

Queanbeyan-Palerang Family Day Care

Policy and Procedure Manual

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Children's Health and Safety Policy

1. OUTCOMES

Queanbeyan -Palerang Family Day Care is committed to maintaining a safe and healthy and environment for children to explore, discover and learn. Children's health and safety will always be paramount. Educators will take all necessary steps to ensure this.

2. POLICY

Educators will ensure the health and safety of children in family day care is protected through the implementation of recognise Australia Health and Safety Guidelines and Standards.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[The Ombudsman Act 1974](#)

[The Child Protection \(Working with Children\) Act 2012](#)

[Commission for Children and Young People Act 1998](#)

[Children and Young Persons \(Care and Protection\) Act 1998](#)

[Children and Young Persons \(Care and Protection\) Amendment \(Parent Responsibility Contracts\) Act 2006](#)

[Child Protection \(Offenders Registration\) Act 2000](#)

[Crimes Act 1900](#)

[Family Law Act 1975](#)

[Children and Young Persons \(Care and Protection\) Amendment Bill 2009](#)

4. CONTENT

Educators registered with Queanbeyan-Palerang Family Day Care recognise the importance of children's health and safety and are committed to following the appropriate steps.

Queanbeyan-Palerang Family Day Care are dedicated to ensuring that each child's health and safety needs are met through the implementation of operative hygiene practices to control the spread of infectious diseases, the prevention and management of injuries and illness and providing a safe and secure physical environment for children.

The importance of children's nutritional and physical health needs will be promoted by educating children about a healthy lifestyle which will be reinforced through the daily routine and experiences.

We believe in quality education and care in an environment that provides for their protection through adequate supervision, safe experiences and environments, and emergency vigilance. Educators at the service are dedicated to understanding their legal and ethical responsibility to protect the children enrolled at the service.

5. PERFORMANCE INDICATORS

- The number of accidents where children are injured or require medical treatment.
- The number of "serious incidents" reported to the Department of Education and Communities
- Assessment and Rating Visit

6. KEY RESOURCES

[Get Up & Grow - Healthy Eating and Physical Activity for Early Childhood](#)
[Healthy Eating & Physical Activity Resources Package](#)
[Healthy Eating for Infants, Children and Teenagers](#)
[Munch and Move](#)
[Keeping Children Safe](#)
[eSafety](#)
[Guide to the National Quality Standard](#)
[NSW Health](#)
[Staying Healthy - 5th Edition](#)
[Safe Food Standards](#)
[ACECQA](#)
[QPRC](#)
[Child Care Provider Handbook;](#)
[Services Australia](#)
[Kidsafe](#)
[Australian Guide to Healthy Eating](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

7. RELEVANT PROCEDURES

Child Protection - Procedure
Sun Protection - Procedure
Supervision -Procedure
Health and Hygiene – Safe Operating Procedures
Sick Children - Procedure
Sleep and Rest - Procedure
Food, Safety, Preparation, and Handling - Procedure
Health Eating - Procedure
Incident, Injury, Trauma, and Illness - Procedure
Emergency and Evacuation -Procedure
Transportation of Children - Procedure
Water Safety - Procedure
Regular Outings and Excursions - Procedure

Policy review date: October 2023

Next policy review date: October 2024

Infection Control Policy

1. OUTCOMES

Queanbeyan-Palerang Family Day Care has a duty a care to ensure that children, families, educators, and staff are provided with a high level of protection whilst education and care is being provided. We aim to manage illnesses and prevent the spread of infectious diseases where possible by implementing best practice hygiene and infection control procedures.

Educators, families, and staff are aware of their rights and responsibilities in relation to controlling infectious diseases.

2. POLICY

Educators and staff must ensure a high standard of hygiene and infection control is maintained in a Family Day Care setting.

Educators, staff, and parents have a responsibility to ensure that all steps are taken to prevent the spread of infectious diseases.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Queanbeyan-Palerang Family Day Care has a duty to provide and maintain a safe working environment for educators, families, children, and staff, and to ensure that the risk of infection is kept to a minimum thus preventing the spread of infectious diseases.

Educators are at risk of contracting infectious diseases. Infection control practices such as the wearing of gloves and hand washing may assist in the prevention and spreading of infectious diseases.

Educators must ensure that the infectious disease policy covers all persons who normally reside in the home of a family day care educator.

Orientation for new educators will include infection control procedures.

Staff will support educators to establish hygiene protocols and infection control procedures in their homes in line with relevant procedures and will monitor during visits that these are maintained.

Immunisation may stop or assist in the prevention of workers contracting some of the infectious diseases or simply reduce the severity of the illness.

The definition of a "sick child" will be determined by the educator's willingness to care for a child with conditions such as ear infections, "runny noses" etc. The educator has a responsibility to ensure that illnesses are not spread to other children in care, to self and to own family.

Staff will review and upgrade hygiene and infection control procedures regularly or as required to maintain currency with health research.

Notification of infectious diseases will be followed where a child, staff member or educator is diagnosed with a notifiable disease.

5. PERFORMANCE INDICATORS

- The incidence of infectious diseases spreading through the Queanbeyan-Palerang Family Day Care service

6. KEY RESOURCES:

[Guide to the National Quality Standard](#)
[National Immunisation Program Schedule](#)
[NHMR](#)
[NCIRS](#)
[ACECQA](#)
[QPFDC Policies and Procedures](#)
[Child Care Provider Handbook](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[NSW Health Disease Notification](#)
[NSW Public Health Legislation](#)
[WH&S Act 2011](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

RELEVANT PROCEDURES

[Hand Hygiene – Safe Operating Procedure](#)
[Nappy Change and Soiled Pull-ups – Safe Operating Procedure](#)
[Toileting a Child – Safe Operating Procedure](#)
[Bathing or Showering a Child – Safe Operating Procedure](#)

Policy review date: October 2023
Next policy review date: October 2024

Health and Hygiene Policy

1. OUTCOMES:

At Queanbeyan- Palerang Family Day Care, we are committed to providing a safe and healthy environment for children enrolled with our service.

To provide clear guidelines to ensure the health, safety and wellbeing of children enrolled with Queanbeyan-Palerang Family Day Care.

Educators and parents are aware of their rights and responsibilities in relation to health and hygiene practices.

2. POLICY:

Educators must observe strict health and hygiene practices that have regard to current community standards and are in accordance with relevant government guidelines to minimise risks to children.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)
[Work Health and Safety Act](#)
[Road Transport Legislation Amendment Act 1999](#)

4. CONTENT

Queanbeyan Palerang Family Day Care promotes child health within the service by encouraging and assisting educators to adopt healthy and hygienic practices, to manage health concerns and emergencies in the most appropriate way. The health and hygiene of the environment at the educator's home for children in their care and for the educator's own family is paramount:

Children will be encouraged and assisted in developing age-appropriate personal hygiene habits, such as hand hygiene.

Educators will ensure equipment and resources are regularly cleaned/washed, are well maintained and age appropriate.

Staff and Educators will ensure that safe sleeping practices are implemented in accordance with the Education and Care Services National Regulations and with policies and procedure developed and promoted by Red Nose recommendations.

Queanbeyan -Palerang Family Day Care will ensure that a strong sense of health and wellbeing is supported by good nutrition and an active lifestyle. Children will be encouraged to make healthy food and drink choices and educators and staff will encourage parents/guardians to provide appropriate foods that meet the nutritional needs of the child. Educators and service staff will work with parents/guardians and be aware of children's food allergies, intolerances and other individual dietary requirements with all documentation completed.

Educators and staff will support and encourage children to engage in movement and physical activity.

Educators and staff must be equipped to deal with emergency situations and have the training and skills to administer first aid as required. Educators must be aware of children attending their service with a medical condition, health or additional need and ensure all required documentation is completed and kept current.

Educators must maintain current approved First Aid, Cardio Pulmonary Resuscitation and Asthma and Anaphylaxis training.

Educators will ensure that a first aid kit is readily available in the service and including on outings and excursions.

Staff and educators have the responsibility to educate and guide children and families relating to dangers of sun exposure. We believe and recognise the value of outdoor play opportunities and learning in a sun safe way. We encourage those opportunities to be guided around sun safe practices and are committed to ensuring all children are protected from ultraviolet.

The safety and supervision of children in and around water is of highest priority. Children will be supervised consistently during water play experiences and the safety of children around water will be considered when undertaking regular outings and excursions.

5. PERFORMANCE INDICATORS:

- The incidence of infectious diseases spreading through the Queanbeyan-Palerang Family Day Care service.

6. KEY RESOURCES:

[Staying Healthy - 5th Edition](#)
[Department of Health and Aged Care](#)
[Cancer Council - Sun Protection](#)
www.sidsandkids.org
[ACECQA](#)
[QPRC](#)
[Child Care Services Handbook](#)
[Guide to the National Quality Standards](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

7. RELEVANT PROCEDURES

[Hand Hygiene – Safe Operating Procedure](#)
[Nappy Change and Soiled Pull-ups – Safe Operating Procedure](#)
[Toileting a Child – Safe Operating Procedure](#)
[Bathing or Showering a Child – Safe Operating Procedure](#)

Policy review date: October 2023

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Hand Hygiene – Safe Operating Procedure

Identify Related Hazards/Risks

The spread of germs due to children and adults not washing and drying hands correctly.

Controls for Hazards/Risks

Implement correct Hand Washing procedures (see Job Steps)

Educators must ensure that adequate, developmentally, and age-appropriate facilities are provided enabling safe and convenient access for children's hand washing.

Cloth towels may be used in the hand washing/drying process but must be used by one person (i.e. not shared) and hung up to dry between uses.

Washing Hands with Soap and Water

- Wet hands with running water
- Use liquid soap and spread over hands.
- Lather soap and rub hands thoroughly, including the wrists, palms, between the fingers, around the thumbs and under the nails. Rub hands together for 20 seconds.
- Rinse your hands thoroughly to remove all suds and germs. Thorough rinsing will help prevent dermatitis from residue.
- Dry your hands with a paper towel.

Hand Rubs

Hand rubs are also known as alcohol-based hand rubs, antiseptic hand rubs, waterless hand cleaners, gels, or hand sanitisers. They have been proven to increase hand hygiene in healthcare settings and it also makes sense to have them in education and care services. They can be a fast and effective way to remove germs that may have been picked up by touching contaminated surfaces. Hand rubs can be useful when assisting children with eating, when on excursions, in the playgrounds, or in other situations where soap and water are not always available.

It is important to remember that soap and water are the best option when hands are visibly dirty.

Hand rubs are safe to use as directed, but children may be at risk if they eat or drink the hand cleaner or splash it into their eyes or mouth. Hand rubs should be kept well out of reach of children and only used with adult supervision.

Cleaning Hands with Hand Rub

Only use hand rub if hands are not visibly dirty, or when soap and water are not available:

- Apply the amount of hand rub recommended by the manufacturer to palms of dry hands.
- Rub hands together, making sure you cover in between fingers, around thumbs and under nails.
- Rub until hands are dry – this will take 5-15 seconds.

Babies need their hands washed as often and as thoroughly as older children. If the baby cannot stand at a hand basin, wash their hands with pre-moistened disposable wipes, making sure their hands have been rinsed to remove any soap, then air.

Antibacterial Soap

Kills some (but not all) bacteria and does not kill viruses. There is no place for the routine use of antibacterial soap in education and care services.

Drying Hands with Cloth Towels

If cloth towels are used, they must be used by one person only and not shared. They must be hung up to dry between uses. Educators are encouraged to ensure that each child has his/her own hook or that each child has a colour assigned to reduce the risk of cross contamination.

Cloth towels must be laundered daily.

Drying Hands with warm air dryers

Educators may use warm air dryers, but they are not recommended. Air dryers take longer to dry hands, can only serve one person at a time and are often not used for long enough to ensure dry hands.

Educators should always wash hands:

- Before handling food, including babies' bottles.
- Before eating
- Before giving medication
- Before putting on gloves
- After taking off gloves
- After changing a nappy
- After coming in from outside play
- After using the toilet
- After cleaning the nappy change area
- After helping children use the toilet
- After cleaning up blood, faeces, or vomit
- After wiping a nose, either a child's or your own
- After handling garbage.

Children should always wash hands:

- On arrival at the educator's home
- Before eating and handling food
- After eating and handling food
- After touching nose secretions
- After using the toilet
- After having their nappy changed. Their hands will become contaminated while they are on the change mat
- After coming in from outside play
- After encountering blood, faeces, vomit or body fluids.

Educators will:

- Provide children with regular supervision so that they develop hand washing as a habit of good hygiene.
- Provide children with appropriate role modelling of hand washing techniques - children learn by watching and observing and will often imitate this behaviour.

Nappy Change and Soiled Pull-Ups – Safe Operating Procedure

Identify Related Hazards/Risks

- The spread of germs through incorrect nappy changing procedures
- The spread of germs/irritation through infrequent nappy changes
- A child falling from a change bench.
- The spread of germs through incorrect storage and disposal of soiled nappies/pull-ups

Controls for Hazards/Risks

- Implement correct hand washing procedures.
- Nappy changing is a social time for babies and toddlers and is an important routine. Health professionals discourage the use of nappy creams and powders. Only use creams and powders provided by the parent and clearly labelled with the child's name. Make sure powder is not inhaled by you or the baby.
- A child is only to have a nappy change on a stable surface. A change mat is to be used on every occasion.
- Under no circumstances is a child:
 - To be left unattended on a change bench
 - To be changed on a surface that has not been cleaned from a previous child's nappy/clothing change
- A child's nappy/pull-up is to be checked hourly and changed as required to ensure the child is comfortable.
- Soiled nappies/pull-ups must be stored in a secure and hygienic manner and disposed of as soon as practicable.
- The practice of sending used disposable nappies/pull-ups home to parents, is deemed unhygienic and therefore not acceptable.
- The use of disposable nappies/pull-ups is to be strongly encouraged. This reduces the risk of infections, because disposable nappies/pull-ups do not "leak" like cloth nappies and can be disposed of immediately.
- When changing nappies, educators need to position themselves in such a way as to increase their ability to provide adequate supervision for all children (visually and audibly). Nappy change may occur in the children's play area (ensuring that the child's dignity and privacy is protected) or all children can be taken to another area of the home such as the laundry.

Job Steps

- Wash your hands.
- Place paper on the change mat on a stable surface
- Put a pair of disposable gloves on both hands.
- Remove the child's nappy and any soiled clothes. The child's nappy should be placed into a plastic bag/nappy bin prior to disposal.
- Clean the child, preferably using pre-moistened disposal wipes.
- Remove the paper and put into plastic bag/nappy bin.

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- Remove your gloves and put them in the plastic bag/nappy bin before you touch the child's clean clothes. Remove gloves by peeling them back from your wrists, turning them inside out. Do not let your skin touch the outer contaminated surface of the glove.
 - Place a clean nappy on the child and dress the child.
 - Take the child away from the change mat.
 - Wash and dry your hands and the child's hands.
 - At the completion of each nappy change, clean the change table with detergent and water paying particular attention to the mat.
 - Wash your hands.

Educators will implement the above procedure for all children, including their own.

Toileting a Child – Safe Operating Procedure

Identify Related Hazards/Risks

- Child abuse
- Risk of allegations of child abuse against educator
- Risk of infection to child and educator

Controls for Hazards/Risks

- Always follow Child Protection Policy
- Always follow Child Safe Policy
- Under no circumstances is a child to be left unsupervised when toileting
- Always follow Universal Precautions for infection control
- Toileting a child is to be undertaken by the primary educator.
- Educators must ensure that adequate, developmentally, and age-appropriate facilities are provided for toileting, enabling safe and convenient access for children.
- It is better for the child to use the toilet than use a potty chair, which increases the risk of spreading diseases. In certain circumstances “potties” can be used. This is to be discussed with the parent and co-ordination unit staff members.

Job Steps

- Wash and dry your hands.
- If assisting the child with toileting, put disposable gloves on both hands.
- Wear a disposable apron (if you wish to protect your clothes from bodily fluids)
- Encourage and/or assist the child to pull up/down/remove clothing as required.
- Encourage and/or assist the child to climb onto the toilet using stool as required.
- Encourage and/or assist the child to wipe their bottom using toilet paper.
- Encourage and/or assist the child to flush the toilet.
- Encourage and/or assist the child to pull up/down/put clothing back on
- Encourage and/or assist the child to wash and dry their hands.
- Ensure that the child is in a safe area, clean away any spills or accidents on the floor.
- Remove the gloves by peeling them back from your wrists.
- Dispose of gloves and apron
- Wash and dry hands
- Return to the bathroom and place disposable gloves on your hands.
- Clean the toilet well if required, using warm water and detergent. If you suspect the person has an infectious disease (e.g., diarrhoea or vomiting), use a disinfectant after cleaning it with detergent and warm water.
- Remove the gloves by peeling them back from the wrists.
- Place the spray bottle out of reach of children.
- Wash and dry hands.

Educators will implement the above procedure for all children, including their own.

When necessary, educators will place dirty clothes in a plastic bag for parents to take home..

Bathing or Showering a Child – Safe Operating Procedure

Identify Related Hazards/Risks

- Child abuse
- Risk of allegations of child abuse against educator
- Risk of infection to child and educator

Controls for Hazards/Risks

- Always follow Child Protection Policy
- Under no circumstances is a child to be left unsupervised when bathing/showering
- Always follow Universal Precautions for infection control
- Toileting a child is to be undertaken by the primary educator.
- Queanbeyan-Palerang Family Day Care doesn't not actively encourage educators to bath children. Bathing of children is the responsibility of the parent.
- Where showering a child is required, this is to be undertaken by the primary educator. Educators must ensure supervision of other children whilst bathing or showering a child.

Job Steps

- Wash and dry your hands.
- Gather clothes that the child will require in the bathroom or encourage and/or assist the child to gather their own belongings from their bag.
- Ensure that the child is appropriately supervised.
- If assisting the child with showering, place disposable gloves on your hands.
Encourage and/or assist the child to remove clothing.
- If possible, use a handheld shower: turn on the taps in the shower to ensure an even flow of warm water and test the water temperature.
- Encourage and/or assist the child to enter the shower cubicle.
- Communicate with the child in a friendly manner.
- Encourage and/or assist the child to shower themselves.
- Turn off the taps.
- Assist the child to remove themselves from the shower.
- Encourage and/or assist the child to dry themselves.
- Encourage and/or assist the child to get dressed in clean clothing.
- Remove the apron.
- Remove the gloves by peeling them back from your wrists.
- Dispose of gloves and apron
- Wash and dry your hands.
- Encourage and/or assist the child to leave the bathroom.
- Return to the bathroom and place disposable gloves on your hands.
- Rinse the child's soiled clothing using the hand-held shower.
- Remove excess water from the clothing.

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- Place child's rinsed soiled clothing in a plastic bag.
 - Clean the shower area well if required, using warm water and detergent. If you suspect the person has an infectious disease (e.g., diarrhoea or vomiting), use a disinfectant after cleaning it with detergent and warm water.
 - Remove the gloves by peeling them back from your wrists.
 - Place the spray bottle out of reach of children.
 - Wash and dry your hands.
 - Where a shower is not the appropriate method of washing a child, and a bath is required, the above job steps are to be followed. Bathing is to occur only in extreme cases.
 - In organising a bath for a child, the following steps are to be added to the above job steps:
 - Turn on the taps and fill the tub to 1/3 full of warm water
 - Test the water temperature and turn off the tap

Sick Children Policy

1. OUTCOMES:

Queanbeyan-Palerang Family Day Care is committed to providing a safe and nurturing environment.

Children will be excluded from childcare when “sick” or unwell this ensuring the health and wellbeing of all children and their families.

2. POLICY:

Educators will discuss with parents/guardians what constitutes a “sick child” and exclude children, when necessary, from care.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. OUTCOME

Children will not be accepted into care if they have an infectious disease, are vomiting, have diarrhoea, a temperature or fever, where they have been on a medication (such as Panadol) in excess of 48 hours, or where they are deemed unable to participate in the day’s activities.

Where a child becomes ill whilst in care, parents will be contacted to collect the child.

Where child leaves care due to an illness, the educator must complete an incident, accident, illness report form and submit to the Co-ordination Unit. Where medical attention, is sought in such a scenario, this is deemed a serious incident and the service must advise the Department of Education within a 24-hour period via the NQA ITS.

In some circumstances an educator may request a medical certificate stating that a child is well enough to return to care.

5. PERFORMANCE INDICATORS:

- Incidence of “sick children” attending care

6. KEY RESOURCES:

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[NSW Health](#)

7. RELEVANT PROCEDURES

Sick Children – Procedure

Sick Children – Procedure

Sick Children

At the initial interview or during placing a child with an educator, it is very important that discussion occur regarding the definition of a “sick child”. This will be determined by the educator’s willingness to care for a child with conditions such as ear infections, “runny noses” etc. The educator has a responsibility to ensure that illnesses are not spread to other children in care, to herself and to her own family.

Parents are encouraged to discuss any illnesses/injuries that have occurred overnight or prior to the child coming into care, with the educator. This also includes where a child has been administered medication overnight. This enables an informed decision to be made about the child’s ability to cope with the day’s program.

Educators may develop their own guidelines in relation to “sick children” however the following guidelines are to be enforced:

- Children with an infectious disease will not be accepted into care.
- Vomiting – Should a child begin vomiting, the parent will be contacted and required to collect the child immediately. The child is not to come back into care until it has been 48 hours after symptoms has stopped.

Diarrhoea/Unusual Stools

Where a child is suffering from diarrhoea or has bowel motions where the frequency, consistency or smell is abnormal for the child, the following is to occur:

- Children should be excluded from attending childcare for 48 hours after the resolution of symptoms.
- Always follow universal precautions for infection control

A child will not be accepted into care if an anti-diarrhoea medication is being administered.

Child taking Antibiotics

Where the NHMRC table does not recommend exclusion for a child with a medical condition, but where a child has been prescribed antibiotics, he or she should stay home for the first 24 hours after the course of antibiotics has commenced to ensure that they have time to take effect and there is no reaction to the medication.

Temperature/Fever

Fevers are common in children. A high fever does not necessarily mean a child has a serious illness.

The normal temperature for a child is up to 38 degrees Celsius. If the temperature moves above 38 degrees Celsius, educators are required to notify the parent and advise them of the current temperature. If the child is unhappy, showing signs of other symptoms that may indicate an infection, and unable to participate in the program, then the parent is to be contacted to collect the child. In the interim educators are to give clear fluids and if the parents give permission, paracetamol. Watch the child and monitor how they are feeling.

If the child is less than 3 months old and has a fever above 38 degrees, contact the child’s parent and ask them to take the child to a doctor.

In some cases, a child may have febrile convulsions, which are physical seizures caused by the fever.

