



**Caulfield South  
Community House**

Policy and Process Manual  
Part E

## **Early Learning Child Care Services**

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*Disclaimer: This manual does not claim to be the absolute authority on all aspects of the Neighbourhood House Sector. Rather, it is a starting point for information and should be used in conjunction with other sources of information and existing policies and procedures.*

*The information is provided on the basis that readers will be responsible for making their own assessments of the matters discussed and are advised to verify all relevant representations, statements and information and obtain independent advice before acting on any information contained in or in connection with this manual.*

*While every effort has been made to ensure that the information is accurate, the House will not accept any liability for any loss or damage, which may be incurred by any person acting in reliance the information.*

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## Introduction

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The House Policy and Procedure Manuals have been developed to facilitate the implementation and clearly define the House's policies in respect to all aspects of the Association's program and service delivery.

The manuals provide processes to be followed in the administration of these policies and assist all employees and volunteers in performing their duties.

The policies are consistent with those of best practice management principles. They have the full support and commitment of the Committee of Management.

This Child Care Manual has been written with consideration to the following legislation outlining the requirements for the provision of child care services:

- Children's Services Act 1996 (amended 25 May 2009)
- Children's Services Regulations 2009
- Health Act 1958
- Health Records Act 2001
- Occupational Health and Safety Act 2004

As an employee or volunteer, you are required to familiarise yourself with the Policies and Processes relevant to your position. This Manual gives an overview of individual responsibilities in relation to the Policies only and does not reflect the full scope of your role and responsibilities.

Any suggestions, recommendations or feedback on the policies and processes specified in this manual are welcome. This should be provided by email to the House Manager.

These policies and processes impact on all areas of the House's Child Care operations and should be read in conjunction with all the other House manuals which document employees' and volunteers' day-to-day roles and responsibilities.

## 1. Anaphylaxis<sup>1</sup>

### ■ Policy Statement

Caulfield South Community House is committed to:

- adopting risk minimisation strategies to reduce the risk of a child having an anaphylactic reaction
- raising awareness about allergies and anaphylaxis amongst the House's community
- actively involving the parents/guardians of each child at risk of anaphylaxis
- ensuring that each child at risk of anaphylaxis has a personalised Action Plan
- ensuring each staff member and other relevant adults undertake anaphylaxis training

### ■ Application

This policy applies to all employees and volunteers, parents and guardians regardless of whether or not a child enrolled at the Child Care Service is diagnosed by a qualified medical practitioner as being at risk of anaphylaxis.

### ■ Process

1. The Child Care Co-ordinator will:
  - a. Receive the child's personalised *Action Plan for Anaphylaxis* that the family must obtain from their GP prior to the commencement of the child's enrolment at the Service.
  - b. ensure that the *Action Plan for Anaphylaxis* is prominently displayed at the Child Care Service
  - c. review annually, the Child Care Service's *Action Plan for Anaphylaxis*
  - d. ensure child care staff:
    - i. attend approved anaphylaxis management training at least annually
    - ii. practise the administration of an adrenaline autoinjector preferably annually
  - e. ensure that at least one child care staff member with current approved anaphylaxis management training is in attendance and immediately available at all times the service is in operation
  - f. ensure that all staff, including relief staff, are aware of the symptoms of an anaphylactic reaction, the child at risk of anaphylaxis, the child's allergies, the *Action Plan for Anaphylaxis*, and the location of the EpiPen kit
  - g. ensure that there are adequate adrenaline autoinjector kits provided and that they are regularly maintained
  - h. ensure the expiry date of the adrenaline autoinjector is checked regularly and replaced when required and the liquid in the EpiPen/EpiPen Jnr is clear.
2. When a child diagnosed as 'at risk' of anaphylaxis is enrolled the Child care Coordinator will:
  - a. identify children at risk of anaphylaxis during the enrolment process and inform staff
  - a. ensure the Enrolment checklist for children diagnosed as at risk of anaphylaxis is completed
  - b. ensure a copy of the child's *Action Plan for Anaphylaxis* is visible to all staff
  - c. ensure that all staff, including casual and relief staff, are aware of the child's diagnosis, their allergies and symptoms, and the location of their adrenaline autoinjector kits and *Action Plan for Anaphylaxis*

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<sup>1</sup> Anaphylaxis is a severe, life-threatening allergic reaction affecting up to two per cent of the general population and up to five per cent of children. The most common causes in young children are eggs, peanuts, tree nuts, cow's milk, bee and other insect stings, and some medications. A reaction can develop within minutes of exposure to the allergen but can be treated effectively with the use of an EpiPen.

- d. encourage the child's parents/guardians and staff to continuously exchange information regarding the current status of the child's allergies
  - e. ensure that no child who has been prescribed an EpiPen is permitted to attend the service or its programs without that EpiPen
  - f. ensure that the child's parent/guardian provides written consent to the medical treatment or ambulance transportation of a child in the event of an emergency, and that this authorisation is kept in the child's enrolment record
  - g. ensure that the child's parent/guardian provides written authorisation for excursions outside the service
  - h. ensure measures are in place to prevent cross-contamination of any food given to children diagnosed as at risk of anaphylaxis
  - i. ensure that staff accompanying the child outside the service carry a fully equipped adrenaline autoinjector kit along with the child's *ASCIA Action Plan for Anaphylaxis*
  - j. notify the child's parent/guardian and emergency services as is practicable if medication has been administered to the child in an anaphylaxis emergency without authorisation from a parent/guardian or authorised nominee
  - k. notify the child's parent/guardian as soon as is practicable if medication is administered to the child in the case of an emergency and update the child's medication record
  - l. review the adequacy of the response of the service if a child has an anaphylactic reaction and consider the need for additional training and other corrective action.
3. Staff responsible for a child at risk of anaphylaxis will:
- a. follow the child's *Action Plan for Anaphylaxis* in the event of an allergic reaction,
  - b. where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:
    - i. call an ambulance immediately by dialling 000
    - ii. commence first aid measures
    - iii. contact the parent/guardian
    - iv. contact the person to be notified in the event of illness if the parent/guardian cannot be contacted
  - c. ensure that medication is not administered to a child at the service unless it has been authorised and administered in accordance with the Medication Policy
  - d. allow the child to only eat food that has been specifically prepared for him/her
  - e. not allow trading or sharing of food, food utensils or containers with the child
  - f. if required, seat a highly allergic child at a table separate from other children when they are consuming food or drink containing or potentially containing the allergen. (Children with allergies should not generally be separated from other children and should be socially included in all activities.)
  - g. increase supervision of the child on special occasions such as excursions, incursions, or family days.
4. In the event of an allergic reaction, which may progress to an anaphylactic episode, staff will:
- a. follow the child's *ASCIA Action Plan for Anaphylaxis*
  - b. inform the House Manager and the child's parents/guardians following an anaphylactic episode.
5. In the event that a child who has not been diagnosed as at risk of anaphylaxis appears to be having an anaphylactic episode, staff will follow appropriate first aid procedures.

