider for the assessment, review and (potentially) the development of practices or procedures.

Any and all instances on non-compliance with legal obligations will be treated seriously. Review and evaluation to address issues will be a priority of the Approved Provider and its management team.

As an education and care service, we are committed to provide quality and legislative compliant education and care for our community. In doing so we recognise our obligation to meet statutory requirements outlined in the National Quality Standard and the requirements for Approved Providers and Nominated Supervisors under the *Education and Care Services National Law Act and Regulations*. The management and governance of the service have been designed and developed in such a way as to best fulfil our responsibilities to educate and care for children. Payne Road OSHC expects all personnel (staff and the Approved Provider) and to carry out the agreed policies and procedures of the service when discharging their duties.

The [Service Philosophy](#) reflects the commitment quality education and care consistent with the National Quality Framework. Payne Road OSHC's Philosophy reflects the values promoted by the Approved Provider and the Nominated Supervisor and underpins all elements of the service's operations.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
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- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
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- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
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- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.17 Self-Assessment and Quality Improvement](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Lead a culture of quality service delivery and sound business practices. • Active in monitoring and supervising service outcomes and practices to ensure the service is meeting obligations and expectations. • Respond diligently to any concern or non-compliant issues, including relevant reporting.
Nominated Supervisor	<ul style="list-style-type: none"> • Support the supervision and monitoring of practices and the implementation of procedures. • Immediately notify the Approved Provider of concern or instances of non-compliance. • Provide insight to opportunities for practice and policy development to support the outcomes and compliance of the service.
All Staff	<ul style="list-style-type: none"> • Ensure practices and conduct reflect the service policies, procedures and management instructions at all times. • Participate in quality improvement practices and reviews by contributing ideas and perspectives on opportunities for more robust systems and procedures to meet obligations and responsibilities.

Procedures

Awareness of Obligations

The Approved Provider is committed to having a sound understanding of its legal obligations and will maintain an ongoing and contemporary understanding of the responsibilities of themselves and their employees.

The Approved Provider will collaboratively develop and implement policies and procedures to assist in meeting the organisation's legal obligation. These documents will aim to reflect and articulate the responsibilities of all employees, managers and volunteers of the organisation.

Commitment to Quality Systems and Practices

All developed and implemented practices should reflect the high-quality expected by the Approved Provider.

The Approved Provider, Nominated Supervisor and all other relevant stakeholders will be supported to collaborate on sound procedures and practices to uphold a commitment to compliant and high-quality practices.

Responding to Non-Compliance

Any instances of non-compliance will be address with timeliness, ethical integrity and diligence.

In the event of a non-compliant or reportable incident, the Approved Provider will provide all relevant notifications to specific authorities, as it applies.

In responding to compliance incidents and concerns the Approved Provider will take a sound approach to review evidence and resources to address any applicable procedures, practices and expectations.

Establishing Compliance

- Payne Road OSHC's policies and procedures have been developed to be consistent with the requirement of the provision of the National Quality Framework.
- Payne Road OSHC will regularly review and update written policies for the conduct of the service to reflect best practice and legislative requirements
- Payne Road OSHC has developed and managed the implementation of policies required by the *Education and Care Services National Regulation 168* and items outlined in the *National Quality Standard*.

Day-to-Day Compliance

- The Approved Provider will appoint a suitable and qualified Nominated Supervisor for the day-to-day management of the service's operations (see [7.1 Nominated Supervisor](#))
- The Nominated Supervisor to be responsible for day to day compliance of the NQF through:
 - Monitoring establishing systems and processes to ensure compliance with the NQF;
 - Providing ongoing training to all service employees on compliance with the NQF;
 - Monitor, record, and acting on non-compliance by the service or its employees
 - The Nominated Supervisor is to report on all NQF compliance matters to the Approved Provider; and;
 - Maintain up-to-date knowledge of the *Education and Care Services National Law, Regulations* and the National Quality Standard which may affect or require an update to any of the policies and procedures of the service.

Consultation and Collaboration

The Nominated Supervisor and Approved Provider will ensure that all educators within the service:

- Are consulted as appropriate in the development and modification of all relevant policies and procedures;
- Are provided with an up-to-date Educator Handbook containing relevant information to support and guide their understanding of the service's policies and procedures; and
- Are provided with suitable instruction to their obligations in ensuring compliance with Education and Care Legislation on employment (see [4.1 Recruitment and Employment of Educators](#))

Professional Support and Supervision

The Nominated Supervisor in conjunction with the Approved Provider is responsible for regular supervision and support of educations (see [4.5 Employee Performance Review and Support](#)).

Access to Legislation

A copy of the *Education and Care Services National Law* and *National Regulations* will be made accessible at the service's premises at all times for use by the Approved Provider, Nominated Supervisor, staff members, volunteers and parents of children at the service.

Compliance monitoring strategies will be implemented, including:

- Developing compliance management tools for use within the service on a regular basis (i.e. checklists and standards);
- Where there are expectations and responsibilities for legislative compliance, the Approved Provider will ensure policy or instruction is provided to ensure employees and volunteers to meet the service's obligation.
- The Approved Provider will ensure relevant training and instruction to all employees and volunteers is provided to outline appropriate expectations of conduct and statutory responsibilities.
- Monitor the implementation and compliance of the organisation's policies and compliance systems;
- Review and update compliance checklists on a regular basis or as new information regarding changes to the implementation of regulations, legislation or standards becomes available;
- Seeking reputable organisations to conduct external audits and to provide reports regarding compliance issues to the service on a regular basis; and
- Acting on any relevant recommendations or notification to changes in compliance requirements immediately.

Information will be made accessible to families, volunteers and employees regarding the service policies and procedures in relevant handbooks as well as having access to a full copy of the service policies and procedures at the service.

Update, changes and other relevant information will be communicated to families, volunteers and employees through appropriate newsletters, flyers and other methods of communication.

Reformative action

Payne Road OSHC will take immediate action to remedy any non-compliance and policy/procedure breaches identified through:

- Internal compliance monitoring activities
- External compliance monitoring activities such as:
 - Spot checks undertaken by the Regulatory Authority
 - External audits

The service takes the obligation for operational compliance very seriously. Relevant management action will be taken to address any identified concerns. Where required additional external support will be sourced. Alternatively relevant actions will be set out in the QIP, with reporting to be directed back to the Approved Provider in a timely manner.

Compliance History Record

In accordance with Regulation 167, the service will keep a record of its compliance history and make it accessible upon request. The history must include:

- Details of any amendment of the service approval made by the Regulatory Authority under section 55 of the Law;
- Details of any suspension of the service approval (other than voluntary suspension); and
- Details of any compliance direction or compliance notice issued to the approved provider in respect of the service.

The information in the service's compliance record must not include any information that identifies any person other than the approved provider.

Policy and Procedure breaches

Any action undertaken by employees, volunteers and management that is inconsistent with service policy and procedure will be considered a breach.

The action taken to remedy breaches may include:

- Reviewing the policy and procedure and updating as required
- Retraining in the policy and procedure
- Undertaking performance management procedures
- Policy and procedure breaches resulting in non-compliance with the law will be reported in accordance with policy (See [7.7 Managing Notifications](#))

In addition to compliance with the *Education and Care Services National Law and Regulations*, the service will actively work towards compliance with:

- Family Assistance Law (Child Care Subsidy);
- Working with Children (Risk Management and Screening) Act 2000 and Blue Card requirements
- Child protection legislation and frameworks
- Public health laws and directions
- Employment legislation and industrial instruments, including:
 - Industrial Relations Act 2016 (Qld)
 - Workplace health and safety legislation and relevant codes of practice; and
 - Anti-discrimination legislation
- Any other law(s) that impacts or prescribes how the provision of OSHC should be conducted.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law and Regulations
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Anti-Discrimination Act 1991 (Qld)
- Building Fire Safety Regulation 2008 (Qld)
- Child Employment Regulation 2016 (Qld)
- Child Protection Act 1999 (Qld)
- Competition and Consumer Act 2010 (Cth)
- Criminal Code Act 1899 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Education (General Provisions) Act 2006 (Qld)
- Electrical Safety Act 2002 (Qld)
- Fire and Emergency Service Act 1990 (Qld)
- Food Act 2006 (Qld)
- Human Rights Act 2019 (Qld)
- Industrial Relations Act 2016 (Qld)
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- Public Health Act 2005 (Qld)
- Public Records Act 2002 (Qld)
- Racial Discrimination Act 1975 (Cth)
- Sex Discrimination Act 1984 (Cth)
- Superannuation Guarantee (Administration) Act 1992 (Cth)
- Tobacco and Other Smoking Products Act 1998 (Qld)
- Transport Operations (Passenger Transport) Standard 2010 (Qld)
- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

Policy Controls	
Date Endorsed:	19 October 2023
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7.5 Appropriate Governance

Policy Statement

The Approved Provider is responsible to ensure that appropriate governance arrangements are in place to guide service decision making ensuring effective oversight for those with management and control of the service.

Governance (as defined by the Australian Institute of Company Directors) includes the management, rules, Relationships, policies, systems and processes whereby authority within an organization is exercised and maintained. Simply put, an organisation's governance controls the manner in which its business is organised, managed and operated. Governance defines who makes the decisions what policies or processes are adopted, how risks are managed and how the organization remains financially viable.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(l)*

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.7 Feedback and Complaints Handling](#)
- [6.8 Visitors](#)

- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.17 Self-Assessment and Quality Improvement](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure relevant suitability and management capability checks are undertaken and reported. • Provide quality management practices to support and guide the service's employees and leadership. • Ensure quality and risk management practices are sound to uphold the principles of protecting children from harm and risk to safety. • Fulfil reporting and notifying obligations.
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Procedures

The Approved Provider will ensure decision making is consistent with the organisation's governance framework (conceptual structure and set of rules) as articulated in the company's purpose and values.

The Approved Provider will ensure that decision making is informed by and consistent with the requirements articulated in the Legal and Regulatory Foundation, including (but not limited to):

- Education and Care Services National Law and Regulations
- Family Assistance Law

The Approved Provider will ensure sound financial management is maintained to avoid risks associated with insolvency. The Approved Provider is committed to upholding ethical business practices and will cooperate with funding bodies to ensure compliance is maintained.

Professional Support

The Approved Provider will seek relevant opportunities to be supported in the management role, including maintaining membership with peak body and employer organisations.

Management Capability

The Approved Provider will be required to demonstrate 'Management Capability' as well as fitness and propriety. Management Capability includes (but is not limited to) the individuals' qualifications, knowledge, skills and experience in the areas of:

- Governance
- Human Resource Management
- Legislation and compliance
- Risk management and minimization
- Delivering quality programs and services

Refer also to Policy [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#) and Policy [7.4 Leading Compliance and Quality Assurance](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:

- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Education (General Provisions) Act 2006 (Qld)
- A New Tax System (Family Assistance) Act 1999 (Cth)
- P&C Constitution
- National Principles for Child Safe Organisations

Policy Controls

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7.6 Information Handling (Privacy and Confidentiality)

Policy Statement

In providing education and care, the service collects, uses and stores personal and sensitive information relating to families, children, staff and others. The service respects the privacy of all individuals and only obtains information which it needs to protect and care for children and handles that information with confidentiality and sensitivity and in keeping with legal requirements.

The service respects and supports the principles of privacy and confidentiality and complies with the Australian Privacy Principles in relation to information gathered and stored by the service. The Approved Provider recognises their duty to ensure information collected by the service is not shared beyond the legislated provision, including:

- to the extent necessary for the medical treatment of a child;
- with the parent of the child;
- with the Regulatory Authority or an authorised officer;
- where authorised or permitted by law; or
- with written consent with the person providing the information.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations* 158, 160-162 & 168 (2)(l), 181 & 183.

Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure staff are instructed on their role and responsibility in maintaining confidential and private information. • Ensure there are suitable facilities and practices maintained by the service to uphold the commitment of privacy and confidentiality.
Nominated Supervisor	<ul style="list-style-type: none"> • Ensure documentation is kept in a manner that upholds the privacy and confidentiality of children and families. • Maintain record to assist in the delivery of quality care and education. • Support the Approved Provider's obligation to maintain compliance with regulations.

Procedures

The service aims to manage personal and sensitive information in an open and transparent way, with clear guidelines relating to how it is collected and stored.

The service will only collect and record information it needs in order to deliver its service, including the responsibilities to protect and care for children, families and educators.

The service is required to maintain the following records and information (see table below):

Record Type		Details	Storage Medium
Child & Family Records	Enrolment Records	<ul style="list-style-type: none"> • Personal information for children and families • Centrelink Customer Reference Numbers • Authorisations • names, addresses and contact details for family members and authorised nominees • Court orders/parenting plans • children's medical/additional needs details 	Hardcopy and/or Electronic (softcopy)
	Health and Medication Records	<ul style="list-style-type: none"> • Medical conditions details (history, diagnosis, support) • Risk management plans • Action/management plans (including treatment and medication) • Medical practitioner/s details • Immunisation status 	Hardcopy and/or Electronic (softcopy)
	Incident, Injury, Trauma and Illness	Details of: <ul style="list-style-type: none"> • Events including observations, treatment and/or response • Witnesses • Notification and communication 	Hardcopy and/or Electronic (softcopy)
	Accounts	<ul style="list-style-type: none"> • Account statement, transactions, and fees paid/owed 	Electronic (softcopy)
Attendance Records		<ul style="list-style-type: none"> • Days of attendance and absence • Persons signing in and out 	Electronic - CCMS
Evaluations of the Educational Program		<ul style="list-style-type: none"> • Evidence of the development of the program (reflections, observations, learning stories, planning documents) • Evaluations of children's wellbeing, development and learning (reflections, observations, photos and stories) 	Hardcopy and/or Electronic (softcopy)
Staff and Volunteer Record	Employee Personal Details	<ul style="list-style-type: none"> • Personal information on employees such as emergency contact details, qualifications, recognised training and places of previous employment • Blue card records • Rosters and timesheets • Detail of performance reviews and workplace matters • Details of income and payment information 	Hardcopy and/or Electronic (softcopy)
	Volunteer	<ul style="list-style-type: none"> • Records of volunteers and students including personal details and days and hours participating 	

	Nominated Supervisor	<ul style="list-style-type: none"> Record of the nominated supervisor and any person in day-to-day charge of the education and care, including suitability information 	
	Responsible Person	<ul style="list-style-type: none"> A record of the name of the responsible person at each session the service operates 	
	Educational Leader	<ul style="list-style-type: none"> A record of the name of the person designated as the Educational Leader 	
	Workplace Health & Safety	<ul style="list-style-type: none"> Details of accidents, incidents and complaints Risk management assessments Copies of notifications supplied to WHS 	
Management Records	Records of the service's compliance with the Law	Records of any amendment, suspension, compliance notice or compliance direction, including: <ul style="list-style-type: none"> Reasons Dates of effect and/or end dates Steps to be take 	Electronic (softcopy)
	Complaints and Feedback Records	Information may contain: <ul style="list-style-type: none"> Details of grievances, allegations, communication Identifying information about complainants Investigation details Recommendations and outcomes 	Hardcopy and/or Electronic (softcopy)

Permission and Consent

The service obtains the written consent of persons for the use of the information by the service in connection to its operations, delivering the program and complying with its Duty of Care to children, employees and other persons, including those giving the information. This consent is contained within the terms of enrolment.