They usually last only a few seconds or minutes; however, an ambulance is to be called if the convulsions last for more than 5 minutes, if the child does not wake up when the convulsions stop, or if they look very ill when the convulsions stop.

If a child has a fever, ensure they drink plenty of fluids and are not overdressed. Avoid cold-water sponging or cold baths that make the child shiver. If sponging or bathing makes the child feel more comfortable, use lukewarm water.

Management/Action Plans

Where a child suffers from asthma, anaphylaxis or any other serious illness/medical conditions, parents are to provide a copy of a management/action plan to their educator and the Co-ordination Unit.

Management/Action Plans need to be reviewed regularly or as required and alongside Risk Minimisation and Communication Plans.

Educators are encouraged to have a copy of the 5th Edition Staying Health – preventing infectious diseases in early childhood education and care services. Further information about common illnesses can be found at www.nhmrc.gov.au. Children who are unwell will be excluded from care in accordance with National Health and Medical Research Council guidelines.

The following information is provided as a guide to educators and parents in determining if a child is well enough to go into care:

Common Cold

While a common cold is infectious – it is only infectious if secretions are not managed appropriately. When deciding whether a child is to be excluded from care, it is important to take all factors into consideration, including:

- Severity of the illness
- Length of time the child has had the symptoms, e.g., cough, runny nose
- The child's ability to manage secretions such as nose wiping, hand washing, covering the mouth when coughing, sneezing etc.

Green Noses"

If a child in care has a green discharge from the nose, is lethargic, suffering from a fever, cough, and has other flu-like symptoms, then he/she should be excluded from care until well. The only way to determine that a green discharge is infectious, is for a doctor to diagnose the situation.

Children will not be accepted into care where they have been on a medication such as Panadol for a period more than 48 hours.

Should a child become ill whilst in care, the educator will separate the ill child from the other children. If the child is not well enough to participate in activities, educators will contact their parent and send them home.

While waiting for the parent to arrive, keep the child away from the main group of children, if possible, although in a position where an educator can comfort and supervise them. After the child leaves, ensure that any bedding or toys used by the child, is cleaned.

Should urgent medical attention be required, and the parent/emergency contact is unavailable, an ambulance will be called (the parent will be responsible for the cost of transportation).

Where a child requires regular medication, the medication will be administered as outlined by the parent on the "Medication Authorisation Form" and completed by the educator as each medication is administered.

All educators must hold a current First Aid Certificate.

Where a child has suffered a serious illness or injury, the Co-ordination Unit may request a medical certificate stating that he/she is well enough to return to Family Day Care.

A child who is apparently suffering from an infectious disease will be excluded from childcare. Where a child has been excluded from care due to an infectious disease, a doctor's certificate may be requested prior to the child returning to care.

An educator is to complete an incident, injury, trauma, and illness form where any of the above occurs and this to be forwarded to the Co-ordination Unit as soon as possible. Where medical attention is sought, a "Family Day Care Australia Incident Report Form" is to be completed immediately and the Co-ordination Unit advised of the incident.

Immunisation Policy

1. OUTCOMES:

Children using childcare with Queanbeyan-Palerang Family Day Care must be fully immunised.

2. POLICY:

Families registered with Queanbeyan-Palerang Family Day Care are required to provide an Australian Immunisation Register (AIR) History Statement that shows a child is up to date or can't be immunised for medical reasons or an AIR Immunisation History Form that shows a child is on a recognised catch-up schedule, when enrolling in childcare. Families can request a copy of their child's AIR Immunisation History Statement at any time.

3. RELEVANT LEGISLATION

[Education and Care Services National Law](#)

[Education and Care Services National Regulations](#)

4. CONTENT

New Immunisation requirements came into force on 1 January 2018. Only children who are fully immunised for their age or have a medical reason not to be immunised or are on a catchup schedule can be enrolled in childcare. Children who have not been immunised due their parent conscientious objection cannot be enrolled.

5. PERFORMANCE INDICATORS:

- Number of unimmunised children enrolled with the service.
- Number of families who understand/do not understand the Government's immunisation policies.

6. RELEVANT PROCEDURES

[Immunisation – additional information](#)

7. KEY RESOURCES

[Save the Date to Vaccinate](#)

[NSW Health Immunisation Information](#)

[Immunisation requirements regarding Child Care Subsidy](#)

Immunisation - Additional Information

Prior to children commencing care with Queanbeyan-Palerang Family Day Care, families must provide an AIR History Statement that shows a child is up to date or cannot be immunised for medical reasons. Where a child is on a recognised catch-up schedule, an AIR Immunisation History form is required when enrolling.

It is the family's responsibility to provide updated documentation as immunisations occur once enrolled. Likewise, educators should be reminding families to provide updated information to the service. Blue books will not be accepted.

Families can request a copy of their child's AIR Immunisation History Statement at any time up to their child being 14 years of age. This can be done by.

- Using their Medicare online account through myGov
[myGov](#)
- Using the Medicare Express Plus App
[Services Australia Information](#)
- Calling the AIR general enquiries line on 1800 653 809

Children vaccinated overseas may have a different immunisation schedule from the Australian schedule. If a child was immunised overseas, their immunisation records will need to be checked by a GP/nurse who will transfer the information to the AIR.

Policy review date: October 2023

Next review date: October 2024

Administration of Medication Policy

1. OUTCOMES:

Children using childcare with Queanbeyan-Palerang Family Day Care will be administered medication with appropriate authorisation and supervision.

2. POLICY:

Families registered with Queanbeyan-Palerang Family Day Care are required to provide authorisation prior to children having medication administered to them.

Educators are required to seek permission from parents prior to administering medication to children.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Medication (including prescription, over the counter and homeopathic medications) can only be administered to a child at a service with the prior authorisation by a parent or an authorised nominee with the authority to consent to administration of medical attention to the child. This authorisation is to be given on the service's medication form.

In the case of an emergency, where it is not possible to obtain verbal consent from a parent or person named in the enrolment form, a registered medical practitioner or medical emergency service can be contacted.

Educators must keep all medications out of reach of children.

Medication may be administered to a child without an authorisation in the case of an anaphylaxis or asthma emergency. In this situation the parent of the child and/or emergency services must be notified as soon as possible by the Nominated Supervisor or Educator.

In some situations, a parent may give permission for a child to self-administer medication (the child must be over pre-school age). Where a child self-administers medication, the child will be expected to complete the relevant information on the "Medication Form". The process and completion of the medication form is to be overseen by the educator.

5. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

www.kidsafe.com.au

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. PERFORMANCE INDICATORS:

- Number of questions relating to the administration of medication

7. RELEVANT PROCEDURES

[Administration of medication – procedure](#)

Administration of Medication – Procedure

Medication (including prescription, over the counter and homeopathic medications) must not be administered to a child at a service without authorisation by a parent or an authorised nominee with the authority to consent to administration of medical attention to the child.

In the case of an emergency, where it is not possible to obtain verbal consent from a parent or person named in the enrolment form, a registered medical practitioner or medical emergency service can be contacted.

Medications must be administered:

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

The medication must be administered in accordance with instructions either attached to the medication, or any written or verbal instructions provided by a registered medical practitioner.

Educators must keep all medications out of reach of children. If medication needs to be refrigerated, it is to be kept in a child resistant container in the fridge. If the medication does not come in a child resistant container, it is to be stored at the back of the top shelf, in a childproof container in the fridge. Parents have a right to know about the educator's provision for storage of medication and the administration of the medication.

To ensure that medication is administered in accordance with doctor's instructions and parents' wishes, a "Medication Record" must be completed. This must be completed by the parent and include the following information:

- Name of the child
- Name of the medication to be administered.
- The time and date the medication was last administered.
- The time and date, or the circumstances under which, the medication should be next administered.
- The dosage of the medication to be administered.
- Parent's signature

On administering the medication to the child, the educator must complete the following information on the child's "Medication Record":

- The dosage that was administered
- The way the medication was administered.
- The time and date the medication was administered.
- The name and signature of the person who administered the medication.

Medication forms are to be submitted to the Co-ordination unit upon completion or when a child leaves the educator's care.

Educators may also require specific instructions and/or training when required to use special equipment for the administration of medication.

If on-going medication is prescribed by a registered medical practitioner, it is acceptable for the parent to authorise administration of medication on a weekly basis. It is the parent's responsibility to notify the educator immediately if there is any change in medication.

Exemption from Authorisation Requirement – Anaphylaxis or Asthma Emergency

Medication may be administered to a child without an authorisation in the case of an anaphylaxis or asthma emergency. In this situation the parent of the child and/or emergency services must be notified as soon as possible by the Nominated Supervisor or Educator.

Self-Administer Medication

In some situations, a parent may give permission for a child to self-administer medication (the child must be over pre-school age). Where a child self-administers medication, the child will be expected to complete the relevant information on the "Medication Form". The process and completion of the medication form is to be overseen by the educator.

Policy review date: August 2023

Next review date: August 2024

Medical Management Plans Policy

1. OUTCOMES:

Children suffering from a serious medical condition such as asthma, anaphylaxis, diabetes will be treated according to their medical management plans.

2. POLICY:

Educators registered with Queanbeyan-Palerang Family Day Care will have a current copy of a medical management plan where a child has a serious medical condition such as asthma, anaphylaxis, and diabetes. These management plans are to be reviewed and updated as required.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

All educators are required to have completed training by an appropriate health or first aid organisation in the management of asthma and anaphylaxis (including the administration of adrenaline (EpiPen, EpiPen JR or Anapen). If an educator is to be responsible for the emergency administration of adrenaline (EpiPen, EpiPen Jr or Anapen) to a child with anaphylaxis, this should be by prior written consent from the child's parent/guardian, and general practitioner.

Where a child suffers with severe asthma, anaphylaxis, diabetes or another serious illness, an individual management plan must be implemented by a qualified medical officer. This information must be provided to the educator and Co-ordination Unit.

It is the parent's responsibility to complete a Risk Minimisation Form and Communication Form in consultation with the educator. These forms ensure that all steps are taken to protect the child. A copy of these forms must be provided to the educator and Co-ordination Unit. The parent must keep copies of these forms so that if the child needs alternate care, the parent can provide this information to the alternate educator.

The parent must also advise the educator and Co-ordination Unit if there any changes to the plan and new documentation completed.

NB In the case of an asthma or anaphylaxis emergency, medication may be administered without authorisation by a parent. If this does occur, the parent and emergency service are to be notified as soon as practicable.

5. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Provider Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. PERFORMANCE INDICATORS:

- Number of children who have medical management plans.
- Number of medical management plans received by the Co-ordination Unit
- Number of parents who have completed Risk Minimisation and Communication Forms

7. RELEVANT PROCEDURES

[Medical Management Plans – procedure](#)

Medical Management Plans – Procedure

Asthma Management Plan

All educators are required to have undergone training by an appropriate health or first aid organisation in the management of asthma.

Where a child suffers with severe asthma, an individual asthma management plan must be implemented by a qualified medical officer. This information must be provided to the educator and Co-ordination Unit.

It is the parent's responsibility to complete a Risk Minimisation Form and Communication Form in consultation with the educator. These forms ensure that all steps are taken to protect the child. A copy of these forms must be provided to the educator and Co-ordination Unit prior to a child commencing care. The parent must keep copies of these forms so that if the child needs alternate care, the parent can provide this information to the alternate educator. These forms must be reviewed, dated, and signed annually.

The parent must also advise the educator and Co-ordination Unit if there any changes to the plan and new documentation completed.

NB In the case of an asthma emergency, medication may be administered without authorisation by a parent. If this does occur, the parent and emergency service are to be notified as soon as practicable.

Anaphylaxis Management Plan

All educators are required to have undergone training by an appropriate health or first aid organisation in the management of anaphylaxis and/or the administration of adrenaline (EpiPen, EpiPen Jr or Anapen).

If an educator is to be responsible for the emergency administration of adrenaline (EpiPen, EpiPen Jr or Anapen) to a child with anaphylaxis, this should be by prior written consent from the child's parent/guardian, and general practitioner, and under the following conditions:

- It is a requirement of and included in the child's Anaphylaxis Management Plan
- The child's Anaphylaxis Management Plan has been signed by a general practitioner.
- The parent/guardian has provided the appropriate authorisation and consent and understands their responsibilities.
- The parent/guardian understands and acknowledges any potential risk or side effects of the administration of adrenaline to their child.
- The educator has been adequately trained by an appropriate organisation in the administration of adrenaline and use of the EpiPen or Anapen and the safe disposal of contaminated material.
- Educator feels they are confident and competent to administer the medication.

Where a child suffers with severe anaphylaxis, an individual management plan must be implemented by a qualified medical officer. This information must be provided to the educator and Co-ordination Unit.

It is the parent's responsibility to complete a Risk Minimisation Form and Communication Form in consultation with the educator. These forms ensure that all steps are taken to protect the child. A copy of these forms must be provided to the educator and Co-ordination Unit. The parent must keep copies of these forms so that if the child needs alternate care, the parent can provide this information to the alternate educator. These forms must be reviewed, dated, and signed annually.

The parent must also advise the educator and Co-ordination Unit if there any changes to the plan and new documentation completed.

Where a child is at risk of an allergic reaction and there is no diagnosis and/or management plan, parents are required to complete a risk minimisation plan and communication plan in consultation with the educator. Copies of these forms must be distributed to the relevant people, as outlined in previous paragraphs.

NB In the case of an anaphylaxis emergency, medication may be administered without authorisation by a parent. If this does occur, the parent and emergency service are to be notified as soon as practicable.

Diabetes

Children and adolescents with diabetes are no more likely to be sick than other young people and can generally be expected to do everything their peers do. Because of their diabetes, they may, however, need:

- Special consideration when planning sport, excursions, camps, and other activities.
- Extra toilet provisions
- Extra consideration if unwell
- Some individual supervision
- To eat at additional times, especially when involved in physical activity.
- Special provisions for privacy if testing for blood glucose levels and injecting insulin.

Where a child suffers with diabetes, an individual management plan must be implemented by a qualified medical officer. This information must be provided to the educator and Co-ordination Unit.

It is the parent's responsibility to complete a Risk Minimisation Form and Communication Form in consultation with the educator. These forms ensure that all steps are taken to protect the child. A copy of these forms must be provided to the educator and Co-ordination Unit. The parent must keep copies of these forms so that if the child needs alternate care, the parent can provide this information to the alternate educator. These forms must be reviewed, dated, and signed annually.

The parent must also advise the educator and Co-ordination Unit if there any changes to the plan and new documentation completed.

Educators are to ensure that used syringes are disposed of in an appropriate and safe manner.

Policy review date: September 2023

Next review date: September 2024

Rest and Sleep Policy

1. OUTCOMES:

Children will be provided with opportunities to have a rest and/or sleep whilst in care.

2. POLICY:

Educators must take reasonable steps to ensure that the safety, health, and wellbeing of children attending Queanbeyan -Palerang Family Day Care and appropriate opportunities are provided to meet each child's need for sleep, rest, and relaxation.

Educators are required to do physical checks of a sleeping child and should occur at least once every 10 minutes and documented. This information is to be accessible to parents and staff.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT

Educators are required to provide children with the opportunity to have a rest and/or sleep whilst in care. Families will be consulted about their child's sleep/rest routine and can be implemented where possible and safe to do so, in line with the prevailing safe sleep practices recommended by Red Nose Australia. Educators are required to follow the Red Nose Guidelines and Safe Sleep Recommendations in relation to sleeping practices.

5. KEY RESOURCES

[ACECQA](#)
[QPRC](#)
[Child Care Services Handbook](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)
www.healthdirect.gov.au/sudden-infant-death-syndrome-sids
[Red Nose](#)

6. PERFORMANCE INDICATORS:

- Number of concerns raised by parents in relation to sleeping arrangements

7. RELEVANT PROCEDURES

[Sleeping arrangements – procedure](#)

Sleeping Arrangement – Procedure

Educators must take reasonable steps to ensure that the needs for sleep and rest of children are met, having regard to the ages, development, and individual needs of the children (this includes organisation of excursions and other outings). Effective sleep and rest strategies are important factors in ensuring every child feels secure and is safe at our service.

Educators are required to physically check sleeping children, and this should occur at least once every 10 minutes and ensure that this is documented. This information is to be accessible to parents and staff.

Educators are required to complete a sleep and rest risk assessment annually or as changes occur. Once completed, a copy must be sent to the coordination unit.

Adequate supervision of sleeping children requires physical checking. Educators must check that a child is breathing by checking the rise and fall of the child's chest and the child's lip and skin colour. The child's sleeping position, breathing, body temperature, head position and airway should be monitored. The circumstances and needs of each child should be assessed to determine any risk factors that may require physical checks more frequently than every 10 minutes. For example, babies or children with colds, chronic lung disorders or specific health care needs requiring higher level of supervision while sleeping.

The use of CCTV, audio monitors or looking through a window does not demonstrate adequate supervision.

Sleep patterns need to be discussed by parents and educators prior to childcare arrangements commencing. Cultural practices will be considered and implemented if it meets the safe sleep recommendations.

Cots used in Family Day Care must meet Australian Standards (AS/NZS 2172 **Cots for household use** or AS/NZS 2195 **Portable cots**). Educators must have evidence of this.

Educators are encouraged to transition from portable cots to using household cots if age and developmentally appropriate.

Bassinets are prohibited and educators must ensure that these are not on the education and care premises at any time that a child/ren are being educated and cared for. All bassinets are covered by this prohibition.

Staff and Educators are mandated to complete Safe Sleep training every 3 years.

Educators must:

- Provide an adequate number of cots, beds, stretchers, sleeping mats or other culturally appropriate forms of bedding for all children who sleep whilst in care.
- Ensure there is adequate lighting to enable effective supervision (checking skin and lip colour)
- Ensure there is appropriate ventilation for children.
- Every reasonable precaution is taken to protect sleeping/resting children from harm and hazard.
- Children resting and sleeping will always be within sight and hearing distance enabling educators to monitor children's safety and wellbeing.
- Ensure that a bassinet is not on the education and care service premises at any time during which children are being educated and cared for by the service.
- Remove any soft items from a cot, such as loose blankets, pillows, and soft toys.
- Provide waterproof covers where children sleep on an innerspring or foam mattress.
- Ensure that portable cots are well maintained and in good condition.

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- Ensure that if stak-a-beds become wet or soiled they are cleaned immediately and dried to stop the possible spread of infection.
 - The ages of children in care, the program of activities and hours of operation are to be considered when determining adequate sleeping facilities.
 - Ensure mattresses and other bedding are clean, comfortable, age appropriate and in good condition.
 - Children should be clothed appropriately and not have any items that are loose and could get tangled and restrict breathing such as bibs, hoodies.
 - Remove jewelry, including cultural and teething necklaces and dummy chains for sleep.
 - Ensure all bed clothing is kept clean and in good repair.
 - Provide individual bed linen and blankets for each child.
 - Ensure children do not share the same bed at the same time.
 - Must transfer a baby/child that has been settled to sleep in a pram, to a bed/cot as soon as possible.
 - Must transfer a baby/child that has fallen asleep in a vehicle, to a bed/cot as soon as possible after returning from an outing/excursion.
 - Ensure bed linen used by one child is washed before it is used by another child.
 - Consider access to other parts of the environment as they wake including items that could pose a risk.
 - Ensure that no child who is of or above 7 years of age sleeps in the same room as another child, other than a relative, of the opposite sex.

Cots, beds, stretchers, mattresses, and other bedding used by FDC children must be arranged so as:

- To be in an area that has natural light.
- To allow easy exit of any child
- To allow easy access to any child
- To reduce the risk of cross infection between children
- Ensure that all children are readily accessible to the educator.
- Arranged to allow for easy access in the event an emergency evacuation is

required Family Day Care children are not to access the top bunk of any bunk

Sleeping Practices for all babies 0 -12 months

Educators are required to observe the following Red Nose Safe Sleep recommendations guidelines in relation to sleeping practices for infants to reduce the risk of sudden infant death:

- Always sleep baby on their back from birth
- Keep baby's face and head uncovered.
- Avoid exposing infants to tobacco smoke before birth and after
- Provide a safe sleeping environment (safe cot, safe mattress, safe bedding, safe sleeping bag)
- Sleep baby in a safe sleeping place in the same room as an adult for the first six to twelve months
- Breastfeeding is encouraged.
- Wrapping must be ceased once baby is beginning to roll.

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- Do not introduce wrapping if baby is not normally wrapped.
 - Babies should be able to be seen and heard when sleeping.

Please note, never sleep a child on a pillow, beanbag, couch, or waterbed.

Children younger than 18 months, not being slept in a cot, consideration but be given to where the child is slept, what are the risks in the environment and what supervision is being provided.

Overnight care

A risk assessment must be completed to identify and mitigate risks of providing overnight care and a copy provided to the coordination unit. This must include access of the child/ren to other parts of the house during the night, access of other people to the child/ren sleeping environment, the physical safety of the child's sleeping environment, plans for supervision of the child/ren overnight and how they will be monitored, and night time emergency evacuation procedures/lockdown.

Ensure that no child sleeps in the same room as another child, other than a relative.

A permanent bed must be available for each child attending overnight care who does not require a cot. Sleeping facilities must be culturally appropriate and suitable for the ages and developmental stages of the child/ren.

Educators must check on sleeping children as per monitoring routines outlined in this policy until the educator retires, then resume the routine on waking. This must be documented.

The circumstance and needs of each child/ren should be considered to determine the risk factors that may impact the adequate supervision of sleeping children. For example, babies or children with specific health care needs, chronic lung disorders, colds etc. require a higher level of supervision while sleeping.

Red Nose Safe Sleep recommendations must always be implemented.

Policy review date: October 2023

Next policy review date: October 2024

Cleaning Policy

1. OUTCOMES:

Queanbeyan-Palerang Family Day Care are committed to providing a clean and safe environment for children.

Staff and Educators are aware of their responsibilities in ensuring a clean, safe, and hygienic environment for children.

2. POLICY:

Educators and staff must be aware of the appropriate way in which to clean resources, equipment, blood, and body spills. Our primary objective is to ensure the well-being of the children, staff, educators, and families by preventing the spread of illness and maintaining a clean, welcoming, and comfortable environment.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[Work Health and Safety Act 2011](#)

[Work Health and Safety Regulation 2011](#)

4. CONTENT

Daily cleaning is essential to maintain a healthy environment. cleaning will minimise the germs that can survive on surfaces in a childcare setting.

5. KEY RESOURCES

[Staying Healthy - 5th Edition](#)

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. RELEVANT PROCEDURES

[Cleaning – procedure](#)

[General Cleaning – procedure](#)

[Body Fluid spills – Safe Operating Procedure](#)

[Cleaning Toys – Safe Operating Procedure](#)

[Cleaning Sandpits – Safe Operating Procedure](#)

[Maintaining the Nappy Change Mat and Area – Safe Operating Procedure](#)

[Cleaning Highchairs – Safe Operating Procedure](#)

Cleaning – Procedure

Daily cleaning will minimise the germs that can survive on surfaces in a childcare setting. It is advisable to use warm water when cleaning because this makes it easier to remove dirt from a surface.