## 2. Asthma

### ■ Policy Statement

Caulfield South Community House is committed to:

- providing a safe and healthy environment for all children enrolled at the service
- providing an environment in which children with asthma can participate to their full potential
- providing a clear set of guidelines and procedures to be followed in the management of asthma
- educating and raising awareness about asthma among staff and parents/guardians

### ■ Application

This Policy applies to all employees and volunteers, parents and guardians, children and others attending the Child Care Service's programs and activities. Asthma management is a shared responsibility. Whilst Caulfield South Community House recognises its duty of care towards children with asthma during their time at the service, the responsibility for ongoing asthma management rests with the child's family and medical practitioner

### ■ Process

1. The House Manager will:
  - a. ensure that all child care staff are aware of asthma management strategies upon employment at the service
  - b. ensure that all child care staff undertake Emergency Asthma Management (EAM) training at least annually and that this is recorded in their training records
  - c. ensure that medication is administered in accordance with the Medication Policy.
2. The Child Care Coordinator will:
  - a. ensure that all child care staff are aware of this Policy and the asthma first aid procedure and that they can identify children displaying the symptoms of an asthma attack and locate their personal medication and their *Asthma Care Plan*.
  - b. ensure the expiry date of reliever medication is checked regularly and replaced when required, and that spacers and face masks are replaced after every use
  - c. ensure at least one staff member with current approved Emergency Asthma Management (EAM) training is on duty at all times
  - d. discuss with parents/guardians the requirements for completing the enrolment form and medication record for their child
  - e. provide parents/guardians with a copy of the service's Asthma Policy upon enrolment of their child
  - f. identify children with asthma during the enrolment process and inform staff
  - g. ensure that children with asthma can participate in all activities safely and to their full potential
  - h. identify and minimise asthma triggers for children attending the service, where possible
  - i. ensure that an asthma first aid kit is taken on all excursions and other offsite activities
  - j. compile a list of children with asthma and placing it in a secure, but readily accessible, location known to all staff. This should include the *Asthma Care Plan* for each child
  - k. ensure that induction procedures for casual and relief staff include information about children attending the service who have been diagnosed with asthma, and the location of their medication and *Asthma Care Plan*

- l. for a child with asthma:
  - i. provide the parents/guardians with an *Asthma Care Plan* to be completed in consultation with, and signed by, a medical practitioner
  - ii. ensure a medication record is kept for each child to whom medication is to be administered by the service
  - iii. ensure parents/guardians of all children with asthma, provide reliever medication and a spacer at all times their child is attending the service.
  - iv. Staff to ensure all asthma medication provided, is clearly labelled with the child's name and check expiry date.
  - v. develop an *Asthma Care Plan* in consultation with the parents/guardians
  - vi. file the child's *Asthma Care Plan* with their enrolment record
  - vii. immediately communicate any concerns with the child's parents/guardians regarding the management of their child at the service
  - viii. communicate any concerns to the parents/guardians if their child's asthma is limiting his/her ability to participate fully in all activities.

3. All staff will:

- a. identify and, where possible, minimise asthma triggers as outlined in the child's *Asthma Care Plan*
- b. administer prescribed asthma medication in accordance with the child's *Asthma Care Plan* and the *Administration of Medication Policy* of the service
- c. under no circumstances change the dosage of medication without referring to the child's family first
- d. advise parents/guardians of any observations made of a change in the child's condition
- e. under no circumstances allow a child to self-administer any asthma medications.
- f. ensure that when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable
- g. follow appropriate reporting procedures set out in Policy 17 Medical & Accident Emergency in the event that a child is ill or is involved in a medical emergency or an incident at the service that results in injury or trauma.



### 3. Child Safe Standards<sup>2</sup>

#### ■ Policy Statement

Caulfield South Community House is committed to:

- ensuring that all the children enrolled at the Child care Service feel safe and are kept safe
- making the welfare of the children at the Child care Service the first priority
- taking a zero tolerance approach to child abuse
- providing a child-friendly environment where children feel safe and have fun
- valuing diversity and applying non-discriminatory practices.

#### ■ Application

This Policy applies to all staff, volunteers and others involved at the Child care Service in relation to all children who use the Service.

#### ■ Process

1. The House Manager will:
  - a. apply best practice standards in the recruitment and screening of staff and volunteers
  - b. interview and conduct referee checks on all staff and volunteer applicants
  - c. require Police Checks and/or Working with Children Checks for relevant positions
  - d. include the House's commitment to child safety and the screening requirements in all vacancy advertisements
  - e. ensure that all staff and volunteers receive adequate and appropriate training on identifying and assessing, and minimising the risks of child abuse, and detecting potential signs of child abuse, along with the House's Code of Conduct
  - f. appoint Child Safety Personnel with the specific responsibility for responding to any complaints made by children, parents/guardians, staff of volunteers.
  - g. ensure there are risk management strategies in place to identify, assess, and take steps to minimise child abuse risks, which include risks posed by physical environments, and online environments
  - h. ensure that this policy is reviewed following any significant incident and at least every two years.
2. All Child Care staff will:
  - a. encourage children to express their views
  - b. listen to their views and respect what they have to say, particularly on matters that directly affect them
  - c. teach the children what they can do if they feel unsafe
  - d. listen to and act on any concerns the children or their parents/guardians raise
  - e. encourage family participation and a sense of community
  - f. respect and value the diversity of the local community
  - g. promote the cultural safety, participation, and empowerment of children from culturally and/or linguistically diverse backgrounds
  - h. promote the cultural safety, participation and empowerment of children from indigenous, aboriginal and/or first nations backgrounds
  - i. welcome children with a disability and their families, and act to promote their equal participation
  - j. foster children's curiosity, enjoyment and empathetic awareness of cultural differences and similarities and providing special cultural activities in response to the children's interest