The service will seek permission to share relevant information as required by law. This is done through the enrolment and other related procedures as new information is received. Families should not unnecessarily refuse relevant and appropriate information to be shared which will improve the service's capacity to meet children's individual needs in the education and care environment.

Relevant information will be shared amongst the educator team, as required, to support children's health, safety and wellbeing.

Record Collection Maintenance

The service aims to manage personal and sensitive information in an open and accountable manner, with clear guidelines relating to how it is collected and stored.

The Nominated Supervisor will ensure that the service's records are reviewed and audited at least annually and otherwise immediately after receiving a request from a parent/guardian to update any detail in the child's record. The service will ensure:

- Fair and open information collection practices;
- Processes and practices that ensure information collected about individuals and families is accurate, complete and current; and
- Use and accessibility of personal information is monitored closely.

The service's electronic records will be backed up by the Nominated Supervisor on a regular basis. Any sensitive record will be stored securely on a password protected system.

Access and Requests for Information

Parents may request information from the Approved Provider with regard to their child/ren's participation and attendance at the service, with the exception of where there is a prohibition from a court order (or similar) preventing this access.

Parents are entitled access to:

- Enrolment records and child information/records (relating to their own children)
- Information about the educational program and menu
- Service policies and procedures
- Quality Improvement Plan

- Fees and statements
- Risk assessments.

Family enrolment and other personal information can be accessed for the purposes of correcting information held by the service.

Requests for information can be directed to the Nominated Supervisor, Responsible Person and/or Approved Provider. Where there are concerns held to the right to information or breaching of confidentiality, all requests will be managed by the Approved Provider.

Information Security

- The service protects the rights of the individual's privacy by ensuring that the information collected is stored securely:
 - All relevant hard copy records will be stored in a locked filing cabinet
 - All electronic (softcopy) documents will be stored on a service owned or subscribed service only. All electronic devices/files are to be secured with suitable password protection
- The Approved Provider, the Nominated Supervisor or Responsible Person will have access to information that is sensitive and confidential in nature.
- All persons with responsibility for the security of confidential information will be expected to maintain a high degree of professionalism and conduct. Any breaches of confidential information will be treated seriously.
- Records held by the service are only to be accessed by persons who need them for the proper conduct of the service and to fulfil the service's Duty of Care and responsibilities to children and families.

Document Retention

The service will maintain a document retention schedule, which will specify the records to be kept by the service and the length of time required by relevant provisions.

The Nominated Supervisor will report the details of the retention and disposal of documentation/records every year to the Approved Provider.

The Nominated Supervisor will prepare documentation for archiving each year. Archived documents will be clearly labelled with planned retention timelines. All archived documentation will be managed by the Approved Provider and stored securely.

The service recognises the current disposal freeze (Public Records Act 2002) applying to records of allegations, investigations or evidence of child sexual abuse and records containing possible corroborating evidence to support future allegations of child sexual abuse.

Sharing of Information in the Protection from Harm

The Approved Provider, Nominated Supervisor and educators are free from liability or breaching Privacy Principles when sharing confidential information, if they are acting honestly and if their actions in doing so are consistent with the purpose of information sharing under the Child Protection Act 1999 (Qld).

Confidentiality and Conduct

The Approved Provider, Nominated Supervisor and employees of the service are bound by the code of conduct in the sharing of information and maintaining confidentiality. Breaches of the code will be treated seriously as outlined by the relevant disciplinary policy.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
 - R.87 Incident, injury, trauma and illness record
 - R.92 Medication record

- R.145 Staff record
- R.151 Record of educators working directly with children
- R.158 Children's attendance record to be kept by approved provider
- R.160 Child enrolment records to be kept by approved provider and family day care educator
- R.161 Authorisations to be kept in enrolment record
- R.162 Health information to be kept in enrolment record
- R.167 Record of service's compliance
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.181 Confidentiality of records kept by approved provider
- R.183 Storage of records and other documents
- R.184 Storage of records after service approval transferred
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)
- Child Protection Act 1999 (Qld)
- A New Tax System (Family Assistance) Act 1999 (Cth)
- Department of Education and Training Child Care Provider Handbook
- Public Records Act 2002 (Qld)

Policy Controls

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7.7 Managing Notifications

Policy Statement

The Approved Provider recognises its obligation to ensure sound reporting and information sharing is established and effective. The service will ensure notifications are made as required and to the relevant authority. The Approved Provider recognises as an approved Education and Care Service it must notify authorities within statutory guidelines to ensure compliance.

This policy and procedure developed by the service aims to identify specific obligations for staff and management to ensure proper internal and external reporting.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Law Sections 39, 56, 59, 173 & 174* and *Education and Care Services National Regulations 12, 36, 37, 175, 176, & 168 (2)(b)(c)(d)(e)(o)*.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Seek appropriate advice from the Regulatory Authority, when required.• Report all matters outlined in the regulations for notification to the Regulatory Authority.• Report other notifiable information to relevant bodies as required.
Nominated Supervisor	<ul style="list-style-type: none">• Report relevant matters to the Approved Provider as relevant.• Seek support and advice from the Approved Provider for significant matters.• Communicate with parents routinely, ensuring significant matters are notified in a timely manner, and at a minimum within 24 hours.• Support staff to report and record information timely and accurately.• Ensure compliant storage of reports and information.
All Staff	<ul style="list-style-type: none">• Record and report information necessary for notification to the Regulatory Authority.• Seek support from the Nominated Supervisor (or relevant other) where required.

Procedures

1. All educators are to communicate any concern, incident or suspicions to the Nominated Supervisor or Responsible Person as soon as practicable.
2. Once an incident has been managed the Nominated Supervisor or Responsible Person has the role in ensuring reporting to the Approved Provider is completed within a lawful and reasonable timeline.
3. The Approved Provider will be the first contact. Where this is not achievable or suitable the Nominated Supervisor or Responsible person will accept the communication on behalf of the Approved Provider.
4. The Nominated Supervisor and Approved Provider will decide on a plan of action and tasks to be undertaken in order to adequately respond and meet reporting requirements.

Regulatory Authority Notifications

The *Education and Care Services National Law and Regulations* sets out incidents and allegations that are notifiable to the Regulatory Authority while a child or children are being educated and cared for by the service. These are outlined in the following table:

Incidents and Complaints		
Serious incident - Death of a child		As soon as practicable, but within 24 hours
Serious incident	Any incident involving serious illness of a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital	Within 24 hours
	Any incident involving serious injury or trauma to a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital, or a reasonable person would consider that the child would require urgent attention from a registered medical practitioner	
	Any emergency for which emergency services attended	
	A child is missing or cannot be accounted for or appears to have been removed from the premises by a person not authorised by a parent	
	A child is mistakenly locked in or out of the premises or any part of the premises	
Any complaint alleging that a serious incident has occurred or is occurring at an education and care service, or the National Law has been contravened		Within 7 days
Any incident that requires the approved provider to close, or reduce the number of children attending the service for a period		
The centre-based service is educating and caring for extra child/ren due to an emergency		
Any circumstance at the service that poses a risk to the health, safety or wellbeing of a child attending the service		
Any incident where the approved provider reasonably believes that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service		
Allegations that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service		
Change to information about Approved Provider		
Change to address or contact details of approved provider		Within 7 days
Any change relevant to approved provider's fitness and propriety		
The appointment of receivers or liquidators to the approved provider or any matters that affect the financial viability and ongoing operation of the service		
Death of approved provider		
Notice of any appointment or removal of a person with management or control of service		Within 14 days
Notice of change in name of approved provider		
Change to information about education and care service		
Any change to the hours and days of operation of the service		Within 7 days
Any proposed change to the premises		
Ceasing to operate the education and care service		
A nominated supervisor is no longer employed at the service, is removed from the role or withdraws consent to the nomination		
Adding nominated supervisor(s)		At least 7 days prior to commencement (or as soon as practicable but no more than 14 days after commencement)
Suspension or cancellation of a working with children card or teacher registration of a nominated supervisor, or disciplinary proceedings of a nominated supervisor under an education law		Within 14 days

Intention to transfer service approval	At least 42 days
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The Approved Provider/Nominated Supervisor of the service, under the *Education and Care Services National Law Act 2010* will make notifications to the Regulatory Authority through the National Quality Agenda IT System (NQA IT System), or by contacting the office directly.

Department of Education (CCS)

The *Australian Government* require that Providers must notify the *Department Education and Training* of any of the following changes to their service(s), within the timeframe specified. Penalties may apply if providers fail to make required notifications.

Operators must notify about the following matters:

Matters to be notified	Timeframe
The number of anticipated vacancies (an ongoing OSHC full-session vacancy).	By 8.00 pm (AEST) each Friday.
The total hourly fee charged by the service including any change to the fee information.	Within 14 days
Any change to the operating hours.	
Ceasing to operate an approved child care service.	At least 42 days
Ceasing to operate to avoid being in breach of a law of the Commonwealth, a state or a territory or due to circumstances beyond the provider's control (when 42 days' notice cannot be given).	Within 24 hours after ceasing to operate the service.
Change of physical or postal address of the provider or the service's premises.	No later than 30 days
Change to the name of the provider or the service.	Within 14 days
Change contact details (email, website, phone, fax) of the provider or service:	
Information about any new person with management or control of the provider (including any person who becomes responsible for the day-to-day operation of any of the provider's approved child care services)	Within 7 days
Change of the name or contact details for a person with management or control of the provider (including any person who is responsible for the day-to-day operation of any of the provider's approved child care services)	
The provider becomes aware, because of a background check undertaken for a specified person, that the person: <ul style="list-style-type: none"> has a serious conviction or finding of guilt for any of the following offences under a law of Australia or of a foreign country <ul style="list-style-type: none"> an indictable offence punishable by a maximum of two years imprisonment or 40 penalty units an offence involving violence or a sexual offence an offence involving fraud, stealing or dishonesty is an undischarged bankrupt, or was a director or secretary of a corporation when the corporation went into administration, receivership or liquidation, or at any time during the 12 months beforehand. 	
An event or circumstance in relation to a person with management or control of the provider (including a person responsible for the day-to-day operation of any of the provider's approved child care services) that reasonably indicates that the person is not likely to be a fit and proper person to be involved in the administration of Child Care Subsidy.	
A person stops having management or control of the provider (including when a person stops having day-to-day responsibility for the operation of any of the provider's approved child care services).	
An educator obtains a child care qualification from a registered training organisation	

A provider or a person with management or control of the provider obtains an interest, or is likely to obtain an interest, in a business which may affect their ability to comply with Family Assistance Law, where the approval may benefit the business or where a conflict of interest might reasonably be perceived to exist.	
Change in the status of a working with children card (blue card) for anyone who is required to have such a card	Within 24 hours
The provider enters into administration, receivership, liquidation or bankruptcy, and the details of this event.	
Unexpected closure of any of the provider's approved child care services due to unforeseen circumstances.	
A serious conviction or finding of guilt of a person with management or control of the provider (including a person who becomes responsible for the day-to-day operation of any of the provider's approved child care services),	

All of these notifications can be made through third-party software or the Provider Entry Point (PEP). Specific details, additional matters for notification and timeframes for notification can be accessed on the Department of Education and Training website.

Mandatory Reporting (Child Protection)

Where a staff member of the service has a reasonable suspicion, a child may be in need of protection they are to follow the [2.7 Handling Disclosures and Reporting Suspicions of Harm \(Mandatory Reporting\)](#) policy and report the matter to Child Safety.

Work Health Safety

The *Work Health Safety Act 2011 (Qld) 2011* sets out what sort of incidents are notifiable to Work Health and Safety Queensland (WHSQ). An incident is notifiable if it arises out of the conduct of a business or undertaking and results in the death, serious injury or serious illness of a person or involves a dangerous incident. The business must keep a record of each notifiable incident for at least five (5) years from the date notified to WHSQ.

Reports and Records

All relevant reports and records will be stored in accordance with the procedures listed in [7.6 Information Handling \(Privacy and Confidentiality\)](#).

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
 - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulations:
 - R.12 Meaning of serious incident
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
 - R.174 Time to notify certain circumstances to Regulatory Authority
 - R.174A Prescribed information to accompany notice
 - R.175 Prescribed information to be notified to Regulatory Authority
 - R.176 Time to notify certain information to Regulatory Authority
- National Quality Standard:
 - QA2 – Children's health and safety
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)
- Work Health Safety Act 2011 (Qld)
- National Principles for Child Safe Organisations

Policy Controls

Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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7.8 Policy Development, Review and Implementation

Policy Statement

Payne Road OSHC acknowledges the fundamental need for effective policy and procedures to guide and manage the service's delivery and the duties of employees. The service's policies should reflect the statutory obligation of the service and its employees. Therefore, policies should be developed through integrating a wide range of relevant information sources including legislation, guidelines and operating handbooks.

The service's policies and procedures will undergo regular review to support the effectiveness and coverage. The Approved Provider will maintain the authority to approved and endorse developed policy; however, the services employees will have an active role in the facilitating policy review and the drafting of new and amended policy. The service's suite of policies will be reviewed at least **annually** or where required.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Service National Regulations 168, 170-172* to ensure relevant policies are developed, accessible by employees and families. The service will ensure it upholds adequate notification to families where there are changes to policies.

Related Policies

- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Develop and implement required policies for Regulation compliance.• Support ongoing development and review of service policies to drive quality education and care.• Review and endorsed (ratify) proposed policy suggestions.• Ensure access and compliance with policies, addressing concerns as they arise.
Nominated Supervisor	<ul style="list-style-type: none">• Support the Approved Provider through identifying, drafting and proposing amended changes to policies.• Maintain a record of amendments and changes to service's policies.• Maintain accurate knowledge of service's requirements and advise the Approved Provider of any required policy developments.• Monitor and supervised the implementation and compliance of policies.• Ensure employees, families and other relevant stakeholder are provided with access and information to policies as required.
All Staff	<ul style="list-style-type: none">• Contribute ideas, wishes and insights to the quality and coverage of policies.• Ensure policies and procedures are followed at all times.

Procedures

Policy and Procedure Quality Standards

- The service will develop policies and procedures which reflect the true nature of the service's operations.
- Where possible, specific roles will be identified to outline responsibilities and delegation.
- Translating legislative obligations will be reflected and explicitly stated.
- The service will ensure that generic policy documents, samples and templates adopted are reviewed and customised to meet the individual and unique circumstance of the service.
- All policies will include references to external documentation, resources, guidelines and principles used to develop or guide the development of the policy.
- Version control will be used to manage policy development and communication records.
- Policy sourcing should also take into considerations other provisions such as copyright laws.

Policy Review

- Policies will be developed or amended either as needed or as a result of periodic review.
- The suite of policies will be reviewed by the Nominated Supervisor each year. The Nominated Supervisor can delegate out aspects of the review to suitably capable educators. The Nominated Supervisor will present a report of the review to the Approved Provider
- Any proposed amendments or policy development will be drafted and submitted to the Approved Provider for ratification/approval.

Policy Approval

- Policies and procedures may be drafted by
 - Suitably capable employees;
 - the Approved Provider; or
 - with prior approval, a appropriate third party.
- Where substantial change is being proposed, the writer should consult with the Approved Provider to discuss a summary of the proposal. Additional consultation may be directed as part of policy development.
- The Approved Provider will review proposed policies and can either:
 - ratify,
 - reject, or
 - request amendments.
- All ratified policies will have the date and version recorded.