Resources

Clean resources in hot water and detergent, rinse them well and dry them (many resources can be washed in the dishwasher). Resources may need to be washed at the end of each day, especially those in rooms with younger children. All resources including cloth and books, can be dried in sunlight.

Bathrooms

Clean tap handles, toilet seats, toilet handles and doorknobs. Check the bathroom during the day and clean if visibly dirty.

Surfaces or doorknobs that the children have frequent contact with (e.g., bench tops, taps, cots, tables)

Sand pit – cover, or enclose when not in use, check the sand daily and rake the sand regularly.

Dummies

Dummies must never be shared by children. When not in use, dummies should be stored in individual plastic containers. Each container should have the child's name on it.

Toothbrushes

Toothbrushes should never be shared by children. Toothbrushes should be labelled with the child's name and stored out of reach of children. Toothbrushes must be stored in an individual toothbrush holder. Toothbrushes are to be washed each day and allowed to air dry each day. Educators may choose to send the toothbrush home each day for the parent to wash and air dry. Bacteria will grow on wet toothbrushes.

Cots

If the child soils a crib or cot, educators should ensure that they use gloves, clean the child and wash the child's hands, prior to cleaning the crib or cot.

Wading Pools

Children's wading pools require the same attention to cleanliness and disinfection as swimming pools. Wading pools that are not adequately chlorinated and maintained, provide a serious risk of disease transmission.

Policy reviewed: October 2023

Next Policy review date: October 2024

General Cleaning – Safe Operating Procedure

Identify Related Hazards/Risks

The spread of germs.

Controls for Hazards/Risks

- Ensure all toys, equipment is cleaned and well maintained.
- Ensure spills are cleaned up quickly and in the appropriate manner (see Job Steps)
- Regular cleaning will minimise the germs that can survive on surfaces in a childcare setting. It is advisable to use warm water when cleaning because this makes it easier to remove dirt from a surface. Cold water and a little extra “elbow grease” can also be used to effectively clean a surface.
- Disinfectants are only necessary if a surface cannot be properly cleaned with detergent and water, or if a surface is known to be contaminated with potentially infectious material. Disinfectants cannot kill germs if the surface is not clean, so always clean first, then disinfect.
- Mops should be dried as much as possible between uses to limit the growth of bacteria in the mop. Buckets and mops should be aired out overnight.

It is recommended that the following are cleaned daily:

- Bathrooms – wash tap handles, toilet seats, toilet handles and doorknobs. Check the bathroom during the day and clean if visibly dirty.
- Toys and objects put in the mouth.
- Surfaces that the children have frequent contact with (e.g., bench tops, taps, cots, tables)
- Doorknobs
- Floors

Job Steps

- Nappy change area – clean the nappy change area thoroughly with detergent and water after each nappy change. If faeces or urine spills onto the change table or mat, clean it with detergent and water, then dry.
- Clothing – it is recommended that children’s dress up clothes are washed once a week in hot water and detergent, plus when they are visibly dirty.
- Linen – wash linen in hot water. Treat soiled linen as you would a dirty nappy and wear gloves.
- Cots – if a child soils a crib or cot:
 - Put on gloves.
 - Remove the bulk of the soiling or spill with absorbent paper towels
 - Remove the soiled linen
 - Thoroughly clean the cot or mattress using detergent and water
- Carpets, mats and curtains – should be vacuumed daily. Spot clean carpets, mats and curtains if they are visibly dirty.
- Dummies – never allow children to share dummies.
- Toothbrushes – never allow children to share toothbrushes.

Body Fluid Spills – Safe Operating Procedure

Identify Related Hazards/Risks

Infection from exposure to blood and body spills.

Controls for Hazards/Risks

- Ensure that all educators follow the procedure for cleaning up blood and body spills (see Job Steps)
- Prompt management of spots and spills, including removing the spilled substance and cleaning and disinfecting the area, reduces the potential risk to children and educator.
- Prevention is better than cure. Strategies to prevent spills of body fluids regularly include toileting children, using disposable nappies rather than cloth nappies, excluding children with vomiting or diarrhoea
- If a spill does occur, it is important to avoid direct contact with body fluids. Healthy skin is an effective barrier against infectious body fluids, so make sure any cuts or abrasions on hands are covered with a waterproof dressing and wear gloves, if possible.

Jobs Steps:

Educators must:

- Ensure that each home is equipped with disposable gloves, paper towels or disposable cloths, detergent, disposable scraper and pan to scoop, bleach.
- Ensure that no child or visitor has access to the area where bodily fluids have been spilled.
- Assist the child who had the accident to clean up and change clothes as necessary.
- Use protective apparel including gloves.
- Administer first aid as required.
- Confine and contain the spill – the size and type of spill will determine how to do this: Blood – spot

1. Wear gloves
2. Wipe up blood immediately with a damp cloth, tissue, or paper towel.
3. Place in a plastic bag, seal the bag and put it in the rubbish bin.
4. Clean area with warm water and detergent
5. Wash your hands with soap and water

Blood – small (up to size of the palm of your hand)

1. Wear gloves
2. Place paper towel over the spill and allow the blood to soak in
3. Carefully lift the paper towel, place it in a plastic bag, seal the bag and put it in the rubbish bin.
4. Clean the area with warm water and detergent using a disposable cloth; place the cloth in the rubbish bin.
5. Wipe the area with diluted bleach (1part bleach to 10 parts water) and allow to dry.
6. Wash your hands with soap and water.

Blood – large (more than the size of the palm of your hand)

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-
1. Wear gloves
 2. Cover the area with an absorbent clumping agent (e.g., kitty litter or sand) and allow the blood to soak in
 3. Use a disposable scraper and pan to scoop up the absorbent material and any unabsorbed blood or body fluids
 4. Place the clumping agent, the scraper and pan into the plastic bag, seal the bag and put it in the rubbish bin
 5. Mop the area with warm water and detergent; wash the mop after use
 6. Wipe the area with diluted bleach (1part bleach to 10 parts water) and allow to dry
 7. Wash your hands with soap and water

Faeces, vomit and urine

1. Wear gloves
2. Place paper towel over the spill and allow the spill to soak.
3. Carefully lift the paper towel, place it in a plastic bag, seal the bag and put it in the rubbish bin.
4. Clean the surface with warm water and detergent and allow to dry.
5. If you know that the spill came from a person with an infectious disease, use a disinfectant on the surface after cleaning it with detergent and warm water.
6. Wash hands thoroughly with soap and running water (preferably with warm water)

Cleaning resources and equipment – Safe Operating Procedure

Identify Related Hazards/Risks

The spread of germs.

Controls for Hazards/Risks

- Ensure resources and equipment are well maintained and kept clean (see Job Steps)
- Washing resources and equipment effectively is very important to reduce spread of disease. Resources and equipment may need to be washed at the end of each day, especially those in rooms with younger children. Wash resources in warm water and detergent and rinse them well – many resources can be cleaned in a dishwasher. All resources, including cloth toys and books, can be dried in sunlight.

Job Steps

- Resources and books should be inspected for visible dirt. Books can be cleaned by wiping with a moist cloth with detergent on it and allowing to dry.
- Remove resources for washing during the day. Have a “to be cleaned” container and place resources in it during the day if you see a child sneeze on a toy, or if the toy has been used by a child who is unwell. Keep this container out of reach of the children.
- Remove toys which have been placed in the mouth and put these into the “to be cleaned” container.
- If a child has a toy whilst they are being changed in the nappy change area, this should also be placed in the “to be washed” container.
- Items in the “to be washed” container should be washed each day.

Cleaning Sand Pits – Safe Operating Procedure

Identify Related Hazards/Risks

The spread of germs.

Controls for Hazards/Risks

Ensure the sandpit is well maintained and kept clean (see Job Steps).

Job Steps

- Cover, or enclose, the sandpit when not in use to prevent access by animals and vermin and to prevent the collection of litter, when not in use.
- Inspect the sand daily for hazards, have litter removed and rake the sandpit over prior to children accessing the area.
- When a contamination occurs, place gloves on and remove the spillage using a spade, place into a plastic bag, seal plastic bag and dispose of appropriately. The remaining sand should be raked over at intervals during the day and left exposed to the sun. Where extensive contamination has occurred, such as through a large spill of body fluids, replace all the sand.
 - On completion, dispose of gloves, and wash hands
- Rake the sandpits often, check regularly and refill when necessary.

Adult and children must wash their hands with soap and water or a hand rub after playing in the sandpit.

Maintaining the Nappy Change Mat and Area – Safe Operating Procedure

Identify Related Hazards/Risks

The spread of germs through incorrect cleaning procedures.

Controls for Hazards/Risks

- Ensure that the nappy change area is cleaned and well maintained.
- Covers on the nappy change mat must be smooth and in good condition, because germs can survive in cracks, holes, creases, pleats, folds, or seams.

Job Steps

- After each nappy change and at the end of each day, wash the surface well with detergent and warm water, rubbing with paper towel or a cloth as you wash.
- Leave the surface to dry.
- If faeces spill on the change surface, clean the surface with detergent and warm water and leave it to dry.
- If a child has diarrhoea (or an infectious disease), then use a disinfectant on the surface after cleaning it with detergent and warm water.

Cleaning Highchairs – Safe Operating Procedure

Identify Related Hazards/Risks

Risk of bacteria growth from remaining food scraps.

Controls for Hazards/Risks

- Educators are to use soap and warm water to wipe down highchairs.
- Highchairs must be cleaned after each use

Job Steps:

- After the child has left the highchair remove the tray and any food containers or utensils. Place these aside for washing.
- Wipe all food scraps from mat.
- Take mat off chair and wipe all over the mat.
- Wipe highchair under the mat area
- Place the mat back into the highchair.
- Place straps over back of chair ready for re-use
- Place tray back onto highchair after washing.
- If the highchair is adjustable, ensure highchair is in 'high' position to prevent climbing.
- The highchair is to be washed each time it is used

On a regular basis:

- Take mats out of highchairs and wash.
- Take straps off highchairs and soak in washing powder. These can be left overnight then hung out to dry the next day
- Take highchairs outside and scrub all over with detergent and hot water

Return highchairs, replace mats, and place clean straps into position.

Food Safety, Preparation and Handling Food Policy

1. OUTCOME:

Stakeholders are aware of their rights and responsibilities in relation to practices for handling, preparing, and storing food.

2. POLICY:

Educators must ensure that food and drinks provided to the child is healthy, is stored, prepared, and served in a safe and hygienic. Educators must also provide a positive eating environment and encourage communication with families about the provision of appropriate healthy food and drinks for children.

3. RELEVANT LEGISLATION:

Education and Care Services National Regulations 2011
Education and Care Services National Law Act 2010

4. CONTENT:

Queanbeyan-Palerang Family Day Care recognises the importance of healthy eating to the growth and development of young children and is committed to supporting the healthy food and drink choices of children in their care.

Families, Educators, and staff have a duty to protect children who have been diagnosed as a risk of allergy and anaphylaxis from exposure to food allergens.

5. KEY RESOURCES:

[Healthy Kids](#)
[Get up and Grow Resources](#)
[Australian Guide to Healthy Eating](#)
[Safe Food Australia](#)
[ACECQA](#)
[QPRC](#)
[Child Care Services Handbook](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[NSW Food Authority](#)
[Education and Care Services National Regulations](#)
[Education and Care National Law](#)

6. PERFORMANCE INDICATORS

- No. of children who are provided with healthy food

7. RELATED PROCEDURES

Preparing Babies' Formula – Safe Operating Procedure
Storing, Heating and Serving Babies' Bottles – Safe Operating Procedure
Storing and Heating Breast Milk – Safe Operating Procedure
Food Preparation – Procedure
Preparing Food – Safe Operating Procedure
Heating Food – Safe Operating Procedure
Food Safety – Safe Operating Procedure

Food Preparation – Procedure

Educators must ensure that food provided to children has been stored, prepared, and served in a safe and hygienic manner which promotes hygienic food practices.

From 8 December 2023, educators who are preparing food are required to hold current Food Safety Supervisor certification.

Staff and educators who are not required to have Food Safety Supervisor certification are required to complete Food Handler Basic training every 5 years.

Educators will:

- Ensure that the educator and children wash and dry their hands (using soap, warm running water and single use or disposable towels) before handling food or eating meals and snacks.
- Discourage children from handling other children's food and utensils.
- Maintain currency of Emergency Anaphylaxis Management training
- Ensure they attend relevant training courses.

Where an educator is providing food (even if this is only providing morning and afternoon tea), the educator must complete a "Council Food Registration form.

Educators need to provide documentation to the service showing that they have notified the above organisation. The provision of food in family day care is deemed as "low risk".

Where educators are providing food and beverages to the children, the following must be followed:

- The food and beverage provided is nutritious and sufficient to meet the needs of the child.
- The food and beverage provided is chosen having regard to the dietary requirements of individual children considering each child's growth and development needs, including any specific cultural, religious or health requirements.
- A wide variety of healthy and nutritious foods for meals and snacks including fruit and vegetables, wholegrain cereal products, dairy products, lean meats and alternatives.
- Plan healthy snacks to complement what is served at mealtimes and ensure snacks are substantial enough to meet the energy and nutrient needs of children.
- Plan and display a comprehensive menu.
- Be aware of foods which can trigger an allergic reaction of anaphylaxis in children that have been identified with such allergens.
- Ensure the care environment is maintained to minimise the risk of children identified as allergic to specific triggers and substances having access to or contact with those allergens.

Educators are required to have a designated area for food preparation and storage, and for preparation of bottles, which is safe and hygienic. Educators must also ensure that all food or bottle preparation and storage areas are separate from nappy change and toileting areas.

Policy reviewed: October 2023

Next policy review date: October 2024

Preparing Food – Safe Operating Procedure

Identify Related Hazards/Risks

Contamination of foodstuffs.

Controls for Hazards/Risks

- Ensure food is prepared using hygienic methods to prevent the spread of bacteria (see Job Steps)
- Always wash hands before preparing food. There is no need to wear gloves when preparing food if your hands are clean.

Job Steps:

- All educators to be aware of infection control procedures and always wash hands before and after food preparation.
- Clean the tables to be used in food preparation.
- Use separate equipment for preparing raw and cooked fish.
- Use separate chopping boards for raw meat, fish, chicken, and vegetables.
- Use disposable hand towels if possible. If fabric hand towels, aprons, tea towels and dishcloths are used these must be changed daily.
- Once food preparation is complete, clean the bench top and other work surfaces.

Heating Food – Safe Operating Procedure

Identify Related Hazards/Risks

Contamination of foodstuffs.

Controls for Hazards/Risks

- Ensure food is heated using hygienic methods to prevent the spread of bacteria (see Job Steps and Important Notes)
- Keep food hot (more than 60 degrees Celsius or cold 5 degrees Celsius or less), otherwise, do not keep it all
- Always wash hands before handling and heating food

Job Steps:

- Ensure food is placed into a microwave safe container and is covered.
- Place food in microwave and heat for 1 minute
- Stir food and heat for another minute.
- Stir food again and test temperature using a temperature probe. Reheated food should reach 60 degrees Celsius. However, in childcare it is recommended that food is reheated until it reaches 70 degrees Celsius and should stay at this temperature for 2 minutes. (The reason for this is that educators do not know if the prepared food has been cooked, stored, and transported to the service correctly.)
- Stir food to cool it slightly before giving to the child. Check that the food has cooled before giving it to the child. Remove a small piece of food with a spoon to another place and test the temperature of the food with your hand. Throw this piece of food away and wash the spoon.
- Throw out all leftovers. Tell parents what food their child left, but do not return the leftover food to the parents.
- Wipe/wash child's hands and face

Important Notes

Bacteria grows in temperatures between 5 degrees Celsius and 60 degrees Celsius. Kitchen temperatures are within this range, so it is not safe to leave food at room temperature for more than two hours.

- Prepare food quickly as close to service time as possible. This will minimise the risk of food poisoning.
- Any foods prepared in advance must be refrigerated until cooked or served.
- If food is cooked in advance, then it should be held hot (above 60 degrees Celsius until served or chilled to refrigeration temperature as quickly as possible, then held at 5 degrees Celsius or less until it is reheated for use in a childcare setting

Food Safety – Safe Operating Procedure

Identify Related Hazards/Risks

Contamination of foodstuffs.

Controls for Hazards/Risks

- Ensure food is prepared using hygienic methods to prevent the spread of bacteria (see Job Steps)
- Food is an excellent place for germs to grow – in the right conditions, the number of bacteria in food can double every 30 minutes. Germs that do not grow in food can still be passed from person to person in food. Germs that are common on our skin and in the environment can cause food poisoning if they grow to large numbers in food.
- The best ways to prevent diseases spreading through food are thorough hand hygiene, not sharing food, plates, or utensils, preparing and storing food properly, and keeping food preparation areas clean.
- Disinfectants or sanitisers are not routinely needed in food preparation areas if surfaces are thoroughly cleaned with warm, soapy water and allowed to dry.
- Always wash hands before handling food. There is no need to wear gloves when preparing food if your hands are clean.

Job Steps:

- All educators to be aware of infection control procedures and always wash hands before and after food preparation.
- Check that all children have washed their hands before they eat or drink.
- Before meals, clean tables that are to be used for the meal.
- Use food tongs when handling food.
- Do not allow children to share individual eating utensils.
- Use a separate spoon for each baby you feed.
- Teach children to turn away from food when they cough or sneeze, and then to wash their hands.
- If you are interrupted while preparing food or spoon-feeding an infant, be sure to wash your hand again before you continue.
- Use separate equipment for preparing raw and cooked food.
- Use separate chopping boards for raw meat, fish, chicken, and vegetables.
- Use disposable hand towels if possible.
- If fabric hand towels, aprons, tea towels and dishcloths are used these must be changed daily.
- Prepare food quickly as close to serving time as possible. This will minimise the risk of food poisoning.
- Any foods prepared in advance must be refrigerated until cooked or served.
- If food is cooked in advance, then it should be held hot (above 60 degrees Celsius) until served or chilled to refrigeration temperature as quickly as possible, then held at 5°C or less until it is reheated for service
- Food may only be reheated once.

Important Notes

- Do not use the raw meat cutting board for cutting up other foods.
- Wash fruit and vegetables before cooking and/or serving.
- Clean work surfaces before and after use
- Spills should be cleaned up as they occur.
- Knives must be washed thoroughly.
- High risk foods must be on the bench for as little time as possible and never more than 2 hours in total (this includes preparation, serving and eating time.). High risk foods include meat (lamb, beef and poultry products), fish, eggs (including mayonnaise and desserts based on eggs), cream and cooked rice and pasta.

Storing and Heating Breast Milk – Safe Operating Procedure

Identify Related Hazards/Risks

- Contamination of foodstuffs
- Risk of burns

Controls for Hazards/Risks

- Ensure breast milk is stored and heated using hygienic methods to prevent the spread of bacteria
- Baby bottles must never be heated in the microwave. The temperature may become extremely hot, at temperatures high enough to cause burns or steam build-up that could explode—this is especially problematic for baby bottles, and is one of the reasons why baby bottles should never be heated in the microwave (microwaving can also break down the disease-fighting ability of breast milk)

Educators are to support mothers of babies up to 12 months old to provide expressed breast milk, or to visit the educator's home to feed their babies.

Storing Breast Milk

- Refrigerated for 3-5 days at 4 degrees or lower (4 degree Celsius is the typical temperature of a standard refrigerator), always store breast milk at the back of the refrigerator, not in the door.
- Stored without refrigeration (if needed) for 6-8 hours if the room temperature is less than 26 degrees Celsius

Rewarming breast milk

- Stand the bottle of breast milk in a container of hot water for no more than 10 minutes.
- Before feeding the baby, check the temperature of the milk by letting a little drop onto the inside of your wrist – it should feel comfortably warm or even a little bit cool.

Never microwave breast milk.

Preparing Babies' Formula – Safe Operating Procedure

Identify Related Hazards/Risks

- Contamination of foodstuffs
- Risk of burns

Controls for Hazards/Risks

- Ensure food is prepared using hygienic methods to prevent the spread of bacteria (see Job

Steps) **Job Steps:**

- It is the parents/ guardians' responsibility to label all bottles and bottle parts. This will prevent formula being given to the wrong child.
- When preparing formula, always wash your hands and ensure work surfaces are clean.
- Follow the manufacturer's instructions for the formula carefully.
- Prepared formula should be stored in the back of the refrigerator where it is coldest.
- Throw away any formula that is left over. Do not freeze or reheat leftover made-up formula.

Storing, Heating and Serving Babies' Bottles – Safe Operating Procedure

Identify Related Hazards/Risks

- Contamination of foodstuffs
- Risk of burns

Controls for Hazards/Risks

- Ensure food is sorted, heated, and served using hygienic methods to prevent the spread of bacteria (see Job Steps)
- Baby bottles must never be heated in the microwave. The temperature may become extremely hot, at temperatures high enough to cause burns or steam build-up that could explode – this is especially problematic for baby bottles, and is one of the reasons why baby bottles should never be heated in the microwave (microwaving can also break down the disease-fighting ability of breast milk)

Job Steps:

Children's Bottles and Formula

- It is the parents/ guardians' responsibility to label all bottles and bottle parts. This will prevent formula being given to the wrong child.
- It is the parents/guardian's responsibility to supply bottles, preferably already made up. The parents are responsible for preparing the bottles hygienically and according to instructions on the tin of formula.
- Prepared formula should be stored at the back of the refrigerator where it is coldest.
- Educators must dispose of unfinished, heated formula or breast milk

Heating Bottles – Breastmilk or Formula

(NB: Microwaves are not to be used to heat breastmilk or formula). Microwaves can cause hot spots in the milk and burn a baby's mouth.

- Gently heat bottles by placing them in a container of warm water. They cannot remain in the water for more than 10 minutes.
- Test the temperature of bottle contents by placing a few drops on the inside of the wrist before feeding the child.

Feeding a Child a Bottle

Offer the bottle to the child as per the families' requirements wherever practicable, preferably in a comfortable chair in a quiet and subdued area away from glare and harsh light

- Communicate and interact quietly with the child.
- Encourage the older baby to hold their own bottle.
- Pour any remaining milk down the sink.
- Rinse out the bottle ready to be sent home for cleaning and sterilising
- Wash and dry your hands.
- **Do not give bottles to children in their cots.**

Nutrition, Food, Beverages, and Physical Activity Policy

1. OUTCOME:

Children will be provided with healthy food and participate in physical activity whilst in care. As part of our commitment to children's health, safety, and wellbeing, we role-model food safety and hygiene practices, as well as supporting healthy food and beverage choices according to each child's needs.