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<sup>2</sup> Child safe policy and statement of commitment, Child safe standards toolkit: resource two, State of Victoria, Department of Health and Human Services, December 2015  
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- k. provide a range of materials that represent varied racial groups, in response to the children's interests, acknowledging the similarities and difference between cultural groups
  - l. provide support or written information for those families who have English as a second language
  - m. if they have a **reasonable belief** (see possible factors below), that an incident has occurred report the incident to the Child Safety Personnel:
    - i. a child states they or someone they know has been abused (noting that sometimes the child may in fact be referring to themselves)
    - ii. observing behaviour consistent with that of an abuse victim
    - iii. someone else has raised a suspicion of abuse but is unwilling to report it
    - iv. observing suspicious behaviour.
3. Child Safety Personnel will:
- a. investigate any allegation, concern or complaint from any source that there has been an incident
  - b. submit a report to child protection if they believe on reasonable grounds that a child is in need of protection from physical injury or sexual abuse
  - c. report to the Child Care Coordinator and/or House Manager the outcomes of their investigation with recommendations for action.

## **4. Clothing and Footwear**

### **■ Policy Statement**

Caulfield South Community House is committed to ensuring that each child is dressed appropriately and safely at all times.

### **■ Application**

This Policy applies to all staff and volunteers when organising activities for enrolled children and in particular, caring for children who are not toilet-trained.

### **■ Process**

1. When a child is dropped off at the Child Care Service wearing inappropriate clothing or footwear, such as thongs, the staff member welcoming the child will:
  - a. speak to the parent/guardian and ask them to change the child's clothing or footwear and remove the inadequate item/s from the Child Care Service
  - b. if the parent/guardian has no suitable alternative for the child, request that the child be removed from the Child Care Service and returned only when he or she is dressed appropriately.
2. If a parent/guardian provides insufficient changes of clothes or nappies for their child, the child care worker will advise the parent/guardian when they collect the child from the Child care Service.
3. If there are repeated instances of insufficient changes of clothes or nappies provided for a child, the Child Care Coordinator will consult with the parent/guardian.

## **5. Compliments and Complaints**

### **■ Policy Statement**

Caulfield South Community House is committed to:

- providing an environment of mutual respect and open communication
- dealing with disputes, complaints and complainants with fairness and equity
- maintaining confidentiality at all times.

### **■ Application**

This Policy applies to all employees and volunteers in their relationships with parents/ guardians handling compliments, disputes and complaints.

### **■ Process**

1. The House Manager will ensure that:
  - a. the following details are displayed prominently at the main entrance of the service:
    - i. the name and telephone number of the person to whom compliments, complaints and grievances may be addressed, and how to make an anonymous compliment, complaint or and grievance
    - ii. the address and telephone number of the Authorised Officer at the DEECD regional office
  - b. information on how to lodge a compliment, complaint or grievance is included on the House website
2. In responding to compliments, complaints or grievances, staff members will at all times:
  - a. provide a respectful, valuing, and informative acknowledgement
  - b. maintain their professionalism and integrity
  - c. comply with the House's Privacy and Confidentiality Policy.
3. If a parent/guardian raises any issues or concerns with any staff member:
  - a. the staff member will:
    - i. notify the House Manager if the complaint escalates and becomes a grievance
  - b. the House Manager will:
    - i. meet with the complainant in an attempt to resolve the issue
4. The House Manager must inform DEECD in writing within 24 hours of receiving a notifiable complaint.
5. All staff will work co-operatively with the Dept Education in any investigations related to grievances about the House, its programs or staff.

## 6. Confidentiality

### ■ Policy Statement

Caulfield South Community House is committed to:

- responsible and secure collection and handling of personal information
- protecting the privacy of each individual's personal information
- ensuring individuals are fully informed regarding the collection, storage, use, disclosure and disposal of their personal information, and their access to that information

### ■ Application

This Policy applies to all staff and volunteers in the collection, storage, use, disclosure and disposal of personal and health information relating to all current and prospective enrolments and their families.

### ■ Process

1. The House Manager will ensure that:
  - a. all personal records and documents relating to current and prospective enrolments and their families are maintained and stored securely, including electronic storage
  - b. a copy of this Policy, including the Privacy Statement, is prominently displayed at the Child Care Service and is available on request
  - c. all staff and volunteers are aware of their responsibilities in relation to the collection, storage, use, disclosure and disposal of personal and health information about prospective and current enrolments and their families.
2. When photos or video recordings are going to be taken at the Child care Service, the Child Care Coordinator will ensure that:
  - a. children and parents/guardians are notified
  - b. the parents/guardians of the children who are to be photographed or videoed provide informed and voluntary consent before the event.
3. All staff and volunteers will ensure that they do not disclose any child's enrolment at the House to anyone without the consent of the child's parent or guardian.
4. The Child Care Co-ordinator will respect the wishes of those parents who have indicated on their child's enrolment form that "no photos are to be used for social media or marketing purposes" and will refrain from doing so.
5. The Child Care Co-ordinator will check all photos of children displayed through-out the Child Care Service and to ensure appropriate permission has been received for display.

## 7. Drop-off and Collection of Children

### ■ Policy Statement

Caulfield South Community House is committed to:

- ensuring children are safely dropped off at and collected from the Child care Service
- fulfilling its duty of care to all children
- providing a welcoming environment to children and their families
- encouraging families to drop off and collect their child or children on time
- complying with all legislative requirements.

### ■ Application

This Policy applies to all Child Care employees and volunteers, the Approved Provider and Committee of Management in relation to the care of all children enrolled at the Child Care Service.