Policies Compliance

- Employees are expected to maintain compliance with service policies at all times.
- Employees will be provided with adequate induction to orientate their knowledge of the service's procedures and expectations for performance and conduct.
- Policies will be made accessible, and where possible, will outline clear expectations and responsibilities to support employees in their duty.
- Where employee's conduct for performance is not consistent with the service's policies the employee will be managed by the procedures outlined in [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)

Policy Accessibility

- The service's full policy and procedure manual will be available at the service's premises for employees, volunteers and families to access when required.

Policy Notification and Communication

- The Approved Provider will ensure families are notified at least 14 days before any policy or procedure referred to in National Regulation 168 takes effect.
- Notification to families will include email messages and signage at the service.
- The date of notification will be recorded on the policy (where relevant)

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA4 – Staffing arrangements
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- National Principles for Child Safe Organisations

7.9 Budgeting, Procurement and Financial Planning

Policy Statement

The Payne Road OSHC Approved Provider seeks to implement measures which provide financial protection and minimise the risk of fraudulent, inappropriate or negligent financial practices. The service takes a responsible approach to fiscal planning and spending to ensure these risks are well managed. The service's financial management practices are designed and implemented to protect both the financial reputation of the organisation and its ongoing viability.

To ensure the effective and efficient management of the service, the Approved Provider and Nominated Supervisor will work collaboratively together to develop workable and responsible budgets and financial planning guidelines for the ongoing operation of the service.

The following principles will be adopted and reflected all purchasing decisions of the service:

- Open, transparent and effective communication;
- Value for money;
- Enhancing the capabilities of local business and industry;
- Environmental protection; and
- Ethical behaviour and fair dealing.

Related Policies

- [7.5 Appropriate Governance](#)
- [7.16 Asset Management](#)
- [7.10 Setting, Reviewing and Managing Fees](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish sound processes for the service's financial management consistent with established financial management procedures of the school.• Ensure budgets are prepared and are adequate to meet the needs of providing quality education and care.• Use judgement and act in a manner that supports the principles of the policy for purchasing decision.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor the service's day-to-day spending and financial management, ensuring compliance with organisational policy and procedures.• Support the Approved Provider in preparing, reporting and reviewing service budgets and financial reports.• Coordinate and supervise the processing of fees and income.• Use judgement and act in a manner that supports the principles of the policy for purchasing decision.• Report any concerns or issues immediately to the Approved Provider.
All Staff	<ul style="list-style-type: none">• Follow the service's procedures for spending within the level of authority, approval or delegation.

Procedures

Annual Budget

Policy Controls	
Endorsed by:	Approved Provider
Date Endorsed:	19 October 2023
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1. A service budget will be prepared for by the Approved Provider, this will provide guidance on spending and additional resourcing for the service.
2. The budget will reflect the provision of quality care are include at least the following items:
 - a. Staffing arrangements (remuneration and associated costs for qualified and adequate staff)
 - b. Facilities and asset maintenance/replacement
 - c. Program, medical and safety equipment (or replacement)
 - d. Professional development needs
 - e. Costs of care (food, consumables etc.)
3. The Approved Provider and Nominated Supervisor may seek external expertise to inform budgets using relevant industry standards.

The service's approved budget will form the standard purchasing delegation for the Nominated Supervisor to purchase or procure items using the following guide to approval.

Purchasing and Procurement

<i>Items under \$500</i>	<ul style="list-style-type: none"> General purchasing for day to day operational items such as groceries, consumables, arts and crafts materials and replaceable items such as sports equipment will be done in accordance with the approved service budget by (or overseen by) the Nominated Supervisor. The Approved Provider will ensure that the Nominated Supervisor has access to accounts for the efficient purchasing of day to day items. Purchasing of items of less than \$500 includes the use of petty cash or use of bank or other business accounts (e.g. Officework or grocery account).
<i>Items \$500 to \$5,000</i>	<ul style="list-style-type: none"> The purchase value of single items over \$1000 should be approved by the Approved Provider prior to purchase, even if the items have been included in the service's annual operational budget. Other purchase requests must be in writing to the Approved Provider of the service. The responsibility for ordering will be with the service Nominated Supervisor or Administrator. In extenuating circumstances, authorisation for purchases of single items over \$1000 may be approved in events of emergency where two approved members of the executive have been contacted and agreed to the expense. Documentation of such discussion will be made and presented at the next Approved Provider meeting.
<i>Items above \$5,000</i>	<ul style="list-style-type: none"> All purchases over \$5,000 will require two written quotes or research evidence. Purchases over \$20,000 will require three written quotes or research evidence depending on the scope of purchase.

The Approved Provider will ensure that the purchasing policy does not negatively impact on the efficient operations of the service and that all purchase requests are followed up in a timely manner.

The service will avoid using cash for purchasing, where possible. The Approved Provider has made a specific debit card facility available.

All purchasing will require an appropriate receipt to be retained. These financial documents will be stored and collated for bookkeeping and reporting purposes.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.103 Premises, furniture and equipment to be safe, clean and in good repair
 - R.104 Furniture, materials and equipment

- National Quality Standard:
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- P&C Accounting Manual
- Australian Government Child Care Provider Handbook

Policy Controls

Endorsed by:	Approved Provider
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7.10 Setting, Reviewing and Managing Fees

Policy Statement

The service aims to provide a quality service to families at a reasonable cost. The Approved Provider will set fees based on the annual budget required for the provision of a quality Outside School Hours Care service in keeping with the service's philosophy statement, program goals, and these policies and procedures. Child Care Subsidy is available to all families who meet eligibility guidelines (including residency, activity and immunisation).

The Service will issue a Statement of Fees to account holders each week consistent with the billing cycle. Account holders (parents and carer) are to notify the Nominated Supervisor if they believe there is an error in their billing or fees charged.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011* 168 (2)(n) and 172(2).

Related Policies

- [7.5 Appropriate Governance](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Undertake an annual review of fees charged based on annual budget required for the provision of quality OSHC.• Comply with Child Care Subsidy requirement including the management being 'fit and proper persons'.• Ensure systems to manage fees (including third-party software) and record keeping practices reflect the requirement of the Child Care Provider Handbook.
Nominated Supervisor	<ul style="list-style-type: none">• Respond to concerns or issues raised by parents/account holders.• Ensure practices reflect the requirements outlined in the Child Care Provider Handbook.• Communicate accrued debts and payment issues to the Approved Provider.
Administrator	<ul style="list-style-type: none">• Undertake the issuing of statement and collection of fees as directed by the Approved Provider and procedures below.• Submit session report and enrolment information to Department of Human Services.• Collect payments from parents/account holders and issue receipt.• Monitor account debts and liaise with parents/account holders.

Procedures

The current fees for the service are included in a Fee Schedule on display near the sign in area.

Fees are reviewed annually by the Approved Provider in consultation with the Nominated Supervisor. Typically, fee adjustments will occur at the start of term 3 each school year. Fee increases are based on of the provision of quality Outside School Hours Care, reflecting the costs associated with meeting the service's philosophy, goals of the program and within the framework of the service's policy and procedures.

Communication of fee changes occur at least **14 days** before making changes to the rate of fees. Notification occurs via email, signage near entrance and the newsletter.

Vacation Care Fees

Excursion and incursion fees are compulsory according to days booked and fees will be calculated following a cost analysis for each event.

Issuing of Statements and Payment of Fees

Fees will be paid, for all days booked, by Friday each week.

A statement will be issued via email each week for all families showing the previous week's charges and transactions. The statement will show reduced fees and estimated reduced fees for each child receiving Child Care Subsidy. Accepted payment methods is limited to either eftpos or direct deposit.

Child Care Subsidy

The appropriate personnel will keep parents informed about the availability of Child Care Subsidy (CCS) by:

- Advising all parents of their option to apply for Child Care Subsidy with Centrelink through information provided in the enrolment package; and
- Making information available for parents in newsletters, on websites, through Facebook page and by email.

To be eligible for reduced fees families are required to provide all personal information as requested on the enrolment form. Full fees will be payable without the subsidy until the service receives current and correct information from the family such as CRNs and that information has been acknowledged by Centrelink. Families should lodge their claim for Child Care Subsidy prior to enrolling their child. Subsidy claims can only be backdated 28 days before the claims were made.

Credit for fees already paid will be made in accordance with the Australian Government's Child Care Provider Handbook.

All CCS records will be kept for 7 years from the last entry on the record in accordance with the Australian Government's Child Care Provider Handbook (see [7.6 Information Handling \(Privacy and Confidentiality\)](#))

Late Collection Fees

Closing time is 6.00pm. Parents who collect their children after this time will incur a late fee of \$15 per 15 minutes increments.

Overdue Fees

Parents in hardship are encouraged to discuss their matters with the Nominated Supervisor to explore possible options and access to additional supports prior to account being in arrears.

1. Where there are outstanding fees and no payment has been made in at least 2 weeks the Nominated Supervisor will prompt the parent verbally and confirm the agreed arrangement via email.
2. If no payment has been received as agreed or where there has been consistent failure to pay accounts, the Approved Provider will notified and will contact the parent/account holder for immediate remedy.
3. The Approved Provider will outline the terms of payment of the service and seek to address an ongoing resolutions. Parents will be informed that continued enrolment is dependent on the payment of the fees outstanding.
4. Where no contact can be made, or where payment of fees continues to have not been received within the agreed timeframe, the enrolment will be suspended and the debt may be referred to a collection agency (or QCAT).
5. Where resolution through suspension has not been achieved the Approved Provider may, in its discretion, cancel the enrolment and suspend any future attendance.

Cancellations and Refunds

Cancellations of bookings will be made in accordance with the Bookings and Cancellations Policy (see [Policy 6.3](#)) and will incur any relevant fees and charges according to such policy.

If a family has permanently cancelled care and their account is in credit, they must provide written instructions to the service indicating:

- A refund is required and have provide account details for transfer, or
- A donation of credit balance to the service

Changes to Collection of Fees

In the event the service makes changes to the amount or the way in which fees are charged, the service will communicate this change at least **14 days** before changes taking effect. Communication will occur via email, notices and newsletter updates.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Department of Education and Training Child Care Provider Handbook
- Competition and Consumer Act 2010 (Cth)

Policy Controls	
Endorsed by:	Approved Provider
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7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy (ACCS)

Policy Statement

The service is committed to ensuring that Child Care Subsidy (CCS) and Additional Child Care Subsidy (ACCS) is administered effectively and in accordance with relevant legislation. The procedures outlined in this policy describe the steps taken to ensure compliance with the service's obligations as an approved child care service for the purpose of administering ACCS.

Additional Child Care Subsidy provides additional fee assistance to support vulnerable or disadvantaged families and children. This support recognises the preventative and protective influence of quality child care on a child's health, wellbeing and development, and the importance of continuity of care.

There are four different payments under Additional Child Care Subsidy:

1. Additional Child Care Subsidy (child wellbeing) — to help children who are at risk of serious abuse or neglect
2. Additional Child Care Subsidy (grandparent) — to help grandparents on income support who are the principal caregiver of their grandchildren
3. Additional Child Care Subsidy (temporary financial hardship) — to help families experiencing financial hardship
4. Additional Child Care Subsidy (transition to work) — to help low-income families transitioning from income support to work.

The service recognises that strategies must be in place to ensure the service complies with the requirements for the administration of Child Care Subsidy, including reporting and that the service has an obligation to design and implement procedures for the detection and prevention of fraud in relation to CCS payments.

Related Policies

- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.5 Appropriate Governance](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.10 Setting, Reviewing and Managing Fees](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the service fulfils its duties for assessment of fit and proper persons.• Ensure only authorised persons has access to the service CCS administration software
Nominated Supervisor and Responsible Persons	<ul style="list-style-type: none">• Monitor the day-to-day compliance of the services IT systems to ensure only authorised persons are accessing CCS software.• Support families to access ACCS services as required.• Monitor and respond to 'at-risk' children to ensure access to ACCS (Child Wellbeing) as required.

Procedures

The service will implement the following procedures to comply with the administration requirements of child care subsidy:

- Ensure that only ***authorised persons** within the service have access to the service's licensed software for the administration of CCS
- Ensure that all staff who require access to the system used to administer CCS meet the fit and proper requirements
- Ensure that all committee members of the 'Approved Provider' meet the **fit and proper** (see below) requirements
- Reconcile payments received with payments expected

The service will implement procedures to detect and minimize fraud, including:

- Ensuring all “Persons with Management or Control of the Provider” (e.g. the Board Members and Managers), “Persons Responsible for the Day to Day Operation of the Service” (e.g. Nominated Supervisor, Responsible Person or Administrator of CCS) meet specified **fit and proper requirements
- Ensuring all service finances are handled in accordance with service policy, accounting manuals and best practice guidelines
- Ensuring there is no personal ‘conflict of interest’ of staff or the governing body in the management of CCS
- Ensuring staff are appropriately trained in CCS compliance and the use of service software

**Authorised person means a person who has been identified by the service in writing as having permission to access the service’s CCS administration software and has been provided with a username and password to access the system. Access may include management of enrolments, bookings, absences and cancellations. The Approved Provider will ensure ‘Authorised’ persons are appropriately trained and competent in the use of the software*

Fit and Proper Persons

A ‘fit and proper person’ is a person (who has met the requirements of Section 43 of the Child Care Subsidy Minister’s Rules 2017) which requires a provider to undertake particular suitability checks for each Person with Management or Control of the Provider. These are:

- An Australian National Police Criminal History Check dated no earlier than 6 months from the date the individual was linked to the organisation.
- A Working With Children Check (Blue Card) if the Person with Management or Control is required to hold such a check under their state or territory’s regulatory law.
- National Personal Insolvency Index check performed using the Bankruptcy Register Search service provided by the Australian Financial Security Authority (AFSA) dated no earlier than 3 months from the date the individual was linked to the organisation.
- A Current and Historical personal name extract search of the records of the Australian Securities and Investments Commission (ASIC) dated no earlier than 6 months from the date the individual was linked to the organisation.
- Evidence that the person does not appear on the banned and disqualified register held by ASIC (in the form of a computer printout of the results of the search) dated no more than 3 months from the date the individual was linked to the organisation.

The service understands that evidence of these checks are required in a CCS application and, where personnel are added after CCS approval, the evidence must be made available to be shown to the department on request.

Additional Child Care Subsidy (ACCS)

The service will maintain access to a current copy of the Australian Government Child Care Provider Handbook to support in accessing relevant guidance on ACCS.

As Providers, the service is centrally involved in identifying children who require extra support through Additional Child Care Subsidy (child wellbeing). Providers are not involved in making applications for the other types of Additional Child Care Subsidy, although they may wish to help families whom they think may be eligible by encouraging them to contact Centrelink and apply for additional assistance. Providers will be advised of individuals using their service who are receiving these other payments.

An overview of these types of Additional Child Care Subsidy is available in the Australian Government Child Care Provider Handbook.

ACCS (Child Wellbeing)

Additional Child Care Subsidy (child wellbeing) provides additional child care fee assistance to an individual (or provider) in respect of children at risk of serious abuse or neglect. It helps to address cost barriers families may experience, so that children can either enter or remain engaged with child care.

For the purposes of Additional Child Care Subsidy (child wellbeing), a child is taken to be at risk of serious abuse or neglect if the child is at risk of experiencing harm, as a result of current or past circumstances or events that resulted in the child being subject to, or exposed to, any of the following:

- serious physical, emotional or psychological abuse, or
- sexual abuse, or
- domestic or family violence, or
- neglect.