2. POLICY:

Educators will provide resources to parents which encourage healthy food is provided for children in care.

Educators will also incorporate physical activity into their program each week.

Educators will provide food and beverages that are nutritious and adequate in quantity and chosen bases on each child's dietary and medical needs.

3. RELEVANT LEGISLATION:

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT:

Queanbeyan-Palerang Family Day Care (QPFDC) recognise the importance of healthy eating to support the growth and development of children and is committed to supporting the healthy food and drink choices of children in their care.

QPFDC promotes a healthy lifestyle, including healthy eating and physical activity. We support children and families' understanding about the importance of nutrition and food choices.

We value our families and their cultures, customs, and religious traditions. We work with them to ensure that the food and beverages provided to their children reflect their cultural preferences where possible.

The service is committed to implementing the healthy eating key messages outlined in Munch & Move and to supporting the National Healthy Eating Guidelines for Early Childhood Settings.

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

We incorporate children's agency and decision making and consider this when planning meal times and other food-related experiences that enable this.

5. KEY RESOURCES

[ACECQA](#)
[QPRC](#)
[Child Care Services Handbook](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Service Australia](#)
[Kidsafe](#)

[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)
[Munch & Move](#)

6. PERFORMANCE INDICATORS:

- Number of educators who incorporate healthy eating and physical activities in their daily routine

7. RELEVANT PROCEDURES:

[Children Have Access to Safe Drinking Water and Beverages – Safe Operating Procedure](#)
[Cooking Activity with Children – Safe Operating Procedure](#)
[Feeding a Child – Safe Operating Procedure](#)
[Storing Children’s Lunchboxes – Safe Operating Procedure](#)
[Healthy Eating Procedure](#)

Healthy Eating – Procedure

Queanbeyan-Palerang Family Day Care is committed to implementing the healthy eating key messages outlined in Munch & Move, the Australian Guide to Healthy Eating and the Dietary Guidelines for Children and Adolescents and to supporting the National Healthy Eating Guidelines for Early Childhood Settings.

Further, Queanbeyan-Palerang Family Day Care recognises the importance of supporting families in providing healthy food and drink to their children. It is acknowledged that the early childhood setting has an important role in supporting families in healthy eating.

Differing nutrition and feeding requirements is also considered depending on the age and development of the children. This includes requirements for babies that are breastfed and supporting the introduction of first foods.

Where food is supplied by the parent, educators will:

- Provide information to families on the types of foods and drinks recommended for children and suitable for children's lunchboxes.
- Encourage children to eat the more nutritious foods provided in their lunchbox, before eating any less nutritious food provided.
- Discourage the provision of highly processed snack foods high in fat, salt, and sugar and low in essential nutrients in children's lunchboxes.

Families will:

Ensure the service is advised of their child's dietary requirements including any specific cultural, religious, development or health requirements.

Should a child have a medical condition that can be impacted by food, work with the educator to develop a risk minimisation and communication plan.

If providing food and beverages, ensure these are nutritious and are in line with QPFDC requirements.

In addition, educators will:

- Ensure water is always readily accessible for children throughout the day.
- Offer food and drink at regular intervals throughout the day.
- Be aware of children with food allergies, food intolerances and special dietary needs and consult with families to determine specific food related requirements and develop individual management plans.
- Minimise the risk of children sharing food through supervision.
- Minimise the risk of choking through provision of appropriate foods and supervision.
- Undertake regular professional development to maintain and enhance knowledge and skills related to early childhood nutrition, food safety and hygiene.
- Sit with the children at meal and snack times to role model healthy food and drink choices and actively engage children in conversations about the food and drink provided.
- Endeavour to recognise, nurture and celebrate the dietary differences of children from culturally and linguistically diverse backgrounds.
- Create a relaxed atmosphere at mealtimes where children have enough time to eat and enjoy their food as well as enjoying the social interactions with educators and other children.
- Encourage older toddlers and preschool aged children to assist to set and clear the table and serve their own food and drink to foster children's independence.

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- Respect each child's appetite.
 - Provide a positive eating environment which reflects cultural and family values.
 - Encourage children to try different / new foods but will not force them to eat.
 - When planning cooking experiences, healthy eating and knowledge of nutrition is implemented.
 - Be patient with messy or slow eaters.
 - Not use food as a reward or withhold food from children for disciplinary purpose.
 - Handle, prepare and store food using safe practices.
 - Ensure an accurate menu is displayed, if food is being provided by the educator.
 - Monitor children's food and beverage intake to ensure it is adequate and appropriate to each child's needs.
 - Maintain ongoing communication with families about changes to a child's dietary requirements and ensure these changes are reflected and implemented during mealtimes.
 - Involve children in decision making about healthy foods and beverage choices where possible.
 - Opportunities for physical activity will be provided during the day.

If an educator has any concerns about a child's diet, he/she should speak to the parents and/or the Family Day Care Co-ordination Unit.

Policy review date: October 2023

Next policy review date: October 2024

Children Have Access to Safe Drinking Water and Beverages – Safe Operating Procedure

Identify Related Hazards/Risks

Dehydration.

Controls for Hazards/ Risks

Ensure water is always available to children (see Job Steps).

Job Steps:

- Safe drinking water must always be accessible to children.
- If other beverages are provided, it is the parents/guardians responsibility to label drink bottles with child's name.
- Educators must ensure that they always water accessible for the children, when on excursions, regular outings and outdoors.

Important Notes

- Educators must ensure that children always have access to safe drinking water.
- Water is the best way to quench a thirst and it does not contain added sugar that is found in fruit juices, soft drinks, and other sweetened drinks. Reduced fat milk for children over two is a nutritious drink and a great source of calcium
- Water and /or beverages must be appropriate to the needs of each child and provided on a regular basis throughout the day

Cooking Activity with Children – Safe Operating Procedure

Identify Related Hazards/Risks

- Contamination of foodstuffs
- Allergic reaction

Controls for Hazards/Risks

- Ensure food is prepared using hygienic methods to prevent the spread of bacteria (see Job Steps and Important Notes)
- When undertaking any cooking activity with children, it is imperative that educators are aware of any allergy that children may have (particularly in relation to eggs, dairy products etc.)

Job Steps:

- Clean the food preparation area including cleaning the bench top and other work surfaces
- Wash and dry hands before and after handling food
- Wear disposable gloves
- Gather all equipment and ingredients required for the cooking activity
- Ensure all children wash and dry their hands
- Prepare food, with children assisting as much as possible
- Ensure children handle food in a hygienic manner
- Once food preparation is complete, clean the bench top and other work surfaces
- If cooking on the stove or in the oven is required ensure the task is completed with children watching from a safe distance
- Wash and dry hands after removing and discarding disposable gloves

Leftovers

If there are any leftovers – it is recommended that they be covered, labelled with the date, refrigerate, and use within 24 hours.

Feeding a Child – Safe Operating Procedure

Identify Related Hazards/Risks

- Risk of back injuries for the educator
- Risk of child choking

Controls for Hazards/Risks

- Ensure that you are seated at the same height as the child you are feeding so you do not injure your back
- Never leave a child unattended while they are feeding themselves or being

fed Job Steps

- Wash and dry your hands before feeding the child and encourage and/ or assist the child to wash and dry their hands before eating.
- Ask the child to sit at the table or lift the child into the highchair.
- Adjust the height of the highchair to the low chair position or turn the child's chair to face you.
- Seat yourself in a comfortable chair alongside the child requiring assistance with feeding, facing the child's chair or highchair.
- Check the temperature of the child's food. If safe, place the food container on the table or highchair tray.
- Encourage and/ or assist the child to self-feed.
- Communicate warmly with the child.
- Encourage and/ or assist the child to wash their face and hands following eating.
- Wash and dry your hands after feeding the child.

Storing Children's Lunchboxes – Safe Operating Procedure

Identify Related Hazards/Risks

Contamination of foodstuffs.

Controls for Hazards/Risks

Ensure food is stored appropriately before use (see Job Steps).

Job Steps:

- Children's Lunchboxes
- Educators must ensure that all food is labelled. This will prevent food being given to the wrong child.
- Where possible store children's lunchboxes in the refrigerator. Where this is not possible, foods that require refrigeration must be removed from the lunchbox, labelled by educators, and stored in the refrigerator.
- Educators must encourage children to remove and recycle or throw out food scraps from their lunchboxes throughout the day (unless requested to do otherwise by the parent)
- Where educators will be undertaking excursions and children are to bring their lunchboxes, educators are to encourage parents to pack a "cooler brick" with the lunchbox.

Daily Safety Audit Policy

1. OUTCOME

Children are cared for in a safe environment and all reasonable steps are taken to protect them from hazards and harm.

2. POLICY

Educators will undertake a safety audit of their home at least once a day prior to children coming into care. This information will be retained by the educator.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT:

A daily safety audit ensures that the environment is safe for children. This also ensures that all equipment and furniture used in providing the service are safe, clean and in good repair. A copy of this safety audit must be kept by educators.

5. PERFORMANCE INDICATORS

- No. of educators who conduct a safety audit at least once a day

6. KEY RESOURCES

[ACECQA](#)
[QPRC](#)
[Child Care Services Handbook](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

7. RELATED PROCEDURES

Incident, Injury, Trauma, Illness Policy

1. OUTCOME:

Children will receive the appropriate treatment when they are involved in an incident, are injured, suffer a trauma and/or are become ill whilst in care.

2. POLICY

Educators and parents must be aware of actions to be taken in the case of incident, injury, trauma and/or illness.

3. DEFINITIONS

According to Workcover, a “serious incident” includes an incident where there has been a fatality, or where there has been a serious injury or illness.

According to the National Law and National Regulations, a “serious incident” includes the death of a child whilst attending a service, where urgent medical attention was required, where a child attended or should have attended a hospital, or where a child appears to be missing, or removed from the service, any complaint alleging a serious incident has occurred (see [Incident, Injury, Trauma, Illness – Procedure](#) for more detailed information).

‘Medical attention’ includes a visit to a registered medical practitioner or attendance at a hospital.

Emergency services may include ambulance, fire brigade, police, and state emergency services.

An “emergency” is defined as an incident, situation, or event where there is imminent or severe risk to the health, safety and wellbeing of any person present at a service.

A “critical incident” is defined as any intense or unusual event or experience which occurs while conducting a Family Day Care service and causes an educator or staff member to experience unusually strong emotional reactions which have the potential to interfere with their ability to function at work either at the time, or at a later date.

4. RELEVANT LEGISLATION:

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

5. CONTENT:

Parents have a responsibility to ensure that educators and Co-ordination Unit staff are aware of any medical condition, including asthma, diabetes, or anaphylaxis relating to their child/ren.

If a child is involved in an incident, injury, trauma or becomes ill whilst in Family Day Care educators must follow certain steps (procedure - INCIDENT, INJURY, TRAUMA, ILLNESS) A full account of any emergency aid/medical treatment must be recorded in an Injury, Trauma, and Illness Incident Report form or FDCA Incident Report form (depending on treatment provided) within 24 hours and provided to the Co-ordination Unit as soon as possible.

At all times the child’s condition will take priority.

Immediate medical aid and, if necessary, emergency medical treatment must be given to a Family Day Care child who requires it, either because of a serious incident, injury, trauma, or illness.

A child placed in care within Queanbeyan-Palerang Family Day Care must be covered by an authority signed by the child's parent, authorising the service and/or educator to seek emergency medical, dental, hospital and ambulance services where this may be considered necessary for the welfare of the child. A parent must also nominate an authorised nominee who can give permission for medical attention or administration of medication to a child.

Where the Co-ordination Unit has a concern regarding an educator's medical fitness, then the Unit may request that the educator obtain a medical certificate to ascertain the educator's ability to perform the inherent requirements of the position.

6. PERFORMANCE INDICATORS:

- Number of questions raised by parents and/or educators regarding the action to be taken where a child is injured, involved in an incident/accident, trauma or becomes ill whilst in care.
- Number of incident reports relating to incident, injury, trauma, or illness

7. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Service Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

8. RELEVANT PROCEDURES

- [Incident, Injury, Trauma and Illness – Procedure](#)

Incident, Injury, Trauma, Illness – Procedure

Medical Conditions

Parents have a responsibility to ensure that educators and Co-ordination Unit staff are aware of any medical condition, including asthma, diabetes, or anaphylaxis relating to their child. This is to ensure that the appropriate action is taken in relation to:

- The management of medical conditions
- If a child has a specific health care need, allergy or medical condition, procedures are in place.
- To ensure that parents provide a medical management plan.
- The development of a risk minimisation plan in consultation with the child's parents
- The development of a communications plan for educators and parents
- Ensure that a 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.

Where a child has been diagnosed as at risk of anaphylaxis, a notice to this effect must be displayed at the educator's home (i.e., it is a nut free environment).

Incident, Injury, Trauma, or Illness

If a CHILD is involved in an incident, injury, trauma or becomes ill whilst in Family Day Care:

- The educator will contact the parent (where applicable the child is returned as soon as practicable to the care of a parent of the child)
- The child is kept under adult supervision until the child recovers or the child's parents or some other responsible person takes charge of the child.
- Where medication is required, the educator can administer the medication so long as the appropriate authorisation has been provided on the medical record. If authorisation has not been provided, it will be necessary to contact the parent to seek this permission verbally. Where it is not possible to contact the parent, the educator is to contact the authorised person who has permission to give consent to the administration of medication and/or seek medical assistance.
- If the child requires urgent medical or dental treatment, immediate steps are taken to secure that attention.
- If any hospital, dental treatment, or ambulance services are obtained for a child, a parent of the child is notified as soon as possible of the incident, injury, trauma or illness and the treatment or services arranged for the child.
- If any other matter concerning the child's health arises while the child is being provided with the service, a parent of the child is given notice of that matter.

If the written authorisation nominates a preferred medical practitioner or dentist to treat the child, any medical or dental treatment of the child must, if practicable, be carried out by that medical practitioner or dentist.

Educators must notify the Queanbeyan-Palerang Family Day Care Co-ordination Unit if Family Day Care children are involved in an incident. If the office is unattended and assistance is required, then educators can contact staff between the hours of 8.30am – 5.00pm Monday to Friday on the on-call mobile phone – 0478 486 108.

A completed "Incident, Injury, Trauma and Illness Record" must be completed by the educator within 24 hours and a copy forwarded to the Family Day Care Co-ordination Unit as soon as possible.

If the incident requires medical/dental/hospital treatment, a child suffers a convulsion or an educator is advised of a notice of intent to claim from a third party, e.g., a parent, then a FDCA Incident Report is to be completed and forwarded to the Co-ordination Unit immediately. "Serious incidents" are to be notified to Workcover immediately (see section on Work Health and Safety)

At all times the child's condition will take priority.

Where a child suffers a serious illness or condition, the Queanbeyan-Palerang Family Day Care Co-ordination Unit may request a medical certificate prior to the child resuming in care.

According to the National Law and National Regulations, a "serious incident" includes the following:

- The death of a child whilst attending a service
- Where urgent medical attention was required
- The child attended or should have attended a hospital (e.g. broken limb)
- Where a child appears to be missing or cannot be accounted for
- Where a child has been removed or taken from the service premises by someone not authorised to do so
- Where a child is mistakenly locked in or out of a service
- Any emergency for which emergency services attended- this is not where emergency services attended as a precaution.
- 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.

A serious injury, illness or trauma includes:

- Amputation
- Anaphylactic reaction requiring hospitalisation
- Broken bone/fractures
- Bronchiolitis
- Burns
- Diarrhoea requiring hospitalisation
- Epileptic seizures
- Head injuries
- Measles
- Meningococcal infection
- Sexual assault
- Witnessing violent or a frightening event

If a child is involved in an incident that causes death or dies in Family Day Care, the Co-ordination Unit and Workcover must be notified immediately.

Other incidents which occur at an educator's premises involving a visitor, volunteer, parent, staff member, student or a contractor are to be documented and reported as outlined in the section on Work Health and Safety.

Educators' Medical Concerns

Where the Co-ordination Unit has a concern regarding an educator's medical fitness, they may request that the educator obtain a medical certificate to ascertain the educator's ability to perform the inherent requirements of the position. Where an educator requires regular medication, a medical certificate is to be obtained confirming his or her ability to care for children.

Where an educator is unable to care for Family Day Care children, parents must contact the Co-ordination Unit to seek backup, if required.

Should an incident occur which involves an educator, Co-ordination Unit staff should be advised as soon as possible to ensure that suitable arrangements are made for the children in care.

Critical Incident

A critical incident is defined as any intense or unusual event or experience which occurs in the course of conducting a Family Day Care service and causes an educator or staff member to experience unusually strong emotional reactions which have the potential to interfere with their ability to function at work either at the time, or at a later date.

In a situation such as this, the educator or staff member must contact the Nominated Supervisor immediately and steps will be taken to assist the educator and/or staff member.

Emergency Aid / Medical Treatment

Immediate medical aid and, if necessary, emergency medical treatment must be given to a Family Day Care child who requires it, either because of a serious incident, injury, trauma or illness.

Queanbeyan-Palerang Family Day Care has an emergency mobile phone 0417 204953 if educators have an emergency and are unable to contact staff in the office. This phone can be used within the normal operating hours of Monday to Friday, 830am – 5.00pm. Any emergencies outside of these hours should be conveyed to the staff member on call (0478 486 108).

A child placed in care within Queanbeyan-Palerang Family Day Care must be covered by an authority signed by the child's parent, authorising the service and/or educator to seek emergency medical, dental, hospital and ambulance services where this may be considered necessary for the welfare of the child. A parent must also nominate an authorised nominee who can give permission for medical attention or administration of medication to a child.

All reasonable steps must be taken to provide immediate medical aid, if necessary, to the child. Educators should act on their discretion in the application of first aid or resuscitation, and in the decision to contact the child's parents, authorised nominee (as detailed on the child's enrolment form), child's doctor, or an ambulance. The Co-ordination Unit will assist where possible.

A full account of any emergency aid/medical treatment must be recorded on Injury, Trauma and Illness Incident Report form or FDCA Incident Report form (depending on treatment provided) within 24 hours and provided to the Co-ordination Unit as soon as possible.

Educators are required to contact the Co-ordination Unit by phone when any of the above occur.

At all times, the child's condition will take priority.

Policy review date: October 2023

Next policy review date: October 2024

Supervision Policy

1. OUTCOME:

Children are always to be supervised whilst in care to prevent accident, incidents, and trauma.

2. POLICY:

Educators will monitor children actively and diligently. This means knowing where children are always. Children of different ages and abilities will need different levels of supervision. In general, the younger children are, the more they may need an adult to be physically present and close by to support and help them.

Educators are not permitted to undertake “other duties” whilst Family Day Care children are in care. This requires that all activities undertaken whilst children are in care, are child oriented and children are included in the activity.

Educators will ensure that their homes meet all the relevant legislation in relation to safety, hygiene, and wellbeing.

3. DEFINITIONS

According to ACECQA “adequate supervision” means that an educator can respond immediately, particularly when a child is distressed or in a hazardous situation. It requires active involvement with children. It is not the intention of this requirement that educators ‘stand back and watch’. Adequate supervision means knowing where children are always and monitoring their activities actively and diligently. Effective supervision requires a balance of engagement and observation and involves educators using a range of skills and strategies such as positioning, peripheral vision, noting changes in the volume and tone of children’s voices, and monitoring children’s arrival and departure.’

4. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

5. CONTENT:

Supervision is critical to the safety of children. At its most basic level, supervision helps to protect children from hazards or harm that may arise in their play and daily routines.

Educators are always to take responsibility for the effective supervision whilst children are in care. This includes responsibility for supervision indoors, outdoors, during nappy change, in vehicles and other transport and on outings and excursions, including playgroup.

Children must NEVER be left alone in a car. It is illegal to leave a child unattended in a vehicle.

Educators are also required to regularly supervise sleeping children. Educators must take reasonable steps to ensure that children’s needs for sleep and rest are met, having regard to each child’s age, development, and needs. This includes regular monitoring of sleeping/resting children and documentation of this.

From time to time, an educator assistant may have responsibility for the supervision of children. Parents and Co-ordination Unit staff must be advised if Family Day Care children are to be cared for by an educator assistant prior to the care occurring.

Role of Educators' Family Members

Family members do not have a role in the care and/or supervision of children. Educators are responsible for the supervision of Family Day Care children at all times (except when an educator assistant is caring for the children – see 2. above), or in an emergency, where Co-ordination Unit staff may care for FDC children.

6. PERFORMANCE INDICATORS

- Number of incidents/accidents relating to lack of supervision

7. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[eSafety](#)

8. RELEVANT PROCEDURES

[Supervision – Procedure](#)

[Child Protection - Procedure](#)

Supervision – Procedure

Supervision is critical to the safety of children. Educator-to-child ratios alone do not determine what is considered adequate supervision.

In a **Family Day Care** service, some children may be playing in different parts of the family day care residence and the educator will need to consider how these children will be supervised.

Educators effectively supervise children by actively watching and attending to their environment through:

- Direct and constant monitoring by educators
- Careful positioning to ensure that the maximum area can be observed.
- Scanning or regularly looking around the area to observe all the children in all areas.
- Listening closely to children near and far will help to supervise areas that may not be in the educator's direct line of sight.
- Observing children's play and anticipating what may happen next will allow educators to assist children as difficulties arise and to intervene where there is potential danger to children.
- Providing activities to ensure risk is minimised.

Educators are also required to regularly supervise sleeping children. This means physically checking each child and listening to their breathing.

Educators are required to set up their environments both indoors and outdoors in such a way that allows for adequate supervision.

Educators will closely supervise children when using technology and accessing the internet and must protect children from exposure to inappropriate content. Educators will provide experiences for children that help them learn key strategies for being safe online.

From time to time, an educator assistant may have responsibility for the supervision of children.

Role of Educators' Family Members

Educators are responsible for the supervision of Family Day Care children at all times (except when an educator assistant is caring for the children), or in an emergency, where Co-ordination Unit staff may care for FDC children.

Whilst support from an educator's family is crucial in the effective running of a Family Day Care business, particularly in helping to keep the home in a safe and hygienic condition, family members do not have a role in the care and/or supervision of children.

Policy review date: October 2023

Next Policy review date: October 2024

Emergency and Evacuation Procedures Policy

1. OUTCOME:

To safeguard the life and wellbeing of educators and children through planning for emergency situations. The child's wellbeing is paramount in all situations.

2. POLICY:

Queanbeyan- Palerang Family Day Care staff and educators are committed to ensuring the safety, health and wellbeing of children attending the service by identifying the risk and hazards of an emergency and evacuation situation.

Children, educators and staff will regularly rehearse emergency and evacuation procedure to maximise their safety and wellbeing in the event of an emergency or event requiring evacuation.