### ■ Process

1. The Child care Coordinator will ensure that:
  - a. educator-to-child ratios are maintained at all times children are in attendance at the service, including when children are collected late from the service
  - b. an attendance book/electronic device is provided for parents/guardians to:
    - i. to sign in their child when they are dropped off at the Child care Service, including the time of drop-off. Once the child has been signed in and the time entered, or the parent/guardian leaves the service, the staff members will be responsible for the supervision of the child.
    - ii. to sign out their child, including the time of collection. Once the child has been signed out, and the time entered, the parent/guardian will be responsible for the supervision of the child even while they are still on the premises
  - c. if a parent/guardian fails to sign a child in or out a staff member will complete this task.
2. Child care staff will:
  - d. refuse to allow a child to leave the service except with a parent/guardian or authorised nominee, or with the written authorisation of one of these except in the case of a medical emergency or an excursion
  - e. ensure that no child is taken outside the service premises on an excursion except with the written authorisation of a parent/guardian or authorised nominee
  - f. inform the Approved Provider as soon as is practicable, but within 24 hours, if a child has left the service unattended by an adult or with an unauthorised person
3. Where a staff member believes that a parent/guardian or authorised nominee may be ill, affected by alcohol or drugs, or not able to safely care for their child, staff will:
  - a. consult with the Child care Coordinator or House Manager, if possible
  - b. if a parent/guardian arrives at the House intoxicated or under the influence of other drugs, notify the police
  - c. complete the Incident, Injury, Trauma and Illness Record and file with the child's enrolment form.
4. When a child is to be collected by an unauthorised person, including where a parent/guardian or authorised nominee telephones the service to notify that such a person will be collecting the child, the Child care Coordinator will:
  - a. request that the parent/guardian or authorised nominee email the authorisation if it is possible to do so, detailing the name, address and telephone number of the person who will be collecting the child; and ensure that the email authorisation is stored with the child's enrolment record. Check the persons ID on collection of the child.

- b. if it is not possible for the parent/guardian or authorised nominee to provide authorisation via email, the House will accept a verbal authorisation provided that:
  - i. all details of the person collecting the child, including the name, address and telephone number of the person are obtained
  - ii. if the person to collect the child is unknown to the staff member in charge at the time, photo identification is obtained to confirm the person's identity on arrival at the service
- c. ensure that:
  - i. the attendance record is completed prior to the child leaving the service
  - ii. the child is not released where authorisation is not or cannot be provided by the parent/guardian or authorised nominee
  - iii. the House Manager is notified in the event that written authorisation is not provided, for further follow-up.
- 5. Where a parent/guardian or authorised nominee **has** notified the service that they will be late collecting their child, the Child care Coordinator will:
  - a. ensure that the educator-to-child ratios are maintained at all times children are in attendance at the service until the parent/guardian has arrived for collection
- 6. Where a parent/guardian or authorised nominee is late collecting their child and **has not** notified the service that they will be late, the Child care Coordinator will:
  - a. ensure that the educator-to-child ratios are maintained at all times children are in attendance at the service
  - b. contact the parents/guardians or the authorised nominee to request collection
  - c. inform the House Manager of the situation
  - d. designate somebody to continue to attempt to contact the child's parents/guardians and emergency persons
- 7. If the safety of the child or service staff is threatened or if they fear for the safety of the child, themselves or other service staff at any time Child care staff will:
  - a. contact police
  - b. within 24 hours of a serious incident, inform the Regulatory Authority (DEECD).

## 8. Enrolment and Orientation

### ■ Policy Statement

Caulfield South Community House is committed to providing access to child care services on an equitable basis, with the following provisos:

- at the end of each term, existing family enrolments will be given the first option to continue their enrolments
- in deciding whether to accept an enrolment, a child's developmental stage within the group will be taken into consideration
- in order to sustain active enrolments for the Child care Service, adequate age ratios amongst each group will be maintained wherever possible.

### ■ Application

This Policy applies to the House Manager, Child care Coordinator and all staff involved in managing applications for the Caulfield South Community House Child care Services, and orienting children into the service.

### ■ Process

1. On receipt of a Child care enrolment application, the Child care Coordinator will:
  - a. review the current vacancies for the child's age group
  - b. if there is no vacancy, notify the applicant when a vacancy may be available and invite them to place the child's name on the waiting list
  - c. if there is a vacancy and the child meets the required developmental stage, offer the applicant a place for the child, provisional on the provision of the necessary documentation and fees.
2. Once the applicant accepts the offer of a place, the Child care Coordinator will arrange a convenient time to introduce the child and family into the child care program and begin the orientation process.
3. **Prior to enrolment**, the Child care Coordinator will review the child's immunisation documentation to assess if it complies with requirements.
4. Whenever a child is accepted, the Child care Coordinator will:
  - a. review the enrolment application to identify any additional needs and make the necessary arrangements to ensure that these needs are addressed
  - b. keep the Immunisation History Statement on file
  - a. discuss the child's needs with the parents/guardians and develop an orientation program to assist them to settle into the program.
5. If a vacancy occurs,
  - a. the Child care Coordinator will offer the place to the family of the next suitable candidate on the waiting list
6. To assist a child's orientation into the service, child care staff will:
  - a. encourage parents/guardians to:
    - i. stay with their child as long as required during the settling in period
    - ii. make contact with educators and carers at the service, when required
  - b. assisting parents/guardians to develop and maintain a routine for saying goodbye to their child
  - c. share information with parents/guardians regarding their child's progress settling into the service
  - d. providing comfort and reassurance to children who are showing signs of distress when separating from family members.



## 9. Exclusion of Sick Children and Staff

### ■ Policy Statement

Caulfield South Community House is committed to maintaining a safe and healthy environment for all children and staff, and others who visit the Child care Service

### ■ Application

This Policy applies to all staff, children enrolled at the Child care Service, and others who visit the Child care Service, who present with symptoms of, or have been diagnosed with an infectious disease

### ■ Process

1. The Child care Coordinator will:
  - a. ensure that at least one staff member with current approved first aid qualifications is in attendance and immediately available at all times the service is in operation
  - b. when a child or staff member is sick, including those with cold sores, conjunctivitis, school sores, Gastroenteritis or head lice, exclude the sick child or staff member to prevent the introduction or re-introduction of infection into the House and avoid contagion of other children and staff.
2. If a staff member or child enrolled at the Child care Service is suspected of or is suffering from an infectious or vaccine-preventable disease, the Child care Coordinator will:
  - a. notify the House Manager immediately
  - b. contact the parents/guardians of the child and request that the child be collected as soon as possible
  - c. within 24 hours, notify the parents/guardians of all children enrolled at the Child care Service, and all other staff of the potential outbreak and displaying this information prominently
  - d. if the disease is confirmed, ensure that the staff member or child is not permitted to return to the Child care Service until the minimum exclusion period has expired and the staff member or child feels well and then only on presentation of a medical certificate confirming they can be readmitted.
3. If a staff member or child enrolled at the Child care Service is diagnosed with any of the specified diseases, the Child care Coordinator will notify the Department of Education and Early Childhood Development, respecting confidentiality at all times.
4. Staff will call the parents/guardians to remove their child from the service if the child:
  - a. has a fever of more than 37°C until their temperature, activity level and appetite are back to normal
  - b. has been prescribed antibiotics for an acute illness for at least 24 hours
  - c. is vomiting or suffering from diarrhoea until 24 hours after the vomiting/diarrhoea has stopped
  - d. has more than 2-3 soiled nappies
  - e. shows signs of being lethargic, not eating or has unusual energy levels
  - f. has cold sores until the sores have dried
  - g. has a heavy cough or cold, especially if the child has a green, snotty nose, until the cough/cold has eased
  - h. has school sores until the sores have dried
  - i. has conjunctivitis until the infection has cleared
  - j. head lice until lice treatment has commenced and there are no longer any live lice.