The Minister's Rule sets out in detail the circumstances when a child is taken to be at risk of serious abuse or neglect for the purposes of Additional Child Care Subsidy (child wellbeing).

The definition of 'at risk' includes situations where the child is likely to experience those circumstances in the future (for example, the future risk is 'real and apparent'). This allows families to be eligible for the subsidy at the appropriate earliest point and potentially before they are known to a child protection agency.

Any child who is identified as being at risk under state or territory child protection law will meet the definition of at risk and the individual (or provider) will, therefore, be eligible to receive the payment.

There are two ways for the service to access Additional Child Care Subsidy (child wellbeing):

- 1) Giving an Additional Child Care Subsidy (child wellbeing) certificate
- 2) Additional Child Care Subsidy (child wellbeing) determination.

When accessing ACCS the Services will refer to the Australian Government Child Care Provider Handbook for up-to-date information and guidance.

Other Hardship

On a case by case basis, the Approved Provider may consider written requests for support from the Approved Provider when the hardship does not meet the threshold for ACCS, however, under Family Assistance Law the service is unable to waive the gap/parent's co-contribution.

Legal and Regulatory Foundation

National Quality Framework

- National Quality Standard:
 - QA2 – Children's health and safety
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook

Policy Controls	
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7.12 Insurance

Policy Statement

Payne Road OSHC recognises and acknowledges the need for a responsible approach to identifying and managing risks and therefore, will ensure there is adequate insurance protection for the service. Employees, children, parents, volunteers and management will be protected from the financial repercussion of public liability through the service's purchasing of suitable insurance.

Payne Road OSHC also recognises the responsibility to comply with insurance requirements outlined in the *Education and Care Services National Law (Section 51) and Regulations (29 & 180)*.

Related Policies

- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure suitable insurance coverage, in particular, Public Liability Insurance is maintained.• Provided evidence of currency to the Nominated Supervisor for recording.• Monitor and respond to assessments of coverage for insurance products for potential liabilities.• Liaise with the relevant insurer when submitting an insurance claim.
Nominated Supervisor	<ul style="list-style-type: none">• Retain evidence of Public Liability coverage at the service's premises.• Monitor and inform the Approved Provider of suspected vulnerabilities in insurance coverage.• Communicate potential insurance claim details to the Approved Provider in a timely manner.

Procedures

Public Liability Insurance

- To comply with *Education and Care Services National Law and Regulations*, the Approved Provider will maintain public liability insurance with a minimum cover of \$10 million.
- Evidence of the Certificate of Currency will be retained at the service premises, through a copy being provided to the Nominated Supervisor on each renewal.

Additional Insurance

- The Approved Provider will source and manage relevant insurance products.
- Appropriate cover will also be taken for building and contents and other personal accident insurances.
- The Approved Provider will request the Nominated Supervisor monitor and gather information as necessary to enable an informed assessment and decisions on the insurance needs of the service.
- Where relevant, the Nominated Supervisor will provide Approved Provider with relevant details of activities and excursions undertaken as to assess if additional insurance coverage is required. The Approved Provider will liaise with their insurance broker when determining added cover.

WorkCover

- The Approved Provider is responsible for ensuring that the service has adequate worker's compensation insurance for all staff including volunteers.

Insurance Claims

- The Nominated Supervisor will report any potential instances of insurance claims to the Approved Provider in a timely manner.
- The Approved Provider will collate relevant information and communicate these details with their insurer.
- The Approved Provider (or any relevant delegate) will follow all directions of the insurer and in the case of material or significant claims, seek legal advice for the service where necessary.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s51 Conditions on service approval
- Education and Care Services National Regulations:
 - R.180 Evidence of prescribed insurance
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Education (General Provisions) Act 2006
- Work Health Safety Act 2011 (Qld) 2011

Policy Controls	
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7.13 Workplace Health and Safety

Policy Statement

For the protection of children, educators, management and the service as a whole, the service will ensure that its equipment, facilities and premises are safe and clean in keeping with the requirements of the *Work Health Safety Act*. The service promotes health and safety awareness for all people involved in the service. Policies and procedures are developed and monitored to reflect safe work practices.

In preparing this policy, the Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(j)*, and 155-156.

Related Policies

- [2.1 Providing a Child Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Safe Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Appropriate Governance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

Auxiliary Plans and Templates

[Indoor Safety Checklist](#)

[Outdoor Safety Checklist](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Exercise due diligence to eliminate or minimise health and safety risk so far as it is reasonably practicable.• ensure the service has and uses appropriate resources and processes to eliminate or minimise risks to health and safety.• Consult with workers who are directly affected by a health and safety matter so far as it is reasonably practicable.
Nominated Supervisor	<ul style="list-style-type: none">• Lead the risk management procedures for the service.• Consult and collaborate on risk management activities with educators and those who will be directly affected.• Monitor controls to ensure they are working as planned, undertake a review of the risk management processes when needed.
All Staff	<ul style="list-style-type: none">• Take reasonable care for their own health and safety and do not adversely affect the health and safety of other persons.• Comply with any reasonable instruction and co-operate with any reasonable health and safety policy or procedure.• Collaborate with risk assessment planning and delivery.

Procedures

The Approved Provider and Nominated Supervisor both have duties to maintaining a suitable safe and healthy workplace environment. The procedures contained within this policy are presented in two parts:

- Systems and processes to manage risks and support health and safety
- Practices that have been identified to support health and safety

WHS Risk Management

The Nominated Supervisor is responsible for leading the day-to-day monitoring and response to work health and safety issues. The Nominated Supervisor is supported by educators who will assist in completing relevant checklist and inspections of the service premises and play environment. Any hazards identified will be addressed in consultation with the relevant management.

Regular periodic inspections will include but are not limited to:

- the service building and surrounding areas
- cupboards and storage areas
- outdoor areas like car parks, gardens and pathways
- playground equipment

Managing Workplace Risks

Managing workplace risks is a four-stage process to:

- **Identify hazards** – find out what could cause harm
- **Assess risks** – understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening
- **Control risks** – implement the most effective control measure that is reasonably practicable in the circumstances
- **Review control measures** to ensure they are working as planned.

Managing work health and safety risks is an ongoing process that is triggered when any changes affect work activities. Undertaking workplace risk management should be considered when:

- changing work practices, procedures or the work environment
- purchasing new equipment or using new substances
- new information about workplace risks becomes available
- responding to workplace incidents (even if they have caused no injury)
- responding to concerns raised by workers or others at the workplace
- required by the WHS regulations for specific hazards

Hierarchy of risk control is a way of controlling risks that are ranked from the highest level (1) of protection and reliability to the lowest (6).

1. **Eliminate** - remove the hazard and associated risk
2. **Substitute the hazard with something safer** - replace hazard item
3. **Isolate the hazard from people** - physically separating the source of harm from people by distance or using barriers
4. **Use engineering controls** - uses a mechanical device or process to physically assist and reduce the chance of physical injury or fatigue
5. **Use administrative controls** - work methods or procedures that are designed to minimise exposure to a hazard
6. **Use personal protective equipment (PPE)** – face masks, gloves, aprons and protective eyewear

Consultation

Consultation is a legal requirement and an essential part of managing health and safety risks. A safe workplace is more easily achieved when everyone involved in the work communicates with each other to identify hazards and risks, talks about any health and safety concerns and works together to find solutions. This includes cooperation between the people who manage the work and those who carry out the work or who are affected by the work. By drawing on the knowledge and experience of everyone, more informed decisions can be made about how the work should be carried out safely.

Consultation involves giving others a reasonable opportunity to express their views and contribute to health and safety decisions. This may involve:

- providing a suitable time during work hours for consultation with workers
- allowing opinions about health and safety to be regularly discussed and considered during workplace meetings
- providing workers with different ways to provide feedback, for example using email

The Approved Provider and Nominated Supervisor must take into account the views of staff and families before making a decision. Consultation does not require consensus or agreement but management must allow relevant people to contribute to any health and safety decisions made.

Managing Identified Workplace Hazards (Routine Practices)

Dangerous Substances

The Nominated Supervisor must ensure that:

- All poisons, disinfectants, corrosive substances and other poisonous and/or dangerous substances and items are clearly labelled as per manufacturer safety instructions, kept out of reach of children and placed in an area not accessed by children.
- Risk assessments are conducted for all dangerous substances used at the service and all educators trained in safe usage.
- Unused or unnecessary substances are disposed of in a safe manner.
- All hazardous substances have a safety data sheet that can be accessed.
- Storage of medications and service first aid kit/s are accessible to educators but not to children except for some items (such as ice packs and Band-Aids).

Environment Risks and Management

The Nominated Supervisor will be responsible to ensure that the service has adequate heating, ventilation and lighting at all times. The Nominated Supervisor will ensure that educators remove all equipment that is faulty or broken.

Prior to use each day, educators will conduct a documented safety check of all indoor and outdoor spaces and equipment to ensure it is safe for use, free from items which may cause injury, and free from splinters and spiders.

Hazards identified from daily safety checklists will be brought to the Nominated Supervisor's attention by the educator. The Nominated Supervisor will notify the school and record the event in a hazard report form and forward it to the relevant persons (school and/or Approved Provider).

Sandpits will be raked prior to use to check for any animal faeces and any potentially dangerous objects.

Facilities and equipment assessed to have potential for injury will not be used or action is taken to allow for safe usage. An entry detailing the problem will be entered into the team communication book and all educators will be instructed on any restrictions necessary on use of equipment or areas.

The School administration will ensure the building is inspected periodically for electrical safety including relevant electrical safety devices. They will coordinate:

Specified electrical equipment is inspected, tested and tagged by a competent person at recommended intervals and immediately withdrawn from use if it is not safe to use; and
Specified electrical equipment is connected to a type 1 or 2 safety switch. The safety switch must be tested at prescribed intervals and withdrawn from use if not working properly.

Educators will be instructed in the safe use and storage of electrical equipment associated with their work. The School administration will ensure that all fire safety equipment (extinguishers and blankets) are tagged and tested and in accordance with the *Building Fire Safety Regulation 2008*.

Manual Handling

Management will ensure that all team members have adequate training in relation to safe lifting and manual handling techniques used at the service. Educators must use lifting equipment (e.g. hoist, devices with wheels) as advised by management for use.

The Nominated Supervisor will ensure that appropriate lifting and manual handling techniques are practised by educators and/or volunteers. Educators must inform the Nominated Supervisor if they have any medical or health issues that may place them at risk of injury when lifting or moving people/objects. Information regarding appropriate lifting and manual handling techniques will be made accessible to educators through the orientation and induction process, and through ongoing displays of safe techniques.

Sharps/Dangerous Objects

'Sharps' refers to any object that can pierce or penetrate the skin easily, including needles and/or broken glass. The Nominated Supervisor will make available at the service a sharps disposal kit consisting of disposable gloves, and a sharps container that complies with *AS/NZS 4261:1994*. The sharps container should have the following features:

- yellow in colour
- labelled as 'sharps' or 'infectious waste'
- carries the biohazard and AS/NZS symbols

As part of the service daily safety checklists, educators may be required to dispose of needles/sharp hazards that are found in playground and sandpit areas as well as clean up broken glass that may be contaminated with blood.

For the collection and disposal of needles/syringe/sharp:

1. Put on disposable latex or vinyl gloves (if available). Gloves will not prevent the wearer from being injured but will form a clean barrier between the hands and the syringe.
2. Bring the sharps container to the syringe, placing it on an even surface beside the object (syringe/sharp)
3. Use gloved hand to pick up the syringe by the middle of the barrel. Do not use a brush to sweep the syringe, as the sweeping action can cause the object to flick into the air causing additional risk.
4. Place the syringe in the container sharp end first.
5. Dispose of the container by putting in an industrial bin or taking it to a public sharps disposal bin. Ensure it is stored appropriately while

If you are injured by a used needle:

- Wash with running water and soap as soon as possible;
- Apply a sterile waterproof dressing;
- Seek medical advice; and
- Follow the safe disposal procedures as above and take the needle or syringe with you to the doctor.

Removing other hazardous and dangerous objects should be carried out with caution. Where an educator is in doubt of the requirements and appropriate actions, they should report their concerns to the Nominated Supervisor immediately.

Psychosocial Hazards

Example of psychosocial hazards include effects of work-related stress, bullying, violence and work-related fatigue. The service will maintain a supportive environment for its staff and users (children and families).

The protection of children, and the promotion of their safety and wellbeing is covered by many practices outlined in policy 2.2 Commitment to Children's Safety and Wellbeing,

Expectations of conduct are clearly contained within relevant policy, including the service's code of conduct ([4.4 Code of Conduct](#)). At all times workplace interactions will be expected to be respectful, courteous and professional.

Instances of harassment and bullying will be taken seriously. Employees have access to complaints mechanisms to support their access to a fair and reasonable workplace environment. Any workplace issues can be addressed to the Nominated Supervisor or Approved Provider free of reprisal or victimization.

Employee's will be fairly managed and have opportunities to address performance and workload issues in appropriate forums, including regular performance review meetings and plans.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law:
 - 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
- Education and Care Services National Regulations:
 - R.155 Interactions with children
 - R.156 Relationships in groups
 - R.168 Education and care service must have policies and procedures
 - R.170 Policies and procedures to be followed
 - R.171 Policies and procedures to be kept available
- National Quality Standard:
 - QA2 – Children’s health and safety
 - QA7 – Governance and Leadership

Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Codes of Practice:
 - How to manage work health and safety risks
 - Work health and safety consultation, co-operation and co-ordination.

Policy Controls	
Endorsed by:	Approved Provider
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7.14 Service Closure

Policy Statement

Payne Road OSHC acknowledges that there may be times when the service is required to close due to both planned and unforeseen circumstances. The service recognises that effective communication and management procedures must be established to meet family expectations, provider requirements and to uphold the safety and care for children.

The Approved Provider recognises the obligation to comply with *Family Assistance Law, Education and Care Services National Law Section 174* and *Education and Care Services National Regulation 175* in notifying the Regulatory Authority of service closures.

Related Policies

- [2.1 Providing a Child Safe Environment](#)[7.5 Appropriate Governance](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the safety and protection of stakeholders accessing the service.• Ensure stakeholders (including government bodies) are suitably notified of any closures, disruptions due to emergency events, or another time the service cannot operate.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure the service is able to fulfil its duty to protect from harm. Where extreme and emergency events hinder the ability to care for children, ensure the safety and protection of children through sound management of service closure.• Deliver sound professional judgement and provide accurate information to the Approved Provider in consulting service closures.• Ensure communication with families and stakeholders adequately notifies of service closure and other relevant requirements.

Procedures

The service will operate as per the approved and advertised opening hours for each session of care where Child Care Subsidy is claimed unless there is an appropriate reason (i.e. emergency closure) and notification is given to:

- the Regulatory Authority (Queensland Government Department of Education - Early Childhood Education and Care); and
- the Australian Government Department of Education.

The service will not close early due to children being collected prior to the approved and advertised closing time unless prior approval has been granted by the Regulatory Authority (Department of Education - Early Childhood and Community Engagement) and the Australian Government Department of Education and Training.

Emergency Closure

Closure of the service may occur in the following instances:

- Extreme weather conditions;
- Emergency situation, such as fire or other external threat;
- Loss of power and/or water.

Determination for closure will be made in consultation with the Approved Provider and/or emergency services personnel, if relevant.