3. RELEVANT LEGISLATION

[Education and Care Service National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT:

Emergencies and critical incidents can occur at any time, and therefore educators must be prepared for all situations and have a planned response to ensure the safety of all people involved.

Medical Aid/Medical Treatment

Educators must take all reasonable steps to provide immediate medical treatment to a child who is injured or has been subjected to some sort of trauma and/or illness.

Emergency and Evacuation Procedures

Emergency and evacuation procedures may be necessary due to a bush fire, flood, gas leak or other event where it is necessary to evacuate the home immediately.

Educators are required to be familiar with emergency and evacuation procedures. These must be practiced every 3 months and an evaluation of each practice kept and retained by the educator.

Lockdown Procedures

Lockdown procedures are designed to secure staff, educators and children in the case of potential threats such as bad weather, dangerous persons, intruder (human or animal)

Educators are required to be familiar with lockdown procedures. These must be practiced every 3 months and an evaluation of each practice kept and retained by the educator.

Educational programs promote opportunities for children to learn and develop skills in responding to an emergency or evacuation.

5. PERFORMANCE INDICATORS:

- Number of incident/accident reports submitted to the Co-ordination Unit

6. KEY RESOURCES

[Guide to the National Quality Standard](#)
[Staying Healthy in Childcare 5th Edition](#)
[Services Australia](#)

[Kidsafe](#)
[NSW Department of Education](#)
[ACECQA](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)
[NSW Rural Fire Service](#)
[QPRC](#)
[Child Care Provider Handbook](#)

7. PROCEDURES: _____

[Emergency and Evacuation – Procedure](#)
[Lockdown – Procedure](#)
[Medical Emergency Involving a Family Day Care Child – Procedure](#)
[Incident, Injury, Trauma, and Illness -Procedure](#)

Emergency and Evacuation – Procedure

To ensure that educators and children are familiar with emergency and evacuation procedures, educators will:

- Display an emergency and evacuation diagram of FDC premises (marked with locations of exits, fire extinguisher/blanket, first aid kit, route, assembly area); and
- Display instructions for what must be done in the event of an emergency (e.g., where children might be at different times of the day {sleeping, eating}; how the children will be alerted {whistle bell, where this item is kept}; keys which may be needed to unlock doors, windows. This should be reviewed every 12 months.

These two documents must be displayed in a prominent position near each exit.

The procedures should be rehearsed every 3 months and an evaluation of each rehearsal must be kept and retained by the educator. Educators should consider offsite evacuations which may be required in the event of an emergency for example bushfire, flood. These should be practiced and evaluated at least annually.

Parents must be aware of the procedures and where they should go to collect their children in case of an emergency.

In all emergency situations, educators are to:

- Stay calm
- Respond to the immediate needs of all children.
- Ensure all children are safe and away from danger,
- Account for all children
- Carry out first aid if necessary.
- Call for assistance 000, clearly stating house number, street address and suburb, including nearest cross street.
- Mention you are caring for children and if a child or other person is missing or injured, or sick.
- Contact Queanbeyan-Palerang Family Day Care staff.

Emergency Aid/Medical Treatment

Immediate medical aid and, if necessary, emergency medical treatment must be given to a Family Day Care child who requires it, either because of a serious incident, injury, trauma, or illness.

Queanbeyan-Palerang Family Day Care has an emergency mobile phone if educators have an emergency and are unable to contact staff in the office. This phone can be used in the event of an emergency within the normal operating hours of Monday to Friday, 830am – 5.00pm 0478 486 108.

A child placed in care within Queanbeyan-Palerang Family Day Care must be covered by an authority signed by the child's parent, authorising the service and/or educator to seek emergency medical, dental, hospital and ambulance services where this may be considered necessary for the welfare of the child. A parent must also nominate an authorised nominee who can give permission for medical attention or administration of medication to a child.

All reasonable steps must be taken to provide immediate medical aid, if necessary. Educators should act on their discretion in the application of first aid or resuscitation, and in the decision to contact the child's parents, authorised nominee (as detailed on the child's enrolment form), child's doctor, or an ambulance. The Co-ordination Unit will assist where possible.

A full account of any emergency aid/medical treatment must be recorded on an Injury, Trauma, and Illness Incident Report form and a FDCA Incident Report form (depending on treatment provided) within 24 hours and provided to the Co-ordination Unit as soon as possible.

Educators are required to contact the Co-ordination Unit by phone when any of the above occur.

Bush Fire

On days where the Fire Danger Rating is Very High, Severe, Extreme or Catastrophic, the educator will inform families that they are on alert. Depending on the rating, educators may deem it more appropriate to close the service.

Educators residing in bushfire zones will close their service in conditions where the rating is declared catastrophic.

Educators will monitor the situation during the day. If the fire is deemed a direct threat and/or advice has been received to leave the area, the educator will make the necessary arrangements to evacuate. Depending on the urgency of the situation, parents will be notified prior to evacuating or by the educator on arriving at another destination.

At all times, the welfare and safety of the children is paramount.

Fire

Educators home should be equipped with an appropriate number of smoke detectors. These will be regularly tested to ensure they are functioning properly.

Fire blanket and fire extinguisher should be placed in a strategic place for easy access when needed. Fire equipment is to be tested and tagged every 6 months.

In the event of a fire in an educator's home, educators are to evacuate the home as quickly as possible. If the home contains smoke, instruct children to crawl to the exits.

Flood

Where educators live in a flood zone, appropriate steps are to be taken if a flood may affect the educator's home. Educators are to ensure that if flooding is anticipated that the service is closed.

At all times, the child's condition will take priority.

Queanbeyan-Palerang Family Day Care has an Emergency Management Plan in place to provide details of how to prepare for and respond to an emergency.

Lockdown – Procedure

Lockdown procedures are designed to secure staff and children in the case of potential threats such as bad weather, toxic spills, dangerous persons/animals, or on the advice of emergency services.

It is important for educators to have an area where they will take the children during lockdown. This should be an area in the home where there are no windows or doors to the outside area.

Depending on the age of the children in care, educators may have a “code name” for when a lockdown is practiced.

Educators are required to be familiar with lockdown procedures. These must be practiced every 3 months and an evaluation of each practice kept and retained by the educator.

When a threat occurs, the educator is to follow the following procedures:

- Educators are to ensure all children are accounted for
- Keep a mobile phone with you
- Move indoors as soon as a risk has been identified
- All doors and windows should be locked
- Close blinds and curtains and sit waiting for the residence to be deemed safe
- Proceed to a designated area in the residence and or venue (as indicated in the emergency plan and evacuation strategies)
- Ensure children move away from the doors and windows and sit low to the ground.
- Do not answer any knocks on the door

It is important to ensure that you have all contact information and a first aid kit with you.

Educators are also encouraged to have an emergency bag packed which should include the following:

- First aid kit
- A list of all the children’s details; including any allergy information, contact details for the parents and the family day care office
- Nappies, wipes, rubbish bags
- Spare clothes
- A torch
- Food and water
- Activities to keep the children occupied

Policy review date: October 2023

Next policy review date: October 2024

Dealing with a Medical Emergency at an Educator's Home Involving a Family Day Care Child – Safe Operating Procedure

Identify Related Hazards/Risks

Child is hurt at the educator's home.

Controls for Hazards/Risks

- Apply first aid
- Seek medical assistance from the ambulance service (see Job Steps)

Job Steps:

- Assess the situation/child - checking for danger to self and others.
- In the event of a medical emergency, call ambulance dialling 000 (or 112 on a mobile phone) and give exact location:
 - Remain calm
 - State the address and telephone number
 - State nearest crossroad
- Await arrival of ambulance, do not move the child or attempt to transport them to hospital
- Report the situation – to the parents, (or the nominated emergency contact if unable to contact the parent) and explain the situation that has occurred and what action is being taken. If unable to contact any of the above, contact the Co-ordination Unit on 0417 204 953 or the out of hours mobile phone 0478 486 108 if necessary.
- If it has not been possible to contact parents/emergency contacts, the Nominated Supervisor or nominee will contact relevant parents
- Continue to supervise the children and attempt to keep them calm
- As soon as practical after the medical emergency, the educator must complete an "Incident, Injury, Trauma and Illness" form detailing the situation. Where emergency services are called, this is considered a "serious incident" (under the National Regulations) and must be notified to the Co-ordination Unit immediately who will then advise the Early Childhood Education and Care Directorate within a 24-hour period

In the event of a death, in addition to the above:

- Educator/Nominated Supervisor must advise the Police Department and NSW Workcover.
- Educators are to ensure that the area is not disturbed until Police arrive.
- The Nominated Supervisor or nominee will notify the Department of Education and Communities.

If appropriate, the Nominated Supervisor will organise/ offer counselling to educators, staff, families and children.

Child Protection Policy

1. OUTCOME:

Educators and staff of Queanbeyan-Palerang Family Day Care are committed to support the safety, welfare and wellbeing of children and young people by adhering to child protection legislation and guidelines.

2. POLICY:

Educators will ensure that children are cared for in a protective and healthy environment where the safety of the child is paramount. Educators must act in the best interests of the child and take all reasonable steps to ensure the child's safety and wellbeing. This includes responding to incidents or concerns that children are at risk of significant harm and meet relevant legislation obligations.

3. DEFINITIONS:

The definition of Risk of Significant Harm (ROSH)

A child or young person is at risk of significant harm if the circumstances that are causing concern for the safety, welfare or wellbeing of the child or young person are present to a significant extent. This means it is sufficiently serious to warrant a response by a statutory authority irrespective of a family's consent. What is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child or young person's safety, welfare and wellbeing.

Definition of Reportable Conduct

Reportable conduct is defined to mean the following conduct (whether or not a criminal proceeding in relation to the conduct has been commenced or concluded):

- a sexual offence with or in the presence of a child
- sexual misconduct with, or in the presence of a child
- ill treatment of a child
- neglect of a child
- an assault against a child
- behaviour that causes significant emotional or psychological harm to a child
- any offence under section 43B or 316a of the Crimes Act 1900, whether or not with the consent of the child.

4. RELEVANT LEGISLATION:

[Education and Care Services National Regulations 2011](#)

[Education and Care Services National Law](#)

[National Quality Standard](#)

[Children's Guardian Act 2019](#)

[ChildStory Reporter](#)

[Child Protection training requirements](#)

[NSW Reportable Conduct Service](#)

[Protecting our Kids](#)

[Children and Young Persons \(Care and Protection\) Act 1998](#)

4. CONTENT:

Legal reporting requirements

All staff and educators have a responsibility by law to recognise and respond to concerns for safety, welfare and wellbeing of children and young people and report these concerns by way of calling the **Child Protection Helpline 132 111** or using the online **Mandatory Reporter Guide (MRG)** <https://reporter.childstory.nsw.gov.au/s/mrg> which is a tool to assist with decision making and supports the reporter to determine whether a report is required.

Where a concern does not meet the reporting threshold, educators and staff will monitor the concerns and provide support to the child and their family where appropriate. This may involve providing the family with information about support services available.

In the case of an allegation or incident of physical or sexual abuse of a child against a staff member, educator, household member or visitor at the service, must be reported to the Early Childhood Directorate via the ACECQA NQA ITS within 7 days of the incident occurring.

Any member of the community who suspect that a child or young person is at risk of harm should report these concerns to the **Child Protection Helpline on 132 111** or via the MRG.

Child Protection Training

Educators and staff will undergo regular training at least every two years or as changes occur. This training is mandatory and will be completed by staff and educators within the timeframe set by Queanbeyan-Palerang Family Day Care. Failure to complete the training may result in termination of registration with the service.

Visitors

Educators have a right to have people visit their home. Visitors to the educator's home must complete the Visitors' Book.

Visitors' Book

A Visitors' Book is required for child protection purposes. Visitors to the educator's home are to complete their relevant details in a visitors' book kept by educators. Refer to definition of "visitors" on page 85

5. PERFORMANCE INDICATORS:

- The number of reports to the Child Protection Helpline
- The number of reports to the Office of Children's Guardian
- The number of reports to the Commission for Children and Young People

6. KEY RESOURCES:

www.kidsguardian.nsw.au
www.community.nsw.gov.au/kts/guidelines/reporting/index.htm
[Mandatory Reporters](#)
[ACECQA](#)
[National Quality Standard](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
www.kidsafe.com.au
[NSW Department of Education](#)
[Education and Care National Regulations](#)
[Education and Care Services National Law](#)
[Protecting our Kids](#)

7. RELATED POLICY/PROCEDURES

[Child Protection – Procedure](#)
[Supervision – Procedure](#)

Child Protection – Procedure

Using relevant legislation, educators will ensure that children are provided with a safe, healthy and protective environment. These guidelines outline policies and procedures in relation to this requirement.

The Children and Young Persons (Care and Protection) Act 1998 places a duty of mandatory reporting on educators registered with Queanbeyan - Palerang Family Day Care. This means that educators are mandated to report regarding children and young people who are at risk of significant harm.

Use of Mandatory Reporter Guide (MRG) to assist and determine whether concerns about a child or young person reaches the threshold of "risk of significant harm" and is available at <https://reporter.childstory.nsw.gov.au/s/mrg>

The guide consists of eight decision trees including:

- Physical Abuse
- Neglect - Supervision; Shelter/Environment; Food; Hygiene/Clothing; Medical Care; Mental Health Care; Education - Not Enrolled; Education - Habitual Absence
- Sexual Abuse – Abuse of a child; abuse of a young person; problematic sexual behaviour towards others
- Psychological Harm
- Danger to Self or Others
- Relinquishing Care
- Carer Concern – Substance Abuse; Mental Health; Domestic Violence
- Unborn Child

Educators who have reasonable grounds to suspect a child or young person is at risk of significant harm and has current concerns about the safety, welfare or wellbeing of the child or young person should make a report to the Child Protection Helpline on 13 2111 (available 24 hours a day/7days a week).

Where concerns of harm do not meet the significant harm threshold, the Guide will indicate whether consultation with a Child Wellbeing Unit or other appropriate professional services is required. The consent of the family should be sought before making referrals.

The definition of “Significant Harm”

A child or young person is at risk of significant harm if the circumstances that are causing concern for the safety, welfare or wellbeing of the child or young person are present to a significant extent. This means it is sufficiently serious to warrant a response by a statutory authority irrespective of a family’s consent. What is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child or young person’s safety, welfare and wellbeing.

Child Wellbeing Units

These units will help agencies identify “at risk” children and respond to the needs of children at the local level, resulting in more families receiving earlier support.

The units will:

- Document concerns for the safety, welfare, and wellbeing of a child or young person where a level of risk is identified.

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- Identify whether a concern about a child/young person may meet the significant harm (ROSH) threshold, and if so, to ensure that these concerns are reported to the Child Protection Helpline.
 - Identify and advise possible services and interventions for children, young people, and their families about whom there is a safety, welfare or wellbeing concern, particularly where statutory intervention is not warranted.
 - Provide advice about the use of Chapter 16A of the Children and Young Persons (Care and Protection) Act 1998 to share information or coordinate services between prescribed bodies.
 - Support better alignment and coordination of services so that children, young people, and families get the help they may need as early as possible.

There are several Acts which impact on Queanbeyan -Palerang Family Day Care staff and educators in relation to obligations surrounding reporting of suspected child abuse.

Procedure

All matters relating to child protection issues will be dealt with confidentially and expeditiously.

Where a staff member or educator has concerns regarding a child, the following steps will be taken:

- Document any observations immediately, with the date and time (this record must be factual and not based on opinions or judgements);
- Access advice via the Mandatory Reporter Guide [Mandatory Reporter Guide](#) or by calling the Child Protection Helpline 132 111.
- If the MRG does not recommend an immediate report, save the information received by the Decision Tree as evidence.

Where a child discloses to a staff member or educator, the following steps will be taken:

- The staff member or educator must listen carefully to what is being said (under no circumstances should the child be interrogated);
- Document the information immediately, with the date and time (this record must be factual and not based on opinions or judgements);
- Access advice via the Mandatory Reporter Guide [Mandatory Reporter Guide](#) or by calling the Child Protection Helpline 132 111.
- If the MRG does not recommend an immediate report, save the information received by the Decision Tree as evidence.

Where a parent discloses information to a staff member or educator, the following steps will be taken:

- Advise the parent that the content of the discussion may be referred to the relevant authority;
- Document the information immediately, with the date and time (this record must be factual and not based on opinions or judgements);
- Access advice via the Mandatory Reporter Guide [Mandatory Reporter Guide](#) or by callin
- Access advice via the Mandatory Reporter Guide [Mandatory Reporter Guide](#) or by calling the Child Protection Helpline 132 111.
- If the MRG does not recommend an immediate report, save the information received by the Decision Tree as evidence.

In all of the above scenarios, if there is any uncertainty or support is required, discuss with the Nominated Supervisor. The Child Protection Helpline can provide advice and support 132 111.

NB: A person who has a mandated responsibility has that responsibility personally. The responsibility for making a judgment and acting upon it rests with the person who has perceived a risk of harm.

Where an educator, or a member of the educator's family, is implicated in a situation of a child being at risk of harm, the following procedures will be followed:

1. The Child Development Officer and Nominated Supervisor will meet with the educator to discuss the incident. In some cases, it may be appropriate to speak to the member of the educator's family who has been implicated in the situation.
2. A report regarding the incident will be written and a copy forwarded to the Service Manager Community and Education and/or the Portfolio General Manager Community Choice
3. Where a letter of warning is the appropriate course of action, the educator will be advised verbally and in writing. This letter will also set out certain conditions which will apply for the educator's continued registration with Queanbeyan-Palerang Family Day Care.
4. Where an educator's action may have put the welfare of a child at risk, the Nominated Supervisor (in consultation with the Service Manager Community and Education) may make a decision to suspend the educator pending further investigations;
5. When an educator is suspended, he/she will be advised verbally and in writing. This letter will indicate that the results of the investigation will determine what further action is to be taken; and
6. In a situation where the welfare of the child is seriously jeopardised, automatic de-registration may occur. This course of action will be recommended by the Nominated Supervisor to the Portfolio General Manager, Community Choice, who, after being appraised of the matter, will make a decision regarding the educator's future registration with Queanbeyan-Palerang Family Day Care. If the matter warrants automatic de-registration, the Portfolio General Manager, Community Choice can exercise his/her authority and the educator's registration will be suspended pending an investigation of the allegation.

For the period of the suspension, parents of children in care with the educator will be provided with backup care. In all cases, the child's welfare is of paramount concern.

Children's Guardian Act 2019 – this Act requires Queanbeyan- Palerang Regional Council staff to report instances of "reportable conduct" to the NSW Office of Children's Guardian **Reportable Conduct Directorate (02) 8219 2800** [NSW Reportable Conduct Service](#)

Child Protection (Working with Children) Act 2012 – A Working With Children Check is a prerequisite for anyone in paid and unpaid child-related work. Child-related work is defined as work in a specific, child-related role or face-to-face contact with children in a child-related sector. WWCC'S must be verified by service.

The object of this Act is to protect children:

- By not permitting certain persons to engage in child-related work

Commission for Children and Young People Act (NSW) 1998 – this Act requires any person selected for child related employment (including educators and other adults in the home) to undergo Working with Children background checks. This Act also requires Queanbeyan - Palerang Family Day Care to notify the Commission when an allegation of reportable conduct or an act of violence is committed.

The Office of the Children's Guardian was established under the Children and Young Persons (Care and Protection) Act 1998 to promote the interests and rights of children and young people living in out-of-home care. In 2013 legislative changes expanded the role of the Office to be an independent government agency that works to protect children by promoting and regulating quality, child safe organisations and services.

The Office reports to the NSW Minister for Family and Community Services and to Parliament.

Under legislation, the Office of the Children's Guardian:

- Accredits and monitors the designated agencies that arrange statutory out of home care (OOHC) Registers and monitors agencies that provide, arrange or supervise voluntary out of home care (VOOHC)
- Accredits non -government adoption services providers.
- Authorises the employment of children under the age of 15, and child models under the age of 16, in the entertainment sector.
- Administers the Working with Children Check and encourages organisations to be safe for children.
- Administers the Child Sex Offender Counsellor Accreditation Service (CSOCAS) – a voluntary accreditation service for persons working with those who have committed sexual offences against children.

Mandatory Reporting

Educators will ensure that children and young people who are at risk of significant harm, are reported to the Child Protection Helpline on 132 111.

NB: A person who has a mandated responsibility has that responsibility personally. The responsibility for making a judgment and acting upon it rests with the person who has perceived a risk of significant harm.

Reportable Conduct Service – Allegations against employees, volunteers, students or contractors

The Approved Provider has the legislative obligation under the Reportable Conduct Service to notify the Office of the Children's Guardian of reportable allegations and convictions against their employees (including volunteers and contractors), investigate the allegation and advise the Office of the outcome. In addition, the Approved Provider must take appropriate action to prevent reportable conduct by employees.

The Children's Guardian Act 2019, effective 1 March 2020, defines the head of an organisation as a 'relevant entity'.

An approved education and care service is listed at Schedule 1 of the Act as an 'entity'. The Approved Provider must notify the Children's Guardian within seven (7) business days and investigate the allegations. A final report of the investigation must be ready to submit within 30 calendar days or provide information about the progress of the investigation to the Children's Guardian. The Approved Provider must send a report to the Office of the Children's Guardian that enables the Office of the Children's Guardian to determine whether the investigation was completed satisfactorily and whether appropriate action was or can be taken. The Approved Provider must ensure an appropriate level of confidentiality of information relating to the reportable allegations as per the Act or other legislation.

The Children's Guardian will monitor the entity's response and may conduct their own investigation.

The Children's Guardian Act 2019 defines reportable conduct as;

- a sexual offence has been committed against, with or in the presence of a child
- sexual misconduct with, towards or in the presence of a child
- ill-treatment of a child
- neglect of a child
- an assault against a child
- behaviour that causes significant emotional or psychological harm to a child

If an allegation is a criminal offence, the first step after addressing any immediate significant risk to children, is to report to Police (02) 6298 0599.

Child Protection Training

It is mandatory for new educators to undertake training in “Child Protection”.

Educators are required to undertake Child Protection training every two years to ensure educators are aware of their responsibilities as a mandatory reporter.

Educator Assistants are also required to keep up to date with child protection legislation and undertake training every two years.

Visitors

Educators have a right to have people visit their home. However, this needs to be balanced with the educator’s responsibility to provide a stimulating, safe, healthy, protected, and supervised environment for children in care. Educators must also understand that they are being paid whilst visitors are in the home and that the quality of care must not be jeopardised.