## **10. Food Safety**

### **■ Policy Statement**

Caulfield South Community House is committed to:

- providing a safe environment for all children and staff
- promoting good hygiene
- being flexible to individual needs

### **■ Application**

This Policy applies to all child care staff and volunteers in relation to the provision and consumption of food and drinks for the children

### **■ Process**

1. Parents are to pack and provide healthy snacks and lunches for their children. Parents are notified at the commencement of their child's enrolment to ensure the food provided does not contain nuts. CSCH is a nut free environment.
2. A Food Warning notice is displayed on the Child Care Service parent's notice board
3. If a child brings nuts, to the Child care Service, staff will:
  - a. remove the item and explain the reason to the child
  - b. give the item to the parent/guardian when the child is collected, advising them that the item is not permitted and the reasons.
4. If children with allergies are enrolled at the Child care Service, the Child care Coordinator will notify all parents/guardians whether celebration food, such as birthday cakes is permitted, and the alternatives, such as stickers, available.
5. All child care staff will:
  - a. provide water to the children throughout the day
  - b. encourage children to wash their hands before eating
  - c. making meal and snack times as relaxing and enjoyable as possible by having the children sit in a social manner at the table
  - d. sitting at the table with the children and having a snack also
  - e. be sensitive and flexible to individual needs, such as allowing a tired, hungry child to begin their snack earlier if necessary.

## 11. Gender Equity

### ■ Policy Statement

Caulfield South Community House is committed to providing all children with the opportunity to develop to their maximum potential, regardless of their gender, reflecting our commitment to nurturing each child's sense of self-worth, confidence and independence

### ■ Application

This Policy applies to the creation and continuing development of a curriculum that values each gender equally and providing equal opportunity for all genders to participate in all aspects of the program

### ■ Process

1. The Child care Coordinator will:
  - a. review the curriculum at least annually to ensure that it is not biased towards a particular gender and that all learning experiences are:
    - i. equally accessible
    - ii. enable children to develop understanding about the discriminatory nature of some social practices, behaviours and attitudes.
  - b. purchase only equipment that does not reinforce gender bias
  - c. remove resources that may not reflect gender equity.
2. All child care staff will:
  - a. treat all children equally and provide the same opportunities for all genders
  - b. encourage children to participate in all activities but respect their choices and acknowledge their play preferences
  - c. question attitudes, behaviours and values that may limit or hinder children's skills and potential
  - d. actively encourage all children to show empathy and healthy assertiveness, treating other children as equal
  - e. use language that does not reflect bias to any gender
  - f. give all children equal attention and time
  - g. choose books, songs, etc, that promote gender equity and
  - h. act as good role models who are not biased in any way.

## **12. Head Lice Policy**

### **■ Policy Statement**

Whilst recognising that parents/guardians have the primary responsibility for the detection and treatment of head lice, Caulfield South Community House is committed to working in a cooperative and collaborative manner to assist all families to manage head lice effectively.

### **■ Application**

This Policy applies to all staff in assisting with the treatment and control of head lice in a consistent and coordinated manner

### **■ Process**

1. In the event that live head lice are identified on a child at the Child care Service, child care staff will:
  - a. notify the parent/guardian to pick up the child immediately and not allow the child to return to the Child care Service until appropriate treatment has commenced
  - b. notify the parents/guardians of the other children at the Child care Service so they have an early opportunity to detect and treat their children if necessary
  - c. maintain a sympathetic attitude and avoid stigmatising or blaming the families of the children with head lice.
2. If a parent/guardian notifies staff that their child has live lice, staff will:
  - a. not allow the child to return to the Child care Service until appropriate treatment has commenced
  - b. notify the parents/guardians of the other children at the Child care Service so they have an early opportunity to detect and treat their children if necessary
  - c. maintain a sympathetic attitude and avoid stigmatising or blaming the families of the children with head lice
  - d. notify families each time a case of head lice is detected in the House.
  - e. provide up-to-date information parents/guardians via newsletters or Information Bulletins.
3. In the event that live head lice are identified on a staff member at the Child care Service, the staff member will not return to the Child care Service until appropriate treatment has commenced.

## **13. Immunisation**

### **■ Policy Statement**

Caulfield South Community House is committed to:

- providing a safe and healthy environment for all children, staff, volunteers and others involved with the Child care Service.
- providing advice and support to a child and their family, staff member or volunteer who presents to the Child care Service with symptoms of an infectious disease or infestation
- providing up-to-date information and resources for families, staff and volunteers regarding infectious diseases and infestation management and immunisation programs

### **■ Application**

This Policy applies to all the management of infectious diseases and infestations for the protection of all children, staff, volunteers and others visiting the Child care Service.

### **■ Process**

1. The Child care Service will not process a new enrolment for a child whose immunisations are not up-to-date. Families must provide documentation that shows the child:
  - is fully vaccinated for their age; or
  - is on a recognised catch up schedule if their child has fallen behind with their vaccinations; or
  - has a medical reason not to be vaccinated
  - if a child has received vaccinations outside of Australia, a letter from an Australian GP must be obtained to confirm vaccinations meet the Australian requirements.
2. The Child care Service can offer a Grace Period of up to 16 weeks. During this time, an up-to-date immunisation record must be supplied to the Child care Service to finalise the enrolment process.
3. During an outbreak of some infectious diseases (such as measles and whooping cough), child care staff will exclude a child whose immunisations are not up-to-date from the Child care Service for precautionary measures.