Parent Communication

In the case of immediate closure of the service, the Nominated Supervisor will:

- Contact families to collect the children from the service;
- Ensure the safety of all children and educators involved; and
- Notify the Regulatory Authority and Australian Government in accordance with *Policy [7.7 Managing Notifications](#)*.

In the case of planned (or upcoming) closure, the Nominated Supervisor will:

- Communicate with families as soon as reasonably practicable;
- Provide information for the reason for closure; and where possible
- Provide anticipated timelines to the disruption.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulation
 - R.174 Time to notify certain circumstances to Regulatory Authority
 - R.174A Prescribed information to accompany notice
 - R.175 Prescribed information to be notified to Regulatory Authority
 - R.176 Time to notify certain information to Regulatory Authority
- National Quality Standard:
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Family Assistance Law

Department of Education and Training Child Care Provider Handbook

Policy Controls

Endorsed by:	Approved Provider
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7.15 Social Media and ITC Usage

Policy Statement

The service acknowledges a key role technology plays in the community and business, especially as a tool for communication. Therefore, the Approved Provider will support the effective and safe use of technology through suitable policies and procedures to ensure devices and tools are used appropriately and in the best interests of the children, families and employees who use the service.

Payne Road OSHC recognises that their IT equipment is a critical resource in managing the privacy and confidentiality of business, family and employee information. The service is committed to ensuring the management and use of equipment upholds the obligation and commitment to information handling. Likewise, the service understands that social media networking and other online communication platforms are an effective method for communicating with families who use the service. In doing so, Payne Road OSHC is committed to ensuring and promoting safe and positive communications.

The established guidelines, policies and procedures for:

- the administration of the OSHC social media pages/sites with the intention to ensure communication is respectful, ethical and is consistent with the purpose of community engagement principles.
- the management of children's access to equipment and resources is appropriate and suitably supervised.
- supporting the interaction and relationship of stakeholders and employees of the service to uphold safety and protection.

Employees will be guided on expectation for the use of communication mediums (i.e. social media platforms) that could interfere with their employment and obligations and an employee. The service acknowledges that employees may access social networking sites (such as Facebook, Twitter, Instagram, etc.) to interact with friends, colleagues, and the community. This policy aims to establish guidelines on the access and usage of online social networking, with the aim upholding safety, protection and reputation for the service and its stakeholders.

Related Policies

- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [7.13 Workplace Health and Safety](#)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Provide guidance and expectations on the use of technology, devices and social media etc. to support the safety and protection of children, families, employees and the business reputation.
Nominated Supervisor	<ul style="list-style-type: none">• Respond and communicate instances of non-compliance.• Ensure the service's equipment and practices reflect the obligation of confidentiality and privacy owed to stakeholders.
All Staff	<ul style="list-style-type: none">• Ensure children are provided with suitable supervision to support the expectations of the service social media and ITC policy.

Procedures

Devices, Technology and Programming

1. The use of electronic devices and technology will be included in the program as a valuable learning tool for children.
2. Potential resources include computer equipment, electronic games, internet access, tablets and cameras.
3. Any internet usage by children will be effectively monitored and supervised by educators. Before any access is facilitated, children will be instructed on expectation and safe usage/access.
4. The service will ensure games and media accessible to children are appropriate for children, using government classifications (G and PG-rated) as the guiding principle.

5. Parents will be instructed to ensure any devices or equipment brought from home is consistent with the service's expectations (especially rating requirements). Any items that are inappropriate will be stored in the office until the child is collected.

Employee Social Media and Communication

For the purposes of this policy 'social media' and online communication will refer to any online tool, functions or platform that allow people to communicate via the internet. This includes, but is not limited to, applications such as:

- Social networking sites (e.g Facebook, Pinterest, LinkedIn, Instagram);
- Video and photo sharing (e.g YouTube)
- Messaging platforms (Snapchat, Messenger)
- Blogging sites, forum or discussion boards (e.g. Twitter, Reddit)
- Online gaming

Responsibilities

All employees have a duty to uphold the reputation of the service (see *Code of Conduct*). Communication and information sharing via social media/the internet have the potential to harm a stakeholder of the service or harm the service's reputation.

Employees are to recognize their employment relationship extends beyond the hours of work; therefore, it is the responsibility of employees to ensure their conduct is consistent with the policies and guidelines of the service when using social media for personal use. Demonstrating professionalism and management of social boundaries is the responsibility of the employee. Interactions with employees and other stakeholders that harasses, threatens, jeopardises trust, or harms the reputation of the services will be treated seriously. Employees engaging in this conduct will be subject to disciplinary action, up to and including termination.

Harmful, threatening, suggestive or harassing comments are not to be made about fellow employees or stakeholders. This will be viewed as cyberbullying (unlawful conduct) and will prompt disciplinary action.

The service name cannot be mentioned in online posts or other online commentaries (either directly or implied). Privacy and confidentiality must be maintained at all times. Employees should not discuss or disclose work-related matters in any public capacity. If anything is posted online by others which may harm the reputation of the service, its employees or stakeholders, and you have the capacity to delete such information, the Approved Provider asks that you do so immediately.

Expectations for Social Media Interaction with Service Users

Employees are expected to display conduct consistent with the following guidelines to ensure safety and protection of others, themselves and the service, therefore:

- There should not be any personal interaction with children of the service via social media, including being 'friends' or following accounts etc. If a child of the service attempts to interact with you online, **do not respond**. Review your privacy settings and notify the Nominated Supervisor or Approved Provider who will communicate the service's expectation with the family directly;
- However, employees who are also family members of children/service users may be excluded from this condition. Disclosure of the relationship with families and children of the service is **essential**. In these extenuating circumstances, the social media responsibilities will be managed on a case-by-case basis by the Nominated Supervisor or Approved Provider.

Reporting Breaches

If any employees become aware of:

- conduct or communication that breaches this policy; or
- finds any online material that is potentially dangerous or damaging to the image or people of the service;

Then, the employee should immediately report this information to either the Nominated Supervisor or Approved Provider. This disclosure should not be shared with others.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Law
 - s.167 Offence relating to protection of children from harm and hazards
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children's health and safety
 - QA4 – Staffing arrangements
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership.

Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- eSafety Commissioner - Best Practice Framework for Online Safety Education
- National Principles for Child Safe Organisations
- Guide for Preventing and Responding to Workplace Bullying (Worksafe Australia)

Policy Controls	
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7.16 Asset Management

Policy Statement

In order to have sound financial management, meet the requirements of auditing and insurance and for the benefit of future planning, Payne Road OSHC will maintain an assets register. The register will be maintained by the Nominated Supervisor and will itemise the non-consumable assets of the service. To support the accuracy of the register an inspection will be undertaken at least every six months.

Related Policies

- [3.1 Space and Facilities Requirements](#)
- [7.1 Nominated Supervisor](#)
- [7.5 Appropriate Governance](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)

Roles and Responsibilities

Approved Provider	• Authorise the disposal of significant asset write-off/disposal
Nominated Supervisor	• Maintain the service's asset register – including review, updating and disposal changes.

Procedures

The Nominated Supervisor will maintain an accurate register of the significant (capital) belongings of the service.

The register will include categories such as:

- Furniture;
- ICT Equipment;
- Outdoor/sporting Equipment;
- Kitchen/cooking Equipment; and
- Child-related resources (other than consumables).

New Assets

Every fixed item purchased for the service (other than consumables) will be entered into the register immediately following the purchase. The details to be contained in the register in respect of purchases will include:

- Name or Description
- Asset code
- Date of purchase;
- Item Type (Categorised);
- Purchase price;
- Supplier; and
- Warranty terms (if applicable).

Asset Review

- The register will be reviewed and updated every 12 months, in accordance with the financial year of audit.
- The date of review will be recorded in the asset register

Disposal of Items

- Items may be disposed of when they are damaged, aged or unsuitable for their purpose.
- In the event that items are in need of disposal, Nominated Supervisor will reflect this outcome in the asset register and record the reasons for the disposal
- Any asset being disposed of with a value great than \$500 will be included in either direct communication or formal reporting to the Approved Provider.

Legal and Regulatory Foundation

National Quality Framework

- *National Quality Standard:*
 - QA3 – *Physical environment*
 - QA7 – *Governance and leadership.*

Additional Regulatory Context and Guidance

- P&C Accounting Manual

Policy Controls	
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7.17 Self-Assessment and Quality Improvement

Policy Statement

Payne Road OSHC acknowledges and recognises that continuous improvement is an integral part of the National Quality Framework. Payne Road OSHC will take a proactive approach to establish effective processes and systems for evaluating and reviewing current practices and identifying areas and opportunities for improvement. The service recognises self-assessment and continuous improvement is an ongoing process, building upon previous efforts and plans.

The Approved Provider expects the Nominated Supervisor and educators will actively work towards developing a culture of critical reflection, self-assessment and continuous improvement in every aspect of service operations.

The Approved Provider will ensure the service's Quality Improvement Plan is developed, reflecting an assessment of the quality and area of improvement that has been identified. The Approved Provider will be supported by the Nominated Supervisor, educators and OSHC Committee members in developing and reviewing the document at least annually to maintain compliance with *Education and Care Services National Regulations 55 and 56*.

Related Policies

- [6.5 Interactions and Communication with Families](#)
- [7.1 Nominated Supervisor](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Appropriate Governance](#)

Roles and Responsibilities

Approved Provider	• Ensure a QIP is developed and reviewed at least annually, and fulfils the requirements outlined in legislation.
Nominated Supervisor	• Support a culture of continuous improvement and high-quality expectation.
All Staff	• Provide copy of QIP as requested by the Regulatory Authority.

Procedures

Culture of Continuous Improvement

The Nominated Supervisor and educators will be empowered to identify and respond to opportunities for continuous improvement, which includes continuous monitoring of the quality of collective and individual educator practices.

As part of the service's overall continuous improvement process, all standards and elements of the National Quality Standard will be reviewed on a regular basis in order to identify:

- Effectiveness of current practice in delivering quality outcomes for children, families and educators;
- Improvements to current practices, procedures and service routines; and
- Changes to be implemented as a result of review.

The Nominated Supervisor will be delegated to instruct and manage educators to improve any aspects of practice that has been identified. Where significant changes are required the Nominated Supervisor will communicate intentions to the Approved Provider.

Quality Improvement Plan (QIP) Development and Review

All stakeholders (management, educators, families and children) will be encouraged to be involved in the service's continuous improvement process with ideas and suggestions for practice improvements welcomed.

The Approved Provider will ensure that a Quality Improvement Plan is prepared and maintained for the service that:

- Contains a statement of philosophy of the service.
- Includes the assessment of the quality of practices of the service against the National Quality Standard and the National Regulations;
- Identifies the areas requiring improvement, goals and the steps to improve; and
- Maintains notes with dates of the progress being made.

The Approved Provider will ensure that the service’s Quality Improvement Plan is reviewed and revised:

- At least annually; and/or
- Whenever directed by the Regulatory Authority

The Nominated Supervisor is responsible for ensuring all relevant improvement actions are documented in the service’s QIP. The Nominated Supervisor will provide reviewed versions of the QIP to the Approved Provider.

QIP Access

The Approved Provider will submit the service’s current Quality Improvement Plan to the Regulatory Authority on request.

The QIP will be accessible to educators, families and other relevant stakeholders for review and feedback.

Legal and Regulatory Foundation

National Quality Framework

- Education and Care Services National Regulations:
 - R.31 Condition on service approval—quality improvement plan
 - R.32 Condition on service approval—entitlement to occupy premises
 - R.55 Quality improvement plans
 - R.56 Review and revision of quality improvement plans
- National Quality Standard:
 - QA1 – Educational program and practice
 - QA2 – Children’s health and safety
 - QA3 – Physical environment
 - QA4 – Staffing arrangements
 - QA5 – Relationships with children
 - QA6 – Collaborative partnerships with families and communities
 - QA7 – Governance and leadership

Additional Regulatory Context and Guidance

- National Principles for Child Safe Organisations

Policy Controls	
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Appendix – Templates and Forms

[Self or Sibling Care Arrangement Written Permission Form](#)

[Behaviour Support Plan](#)

[Information Sheet for Mandatory Reporting by Education and Care Service Professionals](#)

[Incident, Injury, Illness, or Trauma Report](#)

[Bomb Threat Checklist](#)

[Evacuation Drill Evaluation](#)

[Educator Learning and Development Plan](#)

[Swimming Ability Form](#)

[Excursion Permission Form](#)

[Excursion Risk Management Plan](#)

[Excursion Checklist Template](#)

[Medical Risk Minimisation and Communication Plan](#)

[Medication Authority and Administration Form](#)

[Indoor Safety Checklist](#)

[Outdoor Safety Checklist](#)

[Evacuation Drill Evaluation](#)

[Nominated Supervisor Checklist, Delegation and Consent](#)

[Compliance History Statement for A Nominate Supervisor or Responsible Person](#)

[Prohibition Notice Declaration for Prospective Staff Members](#)

[ACECQA Nominated Supervisor Consent Form – NS01](#)

[Responsible Person Checklist, Delegation and Consent](#)

[Complaint Record](#)

Self or Sibling Care Arrangement Written Permission Form

Account Name					
Child/ren Names					
Applicable Dates/Days and Departure Time		Until	/ / or <input type="checkbox"/> ongoing		
Destination		Purpose			
Length of Journey		Mode of Transport			
Will the child(ren) be picked-up by sibling? If so, name and details.					
Agreed communication plan of departure and arrival					

OSHC Representative		Signature		Date	
Parent		Signature		Date	

Behaviour Support Plan

Details			
Child's Name	Child's name	Parent/s Name	Name of Parent/Carer(s)
Service Representative	Staff member name	Contact Details	Phone number/Email
Position	Role	Date of meeting	Date

Interests and Strengths
Identified interests and strengths of the child/YP

Background Information
Outline relevant information to understand behaviours of concern, any health assessments, diagnoses or relevant history

Functional Behavioural Analysis and Assessment	
The process of uncovering why a person responds in a particular way is called a functional behaviour assessment. This helps the service and family understand what factors in the environment influence behaviour.	
Behaviour of concern	Summarise the behaviour
Description of behaviour <i>(including frequency & duration)</i>	Provide detail to what happens when the child behaves in a particular way
Setting/Environment <i>(What makes it more pronounced?)</i>	What environmental condition influence the behaviour?
Early warning signs/triggers	Are there any precursors to the behaviour?
Function of Behaviour	What need is the child trying to fulfil?

Proactive Strategies <i>(Ideas to prevent behaviour from occurring)</i>	
Goal	Action
•	•
•	•
•	•

Response Strategies <i>(Ideas to support a child when we identify challenging behaviours)</i>				
	Trigger	Escalation	Outburst	Recovery
Possible Behaviours of Concern				
Educator Responses/Strategies	•	•	•	•

Training and Support Resources			
What	For Who	When	Organised by
Details of support needs	Name	Date	Name
Details of support needs	Name	Date	Name
Details of support needs	Name	Date	Name

Agreement of Positive Behaviour Support Plan		
Name	Signature	Date
Name		Date
Name		Date
Name		Date
Name		Date

Information Sheet for Mandatory Reporting by Education and Care Service Professionals

Click on file (icon below) to open or accessible online via -
<https://www.csyw.qld.gov.au/resources/dcsyw/child-family/protecting-children/info-sheet-1-mandatory-reporting.pdf>

Mandatory Reporting for ECEC Professionals



Responding to disclosures of abuse



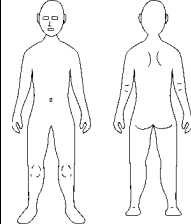
Incident, Injury, Illness, or Trauma Report

To be completed as soon as practicable after the incident/injury/illness/trauma occurs.