“Visitors” are defined as:

- Any person who visits an educator’s home for more than five minutes
- Children of high school age, or older
- Relatives/friends (of the educator and/child) who may visit
- Contractors, or workmen, even if they only visit your backyard
- Family Day Care staff
- Any person who visits the home and has contact with Family Day Care

children. When educators have visitors in their home, educators must ensure that

- Visitors to the home are fit and proper people
- Visitors do not stay for extended lengths of time
- Children are not left alone with visitors and are always appropriately supervised by the educator
- Children’s right to privacy is protected (e.g., toileting, nappy changing, confidentiality)
- The daily routine and program are adhered to.

Visitors to the educator’s home must also complete the Visitors’ Book.

Visitors’ Book

Educators will ensure that children are cared for in a safe, healthy, and protected environment at all times. One way in which this occurs is for educators to maintain a visitors’ book.

A Visitors’ Book is required for child protection purposes. Visitors to the educator’s home are to complete their relevant details in a visitors’ book kept by educators. See definition of “visitors” above.

The information required to be noted in the visitors’ book:

- Date
- Name of person visiting

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- If applicable, company the person is from, or purpose of visit
 - Time of arrival
 - Time of departure
 - Signature of visitor

Protective Behaviours

All children have the right to feel safe irrespective of the child's background, race, or religion.

Protective behaviours are about educating and providing children the tools they need to feel safe and get help if they are in a dangerous situation or feel uncomfortable.

Protective behaviors help children identify early warning signs of feeling unsafe.

The content may include knowing the names of body parts, owning your own body, different kinds of touch, knowing who safe people are to tell and ways to avoid or get away from risky situations.

Why is Protective Behaviour Important?

- To provide protection for children because it is not possible to supervise them 24 hours a day
- Over 85% of children are abused by someone who is known to and trusted by the child
- To create an environment where both children and adults can freely discuss unpleasant or problem situations.
- Encourage children to tell someone safe if they feel uncomfortable.

Protective Childcare Practices

Educators and staff will interact with children in ways which are open, transparent, and acceptable to families and which meet community standards.

Educators will through communication, procedures, and documentation act to protect themselves, other household members and visitors from any allegations which may arise in relation to inappropriate behaviours towards children.

It is important that educators work to earn parent's trust, through transparency and clearly set out routines. Family Day Care educators, as unsupervised childcare providers, are more vulnerable than centre-based educators to an allegation of inappropriate behaviour. In both the management of behaviour and the carrying out of routines such as toileting, changing and bathing, educators need to ensure that their procedures are open to scrutiny, and minimise the risk to themselves, other household members, or visitors to the premises.

To ensure that children are protected from risk of harm, and to ensure that staff, educators, household members and visitors are protected from serious allegation:

- Educators and staff are to engage only in practices that are respectful of and provide security for children and in no way degrade, endanger, exploit, intimidate, or harm the children psychologically or physically
- Educators should ensure families have ready access to their child, and families are consulted on the experiences planned for children, and the persons with whom they come in contact
- Educators should carry out all change and/or bathing routines personally, and carry out such routines in areas which are readily accessible to others in the care environment
- Educators should keep parents informed of the procedures for toileting children and should also respect the child's need for privacy
- Children should not be withdrawn or taken into rooms that can be locked
- Educators must not leave children alone with visitors

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- Educators should ensure that children are not left alone with household members (unless this person is a registered Educator Assistant) for any length of time, but are appropriately supervised
 - Educators should be aware of their own levels of tolerance and stress factors. Educators may from time to time need to acknowledge that some children may be more difficult to relate to than others. Educators should discuss this honestly with staff to develop strategies to assist them
 - Where there is any threat to the educator's safety or wellbeing, an educator should avoid placing herself at risk
 - Educators will ensure that other household members are informed of this policy and of their roles and responsibilities in relation to the children in care
 - Educators and staff will ensure that the privacy of children and families are always respected and maintained when taking appropriate photographs and videos. Every child is protected from any exploitation of photographic and video images of themselves whilst attending the service. Images will only be used to support the child's learning, or to inform the learning and planning cycle.
 - Children will be appropriately clothed including during water/messy play activities.
 - **Child Safe Workplace**

Current Working with Children Check's (WWCC) must be held by all staff, educators, household members over the age of 18 years, students and guests who stay at the residence for a period of longer than 3 weeks.

A register of all those requiring WWCC's will be held at the co-ordination unit and currency maintained. It is the responsibility of educators to notify the Nominated Supervisor of any new household members, guests, or regular visitors.

Registration of new educators is conditional based on the potential educator and household members are fit and proper people.

Referee checks will be done for prospective educators prior to registration.

Household members, visitors are required to adhere to the policies and procedures whilst the service is operating.

The ten Child Safe Standards are used as our benchmark in providing a child safe and child friendly environment. Children enrolled with Queanbeyan-Palerang Family Day Care have the right to feel safe and be safe.

Any incident or allegation of physical or sexual abuse of a child or children at the service must be reported to the Early Childhood Education Directorate via the ACECQA NQA ITS within 7 days.

Policy review date: October 2023

Next policy review date: October 2024

Photographing/video imaging children Policy

1. OUTCOME:

Children have the right to be protected from the misuse of photographic and video images whilst in care. Educators and staff will ensure that the privacy of children and families are always respected and maintained when taking photographs and videos.

2. POLICY:

Educators registered with Queanbeyan-Palerang Family Day Care will only use photographs of the children to support their learning and to record individual development progress.

3. RELEVANT LEGISLATION:

[Education and Care National Regulations 2011](#)

[Education and Care Services National Law](#)

[National Quality Standard](#)

[Children and Young Persons \(Care and Protection\) Act 1998](#)

[Children's Guardian Act 2019](#)

4. CONTENT:

Queanbeyan-Palerang Family Day Care will ensure children's safety and respect their right to privacy by adhering to the following.

- Every child is protected from any exploitation of photographic and video images of themselves whilst attending the service.
- Photographs and videos taken by educators are to support the child's learning, records a child's individual progress or to inform the learning and planning cycle.
- Written parental permission must be obtained from families before any photographs or videos are taken of the child.
- Individuals visiting the service are not permitted to take photographs/videos of the children.
- Children will always be clothed appropriately including during water/messy play activities.
- Only capture images/videos of children that are appropriate.
- Respect the wishes of families and comply with any restrictions they request in relation to their child's image.
- If sending images of children to parents, be aware of protecting the privacy of other children in the service who may appear in the photograph.

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- When using private Facebook pages, ensure, via privacy settings that images of children are accessible only to their parent/guardian. If this is not possible then only post images that do not identify any child, so only take the backs of their heads or where faces are not identifiable.
 - Make the children's play environment, activities, achievements etc. the focus of photographs as opposed to children's images.
 - Parents/guardians are not permitted to share photo's/videos where children other than their own, appear in a photograph/video.

PERFORMANCE INDICATORS:

- The number of complaints received.
- The number of reports to the Child Protection Helpline

KEY RESOURCES:

[Children and Young Persons \(Care and Protection\) Act 1998](#)
[Office of the Children's Guardian](#)
[Education and Care Services National Regulations 2011](#)
[Education and Care Services National Law](#)
[Children and Young Persons Act 1998](#)
[Privacy Act](#)

REALTED POLICIES:

[Child Protection - Procedure](#)
[Supervision - Procedure](#)

Child Safe Policy

1. OUTCOMES:

Queanbeyan-Palerang Family Day Care staff and educators play an integral role in creating and promoting a safe and positive environment for children by adopting the Royal Commission's ten Child Safe Standards as the framework for the procedures and decision-making regarding interactions and involvement with children. This policy focuses on how we can build and maintain a child safe environment which is inclusive, transparent and promotes children's participation.

2. POLICY:

Children enrolled with Queanbeyan-Palerang Family Day Care have the right to feel safe and be safe. Our service is committed to providing a child safe and friendly environment where children are protected, valued and have positive experiences. To achieve this, we will.

- ✓ Act with the best interest of the child as a primary consideration
- ✓ Use the ten Child Safe Standards as our benchmark.

3. RELEVANT LEGISLATION:

Child Protection (Working with Children) Act 2012
Children & Young Persons (Care & Protection) Act 1998
Children's Guardian Act 2019
Ombudsman Act 1974
UN Convention on the Rights of the Child
NSW Office of the Children's guardian
NSW ombudsman – Child Protection
NSW Communities & Justice – Protecting our Kids

4. CONTENT

National Standards for Child Safe Organisations.

Standard 1: Child safety and wellbeing is embedded in Queanbeyan-Palerang Family Day Care leadership, governance and culture.

The welfare of children in our care will always be our priority. The best interests of the child will be the primary concerns in making decisions that may affect them.

Child safety is promoted as part of our culture, and we will communicate it across the service:

- ✓ Via information and awareness/training sessions for staff and educators
- ✓ To new educators as part of their induction
- ✓ Staff and educators having a sound knowledge of children's rights, including their rights to feel safe and be heard, and the accountabilities that accompany these rights.
- ✓ Staff and educators understand their obligations on information sharing and record keeping.

Standard 2: Children participate in decisions affecting them and are taken seriously

Queanbeyan- Palerang Family Day Care staff and educators want children attending our service to actively participate in decisions that affect them and encourage and support their contribution.

Our staff and educators engage with children across a variety of different settings (Family Day Care residence, playgroups, excursions/outings, in the community and at events). Across these,

children are respected as capable, competent, curious and creative learners and we offer them opportunities to explore, experiment and investigate in a safe and nurturing environment. Children are encouraged to express their ideas/views which are valued, respected, and listened to by staff and educators.

Staff and educators develop trusting relationships with children and provide children with the information they require so they can play a role in decision making.

Environments are friendly and welcoming for children and the importance of friendships is recognised, encouraged, and supported to help children feel safe.

Standard 3: Families and communities are informed and involved.

Queanbeyan-Palerang Family Day Care proactively encourages and collaborates with families about the services operations and policies. The service engages with and supports approaches that build cultural safety through partnerships and respectful relationships.

Staff ensure that families have information about the service. This includes but is not limited to; staffing arrangements, policies and procedures and child safe approaches. Educators and families are provided with opportunities to be involved in the development and review of the services policies and practices.

Information is provided to families in person and via our web page, emails, phone calls, in parent information booklets and quarterly newsletters.

Standard 4: Equity is upheld, and diverse needs are considered Queanbeyan-Palerang Family Day Care staff and educators have the knowledge to recognise and respond effectively to children and young people with diverse needs.

Environments are designed to be child-friendly, creating a sense of belonging where all children can develop self-confidence, feel valued and are connected to others.

All children and their families will be treated fairly and supported in ways that are culturally safe.

Standard 5: People working with children are suitable and supported to reflect child safety and wellbeing values in practice.

Queanbeyan -Palering Family Day Care seeks to attract and retain staff and educators that are appropriately skilled and are recruited appropriately. QPFDC's responsibilities relating to child protection include selection of suitable staff and educators for child-related work. We will take every reasonable step to ensure we engage fit and proper people to work with children. We will maintain rigorous and consistent recruitment, screening, and selection processes.

Advertising and recruitment documentation for child-related roles clearly notifies applicants that verified clearance because of a Working with Children Check is required. Recommendations for appointment to a role will only be made following at least two reference checks. Referees must be recent, relevant and from appropriate people.

Staff and educators are aware of their child safety responsibilities including reporting obligations.

Standard 6: Processes to respond to complaints and concerns are child focused.

Queanbeyan-Palerang Family Day Care will take any concerns, complaint or allegation related to child-safety seriously and will respond promptly and thoroughly and meet reporting, privacy, and employment law obligations. Staff and educators' approach in dealing with complaints, allegations and disclosures are consistent and child focused. Staff and educators are attuned to allegations and disclosures are consistent, and child focused. Staff and educators are attuned to signs of harm and will act to ensure the safety, welfare, and wellbeing of children.

Families are made aware of the services grievance procedure and regular opportunities are provided for them to discuss, for example when following up with families after conducting home visits to a Family Day Care residence.

QPRC'S Complaint Management Policy prescribes Council's approach to dealing with complaints.

Standard 7: Staff are equipped with the knowledge, skills, and awareness to keep children and young people safe through ongoing education and training.

Queanbeyan-Palerang Family Day Care provides on-going training on child safety. Child protection training is a requirement at least every two years or as changes occur, for staff and educators to support their knowledge on child safety and risk of harm.

As part of the induction process for new educators, they are required to complete the Child Protection module which forms part of the NSW Family Day Care Induction Package.

Staff and educators are aware of mandatory reporting requirements and are trained to recognise the range of indicators of child harm.

Reminders are sent to educators regarding WWCC renewals and the verification process is conducted.

Standard 8: Physical and online environments promote safety and wellbeing while minimising the opportunity for children and young people to be harmed.

Queanbeyan -Palering Family Day Care provides safe physical environments for children and young people. Risks are identified and mitigated without compromising a child's right to privacy and healthy development.

Children are adequately supervised when using technology to reduce the risks in online environments.

Standard 9: Implementation of the child safe standards is continuously reviewed and improved.

Queanbeyan -Palering Family Day Care will review and update policies at least every two years or as legislation requires it. Review outcomes are considered and implemented to improve child safe practices.

The service seeks participation of educators and families when reviewing policies and procedures.

Standard 10: Policies and procedures document how the organisation is safe for children and young people.

Queanbeyan -Palering Family Day Care's child safe policy, addresses all ten of the child safe standards. This policy, and adherence to it, will be a critical part of the service creating and maintaining safe environments for children.

The services policies and procedures are available on the QPRC webpage making it accessible to educators and families.

5. PERFORMANCE INDICATORS

- Number of reports to relevant organisations
- Child safety is embedded in daily practices.

6. KEY RESOURCES

[Child Safe Standards](#)

[Office of the Children's Guardian](#)

[NSW Ombudsman](#)

[Communities and Justice - Protecting our Kids](#)

7. RELATED PROCEDURES

[Child Protection – Procedure](#)

[Supervision – Procedure](#)

Policy reviewed: October 2023

Next policy review date: October 2024

Sun Protection Policy

1. OUTCOME:

Queanbeyan-Palerang Family Day Care are committed to providing children with a safe environment that provides shade and other sun protection to support their learning and opportunities for play.

2. POLICY

Educators and staff will implement sun safe procedures.

Educators must provide shade in areas where the children will play. Children and educators will wear hats and clothing that protects their face, neck and ears and ensure that sunscreen is applied as applicable.

3. RELEVANT LEGISLATION:

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT:

The safety, health and wellbeing of children is our priority. Our staff and educators implement policies and procedure to protect children from UV radiation from the sun, as well as burns from exposure to surface heated by the sun.

Outdoor experiences are an important factor of children's healthy growth, learning, wellbeing, and development. We will ensure that the outdoor environment offer the required shade and other sun protection measure are implemented by educators and staff.

5. PERFORMANCE INDICATORS

- Incidence of sunburn to children

6. KEY RESOURCES

[ACECQA](#)
[QPRC](#)
[QPRC](#)
[Guide to the National Quality Standard](#)
[Cancer Council Sun Safety](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[Sun Smart](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

7. RELATED PROCEDURES

[Sun Protection – Procedure](#)

Sun Protection – Procedure

Queanbeyan-Palerang Family Day Care's sun protection policy has been developed to protect all children, staff, and educators from the harmful effects of ultraviolet (UV) radiation from the sun.

Australia has the highest rate of skin cancer in the world. Research has indicated that young children and babies have sensitive skin that places them at particular risk of sunburn and skin damage. Exposure during the first 15 years of life can greatly increase the risk of developing skin cancer in later life. Family Day Care plays a major role in minimising a child's UV exposure, as children attend during times when UV radiation levels are highest.

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

- October – March: Minimise outdoor activity between 11am and 3pm (daylight saving time). Sun protection practices are required at all times when outside.
- April- September: Outdoor activity can be planned at any time at any time of the day. Sun protection practices are required between 10am-2pm except in June and July when the UV Index is mostly below 3 (in NSW)

All sun protection practices should be considered when planning excursions and events.

Shade

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

Educators are to provide and maintain adequate shade for outdoor play. Shade options can include a combination of portable, natural, and built shade. Regular shade assessments should be conducted to monitor existing shade structures.

Hats

Staff, educators, and children are required to wear sun-safe hats that protect their face, neck and ears. Sun-safe hats include:

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

Baseball caps and visors are not sun-safe hats.

Children without a sun-safe hat are required to play in an area protected from the sun or will be provided with a spare hat where possible.

Clothing

Educators, staff, and children are required to wear sun-safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible.

Sunscreen

Educators and children are required to apply at least SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours. Sunscreen is stored in a cool, dry place and the expiry date is monitored.

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

Role Modelling

Staff and educators are required to act as role models and demonstrate sun-safe behaviour by:

- Wearing a sun-safe hat, clothing, and sunscreen, and using shade.
- Wearing sunglasses (optional) that comply with the Australian Standard 1067 (Sunglasses: Category 2, 3 or 4)
- Encouraging families and visitors to role model positive sun-safe behaviour when at the service.

It is the responsibility of parents to provide alternate sunscreen, hats, and protective clothing for their child.

If parents choose sunscreen not be applied because their child is allergic to it, written confirmation must be provided to the educator. In certain instances, children may be exempt from wearing sunscreen. A letter from the parent is required stating the reasons.

Educational Program

Staff and educators will encourage children with opportunities to apply their sunscreen under supervision where age appropriate to develop independence skills.

Sun safety is incorporated in the educational program.

Policy review date: November 2023

Next Policy review date: November 2024

Tobacco, Vapes, Drugs and Alcohol Policy

1. OUTCOME

Children will be provided with an environment that is hygienic and safe. Educators must provide an environment that is free from the use of tobacco, vapes, drugs and alcohol.

2. POLICY

Queanbeyan-Palerang Family Day Care is committed to providing a safe, healthy, and hygienic environment for children in care. To ensure this, an educator is to provide an environment that is free from the use of tobacco, drugs, and alcohol.

Children must not be subjected to smoke inhalation whilst in care in the home, in the car or during other activities. This smoke free policy will affect others living in the home and visitors to the home.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT:

Educators who require prescription medication must discuss this with the Nominated Supervisor.

Educators must not consume, or be under the influence of drugs or alcohol, whilst caring for children.

Drinking of alcohol and/or taking recreational or illegal drugs/substances by educators or any other person at any venue where family day care children are present, is prohibited.

5. PERFORMANCE INDICATORS

- No. of incidents where educators are found to be using tobacco, illicit or drugs whilst children are in care

6. KEY RESOURCES

[ACECQA](#)
[QPRC](#)
[Child Care Provider Handbook](#)
[Guide to the National Quality Standard](#)
[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

7. RELATED PROCEDURES

[Tobacco, Illicit Drugs and Alcohol – Procedure](#)

Tobacco, Vapes, Drugs and Alcohol – Procedure

Queanbeyan-Palerang Family Day Care is committed to providing a safe, healthy, and hygienic environment for children in care. To ensure this, an educator is to provide an environment that is free from the use of tobacco, vapes, illicit drugs and alcohol.

To ensure this, the following guidelines apply:

- Educators who require prescription medication, must obtain a medical certificate confirming his or her capacity to care for the children is not impaired using the medication (this will be requested at the discretion of the Nominated Supervisor)
- Educators must not be under the influence of alcohol or any drugs whilst family day care children are in care.
- Educators must not consume any alcohol or unlawful substance whilst family day care children are in care.

Research indicates that the risk to passive smokers is considerable. In the interest of the health of children, particularly those who suffer from lung sensitive conditions, it is necessary that children are not exposed to this risk. Educators should also be aware of the possible legal implications of not providing a smoke free environment.

Children must not be subjected to smoke inhalation whilst in care in the home, in the car or during other activities. This smoke free policy will affect others living in the home and visitors to the home.

Where educators and/or family members smoke outside of Family Day Care hours, the home must be well ventilated particularly prior to children coming into care.

Children must not be exposed to anyone consuming or affected by drugs or alcohol.

There is much documentation supporting the risks associated with the consumption of alcohol and other drugs when operating in precise situations. Judgements are impaired and the risk of accidents occurring are increased in these situations. Furthermore, the consequences of modelling undesirable behaviour to children must be avoided.

Policy review date: November 2023

Next policy review date: November 2024

Animals/Pets/Birds Policy

1. OUTCOME:

Animals/pets/birds kept in a sound condition can be educational for children. They can also promote a sense of caring and responsibility. However, this needs to be balanced with the safety and welfare of children in care.

2. POLICY

Educators are required to take the appropriate steps if they have animals/pets/birds in their home, which ensures the safety and welfare of children in care and that of the animal itself.

3. RELEVANT LEGISLATION

[Education and Care Services National Law](#)

[Education and Care Services National Regulations](#)

4. CONTENT

In some cases, it may be necessary to permanently separate animals/pets/birds from children in care. This will be at the Nominated Supervisor's discretion.

Restricted and Dangerous Dogs

In NSW, there are guidelines in relation to "restricted and dangerous dogs". "Restricted dogs", including offspring, are American Pitbull Terrier or Pitbull Terrier, Japanese tosa, Dogo Argentino (Argentinean fighting dog), Fila Brasileiro (Brazilian fighting dog), and any dog declared by a Council under division 1 and 2 of the declarations relating to dangerous and menacing dogs Act.

"Dangerous dogs" in NSW are dogs that are the subject of a declaration under the Act by a Council or a court that the dog is considered dangerous. Prospective educators with any of the above dogs, will not be registered as an educator with Queanbeyan-Palerang Family Day Care.

No animal is permitted to travel in a motor vehicle with Family Day Care children unless the animal is restrained in the car by a fixed barrier or harness or in a cage.

5. PERFORMANCE INDICATORS

- No. of educators who have animals on their premises

6. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

7. RELATED PROCEDURES [Animals/pets/birds – Procedure](#)

Animals/Pets/Birds – Procedure

Animals/pets/birds kept in a sound condition can be educational for children. They can also promote a sense of caring and responsibility.

However, this needs to be balanced with the safety and welfare of children in care and the animal itself. In some cases, it may be necessary to permanently separate animals/pets/birds from children in care. This will be at the Nominated Supervisor's discretion.

Once the interaction is concluded, Educators are required to have a space for the animal that is inaccessible to the children.

All people who come into contact with any species of animal should be aware of the risks of transmission of disease from both ill and clinically normal animals to humans.

Obtaining an accurate veterinary diagnosis when animals are ill, practicing proper personal hygiene, completing regular intestinal de-worming of pets, and using vaccination when available, will help lessen the chance of contracting these diseases.

Fortunately, the occurrence of transmission of diseases is uncommon and generally is prevented by taking several precautions including:

- Practicing good personal hygiene
- Providing prompt and effective first aid treatment to cuts and scratches.
- Cleaning and disinfecting workspaces and equipment/ resources.
- Vaccinating pets and livestock
- Worming pets
- Controlling rodents
- Isolating and treating sick animals

Further information in relation to illnesses which can be transmitted from animals to humans, can be found in the service's Safety Regulations.

Queanbeyan- Palerang Regional Council recommends that pets are de-sexed, and that dogs and cats are microchipped.