## **14. Infection Control**

### **■ Policy Statement**

Caulfield South Community House is committed to maintaining a safe and healthy environment for children, staff, volunteers and others involved with the Child care Service, including the prevention of the spread of infectious diseases such as HIV, Hepatitis B and Hepatitis C.

### **■ Application**

This Policy applies to all staff and volunteers when handling or dealing with blood, faeces, urine, sweat and tears.

### **■ Process**

1. When dealing with blood, all staff and volunteers will:
  - a. treat all blood as potentially infectious
  - b. locate the first aid kit and notify a first aid qualified staff member
  - c. wear disposable gloves
  - d. cover open wounds with a waterproof dressing
  - e. clean spills.
2. When cleaning blood and body fluids with disinfectant or cleaning detergent, all staff and volunteers will:
  - a. wear disposable gloves
  - b. apply absorbent paper to soak up the substance
  - c. clean the surface with detergent and hot water
  - d. dry the area so that it is not slippery
  - e. ensure all children are well clear of the affected area and are safe
  - f. place used gloves and paper towel in a plastic bag, seal the bag and dispose of it in the appropriate bin
  - g. wash their hands thoroughly.

## 15. Interactions with Children

### ■ Policy Statement

Caulfield South Community House is committed to:

- considering the health, safety and wellbeing of each child, and providing a safe, secure and welcoming environment in which they can develop and learn
- maintaining its duty of care towards all children at the service
- building collaborative relationships with families to improve learning and development outcomes for children
- encouraging positive, respectful and warm relationships between children and staff and volunteers.
- the development of positive and respectful relationships with each child at the Child care Service
- supporting each child to learn and develop in a secure and empowering environment

### ■ Application

This Policy applies to all employees and volunteers and their behaviour in respect to the children at the Child care Service and their families

### ■ Process

1. All staff will be positive and respectful and model appropriate behaviour when working with children and families.
2. All staff will:
  - a. ensure that there is supervision of children at all times
  - b. communicate and work collaboratively with parents/guardians and families in relation to their child's learning, development, interactions, behaviour and relationships
  - c. deliver educational programs, in accordance with an approved learning framework,
  - d. staff will observe the children's interests, then develop and deliver a program that incorporates their interest
  - e. deliver programs that develop a sense of wellbeing and identity, connection to community, and provide skills for lifelong learning in all children
  - f. develop a program that develops inclusiveness and acceptance of all children's needs
  - g. provide education and care to the children in a way that:
    - i. encourages them to express themselves and their opinions
    - ii. allows them to undertake experiences that develop self-reliance and self-esteem
    - iii. maintains the dignity and the rights of each child at all times
    - iv. offers positive guidance and encouragement towards acceptable behaviour
  - h. support each child to develop responsive relationships, and to work and learn in collaboration with others
  - i. use positive and respectful strategies to assist children to manage their own behaviour, and to respond appropriately to conflict and the behaviour of others
  - j. be aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
  - k. maintain confidentiality at all times.

## 16. Lock-down and Lock-out

### ■ Policy Statement

Caulfield South Community House is committed to ensuring the safety of all children by:

- locking down the premises immediately an external and immediate danger is identified, and it is determined that the children should be secured inside the building for their own safety
- locking the children out of the premises when an internal immediate danger is identified, and it is determined that the children should be excluded for their safety.

### ■ Application

This Policy applies to all staff and volunteers when the children are under threat from an external source.

### ■ Process

#### Lock-down

1. As soon as an external and immediate threat is identified, the Child care Coordinator will:
  - a. call **000** for emergency services and seek and follow the advice
  - b. initiate the lock-down and instruct staff as necessary to:
    - i. close internal doors and windows
    - ii. remain in the child care services indoor room
  - c. check that all external doors (and windows if appropriate) are locked
  - d. notify parents/guardians and returning groups to not come to the facility until the incident is over
  - e. ensure a telephone line is kept free.
  - f. keep the main entrance as the only entry point – it must be constantly monitored, and no unauthorised people allowed access
  - g. ensure that all children, staff, volunteers and visitors are accounted for
  - h. if it is safe to do so, have a staff member wait at the main entry to the facility to guide emergency services personnel.
  - i. as appropriate, confirm with emergency services personnel that it is safe to return to normal operations.
  - j. maintain a record of actions/decisions undertaken and the times
  - k. contact the children's parents/guardians as required.
2. After a lock-down, the Child care Coordinator will:
  - a. ensure that support is provided to any children, staff, volunteers or visitors with medical or other needs
  - b. when appropriate activate the parent/guardian reunification process
  - c. distribute a prepared communication to parents/guardians as appropriate
  - d. undertake an operational debrief with staff to identify any lock-down and procedural changes required
  - e. report any serious incidents to the relevant DET officer in the region (Services operating under the *Children's Services Act 1996* refer to practice note Serious incidents available at:  
[www.education.vic.gov.au/childhood/providers/regulation/Pages/vcspracnotes.aspx](http://www.education.vic.gov.au/childhood/providers/regulation/Pages/vcspracnotes.aspx))



**Lock-out**

3. As soon as an internal and immediate threat is identified, the Child care Coordinator will:
  - a. call **000** for emergency services and seek and follow the advice
  - b. announce the lock-out with instructions about what is required, such as nominating staff to check the premises for anyone left inside and collect the Emergency Kit
  - c. assemble the children, staff, volunteers and visitors to the most identified assembly area:
  - d. check that all children, staff, volunteers and visitors are accounted for
  - e. where appropriate, confirm with emergency services personnel that it is safe to return to normal operations
  - f. maintain a record of actions/decisions undertaken and times
  - g. contact the children's parents/guardians as required.
4. After a lock-out, the Child care Coordinator will:
  - a. ensure that support is provided to any children, staff or visitors with medical or other needs are supported
  - b. determine whether to activate the parent/guardian reunification process
  - c. distribute letters to parents/guardians as appropriate
  - d. undertake an operational debrief with staff and the Incident Management Team to identify any lock-out and procedural changes required
  - e. report any serious incidents to the relevant DET officer in the region  
(Services operating under the *Children's Services Act 1996* refer to practice note Serious incidents available at:  
[www.education.vic.gov.au/childhood/providers/regulation/Pages/vcspracnotes.aspx](http://www.education.vic.gov.au/childhood/providers/regulation/Pages/vcspracnotes.aspx))

## 17. Medical & Accident Emergency

### ■ Policy

Caulfield South Community House is committed to ensuring the children's wellbeing at all times by:

- providing a safe and healthy environment for the children
- developing, monitoring and practising sound accident prevention strategies
- responding to and treating any injury quickly and appropriately to prevent an exacerbation of the situation
- keeping parents/guardians informed of any accidents or injuries that affect their child.