Childs Name		Date of Birth	
Time of Event/ Symptom		Date	

Incident/Injury/Trauma - circumstances leading to the incident/injury/trauma:

Details of any injury

Name/s of witness

--

Illness - circumstances surrounding the child being ill, including symptoms:

Action Taken - Details of action taken including first aid and/or administration of medications, and by whom:

Was Medical Advice Sought? Y/N – Details of advice and by whom

--

Treatment and Outcome Details

Initial Parent/Emergency Contact							
Name		Relationship		Contact Method		Time	
Name		Relationship		Contact Method		Time	
Name		Relationship		Contact Method		Time	
Name		Relationship		Contact Method		Time	

Person Completing the Report- should be the person responsible of the service at the time of the events			
Name		Signature	
Position		Date	
Witnesses			
Name		Signature	
Name		Signature	

Parental Acknowledgement of Notification			
Name			
Signature		Date	
Comments			

Regulatory Authority Notification							
Notified?	Y/N	Time		Date		Method	
Serious Incidents (. Reg 12) require Parent and Regulatory Authority notification within 24 hours							

Bomb Threat Checklist

DO NOT HANG UP — KEEP CALLER TALKING					
Call Details					
Date	/	/	Time	:	AM/PM
Exact Wording of Threat					
Prompts					
When is the bomb going to explode?					
Where exactly is the bomb?					
When did you put it there?					
What kind of bomb is it?					
What will make the bomb explode?					
Did you place the bomb?					
Why did you place the bomb?					
What is your name?					
Where are you?					
What is your address?					
Caller Description/Characteristics					
Voice	Accent; impediment; tone; speech; diction; manner				
Language	Polite; incoherent; irrational; taped; read out; abusive				
Noises/Environment	Voices; machinery; music; noises on the line				
Other	gender of caller; estimated age				
End of Call					
Reason Ended				Time	
Name		Signature		Date	

Evacuation Drill Evaluation

Drill Details				
Date		Time		
Type of Emergency Responses	Evacuation	Lockdown	Other	
Educators Participating				
Number of Children (Attach Role)				

Action	Yes/No	Comment			
Educators					
Had all education provided with training or instructions in how to respond?					
Was the procedure clearly displayed?					
Did all educators understand their particular roles and duties?					
Were there any points of the drill that were unclear?					
Were any work health and safety issues noticeable during the drill, e.g. hazards?					
Were children adequately supervised and ratios maintained?					
Were directions given to children clear and accurate?					
Any improvements identified?					
Children					
Were all prepared with information in how to respond to the emergency drill?					
Did the children understand the reason for carrying out the drill?					
Did children understand the directions given by educators?					
Did children follow directions given by educators?					
Did children experience any difficulties?					
Were any children upset by the experience? If so, why?					
Feedback provided by the children after the drill?					
Evaluation					
Was the response timely?					
Did educators and children follow the procedures?					
Where all children and educators accounted for?					
Any issues that need improvement?					
Comments:					
Name		Signature		Date	

Educator Learning and Development Plan

Name of Employee		Name of Role/Position	
Date of Supervision Meeting		Length of Employment	
Name of Supervisor/ Facilitator		Supervisor/ Facilitator Position	

Background and/or Evaluation of Previous Plan and Actions
Delete for initial L&D plan

Summary of Strengths, Skills, and Ability
<ul style="list-style-type: none">Outline what the employee/educator has identified through their self-assessment as a strengthSummarise feedback and examples of good practice or application of skillOutline achievements or qualities that have contributed to performance and outcomesSummarise the point of discussion in the performance collaboration and planning toolInclude any other relevant information
Summary of Areas of Development, Growth or Vulnerability
<ul style="list-style-type: none">Outline what the employee/educator has identified as a learning/developmental need (self-assessment tool)Summarise feedback (where relevant)Reflect on service needs, goals and alignmentFocus on fulfilling unmet potentialInclude any other relevant information

Learning and Development Actions		
Learning Topic or Outcome	Who, What, Where	Completion Date

Employee Comments

Development and Learning Plan Review Date	6 months (unless otherwise needed/appropriate)
Date for Interim Review	Approximately 3 months/ half-way

Employee Signature		Date	
Nominated Supervisor Signature		Date	

Learning and Development Plan Interim Review			
Name of Employee			
Date of Meeting			
Supervisor Name			
Interim Review			
<ul style="list-style-type: none"> • Summary and evaluations of actions completed (what has been done? Has it been effective?) • Have there been any significant changes? Is the plan still appropriate? • What is still pending? 			
Variation(s) to Plan – Interim Action			
Describe any changes that need to occur or alternatives as the result of reflection on current plan			
Employee Signature		Date	
Nominated Supervisor Signature		Date	

Swimming Ability Form

Child's Name:		Age:	
Confidence around the water:			
<p>Please check the appropriate space and provide comments if necessary:</p> <p> <input type="checkbox"/> Very confident <input type="checkbox"/> Somewhat confident <input type="checkbox"/> Not confident </p> <p>Comments:</p>			
Swimming ability:			
<p> <input type="checkbox"/> Non-swimmer (cannot support themselves in water) <input type="checkbox"/> Novice (can support themselves in shallow water and are capable of moving short distances <5m) <input type="checkbox"/> Intermediate (can support themselves in deep water and can swim a length of the pool) <input type="checkbox"/> Advanced (can support themselves in deep water and can competently swim lengths of the pool) </p>			
<p>Please indicate any special needs or preferences that will enable the educators to support your child whilst participating in water/swimming activities:</p>			
Signature			
Name of Parent/Guardian		Date	

Excursion Permission Form

Excursion Details					
Excursion date:		Departure time:			
		Return time:			
Reason for the excursion:					
Excursion location, description and address:					
Proposed activities to be undertaken:					
Method of transport:		Seatbelt requirements	(as per Transport Operations (Passenger Transport) Standard 2010)		
Anticipated number of educator (and other adults) to accompany and supervise children		Anticipated number of children attending:		Anticipated educator to child ratio:	

Child(ren)'s Details and Permission				
1	Child's Name		DOB	
Comments or Additional Information:				
Please note: A risk assessment has been prepared for this excursion. It is available for viewing at the service.				
Permission				
I give permission for my child/ren to participate in the excursion/s as indicated above:				
Signature				
Name of Parent/Guardian		Date		
Contact Details				

Excursions Risk Assessment Template

The Approved Provider and Nominated Supervisor must ensure a risk assessment is carried out before children are taken outside the service premises on an excursion made available to parents/ authorised nominees prior to or at the time written authorisation is sought.

[Regulation 101](#) of the Education and Care Services National Regulations includes the minimum risk assessment considerations for excursions, including specific considerations when an excursion **involves transporting children**.

Persons undertaking the excursion risk assessment should have read and understood all relevant requirements outlined in the Service's Excursion Policy, including the procedures to ensure the following items are addressed:

The risk assessment will:

- identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion; and
- specify how the identified risks will be managed and minimised.

And consider:

- the proposed route and destination for the excursion;
- any water hazards;
- any risks associated with water-based activities;
- the transport to and from the proposed destination for the excursion, including:
 - the means of transportation;
 - any requirements for seatbelts or safety restraints under Queensland law;
 - the process for entering and exiting
 - the Service's premises; and
 - the pick location and/or destination
 - procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking/disembarking;
- the number of adults and children involved in the excursion;
- given the risks posed by the excursion, the number of educators or other responsible adults that is appropriate to provide supervision and whether any adults with specialised skills are required (e.g. lifesaving);
- the proposed activities;
- the proposed duration of the excursion; and
- the items that should be taken on the excursion (e.g. mobile phone, emergency contacts).

Exception for Regular Outings

Note: A risk assessment is only required to be completed at least once for a 12 month period if the excursion is a 'regular outing'.*

**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 substantially the same on each outing.*

Excursion Risk Assessment			
Date of Excursion If it is a regular outing include a description of when children are to be taken on regular outings.		Excursion Destination	
Proposed activities. List all activities that will take place during the excursion.			
Pick up location and destination(s). List each location travelled to and from as part of the excursion. E.g. the museum, park for lunch and service.			
Estimated departure and arrival times and duration of the excursion. E.g. from the service to each destination and returning to the service.			
Proposed route You can include an image of the route sourced online.			
Means of transport E.g. public bus, private bus, coach, private car, taxi, tram			
Requirements for seatbelts or safety restraints Do Queensland laws require children to use seatbelts or restraints for the transportation type			
Number of adults involved in the excursion. E.g. service staff, family members, volunteers			
The number of educators / responsible adults, appropriate to provide supervision, and whether any adults with specialised skills are required. E.g. for children's individual needs.			

The number of children involved in the excursion.	
Any water hazards during the excursion, including any risks associated with water-based activities? If yes, detail in the risk assessment table below.	
Educator to child ratio, including whether this excursion warrants a higher ratio. Provide details in the risk assessment table below.	
Describe the process for entering and exiting the service premises and the pick-up location or destinations (as required); (include how each child is accounted for):	<p>Exiting the service -</p> <p>Entering the location -</p> <p>Exiting the location.</p> <p>Entering the service - O</p> <p>If at any stage there is a discrepancy with a headcount a role call will be undertaken to identify the missing child/ren.</p>
Describe the procedures for embarking and disembarking the vehicle (include how each child is accounted for in embarking and disembarking):	<p>Embarking</p> <p>Disembarking</p>
Excursion checklist – items to be readily available during the excursion (please tick)	
<input type="checkbox"/> First Aid Kits	<input type="checkbox"/> List of educators participating & contact information
<input type="checkbox"/> Roll of children attending with group lists	<input type="checkbox"/> Mobile Phones
<input type="checkbox"/> Emergency contact information for each child	<input type="checkbox"/> Epipens, Antihistamines and Action Plans
<input type="checkbox"/> Medical information for each child	<input type="checkbox"/> Ventolin, Spacer & Action Plans
<input type="checkbox"/> Sunscreen, hand gel and wet wipes, tissues, plastic bags	<input type="checkbox"/> Any other required medication

Use the table below to identify and assess risks to the safety, health or wellbeing of children attending the excursion, and specify how these risks will be managed and minimised [Regulation 101(1)]. This must include any risks associated with water-based activities.

Risk Assessment						
Hazard Identified	Risk Assessment (use matrix)	Control Measure	Location/Activity	Person Responsible	Residual Risk (after Control Measure applied)	Rationale
		•				
		•				
		•				
		•				

Consequence - Evaluate the consequences using the following guiding definitions.	
Insignificant	No injury
Minor	Injury or health issue requiring first aid
Moderate	Injury or health issue requiring medical attention
Major	Injury or health issue requiring hospital admission
Severe	Fatality

Likelihood - Evaluate the likelihood of an incident occurring using the following guiding definitions.	
Rare	May occur somewhere, sometime (i.e. once in a life time)
Unlikely	May occur at some point over an extended period of time
Possible	May occur several times across over a period of time
Likely	May be anticipated multiple times over a period of time or may occur once every few repetitions of the activity or event
Almost Certain	Prone to occur regularly or it is anticipated for each time the activity or event is held

Risk Matrix						
		Consequence				
		Insignificant	Minor	Moderate	Major	Severe
Likelihood	Almost Certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	High	High	Extreme
	Unlikely	Low	Low	Moderate	High	High
	Rare	Low	Low	Low	Moderate	High

Hierarchy of Risk Control		
+ Level of protection > Level of protection <	Level 1 Eliminate the hazards	+ Reliability of control measure > Reliability of control measure <
	Level 2 Substitute the hazard with something safer Isolate the hazard from people Reduce the risk through physical modification/design of equipment	
	Level 3 Reduce exposure to the hazard using administrative actions Use person protective equipment	

Plan and Review		
Plan revised by:	Full name:	Date:
	Signature:	
	Role/Position:	
Prepared in consultation with:	Full name:	
	Role/Position:	
Communicated to all relevant staff:		
Vehicle safety information reviewed and attached:	Attachment N/A Comment if needed – Guided by <i>Transport Operations (Passenger Transport) Standard 2010</i>	

Excursion Checklist Template

Excursion Activity/Location			Proposed Date	
Item	Person Responsible	Date Completed [or N/A]	Notes	
Preparation, Planning and Approval				
Discuss draft excursion ideas with Approved Provider	Nominated Supervisor			
Prepare Risk Assessment for approval, including identifying: <ul style="list-style-type: none"> • Purpose and rationale for the excursion • Transport method, route and other relevant consideration for using transport (seatbelts, • Associated water hazards and other relevant risks • Any specialist required • Ratio and number of adults attending • Duration of excursion • Any items that should be taken on excursion 	Nominated Supervisor			
Submit to Approved Provider for approval (one month prior to excursion). Copy of risk assessment kept in OSHC office for parent viewing.	Nominated Supervisor			
Where risk assessment identifies the need, visit excursion site assess: <ul style="list-style-type: none"> • Access to shade • Access to water and/or proximity water hazards • Accessibility to toilets • Relevant hazards • Any other critical factor 	Nominated Supervisor			
Excursion authorised by the Approved Provider	Approved Provider			
Parent permission form developed (containing all required information) and distributed, where relevant, <i>Swimming Ability Form</i> included.	Nominated Supervisor			
Organise transport and any other relevant bookings.	Nominated Supervisor			
Authorisations, Records and Equipment				
Confirm parent permission forms completed in full	Nominated Supervisor			
Where relevant, confirm Swimming ability form returned and contain sufficient information/permission	Nominated Supervisor			
Assess relevant needs of children (i.e. medical needs). Develop plans as required.	Nominated Supervisor			

Ensure emergency contact information is collated	Nominated Supervisor		
Inspect first aid kit for stock/supplies	Nominated Supervisor		
Day of Excursion			
Ensure the following items are packed:	Nominated Supervisor		
First aid kit			
Medication			
Mobile phones			
Walkie-talkies			
Sunscreen			
Details of transport company			
Details of Venue			
Roll (list of children attending)			
Emergency contact information			
Pen and notepad			
Any other items listed on the risk assessment			
Each child will need:	Delegated Educator		
Drink Bottles			
Hat			
Shoes			
Sun-safe clothing			
Bag and food (morning tea/lunch)			
Wristband with contact information			
Debrief risk assessment with staff and confirm understanding of role and expectations, issue attending adults a run sheet for the excursion	Nominated Supervisor		
Debrief the following with children: <ul style="list-style-type: none"> relevant risks and hazard, excursion plan (itinerary for the day), emergency procedures, and expectations for behaviour how to transition to and from the service to the transport/destination 	Nominated Supervisor		
Headcount/roll call before leaving school site	Nominated Supervisor		

Educator Excursion Evaluation

Commented [OV1]: Form included

	Excellent	Good	Satisfactory	Unsatisfactory
Suitability and planning of transport				
Shade, shelter and protection available				
Level of engagement and enjoyment of activity				
Coordination of children's transitions				
Provision of toilet facilities				
Food/drink facilities (BBQ, kiosk, drink taps)				
Facilities for people with disabilities				
Interactions with staff and public				
Suitability to a range of interests and abilities				
What made this excursion valuable and/or enjoyable?				
Identify and explain the learning outcomes met by the children attending this excursion.				
What did children say about the excursion?				
Would you make any changes to the excursion?				
Educator Name			Date	

Medical Risk Minimisation and Communication Plan

Child's Name		Date of Birth	Select Date
Parent's Details			

Medical Condition					
Diagnosed Medical Condition, Health Need, Allergy or Other				Supporting Documentation Provided	Y/N Details -
Medical Action Plan Supplied by Parent?	Y/N	Date Received	Select Date	Date to be reviewed	Select Date
Medication Required?	Y/N	Authorisation Completed?		Y/N	

Risk Assessment				
Risks Identified	Risk Assessment (use matrix)	Control Measure/Strategy	Location/Activity	Person/position Responsible
	Risk Level	•		
	Risk Level	•		
	Risk Level	•		
Risk relating to the safe handling, preparation, consumption and service of food (if relevant)				
	Risk Level	•		
	Risk Level	•		
	Risk Level	•		

Notification relating to known allergens that pose a risk to a child			
Allergen	Areas of potential exposure	Strategies for Minimising Risks	Person/position Responsible

Medication

How will the provision and access to medication be managed?