Educators who have a pet must notify the Queanbeyan-Palerang Family Day Care Co-ordination Unit and parents. Educators who plan to acquire a pet, must also advise the Co-ordination Unit and parents.

Prospective educators who have pets, will be required to advise the Co-ordination Unit on their Application to become an educator.

Educators who have pets must comply with the following guidelines:

- Complete a risk assessment for each pet that enters or is kept on the premises.
- Any animal (including livestock) or domesticated bird that enters or is kept on the premises is in a clean and healthy condition and does not constitute a safety or health risk in any way (e.g. allergic reaction, infection, potentially dangerous/aggressive or have a detrimental effect on the wellbeing of children in care)
- Any domestic pet or farm animal kept at the educator's home is kept in an area separate to and apart from the areas used by the children, unless involved in a specific activity that is directly supervised by the educator, e.g., brushing or bathing the dog, providing food or water for birds or

chickens. Where practicable (at the Nominated Supervisor's discretion), pets are to have an area to be separated from children in care.

- Any pet which is kept inside the home must always be kept inaccessible to areas where children eat, sleep, play or are toileted.
- Animal bedding, toys, litter tray, food, feeding container or water used or consumed by animals must not be accessible to a child in care.
- Animals must not have access to bedding used by the children, resources or play equipment used by the children in care.
- Animals must not be allowed access to a food preparation area (benches, tables or sink areas where food is prepared)
- Yards must be kept free from excrement and checked daily for bones and/or holes dug by animals prior to children having access to the area.
- There must be an area within the home where animals can be separated from the children.
- Educators will ensure that animals are kept in an area where children cannot have any unsupervised contact with them.

No animal is permitted to travel in a motor vehicle with Family Day Care children unless the animal is restrained in the car by a fixed barrier or harness or in a cage.

Policy review date: November 2023

Next Policy review date: November 2024

Hazardous Plants Policy

1. OUTCOME

Children are protected from hazardous plants.

2. POLICY

Educators will ensure that they do not have hazardous plants in their gardens that are accessible to children.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Some varieties of indoor/outdoor plants may be hazardous to children. Their toxicity varies – some cause nausea and irritation, allergic reactions while others can kill. These plants affect health by three methods – through direct contact, airborne ingestion, or by swallowing. They may cause allergic reactions, illness and poisoning (see the service's Safety Regulations for more information).

If poisoning is suspected, immediately seek medical advice. The Poisons Information Centre can be contacted on 13 11 26 from anywhere in Australia – 24 hours a day.

5. PERFORMANCE INDICATORS

- Number of children who are injured by a hazardous plant

6. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard 2011](#)

[Staying Healthy in Childcare 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Sydney Children Health Network Fact Sheet - Poisonous or harmful plants](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

7. RELATED PROCEDURES

[Hazardous plants – Procedure](#)

Hazardous Plants – Procedure

Gardens are generally safe and interesting places, and children often love spending time in them, but gardens aren't always designed with children in mind.

Supervising children is the best way to avoid danger in the garden or anywhere else.

Some varieties of indoor/outdoor plants may be hazardous to children. Their toxicity varies – some cause nausea and irritation, while others can kill. These plants affect health by three methods – through direct contact, airborne ingestion, or by swallowing. They may cause allergic reactions, illness and poisoning. If you are unsure about any plants, your local nursery may be able to assist you.

If poisoning is suspected, immediately seek medical advice. The Poisons Information Centre can be contacted on 13 11 26 from anywhere in Australia – 24 hours a day.

Any vegetation at the educator's home that can lead to injury or severe discomfort (e.g. because of sharp prickles or prominent thorns) must be identified and provision made to ensure that the vegetation is not accessible to children. Similarly, shrubs, trees, etc. with coloured berries must be made inaccessible to children.

Further information at http://raisingchildren.net.au/articles/dangerous_plants_checklist.html

http://raisingchildren.net.au/articles/dangerous_plants_checklist.html

Transportation of Children Policy

1. OUTCOME:

Queanbeyan- Palerang Family Day Care are committed to ensuring the safe transportation of children, including for excursions, during single trips and for regular transportation.

All children have a right to be transported in a safe manner. Whenever children are passengers in a vehicle, they must be seated in the most appropriate child restraint for their age and size.

2. POLICY

Educators have a responsibility to ensure that if children are transported in a vehicle, this is done so in accordance with state laws.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[Transport for NSW](#)

4. CONTENT

Educators who transport family day care children in a vehicle must:

- Transport children ensuring that each child is in the most appropriate child restraint for their age and size
- Educators must complete the risk assessment, regular outings/excursion permission form indicating methods used to ensure the safe transportation of children. Authorisation from families in the form of regular outings/excursion permission is required prior to transporting children.
- Ensure that the car is registered and insured
- Ensure that the car has been checked by a registered fitter in the last 12 months (and that documentation has been provided to the Co-ordination Unit to this effect)
- Ensure that the car is maintained in good repair and condition.

5. PERFORMANCE INDICATORS

- No. of educators who undertake annual car checks.

6. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

7. RELATED PROCEDURES

[Transportation – Procedure](#)

Transportation – Procedure

All children have a right to be transported in a safe manner. Whenever children are passengers in a vehicle, they should be seated in the most appropriate child restraint for their age and size. Risk assessments and authorisation must be completed prior to any transportation of a child occurring. In completing these risk assessments, educators must outline how they are accounting for children when exiting and entering venues.

Ensure all children transported have an authorisation from a parent or other person named in the child's enrolment record as having authority.

During transportation educators will undertake regular attendance check to account for children including but not limited to when leaving the service, embarking, and disembarking the vehicle and upon returning to the service.

Educators must ensure that all the required equipment and/or items are taken on the transportation, including, but not limited to, a first aid kit, emergency contact lists, children's individual medication, required medical management plans and mobile phone.

To provide the best protection for a child in a motor vehicle, there are several simple principles that must be followed:

- An educator registered with Queanbeyan-Palerang Family Day Care who are transporting children must hold a current Australian Driver's license.
- Use a restraint which conforms to Australian Standards
- Place children in an appropriate child restraint for every journey
- Educators must ensure that restraints are in good condition and are disposed of if they reach the manufacturer's recommended use-by date or if they are older than 10 years.
- Any restraint involved in a car accident must not be used.
- Restraints are checked and fitted annually by an authorised restraint fitter and provide the co-ordination unit with a copy of their inspection notice.
- Children are safest when travelling in the rear of the vehicle.
- Do not transition children to the next restraint before they are ready.
- Child restraints must always be used exactly as stated by the manufacturer, otherwise they are unlikely to function correctly in an accident which may result in injury or death.

The following information should be used when choosing the type of restraint to be used. All children must be safely fastened in the correct restraint for their age.

Children under 6 months

- Children younger than six months must be secured in rearward facing restraints and must not occupy a front seat.

Children aged between 6 months and 4 years

- Children between six months and four years must be secured in either a rear or forward-facing approved restraint with an in-built harness.
- Children under 4 years old cannot travel in the front seat of a vehicle.

Children aged between 4 years and 7 years

- Children between four and seven years must be restrained in an approved forward-facing child restraint or booster seat.
- Children between four and less than seven years cannot travel in the front seat of a vehicle with two or more rows, unless all other back seats are occupied by younger children.

Children 7 years and older

- Children aged 7 years and older must be restrained by a suitable lap and sash type approved seatbelt that is properly adjusted and fastened.

If educators are unsure about the installation of a child restraint they should contact a registered fitter <https://roadsafety.transport.nsw.gov.au/cgi-bin/index.cgi?action=authrestraintfitting.form>

Educators must ensure that any motor vehicle used to transport children (other than a motor vehicle with seating for more than 9 persons) is fitted with child restraints approved by the Roads and Maritime Services.

In the case of newly registered educators, they will be required to have their restraints, fittings and anchorage points checked and a certificate certifying that these items are fitted correctly, prior to transporting children registered with Queanbeyan-Palerang Family Day Care.

Children must NEVER be left alone in a car. It is illegal to leave a child unattended in a vehicle.

They are in danger of:

- Heat stress and dehydration. Temperatures can rise to dangerous levels very quickly. Children left in hot cars are at risk of life-threatening heatstroke, dehydration, suffocation, organ damage and death.

Children/babies that have fallen asleep in a car must NEVER be left in the vehicle to sleep. The child/baby should be transferred to a cot/bed as a soon as possible.

Policy review date: November 2023

Next Policy review date: November 2024

Water Safety Policy

1. OUTCOME

Children's safety and wellbeing will be protected in and around water and support children's learning in a safe environment.

2. POLICY

Educators will ensure that child children are not exposed to any hazard or harm relating to water.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Educators must complete a risk assessment when children undertake an excursion/regular outing to a venue where there is a water hazard.

The safety, health and wellbeing of children is paramount. All water-based activities will be adequately supervised, and no child will be left unattended when in proximity to water.

Hot water at an educator's residence must be temperature controlled or the hot water tap made inoperable to children.

5. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. PERFORMANCE INDICATORS

- No. of educators who take children on excursions/outings to areas where there is water⁷.

RELATED PROCEDURES

[Water Hazards – Procedure](#)

[Supervision policy](#)

Water Hazards – Procedure

Queanbeyan-Palerang Family Day Care acknowledges the importance of safe practices around water. Water hazards and pools are a high risk to children's safety. Supervision of the children is paramount.

Water-based play is an important part of children's healthy growth, learning, wellbeing, and development. Queanbeyan-Palerang Family Day Care Educators ensure that all precautions are employed to safeguard children during these experiences.

Staff and educators must consider the suitability of water-based activities according to the number, ages and abilities of children participating.

We create opportunities for children to learn and develop. This includes incorporating water safety awareness into the educational program.

Water areas are popular with the public, particularly in hot weather, making it difficult to maintain close supervision of children in the crowd; therefore, strict procedures have been set to ensure the safety of the children in Queanbeyan-Palerang Family Day Care.

Educators must display a diagram which shows areas of the residence which includes identifying the existence of any water hazard, water features or swimming pools.

- No family day care child will participate in an excursion/outing where a water hazard is located unless a risk assessment has been completed prior to parental permission being obtained.
- Educators are not permitted to take family day care children on an excursion/outing to a place where is a significant drop to water, e.g., riverbank, Lake Burley Griffin.
- No family day care child is to swim in a pool at the educator's home at any time while the service is being provided.
- Educators are not to take family day care children to a public swimming pool or other person's pool for any reason.
- Water troughs and pet water containers must be inaccessible to a child.
- Empty, safely cover or make inaccessible all water containers when they are not in use.
- Water play activities will always be supervised. If a small wading pool is being used, the educator will stand immediately beside it.
- All water holding containers must be stored to ensure they cannot refill with water.
- Buckets used for cleaning will be emptied immediately,
- Any water hazards/features in the children's play area, for example ponds or fountains that could constitute a drowning hazard are securely covered or made inaccessible to children.
- Wading pools, sprinklers, soaker hoses may be used if children are always constantly in the sight of the educator. On the completion of play with wading pools etc. they must be emptied and put away each time
- Educators should inspect indoor and outdoor environments for potential water hazards, particularly during and after wet weather.

Hot Water

Burns and scalds from hot water are the most common type of injury to young children with most of these injuries occurring in the bathroom. Therefore, hot water should be controlled to a maximum of 50 degrees celsius in the bathroom or where children's hand washing is occurring.

Clothing

Children will always be appropriately clothed during water play activities.

Inspections

Where an educator has a water hazard, water feature or swimming pool, monthly inspections must be conducted by Family Day Care staff.

Within 7 days of conducting an inspection, staff must ensure that the person who conducted the inspection provides the educator with a written report with the following information:

- The address of the residence
- The date and time of inspection
- Full name of the person who conducted the inspection and the person's signature.
- Whether the inspection was conducted onsite or remotely.
An inspection cannot be conducted remotely if the previous two inspections were conducted remotely. No more than six inspections may be conducted remotely in any given calendar year.
- Details of any safety risk or issue identified during the inspection.
If any safety issues or risk identified what action the person who conducted the inspection considers should be taken to mitigate the risks associated and estimate the time required to rectify the identified safety issue.

In addition to creeks, rivers and canals found at a Family Day Care residence located in a rural area, may require extra care in assessing and managing risks.

Staff and educator must consistently implement a risk-based approach to ensure there is safe environment for children around water.

Policy review date: November 2023

Next policy review date: November 2024

Delivery and Collection of Children Policy

1. OUTCOME

Educators and parents are aware of their rights and responsibilities in relation to the arrival and departure of children.

2. POLICY

The safety and security of children is of paramount importance in the transfer of care responsibility from one responsible adult to another.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Handover of children can be a distracting time of the day and educators must minimise any risk factors at this time.

5. KEY RESOURCES

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. PERFORMANCE INDICATORS

- No. of incidents which occur at delivery and collection times

7. RELATED PROCEDURES

[Arrival and Departure of Children – Procedure](#)

[When a parent/guardian does not come to collect a child – Safe Operating Procedure](#)

[When an unknown person comes to collect a child – Safe Operating Procedure](#)

[Collection of a child by drug/alcohol affected person – Safe Operating Procedure](#)

[When a person with a court order against them comes to collect a child – Safe Operating Procedure](#)

[Child Protection Policy](#)

[Child Safe Policy](#)

Arrival and Departure of Children – Procedure

To ensure that children are handed over in a safe and secure manner, educators must be ready for the arrival of children into care. The authorised educator must receive the child into care and the parent must sign the child in recording attendance. Once the attendance record is signed in by the parent/guardian on arrival, the child becomes the responsibility of the educator.

Where arrival and departure of children may occur at a venue other than the educator's home, consideration must be given to a place which is safe and secure. Educators must have attendance records available for the parent/guardian to sign.

When a child departs from the educator's home, the educator must ensure the person who receives the child is the child's parent or a person who is authorised in writing by the child's parent to receive the child. On leaving care the parent/guardian signs the child out on the attendance record and recording departure. Once the attendance record has been signed by the parent on departure, the child becomes the responsibility of the parent.

In the case of school aged children who arrive or leave the educator's home unaccompanied by a parent, the arrival and/or departure shall be in accordance with procedures agreed to by the child's parent. The arrival and/or departure times will be the responsibility of the educator recording attendance/departure times.

In a situation where a school aged child walks/catches a bus to/from school, written parental permission is required. Where a child does not arrive at the educator's home at the agreed time, the educator should contact the child's parents. If this is not possible, the emergency contact should be called. The Coordination Unit should also be contacted as they may be able to assist. Where a child has been missing for more than an hour, the Police should be contacted. An Incident, Injury, Trauma, and Illness Record must be completed and forwarded to the Co-ordination Unit as soon as possible.

Contracted hours must be adhered to. As a courtesy, where parents may be late delivering or collecting children from care, they must contact the educator to advise him/her. Educators often have family commitments at the beginning and end of the day and expect children to arrive and be collected at the agreed hours.

Generally, if parents are late, educators will wait 15 minutes. If they have other commitments which necessitate leaving their home, they will do this. In this case, it is the parent's responsibility to organise drop-off or collection of their children when the educator returns to his/her home.

The safety and security of children is of paramount importance in collection of children from an educator's home.

It is the parent's responsibility to ensure that the educator is aware of who is responsible for the collection of children from an educator's home. If this arrangement changes, the parent must keep the educator informed of any changes by completing a new "Enrolment for Childcare" form.

If the educator is notified verbally of a change in the person nominated to collect the child written confirmation must be provided by the parent as soon as possible.

When a Parent/Guardian Does Not Come to Collect a Child – Safe Operating Procedure

Identify Related Hazards/Risks

Child not collected and experiences emotional distress.

Controls for Hazards/Risks

Ensure parents are aware of policy and keep the educator informed if they are unable to collect the child on time

Children are to be collected by the authorised person nominated on the enrolment form. This documentation must be kept up to date to ensure that any changes to collection arrangements are current.

Job Steps:

If the parent or authorised person nominated on the enrolment form does not arrive to collect a child from the educator within a reasonable period of the normal collection time, educators must:

- Attempt to contact the parent/guardian
- Attempt to contact emergency contacts as specified on the enrolment form
- If unable to contact any of the above, contact the police to see if they can locate the parent/s
- If during working hours, contact the Nominated Supervisor for help and support
- If outside of normal working hours, contact the on-call staff member on the on call mobile phone 0478 486 108

If the parents are not able to be contacted, then the educator is to contact the Child Protection Helpline on 132 111 to advise them of this situation. Staff from the Helpline will then determine the appropriate course of action to be taken.

As soon as practical after this situation, the educator must complete an “Incident, Injury, Trauma and Illness” form detailing the situation. Where a parent fails to collect a child, this is considered a “serious incident” (under the National Regulations) and must be notified to the Co-ordination Unit immediately who will then advise the Early Childhood Education and Care Directorate within a 24 hour period.

When an Unknown Person Comes to Collect a Child – Safe Operating Procedure

Identify Related Hazards/Risks

Child taken from the educator by unknown person.

Controls for Hazards/Risks

- Ensure parents are aware of policy and to keep the educator informed if they are unable to collect the child on time
- Children are to be collected by the authorised person nominated on the enrolment form. This documentation must be kept up to date to ensure that any changes to collection arrangements are current
- The family must notify the educator if another person is to collect the

child **Job Steps:**

Any permanent change in the person nominated to collect the child must be notified in writing on the enrolment form to the educator and service.

If notification is made verbally by the family of a change in the person nominated to collect the child, a written record must be kept and written confirmation provided by the family as soon as possible.

In instances where someone unknown to the educator arrives to collect a child and the required notification has been given, the person will be required to provide identification – preferably a drivers licence.

If a person not so nominated attempts to collect a child, educators must:

- Attempt to contact the family
- Attempt to contact emergency contacts as specified on the enrolment form
- Contact the police if necessary
- If during working hours, contact the Nominated Supervisor for help and support
- If outside of normal working hours, contact the on-call staff member on the on call mobile phone 0478 486 108
- Take all reasonable precautions to ensure the safety of the other children in care

However, under no circumstances should the educator place themselves or other children at risk.

Collection of a Child by Drug/Alcohol Affected Person – Safe Operating Procedure

Identify Related Hazards/Risks

Child's safety and wellbeing is at risk.

Controls of Hazards/Risks

Ensure parents are aware of policy and that a responsible person collects the child/ren.

Job Steps

If an educator believes a child to be at risk e.g., parent driving a vehicle while under the influence of alcohol or mind-altering drugs, the following steps should be taken:

- Tell the parent that you have concerns about the child's safety.
- Offer to ring a taxi or other person to drive the family home.

If the parent does not accept these offers tell the parent that you have a duty of care in relation to the child's safety and you must report this incident. If during working hours, ask the parent to wait until you have contacted the Nominated Supervisor. If outside of office hours, contact the on-call staff member on mobile phone 0478 486 108.

Write down the vehicle registration number, contact the Police straight away.

When a Person with a Court Order Against them Comes to Collect a Child Safe Operating Procedure

Identify Related Hazards/Risks

Child taken from the educator's home by a person with a court order against them.

Controls for Hazards/Risks

- Ensure parents are aware that a person with a court order (that specifies the person cannot have access to the child) cannot collect the child from the educator's home
- Educators must not place themselves or anyone in their home at risk (see Job Steps)
- Children are to be collected by the authorised person nominated on the enrolment form. The family must notify the educator if another person is to collect the child

Note: A Parenting Plan is an agreement that separated parents make about how their children will be cared for and supported. **A parenting plan is not a legally enforceable agreement. It is different from a parenting order, which is made by a court and is legally enforceable.**

Job Steps:

- If there is a parenting order or any other court order taken out against a person, there are conditions regarding the person named on the order. In some circumstances the order may cover the location of an educator's home. It is the responsibility of the family to provide a copy of the court order or any variations to an existing court order to the Nominated Supervisor and educator.
- The Nominated Supervisor is to ensure that a copy of any such existing court order is attached to the child's file
- If copies of court orders are not provided as required, care may be discontinued at the Nominated Supervisor's discretion. This is to safeguard the safety and wellbeing of all children in care.
- If a person named on a court order arrives at an educator's home, the educator should then phone the police and the custodial person as soon as possible.
- If an unauthorised person arrives at an educator's home to remove a child, the educator must:
 - Be polite, firm, and clear and remember the primary duty of care is to children in care
 - Clarify the legal position with the unauthorised person
 - If they refuse to leave and/or become abusive, ask them again to leave and explain that it may be necessary to call the police to remove them if they are making a scene, upsetting children or harassing you. It may be necessary to point out that they can be charged with trespass.
 - Ask the person politely to leave
 - If they do not leave, call the police
- An "Incident, Injury, trauma and Illness Record" form must be completed following any incident related to Court Orders. This must be forwarded to the Nominated Supervisor as soon as possible following the incident.

Regular Outings and Excursions Policy

1. OUTCOME:

Regular outings and excursions are an important aspect of the educational program, providing opportunities for children to build connections with the local community and contributing to their sense of belonging and connection with the world around them.

Queanbeyan-Palerang Family Day Care are committed to ensuring the safety, health and wellbeing of children during excursion and regular outings by conducting risk assessments and ensuring authorisations are obtained from families.

2. POLICY:

The educator will ensure that when children participate in regular outings and/or excursions, all necessary steps have been taken to ensure the safety and wellbeing of the child. All experiences will be conducted in a way that minimise and addresses any risk identified.

Excursions/outings must be child focused.

3. RELEVANT LEGISLATION:

[Education and Care Services National Law](#)
[Education and Car Services National Regulations](#)
[Road Transport \(Safety and Traffic Management\) Act 1999](#)
[Road Transport \(General\) Act 1999](#)
[Road Transport \(Driver Licensing\) Act 1998](#)

4. CONTENT:

Excursions and outings are an essential part of any childcare program. They provide the opportunity to expand a child's experience, explore different environments and learn new activities. Children have a right to proper supervision and care for the full duration of the excursion/outing.

Regular Outings

A regular outing means a walk, drive or trip to and from a destination. This includes a place where the educator regularly visits as part of the educational program, and where the elements of the risk assessment are the same on each outing.

A regular outing is defined as an outing which is undertaken at least once a month to a destination which is in the local area of where educators reside. Regular outings must be planned and can be predicted to occur at the same time, same day, same place at least once a month.

Regular outings are to be outlined on a Regular Outings permission form and the frequency of the outing must be included on the form. The Regular Outings permission form is to be completed, signed and dated by the parent and educator and updated as changes occur.

Excursions

Excursions are outings which fall outside the above definition of "regular outings".

Excursions require an "Excursion Permission" form to be completed and received by the Co-ordination Unit prior to the excursion occurring.

Risk Assessment

Educators undertaking excursions/outings do so at their own risk. When an educator leaves her own environment and takes children on an excursion/outing, the probability of accidents occurring, increases significantly. This is due to factors often outside of anyone's control.