### ■ Application

This Policy applies to the management of an injury to any child while in the care of Child care Service staff.

### ■ Process

The House Manager will ensure that emergency procedures are displayed in high visibility areas throughout the House

1. If a child suffers a **minor injury**, the staff member involved will:
  - a. administer basic first aid as quickly and effectively as possible to prevent any serious harm or secondary issues
  - b. complete and sign an Accident Report in the presence of a witness
  - c. inform the parent/guardian by phone at the time of the injury or when they arrive to collect their child
  - d. request the parent/guardian to sign an acknowledgement of the injury in the Accident Book
  - e. provide the Accident Report to the Child care Coordinator for information and filing in the accident file.
2. If a child suffers a **major injury**:
  - a. the staff member involved will:
    - i. if emergency treatment is required ask a co-worker to call for an ambulance and notify the Child care Coordinator immediately
    - ii. administer basic first aid as quickly and effectively as possible to prevent any serious harm or secondary issues
    - iii. stay with the child until the ambulance officers arrive
    - iv. a staff member of the House to travel in the ambulance in the absence of a parent, guardian or emergency contact person
    - v. document clearly and specifically all the details of the incident in the Child Accident Report and sign it in the presence of a witness
    - vi. provide the Accident Report to the Child care Coordinator
  - b. a co-worker will take the other children to another part of the premises
  - c. the Child care Coordinator will:
    - i. immediately notify the child's parents/guardians by phone of the incident and whether medical aid or hospitalisation is required
    - ii. immediately notify the House Manager and a Committee Member or, if unable to contact the House Manager, one of the Committee of Management Executives
    - iii. request the parent/guardian to sign an acknowledgement of the injury in the accident book
    - iv. undertake an investigation into the incident within 24 hours
    - v. within 48 hours, provide a report outlining the accident to the Secretary of the Department of Education and Early Childhood Development

- vi. arrange for counselling for the child and other children, families and staff as required.

## **18. Medication**

### **■ Policy Statement**

Caulfield South Community House is committed to

- providing a safe and healthy environment for all children, staff, volunteers and others at the Child care Service
- responding immediately to the needs of a child who is ill or becomes ill while attending the service
- ensuring that medication is administered safely and appropriately.

### **■ Application**

This policy applies to all staff in relation to the administration and storage of medication.

### **■ Process**

1. Whenever a parent/guardian provides medication for their child, staff will:
  - a. Check the use by date of the medication
  - b. immediately place the medication in the House fridge or the first aid cupboard as appropriate
  - c. ensure that the parent/guardian enters the following medication information in the Medication Book:
    - i. Date of entry and Child's full name
    - ii. Name of medication and dosage to be given
    - iii. Date and time of requested dose including, for precautionary medication, the symptoms that need to be present before medication should be given, eg. if wheezing commences, or if the child's temperature rises above 37 degrees
    - iv. Why the medication is required
    - v. The parent's/guardian's signature authorising the administration of the medication
  - d. ensure that, if a parent/guardian requests a change to the dosage written on the container, whether or not it is over the counter or prescribed medication, the parent/guardian provides a letter signed by the child's doctor authorising the change in dosage. (If no such letter is provided, only the dosage that is written on the medication container may be administered and the parents/guardians contacted and informed accordingly.)
2. All staff will ensure that, when arranging to administer authorised medication to a child that:
  - a. two staff with Level II First Aid Training are present
  - b. prior to administering the medication, both staff check and witness that:
    - i. the parent's/guardian's details entered into the Medication Book are the same as those written on the medication label – child's name, dosage, correct time since previous dosage
    - ii. the correct dosage is prepared for the child in question
    - iii. the full dosage is administered to the correct child.
  - c. medication is never left in a position where it is accessible to children.
  - d. once the medication has been administered to the child, both staff members complete and sign the medication administration forms.
3. When a parent/guardian arrives to collect their child, staff will invite them to check and sign the medication administration details in the Medication Book to acknowledge that the requested medication has been given, the dosage and the time administered.

4. When a child suffers from an ongoing condition, such as Asthma or Epilepsy, which requires prolonged or preventative medications, staff will refer to the *Medical Management Plan* signed by the child's doctor and provided by the parents/guardians at the time of enrolment or onset of the illness.

## 19. Qualified Staff

### ■ Policy Statement

Caulfield South Community House is committed to providing only staff qualified in accordance with the *Children's Services Regulations 2009* to care for and educate all children left in care at the House.

### ■ Application

This Policy applies to the employment and engagement of child care staff.

### ■ Process

1. The House Manager will ensure that:
  - a. all staff employed to care for and educate all children left in care at the House, hold the qualifications specified in the *Children's Services Regulations 2009*
  - b. copies of each staff member's qualifications are kept on the premises at all times
  - c. if a qualified staff member is absent, they will be replaced by another qualified staff member employed by the House or, if necessary, a qualified staff member from an employment agency
  - d. ongoing training opportunities are provided for staff to enhance their professional development.

## **20. Safe Sleep Safety Policy**

### **Policy Statement**

Caulfield South Community House is committed to ensuring that each child is safe and supervised while sleeping/resting during the day.

### **Application**

This Policy applies to Child Care staff, educators and volunteers who assist in the process of putting children to bed during rest time.

### **Process**

The Child Care Co-ordinator will seek (upon enrolment) information about the child's sleep routine which relate to their values and beliefs and how this will occur at the centre.

Families will:

- provide the sheets, blanket/sleeping bag in a labelled bag.
- be encouraged to provide any sleep comforting objects eg; dummy, sleep toy, sleeping bag etc.