Parents have been informed and acknowledge:

- The service's policies require identify medication to be accessible to the service for the child to attend.
- Where the child is without medication for any reason, the parent (or authorised nominee) will be called to collect the child.

Y/N

Communication and Training Plan

Location of the child's *Medication Management (Action) Plan* and medication

-

Strategies/training for staff and volunteers to be able to identify the child, the Medical Management Plan and medication

-

How parents can communicate any changes to health/medical needs, *Medical Management Plan* or *Risk Minimisation Plan*:

-

Plan Prepared by:		Date:	Enter Date
Prepared in consultation with:			
Parent Name		Signature	Date: Enter Date
Service Representative		Signature	Date: Enter Date

Please note: This plan must be read in conjunction with the service’s medical conditions policy.

Communication to staff and volunteers:	Name (Role)	Date

Medication Authority and Administration Form

Authorisation and Medication Details		
Child's Name		DOB / /
Name(s) of medication(s) to be administered:		
Time and date the medication(s) were last administered		
The time and date [or the circumstances under which,] the medication should be next administered.		
Dosage of medication to be administered		Can the child self-administer medication?
Method (e.g. oral) medication to be administered		Y/N
Any additional instructions or information (i.e. medication required to be refrigerated)		
<p>I,[parent or person named in enrolment form], give authorisation for the medication(s) listed above to be administered by the service, as described.</p> <p><input type="checkbox"/> I acknowledge the service can only administer medication from its original container, bearing the original label and instructions, and within the expiry/used-by date printed on the container/label. Where the medication is a prescribed medication, the label must have the name of the child whom the medication is to be given.</p> <p><input type="checkbox"/> I recognise medication will only be administered by the service in accordance with the instructions attached to the medication or otherwise instructed by a registered medical practitioner.</p>		

Signature		Date	
-----------	--	------	--

Administration Record									
Child's Name						DOB		/ /	
Medication Administered				Person Administering Medication		Witness			Parent Initial
Date	Time	Dosage	Method of administration (e.g. oral)	Name	Signature	Name	Confirmation of dosage and identity of child	Signature	

Indoor Safety Checklist

The following checklist must be completed by an educator before each session. Children will not have access to the area until the checklist has been completed.											
Date:		Monday	Tuesday	Wednesday	Thursday	Friday					
		/ /	/ /	/ /	/ /	/ /					
Staff Name:											
OSHC Room											
Fire Safety	All exits/fire doors free from obstructions?										
	All doors/exits open easily?										
	Notices of evacuation procedures (including floor plan) displayed at each exit?										
	Fire/smoke alarms in working order?										
	Fire equipment (extinguishers etc) in good order and in their location?										
Electrical Safety	All lights working?										
	All electrical cords are secure and in good repair?										
	All electrical sockets are protected with safety covers?										
Environmental Hazards	All windows and/or glass doors free from damage?										
	Flooring clean and free from spillage?										
	Mats and flooring is secure/stable? No trip hazards identified?										
	Room is well-ventilated?										
	Play areas generally clean and tidy?										
	Broken play equipment removed?										
	No chemical or substances accessible?										
Toilets											
Toilets are in working order?											
Toilets are clean - no biological hazard present?											
Floors clean and dry?											
Sinks clean and taps working?											
Toilet paper available?											
Paper towels available (or other hand drying facilities)?											

Hand soap available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bins clear and clean?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen										
Floor area clean and dry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any hot items (likely to burn) accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work surfaces clean and sanitised?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharp objects (knives) stored securely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poisons/chemicals locked and secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bins clear and clean?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any signs of pests?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication and First Aid										
All medication stored correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency medication in date and accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication action plans displayed/communicated as required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid kits accessible and holds sufficient stock?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any issues identified? (include date and name)										
Actions taken? (include date and name)										

Outdoor Safety Checklist

The following checklist must be completed by an educator before each session. Children will not have access to the area until the checklist has been completed.											
Date:		Monday	Tuesday	Wednesday	Thursday	Friday					
		/ /	/ /	/ /	/ /	/ /					
Staff Name:											
Playground											
Equipment	Any wear, broken elements, and/or other sharp objects/protrusions?										
	Insects or vermin?										
	Garbage/rubbish?										
	Dry and free of any slippery substance?										
Softfall	Been raked? Any areas with thin coverage (especially high use areas)?										
	Any foreign objects, sharps or other biological hazard identified?										
Undercover Area											
Area clear of rubbish, food scraps, and/or hazards											
Seating safe and secure											
Pathways clear											
Bag rack secure											
Outdoor Toilets											
Toilets are in working order?											
Toilets are clean - no biological hazard present?											
Floors clean and dry?											
Sinks clean and taps working?											
Toilet paper available?											
Paper towels available (or other hand drying facilities)?											
Hand soap available?											
Bins clear and clean?											
Oval											
Undercover shade areas are clear of rubbish and/or hazards											
Grass is a suitable length											

Fences and gates closed and in good repair										
Goal posts etc. secure										
Water accessible? Bubbler clean and hygienic?										
Sandpit										
Free of foreign objects, animal faeces, or other biological hazards?										
Equipment clean and in good repair?										
School Premises										
No [unauthorised] animals on site?										
No unauthorised visitors/persons identified?										
Emergency assembly area accessible and free from obstruction?										
Any issues identified? (include date and name)										
Actions taken? (include date and name)										

Evacuation Drill Evaluation

Drill Details			
Date		Time	
Type of Emergency Responses	Evacuation	Lockdown	Other
Educators Participating			
Number of Children (Attach Role)			

Action	Yes/No	Comment
Educators		
Had all education provided with training or instructions in how to respond?		
Was the procedure clearly displayed?		
Did all educators understand their particular roles and duties?		
Were there any points of the drill that were unclear?		
Were any work health and safety issues noticeable during the drill, e.g. hazards?		
Were children adequately supervised and ratios maintained?		
Were directions given to children clear and accurate?		
Any improvements identified?		
Children		
Were all prepared with information in how to respond to the emergency drill?		
Did the children understand the reason for carrying out the drill?		
Did children understand the directions given by educators?		
Did children follow directions given by educators?		
Did children experience any difficulties?		
Were any children upset by the experience? If so, why?		
Feedback provided by the children after the drill?		
Evaluation		
Was the response timely?		
Did educators and children follow the procedures?		
Where all children and educators accounted for?		
Any issues that need improvement?		

Comments:

Name

Signature

Date

Nominated Supervisor Checklist, Delegation and Consent

Name:		Position:		Date of birth: (must be over 18)	
The Role of the Nominated Supervisor <p>The Education and Care Services National Law Act 2010 requires that a service has a Nominated Supervisor to operate. The Nominated Supervisor must provide their consent to the nomination in writing. As the person with responsibility for the day-to-day management of an Approved Service, a Nominated Supervisor has a range of responsibilities including:</p> <ul style="list-style-type: none"> • Monitor and respond to the requirements and obligations set out under the Education and Care Services National Law Act (2010) and Regulations (2011), ensuring that the service operates within these legislative frameworks; • Manage the day-to-day operations of the service including the organising and coordinating of tasks; • Lead the delivery of the service ensuring the preparation and development of the services program meets the needs of children and families; • Monitoring compliance with the service's policies and procedures and ensuring these guidelines adequately reflect the requirements needed in providing quality care and education; • Ensure practices to support the safety and wellbeing of children are followed and provide immediate response of suspicions of harm, incidents, illness, injury and trauma; • Communicate all incidents or significant events involving children, educators or visitors to the service to the Approved Provider as soon as practicable (must be under 24 hours); • Respond to requests and enquiries from parents, educators and management; and • Attend to relevant operational requirements. 					

Suitability Checklist			
Criteria	Indicator of Suitability	Comments and Evidence	
Qualifications			
Hold or be actively working towards minimum 2 year or higher relevant qualification	<ul style="list-style-type: none"> • Evidence of enrolment and progression • Qualification listed on ACECQA register • 50% or more completion considered as a better practice in determining the responsible person 		<input type="checkbox"/>
Working with Children Check (Blue Card or Exemption)	<ul style="list-style-type: none"> • Evidence of positive notice or exemption 	<ul style="list-style-type: none"> • Number – Blue Card Number. • Expiry - enter a date. 	<input type="checkbox"/>
First Aid, Asthma and Anaphylaxis	<ul style="list-style-type: none"> • Evidence of completion/competency (certificate) • Details of course code/s (valid with ACECQA register) • Dates of expiry/validity 		<input type="checkbox"/>

No previous history of (non)compliance with National Law and other (including previous) relevant law	<ul style="list-style-type: none"> No disclosure of any decision to refuse, suspend, refuse to renew, or cancel a licence, approval, registration, certification or other authorisation granted to the person under the National Law and other relevant laws 	<i>Compliance History Statement and Prohibition Notice Declaration</i> can be completed and kept on file.	<input type="checkbox"/>
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Knowledge			
Understanding of the Education and Care Services National Law Act 2010 and Regulations 2011	<ul style="list-style-type: none"> Management observations, feedback and employee records Completed training or demonstrated knowledge through testing/conversation or references Completion of Responsible Persons training 		<input type="checkbox"/>
Understanding of Legal and Regulatory Foundation such as; <ul style="list-style-type: none"> <i>Child Protection Act 1999 (Qld)</i> <i>Work Health Safety Act (Qld)</i> 	<ul style="list-style-type: none"> Management observations, feedback and employee records Completed training in: <ul style="list-style-type: none"> Child Protection Work Health and Safety 		<input type="checkbox"/>
Demonstrated understanding of service's policies and procedures including sound knowledge of policies relating to: <ul style="list-style-type: none"> Emergency evacuation procedures Behaviour guidance and support practices Illness, injury, incident and trauma Children with additional and medical needs/conditions Children's arrival and departures Notification procedures 	<ul style="list-style-type: none"> Management observations, feedback and employee records demonstrates a working knowledge of service policies and expectation Induction and orientation procedure completed – with signed staff handbook and/or acknowledgement of service policy Educator's conduct is consistent with service standards Demonstrated understanding through communication with management or references Participation in previous policy development and review 		<input type="checkbox"/>
Skills and Capacity			
Sound communication and interpersonal skills to supervise, manage and lead educators	<ul style="list-style-type: none"> Management observations, feedback and employee records demonstrates the ability to communicate effectively and build collaborative relationships. Recommendations from references Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Sound understanding and demonstrated practice in supporting children's behaviour, safety and wellbeing	<ul style="list-style-type: none"> Management observations, feedback and employee records demonstrate skilful in responding to the needs and behaviour of children Recommendations from references Previous experience, level of qualification and completed training Completion of relevant training 		<input type="checkbox"/>
Capacity to provide adequate supervision and demonstrated	<ul style="list-style-type: none"> Management observations, feedback and employee records demonstrate critical thinking and responsiveness Previous engagement with quality improvement and compliance tasks 		<input type="checkbox"/>

responsiveness to needs, including prioritising and coordinate critical tasks	<ul style="list-style-type: none"> Recommendations from references Previous experience, level of qualification and completed training 		
Ability and Work Experience			
Demonstrated ability to respond adequately to incidents involving children's health and safety	<ul style="list-style-type: none"> Can articulate responsibilities in managing and notifying of incidents Observations and feedback of the ability to identify and manage risks appropriately Experience in leading previous emergency drills Recommendations from references Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Ability to lead emergency and evacuation procedures	<ul style="list-style-type: none"> Can articulate role and priorities in coordinating emergency evacuation Experience in leading previous emergency drills Recommendations from references Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Can effectively collaborate and engage with external stakeholders	<ul style="list-style-type: none"> Can articulate strategies for effective communication with family and the school community Understand the types of information reasonably expected that a responsible person would communicate to parents/caregivers Demonstrated experience in developing warm trusting relationships with families and parents Can articulate a suitable capability to communicate with the Regulatory Authority during a compliance visit 		<input type="checkbox"/>
Demonstrated ability to work with ethical practice and meet expectations without close supervision.	<ul style="list-style-type: none"> Management observations, feedback and employee records demonstrate the ability to autonomously Experience with responsibility and decision-making is sound Responds to receiving feedback and instruction constructively 		<input type="checkbox"/>
Suitability Assessment Completed by			
Name		Position	
		Date	

Acknowledgement of National Law and Regulation Obligations *(Completed by Proposed Nominated Supervisor)*

Area of Responsibility	Initial
Educational program <i>(Regulation s168(2))</i> I understand that I am responsible to ensure educational programs are: <ul style="list-style-type: none"> based on and delivered in accordance with My Time, Our Place – Framework for School Age Care in Australia based on the developmental needs, interests and experiences of each child designed to take into account the individual differences of each child 	

<p><i>Supervision and support of children</i> (Law s165(2), s166(2) & s167(2))</p> <p>I understand that I am responsible to ensure children are adequately supervised at all times that the children are in the care of the service and while children are being cared for they are not subject to any form of corporal punishment or discipline that is unreasonable in the circumstances.</p> <p>I understand that it is my obligation to ensure every reasonable precaution is taken to protect children being educated and cared for from harms and hazards that are likely to cause injury.</p>	
<p><i>Incident, injury, trauma, illness and emergency procedures</i> (Regulation 85 & 95)</p> <p>I understand that I must follow the service's Incident, injury, trauma and illness policy and procedures when a child is injured, becomes ill or suffers a trauma.</p> <p>I understand that I will support the Approved Provider in ensuring telephone or other communication device is available to communicate with parents and emergency services in the event of an emergency.</p>	
<p><i>Entry and departure from the premises</i> (Law s170, Regulation 99, & 157(2))</p> <p>I understand I am responsible to ensure children do not leave the education and care service premises except when (accordance with the National Regulations):</p> <ul style="list-style-type: none"> • given into the care of a parent, authorised nominee or a person authorised by an authorised nominee • leaving the premises in accordance with the written authorisation of the child's parents or authorised nominee (named in the enrolment) • take on an excursion (in accordance with regulations) • a child requires medical, hospital or ambulance care or because of another emergency <p>I understand I am responsible to ensure that a parent of a child being educated and cared for by the service may enter the service premises at any time when the child is being educated and cared for by the service, except when permitting entry would pose a risk to the safety of the children and staff or conflict with the duty of the supervisor under the National Law, or where you reasonably believe permitting the parent's entry would contravene a court order.</p> <p>I understand I am responsible to ensure a person not authorised (as defined in the Nat. Law) is not at the service while children are present unless the person is under direct supervision.</p>	