A risk assessment must be carried out for an excursion before parental authorisation is sought.

The risk assessment must identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion, and detail strategies for minimising and managing those risks (see risk assessment form). Given the risk/s posed, an educator will be able to determine whether additional responsible adults will be required to provide supervision and whether any specialised skills are required to ensure children's safety.

5. KEY RESOURCES:

[ACECQA](#)

[QPRC](#)

[Child Care Services Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

6. PERFORMANCE INDICATORS:

- No. of excursions/regular outing forms completed correctly
- No. of forms submitted with risk assessments completed

7. RELATED PROCEDURES

- [Excursions and Regular Outings – Procedure](#)
- [Transportation of Children - Procedure](#)

Excursions and Regular Outings – Procedure

Family day care is a home-based childcare option and therefore it is expected that most of the time that a child is in care will be spent in the home chosen by the parent.

Excursions/outings are to be child oriented and primarily focused on the interests of the children.

Getting to know children and their interests well and thinking about how the learning outcomes of the excursion/outing will meet or extend these interests, will help to ensure that the excursion is child focused.

PLEASE NOTE: Excursions/outings to major shopping centers will not be acceptable, unless it can be shown that the excursion is child focused.

Parents have a right to control when and where their children go during any day. To ensure that this occurs, educators must seek parental permission for all excursions/outings which are undertaken. If the parent deems the excursion/outing unsuitable for their child/ren to attend, the parent may contact the Coordination Unit to seek backup care. payment will be made to the backup educator.

For Queanbeyan-Palerang Family Day Care purposes, there are two types of excursions/outings.

Regular Outings

A regular outing means a walk, drive or trip to and from a destination. This includes a place where the educator regularly visits as part of the educational program, and where the elements of the risk assessment are the same on each outing.

A regular outing is defined as an outing which is undertaken at least once a month to a destination which is in the local area of where educators reside. Regular outings must be planned and can be predicted to occur at the same time, same day, same place at least once a month.

Regular outings are to be outlined on a Regular Outings permission form and the frequency of the outing must be included on the form. The Regular Outings permission form is to be completed, signed and dated by the parent and educator and updated as changes occur. These forms are available to access of the QPRC webpage.

Once completed the Regular Outings permission form is to be forwarded to the Co-ordination Unit. Copies of the form will be placed on the child's file and a copy is provided to the educator. Educators must display their Regular Outings routine for the information of parents.

Regular outings can include outings such as:

- Trips to school and preschool with older children
- A walk around the local neighbourhood
- Trips to playgroup, either walking, by car or bus
- Play sessions at other educators' homes
- Trips to after school activities (e.g. a sports ground)

Educators and parents must:

- Discuss excursions with parents/guardians at the time of the initial interview
- Complete and sign a "Regular Outings" permission" form

Educators must

- Seek parental permission for regular outings at least once every 12 months
- Update the Regular Outings permission form as changes occur;
- Ensure that all specific locations are included on the form e.g., Queanbeyan Library (general terms such as “Queanbeyan businesses” will not be accepted unless they are located within the one building, such as Riverside Plaza)
- Forward a copy of the Regular Outings permission form to the Co-ordination Unit so that copies can be placed on the child’s file and the educator visit reports
- Display a copy of the Routine Outings form for the information of parents
- Ensure a risk assessment has been conducted for the outing. If the venue has not been visited previously, then a risk assessment must be carried out before permission is sought from the parents
- Once the initial risk assessment has been conducted, a further risk assessment is required every 12 months unless the circumstances of the outing have been changed
- If the circumstances of the outing have changed, the outing needs to be re-assessed using the risk assessment form
- A copy of the risk assessment must be forwarded to the Co-ordination Unit for approval prior to undertaking a regular outing

It is important that educators note all outings which may occur during the month. If the venue is not noted on the Regular Outings permission form, the educator will not be permitted to undertake this excursion. An Excursion Permission form will be required and must be forwarded to the Co-ordination Unit prior to the excursion occurring.

If an educator decides to undertake a regular outing which occurs on a fortnightly or monthly basis, the educator must advise the parents and Co-ordination Unit prior to the excursion occurring. This information must include the proposed time frame and venue/s that will be visited. Where a regular outing is listed to occur on a particular day and time and the outing is re-scheduled for a different day or time, the Coordination is to be advised.

Parents should be advised at the beginning of each day, if the educator plans to undertake a regular outing.

Excursions

Excursions are outings which fall outside the above definition of “regular outings”.

In undertaking an excursion, parents may incur a fee (such as an entrance admission). In this situation, parents have the right to say “no” and can request backup care.

Excursions require an “Excursion Permission” form to be completed and approved by the Co-ordination Unit prior to the excursion occurring. Forms can be:

- Delivered to a Co-ordination Unit staff member
- Scanned and emailed to the office (if this is done, educators must phone the office to make sure that the form has been received)
- Forms are accessible on the QPRC webpage

All Excursion Permission forms will be monitored by service staff to ensure that the excursion meets regulatory requirements and the conditions outlined on the form. If the excursion does not meet the necessary guidelines, educators will be advised, and disciplinary procedures may be initiated.

Educators and parents must discuss excursions at the time of initial interview.

Educators must

- Conduct a written risk assessment prior to seeking parental authorisation for the excursion;
- The risk assessment must be completed and submitted to the Co-ordination Unit prior to undertaking the excursion
- Ensure that parents complete the Excursion Permission form prior to the excursion

occurring

Backup Care

In the case of backup, educators are required to complete relevant excursion/outing permission forms and submit them to the Co-ordination Unit in line with the above requirements.

Exceptional Circumstances

It is acknowledged that from time to time, an educator may experience exceptional circumstances where the relevant paperwork has not been completed, i.e., in an emergency. Should this occur, educators are to contact the Nominated Supervisor who will assess each individual scenario at the time.

Excursion/Outing Planning

Prior to undertaking excursions/outing, educators must consider the following questions.

Is the excursion/outing child oriented or more suited for adult interests? (If the excursion/outing is deemed to be more related to adult interests, educators must then identify how it can be made child focused. If this is not possible, then the excursion/outing is not to be undertaken)

- Does the excursion/outing provide a learning experience for the child/ren?
- What are the ages of the child/ren who will be participating in the excursion/outing?
- Will the child/ren require a sleep or rest time during the excursion/outing?
- Will the child/ren require morning tea, lunch, or afternoon tea during the excursion / outing?
- How much time will the child/ren spend in a car (more than 1/2 hour)?
- How does the excursion/outing meet the needs/interests of the child/ren in care?
 - How will children be accounted for when exiting and entering the venue?
- How many excursions/outings will the child/ren participate in during any week?

Co-ordination Unit staff will actively oversee the “appropriateness” of all excursions/outings. The safety of the children undertaking the excursion/outing will be paramount in considering the suitability of an excursion or outing. The above questions will also be taken into account. Should the Co-ordination Unit deem an excursion/outing to be unsuitable, then the educator will not be able to undertake that excursion/outing.

Risk Assessment

Educators undertaking excursions/outings do so at their own risk. When an educator leaves her own environment and takes children on an excursion/outing, the probability of accidents occurring, increases significantly. This is due to factors often outside of anyone’s control.

A risk assessment must be carried out for an excursion before parental authorisation is sought. The risk assessment must identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion, and detail strategies for minimising and managing those risks (see risk assessment form). Given the risk/s posed, an educator will be able to determine whether additional

responsible adults will be required to provide supervision and whether any specialised skills are required to ensure children's safety

A visit to the proposed excursion destination will assist in conducting a risk assessment. During a site visit information can be gathered about the availability of toilets, hand washing, any water hazards, drinking and shade facilities at the destination and details can be checked such as mobile phone coverage and access for emergency services.

For regular outings, a risk assessment must be completed prior to the first visit to the venue and then every 12 months. Where changes are made to the venue, these must be noted on the risk assessment, as they occur.

For excursions, a risk assessment is to be conducted prior to seeking parental permission for the excursion. The risk assessment must be forwarded to the Co-ordination Unit with the excursion permission.

In addition, educators must have:

- Contact information for parents.
- Parents' consent for all children going on an outing / excursion.
- Emergency phone numbers, including emergency services.
- A first aid kit
- A mobile phone
- Medication and children's management plans
- Planned the excursion travel, routes and locations that are safest, and check the location of safety hazards.
- Planned to take the most direct route.
- Taken into consideration the possibility of walking rather than using vehicles.

Passenger Safety

Educators must:

- Ensure all vehicles have child restraints and/or seatbelts and are professionally installed or checked by an authorised restraint fitter.
- Always buckle up children's seatbelts. Ensure children remain occupied when travelling in vehicles to prevent children unbuckling their seatbelt, e.g., sing songs, play simple games and talk about the journey.
- Ensure as far as practicable child passengers enter and exit the car by the "safety door" which is the rear, left hand side door of the car.
- Ensure there are no loose or sharp objects inside the car that could cause injury if an accident occurs.
- Ensure that children do not eat or drink when travelling in vehicles.

Pedestrian Safety

The NSW Roads and Traffic authority recommends when walking with children up to age 8 years in a traffic environment (e.g. roads, pedestrian crossings, bicycle tracks, footpaths, driveways, and carparks) all children hold an adult's hand. If an adult's hand is not available, children should hold onto a pram, stroller, wheelchair, and should be kept in sight of an adult. It is unacceptable for children to walk behind an educator. Educators must conduct a written risk assessment of the excursion and traffic environment for a planned excursion and use strategies such as choosing the safest route, choosing locations with minimal or no traffic.

Educators should promote awareness in children of road safety and play safety by using a walking commentary about all things you are doing to keep safe while on excursions/outings and when out walking.

Bicycle Safety

It is compulsory to wear an approved helmet when riding bicycles in public areas. This applies to all cyclists, regardless of age, including children on bicycles with training wheels and any child being carried as a passenger on a bike or in a trailer.

Safe Play

Educators must choose a safe place for children to play when on excursions/outings. Playgrounds should be fenced, away from traffic hazards, and the play equipment must be safe and age appropriate. Educators must also be aware of stray animals, particularly dogs and prevent the children from playing or going near them.

The area should also have sufficient shade and children must be protected from sun exposure with appropriate clothing, hats, sunscreen, sunglasses and drinking water.

Supervision

Educators must ensure that:

- Children are always supervised
- They are alert to children's whereabouts, activities and safety
- Children are never left alone in motor vehicles, or standing alone by the side of
- The road or road crossings
- They are aware of unfamiliar people.

Emergency Precautions

Educators must be aware of the extra precautions that might be needed for children with a disability or medical problems.

The educator must:

- Conduct all excursions/outings in a safe manner.
- Ensure that any vehicles used to transport children on excursions/outings are fitted with suitable child restraints within the meaning of Regulation 110F of the Motor Traffic Regulations (see section on "Transportation").

Change in circumstances

When there is a change in circumstances relevant to the risk assessment, the risk assessment and authorisations must be updated. Examples of change include but is not limited to; additional children attending, change in location, change in date, or there are changes to the route taken to and from the outing/excursion.

Accounting for children

Educators will undertake regular attendance checks to account for all children.

Policy review date: November 2023

Next policy review date: November 2024

Play Equipment, Toys, and Resources Policy

1. OUTCOME

Children will have access to safe play equipment, toys and resources which are well maintained and in good repair.

2. POLICY

Educators will ensure that all play equipment, toys and resources used by children meet Australian Standards (where applicable), are kept clean and in good repair.

Some equipment (such as car restraints, boosters) have expiry dates and these items should not be used beyond their recommended manufacturer expiration date.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)

4. CONTENT

Play Equipment (see Safety Regulations for more detailed information)

Family Day Care children are not permitted to play on swings or equipment where a child could fall more than 1 metre, unless soft fall is provided which complies with the requirements of Australian and New Zealand Standard AS/NZS 4422:1996 Playground surfacing – Specifications, requirements and test method.

Equipment where a child could fall more than 50cm and less than 1m is to have soft fall, grass, and/or immovable mats underneath and around the piece of equipment. (Please note materials such as bricks, stones, concrete, pavers, bituminous materials and timber are not considered appropriate under surfacing).

IN ALL CIRCUMSTANCES whilst children are playing on any equipment, family day care children must be directly supervised by the educator at all times.

Toys and Equipment

Toys, play equipment and equipment such as cots, strollers, car seats, booster seats used by educators must meet Australian Standards, be safe, clean and in good repair.

5. PERFORMANCE INDICATORS:

- Number of incidents where toys/equipment/resources are not maintained in a safe condition.

6. KEY RESOURCES

www.acecqa.gov.au
www.qprc.nsw.gov.au
www.education.gov.au/child-care-service-handbook-0

[Staying Healthy - 5th Edition](#)
[Services Australia](#)
[Kidsafe](#)
[NSW Department of Education](#)
[Education and Care Services National Regulations](#)
[Education and Care Services National Law](#)
[Guide to the National Quality Standard](#)

7. RELATED PROCEDURES

[Play Equipment \(including toys and resources\) – Procedure](#)

Play Equipment (including Toys and Resources) – Procedure

(see Safety Regulations for more detailed information)

Family Day Care children are not permitted to play on swings or equipment where a child could fall more than 1 metre, unless soft fall is provided which complies with the requirements of Australian and New Zealand Standard AS/NZS 4422:1996 Playground surfacing – Specifications, requirements and test method.

Equipment where a child could fall more than 50cm and less than 1m is to have soft fall, grass, and/or immovable mats underneath and around the piece of equipment. (Please note materials such as bricks, stones, concrete, pavers, bituminous materials and timber are not considered appropriate under surfacing).

In all circumstances whilst children are playing on any equipment, FDC children must always be directly supervised by the educator.

Toys and Equipment

Toys, play equipment and equipment such as cots, strollers, car seats, booster seats used by educators must be safe, clean and in good repair. The items must be checked regularly to ensure:

- A child cannot be trapped, pinched or crushed
- There are no sharp/rough edges, projections or rust
- There are no breakages

Educators are required to ensure that Family Day Care children:

- Have independent access to books and equipment suitable to the child's development and needs.
- Have toys/play equipment which are adequate and sufficient to meet the individual interests and capabilities of each child (considering the age of the child, and the number of children)
- Age and developmentally appropriate equipment and resources are provided.

(The relevant standards for cots used in Family Day Care - Australian Standards (AS/NZS 2172 Cots for household use or AS/NZS 2195 Portable cots

Given the growing concern about the dangers associated with the use of baby walkers, change tables and highchairs, if educators choose to use this equipment, strict supervision must always be observed whilst children are using the equipment.

Work Health and Safety Policy

1. OUTCOME:

Educators and parents are aware of their rights and responsibilities in relation to work health and safety.

2. POLICY:

Educators registered with Queanbeyan-Palerang Family Day Care must comply with the Work Health and Safety Act 2011 and the Work Health and Safety Regulation 2011.

3. RELEVANT LEGISLATION:

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[Work Health and Safety Act 2011](#)

[Work Health and Safety Regulation 2017](#)

[Children's and Young Persons \(Care and Protection\) Act 1998](#)

4. CONTENT:

Educators' homes are considered a "workplace" when FDC children are in care. Educators have responsibilities under Work Health and Safety legislation.

In addition, educators must ensure the health and safety of people visiting or working at their home (workplace) and provide safe access and egress to the same.

Notification to SafeWork (13 10 50)

Under work health and safety (WHS) laws, incidents such as fatalities, serious injuries and illnesses and dangerous incidents must be notified to SafeWork immediately and incident records must be kept for five years.

It is educator's responsibility to ensure that SafeWork is notified immediately. If a notification is made by phone, it is recommended that it be followed up in writing within 48 hours.

Serious Incident

A serious incident is an incident where a child requires medical attention (i.e., dental, doctor, hospital attendance or ambulance). The information relating to such an incident must be documented on an incident, injury, trauma and illness record as soon as possible. Educators must ensure this information is provided to the Co-ordination Unit so that the Department of Education can be advised via the NQA ITS within 24 hours of the incident.

5. PERFORMANCE INDICATORS

- Number of incidents where reports are made to Workcover
- Number of serious incident reports
- Number. of incident, injury, trauma and illness reports completed

6. KEY RESOURCES:

[ACECQA](#)

[QPRC](#)

[Child Care Service Handbook](#)

[Guide to the National Quality Standard](#)

[Staying Healthy - 5Th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

[SafeWork](#)

6. RELATED PROCEDURES

Serious incident – Procedure

Policy review date: November 2023

Next policy review date: November 2024

Manual Handling Policy

1. OUTCOME:

Educators are aware of their rights and responsibilities in relation to manual handling.

2. POLICY:

Educators must be aware of the correct techniques to be used in manual handling.

3. RELEVANT LEGISLATION:

Education and Care Services National Regulations 2011

Education and Care Services National Law 2010

Work Health and Safety Act 2011, Work Health and Safety Regulation 2011

4. CONTENT

Manual handling means lifting, lowering, pushing, pulling, carrying, moving, holding or restraining any object, animal or person. When providing childcare, all care should be taken when educators are required to do any of the above.

Correct lifting techniques protect the child and educator

5. PERFORMANCE INDICATORS:

- The number of incident reports relating to manual handling practices
- The number of injuries as a result of incorrect manual handling practices

6. KEY RESOURCES:

Management OHS in Children's Services, Tarrant, S, 2002

www.acecqa.gov.au

www.qprc.nsw.gov.au

www.education.gov.au/child-care-service-handbook-0

[Guide to the National Quality Standard](#)

[Staying Healthy - 5th Edition](#)

[Services Australia](#)

[Kidsafe](#)

[NSW Department of Education](#)

[nhmrc](#)

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

7. RELATED PROCEDURES

Administration of First Aid Policy

1. OUTCOMES

Queanbeyan-Palerang Family Day Care are committed to providing an environment that promotes children's health, safety, and wellbeing, which includes ensuring the implementation of clear policies and procedures for the administration of first aid.

2. POLICY

Queanbeyan-Palerang Family Day Care recognises that most incidents of injury, trauma and illnesses are preventable. Putting simple preventative strategies into place can reduce the likelihood of such incidents. Queanbeyan-Palerang Family Day Care believes in providing equal opportunities for all participants where they can be safely managed. Our aim is to reduce and prevent as many incidents as possible and to deal with injury, trauma, and illness as effectively as possible when they happen. Preventative measures, appropriate training, adhering to service procedures, regulatory requirements and forward planning will ensure these aims are met.

Queanbeyan-Palerang Family Day Care staff and educators will.

- Ensure the health, safety and wellbeing of children is a paramount consideration for our service. Therefore, we will take every reasonable precaution to protect the children from harm and ensure that we are well equipped to administer first aid in the event of injury or illness.
- Ensure that educators and staff can undertake their roles effectively. In relation to the administration of first aid, they will receive regular training to ensure their qualifications are approved and up to date, as well as access to suitably equipped first aid kits.
- Clear roles ensure that staff and educators are aware of their responsibilities in relation to the administration of first aid, notifications, and reporting.
- We create opportunities for children to learn and develop. This includes incorporating health and safety into the educational program.

3. RELEVANT LEGISLATION

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

4. CONTENT

Queanbeyan-Palerang Family Day Care will ensure comprehensive and current knowledge about the health and special requirements of every child in the service is obtained and documented.

All educators and staff will be adequately equipped to deal with incidents of accident injury, trauma, and illness as they arise and will consistently ensure that effective first aid is administered.

Educators will maintain a well-equipped and accessible First Aid Kit including on outings and excursions. Educators are responsible for maintaining and restocking first aid kits as needed and any expired items will be replaced promptly.

All staff and educators must consistently hold current First Aid and Cardiopulmonary Resuscitation (CPR) certification.

5. PERFORMANCE INDICATORS

- Number of Incident reports relating to incident, injury trauma, or illness

6. KEY RESOURCES

[Education and Care Services National Regulations](#)

[Education and Care Services National Law](#)

7. RELEVANT PROCEDURES

[Incident, Injury Trauma, or Illness – Procedure](#)

[Emergency and Evacuation – Procedure](#)

[Excursions and Regular Outings – Procedure](#)

[Transportation of Children- Procedure](#)

[Medical Management – Procedures](#)

[Sun Protection – Procedure](#)

[Water Safety - Procedure](#)

Administering First Aid – Procedure

Staff and educators are to maintain their current ACECQA-approved first aid qualifications. CPR should be undertaken annually, and first aid qualifications should be renewed every three years.

Educators are required to have as suitably equipped first aid kit that is fully stocked, with no expired products, and that it is checked regularly.

Educators must;

- ensure the administration of first aid policy and procedures are implemented
- maintain a current approved first aid qualification that includes approved anaphylaxis management training and approved emergency asthma management training
- ensure first aid kits are suitably equipped, easily recognisable and readily accessible to adults
- ensure a suitably equipped first aid kits are taken on regular outings/excursions and in an emergency evacuation situation
- monitor and maintain stock in first aid kits including regularly checking the contents expiry date
- seek further medical attention if required after first aid has been administered if required.
- ensure that information relating to the administration of first aid resulting from an incident, injury, trauma, or illness is recorded in the incident, injury, trauma and illness record. It should be recorded as soon as possible, and within 24 hours, after the incident, injury, trauma or illness
- be aware of children attending the service with allergies and their attendance days and apply this knowledge when providing first aid
- while attending to a child requiring first aid, ensure other children are adequately supervised.

Families must

- provide authorisation in their child's enrolment form for the approved provider, nominated supervisor or an educator to seek medical treatment for their child from a registered medical practitioner, hospital, or ambulance service and, if required, for transportation by an ambulance service
- be aware that medication may be administered to their child in the case of an anaphylaxis or asthma emergency without their authorisation
- notify the service upon enrolment of any specific health care needs of their child, including any medical conditions and allergies and any medical management plans that need to be followed
- ensure any medical management plans at the service are kept up-to-date
- if needed, collect their child as soon as possible when notified of an incident, injury, trauma, or illness that required first aid
- be contactable, either directly or through emergency contacts listed on the enrolment form, in the event of an incident requiring the administration of first aid and/or medical attention
- notify educators or staff if there has been a change in the condition of the child's health, or of recent accidents or incidents that may impact the child's care and require the administration of first aid.

Staff must:

- ensure that incidents, injury, trauma and illness events requiring first aid are notified to families as soon as practicable but not later than 24 hours after the occurrence. In the case of a serious incident, notification must also be given to the regulatory authority within 24 hours
- take reasonable steps to ensure educators and staff follow and implement the administration of first aid policy and procedures
- Ensure that up to date policies and procedures are easily accessible to staff, educators and families enrolled.
- Support educators to maintain their current approved first aid qualifications.
- Support educators to undertake CPR training annually.
- Implement notification requirements to families and the Regulatory Authority.

Policy date: November 2023

Next policy review date: November 2024