Educators will:

- Only 1 child per bed at a time.
- Ensure there are adequate numbers of beds that meet the Australian Standards.
- Ensure the mattresses are clean and in good condition.
- Position the beds with unobstructed access to assist in managing emergency situations and to reduce the risk of cross infection or injury.
- Provide children with a safe sleeping environment removing from reach all potential dangers including cords or electrical appliances.
- Ensure the room temperature and sleep linen is appropriate for the climate.
- Create a relaxing atmosphere for resting children by playing relaxation music, turning off lights and ensuring children are comfortably clothed.
- Sit with children and support them by encouraging them to relax and listen to the sleep music. Educators may gently sooth the child's head to help relax them.
- Encourage children to rest their bodies and minds for 20/30 minutes. If children are awake after this time, they will be provided with quiet activities for the duration of rest time.
- Children's rest requirements will be accommodated according to their individual needs.
- Ensure the children are always supervised whilst asleep.

- Communicate with families about their child's sleep or rest times either via direct communication at the end of the day at pick up or via the Xplore app where it can be recorded for that day.
- Make sure that no children are wearing necklaces/ bracelets at sleep time. It must be removed while sleeping as it is a choking hazard.
- Ensure that if a child falls asleep or chooses to fall asleep/rest in a space (besides on a mattress), educators will complete a risk analysis to ensure they are resting/sleeping safely. If they are not resting/sleeping safely, educators will safely and respectfully move the child onto a mattress.
- Respect a child's dignity and rights by ensuring children are not forced to rest on a mattress if they choose not to.

## **21. Sun Smart**

### **■ Policy**

Caulfield South Community House is committed to providing a SunSmart environment for children and staff and volunteers to protect them from skin damage caused by the harmful UV rays of the sun

### **■ Application**

This Policy applies to all child care activities throughout the year, and particularly in warmer weather, and to all children, and staff, volunteers and other adults involved at the Child care Service

### **■ Process**

1. The Child care Coordinator will ensure that:
  - a. every child is provided with a legionnaire style hat upon enrolment
  - b. sunscreen with protection Factor 50 is always available at the House
    - parents are encouraged to apply sunscreen to their child prior to leaving
    - alternatively, sunscreen is applied to each child prior to going outside
    - if a child has an allergy or sensitivity to sunscreen, parents must provide an appropriate alternative for staff to apply sunscreen must be clearly labelled and left in child's bag
  - c. SunSmart information is displayed as a reminder of this SunSmart Policy.
2. Child care staff will:
  - a. ensure that children, staff, volunteers and others involved at the Child care Service, wear hats and use shaded areas during the warmer weather and always during terms 1 and 4
  - b. if a child does not have a sun hat that protects their face, neck and ears, or clothing that protects both their shoulders and backs, and footwear that covers their feet
  - c. if a child refuses to wear a sun hat that protects their face, neck and ears, keep the child inside with adequate supervision or, if this is not an option, require the child to play only in the shaded area outside
  - d. if a child's hat is not clearly labelled, write the child's name on the inside rim of the hat
  - e. discuss the importance of skin care and sun protection with children in regard to keeping safe and healthy and reinforce SunSmart behaviour in a positive way
  - f. ensure that:
    - i. water is available at all times and offered to the children frequently

- ii. time is allocated during the session for children to stop what they are doing, sit quietly and have a drink.

## **22. Supervision of Children**

### **■ Process**

The House is committed to providing the required staff/child ratio to ensure a safe and healthy environment for all children

### **■ Application**

This Policy applies at all times whenever children enrolled at the Child care Service are present

### **■ Process**

1. Staff will ensure that:
  - a. at all times, the staff/child ratio is met in all areas where there are children, including when running indoor and outdoor programs simultaneously
  - b. no child or group of children is left unattended at any time
  - c. a qualified staff member is present at all times, at no stage are children left only with students or volunteers
  - d. if a staff member needs to leave the child care area where they are responsible for the supervision of children, they first call upon another staff member or volunteer to relieve them
  - e. when a child is using the bathroom, one staff member is positioned within the room to supervise and/or assist them
  - f. whilst outside, they place themselves in positions that allow supervision of the whole play yard and door entrances
  - g. they are always in a position that allows them to react to different situations quickly.



## **23. Updating Records**

### **■ Policy Statement**

Caulfield South Community House is committed to maintaining up-to-date records for the children enrolled at the Child care Service

### **■ Application**

This Policy applies to the management of all enrolment and other records for the children enrolled at the Child care Service

### **■ Process**

1. The Child care Coordinator will update the child's records whenever a parent/guardian advises a change (by way of email or a clearly outlined document) to any pertinent information such as the following:
  - a. the child's or parent's/guardian's address and/or phone number
  - b. the persons authorised to collect the child
  - c. the child's health and immunisation records
  - d. the parent's/guardian's employment details.

## 24. Water Safety Policy

### ■ Policy Statement

Caulfield South Community House is committed to ensuring that each child is safe and supervised in and around water.

### ■ Application

This Policy applies to all staff and volunteers when organising activities for enrolled children.

### ■ Process

#### Educators will:

- Provide direction and education about Water Play and the importance of the children's safety in and around water and ensure the health and safety of storing water for water play.
- Ensure water safety is incorporated into the program.
- Provide current information to families about water safety.
- Water hazards and risks associated with water-based activities will be considered in a risk assessment prior to conducting water play activities or near the premises that may be accessible to the children.
- Ensure at least one educator holds a current first Aid qualification is in attendance.
- Ensure any containers that holds or collects water, must be safely covered, or made inaccessible to children or water emptied when not in use.
- Always supervise children near water.
- Children are never left alone near water.
- Utilise water activities in appropriate weather.
- When using the water trough for water play, make sure it is used with a stand, filled to a safe level and that all children must remain standing while playing with the water. After play is finished, the water must be emptied appropriately and safely and hygienically cleaned and disinfected for next time.
- Monitor the tap and make sure it is turned off when not in use.
- Hot water taps will be always inaccessible to children.
- Mop buckets will be emptied immediately after use if educators are required to mop an area.
- Ensure all children do not drink the water from water play and will have access to clean water by having the children's drink bottles nearby.
- Safe drinking water is always accessible to children and continually monitor the water to ensure it is stored hygienically and safe for consumption. Children's cups or bottles will be washed when required.
- Ensuring permission is obtained from Parents/Guardians for an excursion to a location where there is a water hazard.

## Appendix A: Forms and Templates

- |   |
|---|
| • Development Record                          |
| • Child care Enrolment Application            |
| • Food Safety Plan TEMPLATE                   |
| • Health Issue Notice TEMPLATE                |
| • Incident, injury, trauma and illness record |

**Commented [LM1]:** links to existing forms and new templates to be inserted.