<p>Food and beverages (Regulation 79(2) & 80(2))</p> <p>I understand I am responsible to ensure adequate health and hygiene practices and safe practices for handling, preparing and storing food are implemented at the service to minimise risks to children.</p> <p>I understand I am responsible to ensure children being cared for by the service have access to safe drinking water at all times and are offered food and beverages on a regular basis throughout the day.</p> <p>I understand I am responsible to ensure that, where food and beverages are supplied by the service, it is:</p> <ul style="list-style-type: none"> • nutritious and adequate in quantity; • chosen with regard to the dietary requirements of individual children; and • a weekly menu accurately describing the food and beverages to be provided is displayed at the premises in a location accessible to parents. 	
<p>Administration of medication (Regulation 93(3), 94, & 95)</p> <p>I understand I am responsible to ensure that medication is not administered to a child being cared for by the service unless the administration is authorised (except in the case of anaphylaxis or asthma emergency) and is administered in accordance with the National Regulations and the services policy and procedures:</p> <ul style="list-style-type: none"> • if the medication has been prescribed by a registered medical practitioner, from its original container, bearing the original label with the name of the child to whom the medication is to be administered, and before the expiry or use by date; or • from its original container, bearing the original label and instructions and before the expiry or use by date; and • in accordance with any instruction attached to the medication or provided by a registered medical practitioner. <p>I understand in the case of an anaphylaxis or asthma emergency, medication is administered to a child without authorisation, I will ensure that a parent of the child and emergency services are notified as soon as practicable.</p>	
<p>Prescription medication, nd alcohol (Regulation 83(2))</p> <p>I understand that while educating and caring for children at the service, I must not consume alcohol or be affected by alcohol or drugs (including prescription medication) so as to impair my capacity to supervise or provide education and care to children.</p>	
<p>Sleep and rest (Regulation 81(2))</p> <p>I understand my responsibilities in taking reasonable steps to ensure that the needs for children's sleep and rest of children are met. In doing so you will have regard to the ages, development stages and individual needs of children.</p>	
<p>Excursions (Regulation 100(2), 101 & 102)</p> <p>I understand my responsibility to ensure that a risk assessment is carried before authorisation for an excursion is sought. When completing a risk assessment for approval, I understand the Regulations require specific elements to be addressed. I must identify and assess risk, and specify how these risks will be managed and minimised.</p> <p>I understand I must ensure that children being cared for by the service must not be taken outside of the service premises on an excusing without written consent by a parent or persons named on the enrolment form. This consent must outline specifics outlined in the Regulation 102 (4).</p>	

Staffing (Regulation s169) I understand my responsibility to ensure the prescribed educator to child ratios are met and each educator at the service meets the qualification requirements relevant to the educator's role.		
Appointment of Responsible Persons (Regulation 117B & Law s162A) I understand that I must not place a person in day-to-day charge unless the person: <ul style="list-style-type: none"> • is over 18 years; • has had their compliance with education and care law and history has been declared; • has taken reasonable steps to ensure adequate knowledge and understanding of providing education and care; • has the ability to effectively supervise and manage a service; and • has received instruction to the awareness and application of the <i>Child Protection Act 1999 (Qld)</i> and their obligations as a mandatory reporter. 		
Consent		
I, name of Nominated Supervisor , agree to fulfilling the role of Nominated Supervisor at <<insert name of service>> when rostered or requested. In doing so, I acknowledge: <ul style="list-style-type: none"> • I have read and understand the role description and agree to meet these requirements; • I am confident in my capacity to perform all requirements of the role; • I have not been subject to any compliance actions or disciplinary proceedings under the Education and Care Services National Law Act (2010) and Regulations (2011) or relevant other legislation. 		
Signature		Date
Approved Provider Endorsement		
Name		Position
Signature		Date

Compliance History Statement for A Nominate Supervisor or Responsible Person

This form may assist when determining a person's suitability to be the nominated supervisor or to be placed in day-to-day charge of a service. Completed forms should be retained and stored.			
1. Please provide information about any compliance action or disciplinary proceedings to which you have been subject under: <ul style="list-style-type: none">the Education and Care Services National Law, including the Education and Care Services National Regulations, andany of the laws listed at Table 1 below, in any Australian state or territory.			
2. Have you ever had a supervisor certificate that was subject to any conditions or suspended or cancelled by the regulatory authority? <input type="checkbox"/> Yes – please provide details below <input type="checkbox"/> No			
3. Are you or have you ever been subject to a prohibition notice under the <i>Education and Care Services National Law</i>? <input type="checkbox"/> Yes – please provide details below <input type="checkbox"/> No			
4. Have you ever held or applied for a licence, approval, registration, certification or other authorisation under the National Law which the regulatory authority refused, refused to renew, suspended or cancelled? <input type="checkbox"/> Yes – please provide details below <input type="checkbox"/> No			
I, Full Name, of Address and born on declare that: <ul style="list-style-type: none">the information provided in this statement is true and complete, andI am aware that I may be subject to penalties under a Commonwealth or State or Territory Act if I provide false or misleading information.			
Signature		Date	18/02/2025

Table 1**Other relevant laws, including children's services laws, education laws, and former education and care services laws in any Australian state or territory**

Australian Capital Territory	<ul style="list-style-type: none"> • Children and Young People Act 2008 • Education Act 2004 • Working with Vulnerable People (Background Checking) Act 2011
New South Wales	<ul style="list-style-type: none"> • Children and Young Persons (Care and Protection) Act 1998 • Education Act 1990 • Institute of Teachers Act 2004 • Teaching Service Act 1980 • Commission for Children and Young People Act 1998
Northern Territory	<ul style="list-style-type: none"> • Care and Protection of Children Act • Care and Protection of Children (Children's Services) Regulations • Education Act • Teacher Registration (Northern Territory) Act and Regulations
Queensland	<ul style="list-style-type: none"> • Child Care Act 2002 Child Care Act 1991 • Education (Accreditation of Non-State Schools) Act 2001 • Education (General Provisions) Act 2006 • Education (Overseas Students) Act 1996 • Education (Queensland College of Teachers) Act 2005 • Higher Education (General Provisions) Act 2008 • Family and Child Commission Act 2014
South Australia	<ul style="list-style-type: none"> • Children's Protection Act 1993 • Children's Services Act 1985 • Education Act 1972
Tasmania	<ul style="list-style-type: none"> • Child Care Act 2001 Education Act 1994 • Teacher's Registration Act 2000 • Registration to Work with Vulnerable People Act 2013 • Children, Young Persons and their Families Act 1997
Victoria	<ul style="list-style-type: none"> • Children's Services Act 1996 • Education and Training Reform Act 2006 • Working with Children Act 2005
Western Australia	<ul style="list-style-type: none"> • Child Care Services Act 2007 • Child Care Services Regulations 2007 • School Education Act 1999 • Western Australian College of Teaching Act 2004 • Working with Children (Criminal Record Checking) Act 2004

Prohibition Notice Declaration for Prospective Staff Members

<ul style="list-style-type: none"> The declaration may be completed by any prospective staff member seeking employment or engagement with an education and care service This form is designed to support approved providers to ensure they do not engage or employ a person who is prohibited from working in an education and care service, in line with Section 188 of the Education and Care Services National Law Completed forms should be retained and stored by the approved provider to support compliance with Section 188 of the Education and Care Services National Law Please note this form does not need to be lodged with the regulatory authority 			
Part A: Personal details			
Title:		Date of birth	
First Name		Last Name	
Phone Number			
Email			
Street Address			
Suburb			
State		Postcode	
Please provide details of any former names or other names you may be known by			
Are you currently subject to a prohibition notice under the Education and Care Services National Law? Please note that under section 187 of the Education and Care Services National Law, a person who is subject to a prohibition notice is not allowed to work for or be engaged by an education and care service or carry out any other related activity.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently prohibited or restricted from working with children under any other law?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Part B: Declaration			
I,[insert full name of person signing the declaration] declare that: <ol style="list-style-type: none"> the information provided on this form is true, complete and correct the approved provider or a representative of the approved provider is authorised to verify any information provided in this form I am aware that under the Education and Care Services National Law penalties apply if false or misleading information is provided. 			
Signature		Date	

ACECQA Nominated Supervisor Consent Form – NS01



NS01_NominatedSu
pervisorConsentFori

Responsible Person Checklist, Delegation and Consent

Name:		Position:		Date of birth: (must be over 18)	
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The Education and Care Services National Law Act 2010 requires that a **Responsible Person** is physically in attendance at all times the service is educating and caring for children. The Responsible Person is either the Approved Provider (or the person in management or control of the service), the Nominated Supervisor of the service, or an Educator who has been placed in day-to-day charge of the service.

A Responsible Person placed in day to day charge of a service does not have any statutory responsibilities under the National Law and Regulations nor does the Nominated Supervisors' responsibilities do not pass onto them in the Nominated Supervisor's absence. However, the Responsible Person is still responsible for ensuring the service continues to comply with the law and regulations as well as the service's own policy and procedures.

The role of the Responsible Person is to:

- Monitor and respond to the requirements and obligations set out under the Education and Care Services National Law Act (2010) and Regulations (2011), ensuring that the service operates within these legislative frameworks;
- Manage the day-to-day operations of the service including coordinating tasks, leading the delivery of the service and monitoring compliance with the service's policies and procedures;
- Ensure practices to support the safety and wellbeing of children are followed and provide immediate response of suspicions of harm, incidents, illness, injury and trauma;
- Communicate all incidents or significant events involving children, educators or visitors to the service to the Nominated Supervisor and/or Approved Provider as soon as practicable (must be under 24 hours); and
- Respond to requests and enquiries from parents, educators and management.

Suitability Checklist			
Criteria	Indicator of Suitability	Comments and Evidence	
Qualifications			
Hold or be actively working towards minimum 2 year or higher relevant qualification	<ul style="list-style-type: none"> • Evidence of enrolment and progression • Qualification listed on ACECQA register • 50% or more completion considered as a better practice in determining the responsible person 		<input type="checkbox"/>
Working with Children Check (Blue Card or Exemption)	<ul style="list-style-type: none"> • Evidence of positive notice or exemption 	<ul style="list-style-type: none"> • Number – Blue Card Number. • Expiry - enter a date. 	<input type="checkbox"/>
First Aid, Asthma and Anaphylaxis	<ul style="list-style-type: none"> • Evidence of completion/competency (certificate) • Details of course code/s (valid with ACECQA register) • Dates of expiry/validity 		<input type="checkbox"/>
No previous history of (non)compliance with National Law and other (including previous) relevant law	<ul style="list-style-type: none"> • No disclosure of any decision to refuse, suspend, refuse to renew, or cancel a licence, approval, registration, certification or other authorisation granted to the person under the National Law and other relevant laws 	<i>Compliance History Statement and Prohibition Notice Declaration can be completed and kept on file.</i>	<input type="checkbox"/>

Knowledge			
Understanding of the Education and Care Services National Law Act 2010 and Regulations 2011	<ul style="list-style-type: none"> • Management observations, feedback and employee records • Completed training or demonstrated knowledge through testing/conversation or references • Completion of Responsible Persons training 		<input type="checkbox"/>
Understanding of Legal and Regulatory Foundation such as; <ul style="list-style-type: none"> • <i>Child Protection Act 1999 (Qld)</i> • <i>Work Health Safety Act</i> 	<ul style="list-style-type: none"> • Management observations, feedback and employee records • Completed training in: <ul style="list-style-type: none"> ○ Child Protection ○ Work Health and Safety 		<input type="checkbox"/>
Demonstrated understanding of service's policies and procedures including sound knowledge of policies relating to: <ul style="list-style-type: none"> • Emergency evacuation procedures • Behaviour guidance and support practices • Illness, injury, incident and trauma • Children with additional and medical needs/conditions • Children's arrival and departures • Notification procedures 	<ul style="list-style-type: none"> • Management observations, feedback and employee records demonstrates a working knowledge of service policies and expectation. • Educator's conduct is consistent with service standards • Signed staff handbook and/or acknowledgement of service policy • Demonstrated understanding through communication with management or references • Participation in previous policy development and review 		<input type="checkbox"/>
Skills and Capacity			
Sound communication and interpersonal skills to supervise, manage and lead educators	<ul style="list-style-type: none"> • Management observations, feedback and employee records demonstrates the ability to communicate effectively and build collaborative relationships. • Recommendations from references • Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Sound understanding and demonstrated practice in supporting children's behaviour, safety and wellbeing	<ul style="list-style-type: none"> • Management observations, feedback and employee records demonstrate skilful in responding to the needs and behaviour of children • Recommendations from references • Previous experience, level of qualification and completed training • Completion of relevant training 		<input type="checkbox"/>
Capacity to provide adequate supervision and demonstrated responsiveness to needs, including prioritising and coordinate critical tasks	<ul style="list-style-type: none"> • Management observations, feedback and employee records demonstrate critical thinking and responsiveness • Previous engagement with quality improvement and compliance tasks • Recommendations from references • Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Ability and Work Experience			
Demonstrated ability to respond adequately to incidents involving children's health and safety	<ul style="list-style-type: none"> • Can articulate responsibilities in managing and notifying of incidents • Observations and feedback of the ability to identify and manage risks appropriately • Experience in leading previous emergency drills • Recommendations from references 		<input type="checkbox"/>

	<ul style="list-style-type: none"> • Previous experience, level of qualification and completed training 		
Ability to lead emergency and evacuation procedures	<ul style="list-style-type: none"> • Can articulate role and priorities in coordinating emergency evacuation • Experience in leading previous emergency drills • Recommendations from references • Previous experience, level of qualification and completed training 		<input type="checkbox"/>
Can effectively collaborate and engage with external stakeholders	<ul style="list-style-type: none"> • Can articulate strategies for effective communication with family and the school community • Understand the types of information reasonably expected that a responsible person would communicate to parents/caregivers • Demonstrated experience in developing warm trusting relationships with families and parents • Can articulate a suitable capability to communicate with the Regulatory Authority during a compliance visit 		<input type="checkbox"/>
Demonstrated ability to work with ethical practice and meet expectations without close supervision.	<ul style="list-style-type: none"> • Management observations, feedback and employee records demonstrate the ability to autonomously • Experience with responsibility and decision-making is sound • Responds to receiving feedback and instruction constructively 		<input type="checkbox"/>
Suitability Assessment Completed by			
Name		Position	
		Date	

Consent			
<p>I, <u>Enter name of Responsible Person</u>, agree to fulfilling the role of Responsible Person at <u><<insert name of service>></u> when rostered or requested. In doing so, I acknowledge:</p> <ul style="list-style-type: none"> • I have read and understand the role description and agree to meet these requirements; • I am confident in my capacity to perform all requirements of the role when placed in day-to-day charge of the service; • I have not been subject to any compliance actions or disciplinary proceedings under the Education and Care Services National Law Act (2010) and Regulations (2011). 			
Signature		Date	
Nominated Supervisor/Approved Provider Endorsement			
Name		Position	
Signature		Date	

Complaint Record

Name of complainant:		Role:	
Date complaint made:		Time:	
Summary of complaint			
Summary of discussion:			
Resolution sought:			
Further action required by management? Choose an item.			
Planned Action			
Employee Name:			
Signature:			
Date:		Date Approved Provider Notified	