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ABOUT THE SERVICE

Oakleigh Outside School Hours Care (OSHC) has been operating since 1990. Over the years the service has grown and now provides care for Before School, After School, Vacation breaks and on Pupil Free Days.

At Oakleigh the Management Committee, staff, parents and children work as a team.

We encourage parents to become involved with the centre and the OSHC management committee. We value your ideas and feedback—your contribution is important to ensure Oakleigh OSHC continues to provide quality care, age-appropriate, affordable care which promotes children’s wellbeing with an opportunity for child-initiated planning.

Please read this booklet carefully as it contains important information for you and your children. A copy of the Oakleigh OSHC Policy and Procedures Manual is also available at the OSHC Centre for parents to read.

If you have any questions or concerns about OSHC please feel free to discuss these with the Coordinator or a member of the Management Committee.

Oakleigh OSHC is licensed under the Education and Care Services National Law and complies with the Education and Care Services National Regulations with requirements relating to activities, experiences and programs, numbers of staff members and children and the qualifications relating to staff.

Service Philosophy

This Philosophy Statement provides the foundation for all activities, policies and procedures of the Service. Wherever there is uncertainty as to the Service’s policy or procedure on any issue, the Service uses these principles and philosophies to help resolve the issue. The written policies and procedures of the Service have been developed, and will be monitored and reviewed with these values in mind.

The values which underpin this Service’s provision of a quality service are:

- Provision of an environment which is safe and protects children from harm.
- Respect for children’s dignity and privacy.
- Recognition of children’s individual physical, emotional and social needs.
- Promotion and development of life skills.
• Support for positive and enjoyable experiences.
• Consideration of open discussion on all issues relevant to the Service’s operation.
• Encouragement of family, staff and community involvement via committee membership and general support.

AUTHORISATIONS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all legislated authorisations are sought and obtained when and where is required.

PROCEDURES
1. All authorisations required under the legislation and regulations shall be identified.
2. Where authorisations are required, the proper procedures will be followed at all times.
3. Authorisations will be checked prior to undertaking the nominated activity.
4. All authorisations will be checked to ensure that they have been completed correctly and signed by the parent or person with suitable authority.
5. Any authorisation not completed correctly or not signed by a parent or person with suitable authority will be rejected by the nominated supervisor and returned to the person for completion.
6. No activity that requires an authorisation shall proceed if an accurately completed authority has not been received by the centre/school.

REFERENCE
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
BEHAVIOUR GUIDANCE
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall provide positive guidance to the children in our care that at all times that reinforces the rights of individuals and demonstrates the value of understanding, dignity and empathy.

PROCEDURES
RULES FOR BEHAVIOUR
Established rules will be understood and accepted by children;
Staff will be consistent in their implementation of these rules. The OSHC rules are;

- Always use good manners
- Keep your hands and feet to yourself
- Treat others with respect
- Don't swear or use bad language
- Use and return equipment properly and tidy up when finished
- Stay with a carer at all times and never go out of bounds
- Stay seated while eating
- Listen when others are talking
- No running or sliding in the Centre
- Stay safe and have as much fun as possible

Oakleigh OSHC aims to maintain appropriate discipline through positive reinforcement of acceptable behaviours. Behaviour which is endangering the safety or welfare of anyone involved in the program, or the smooth running of the program, will be managed firmly and consistently in accordance with set procedures.

Unacceptable behaviour is managed with understanding and with respect for the dignity and rights of the child.

REFLECTION TIME
Reflection time is to be used to withdraw a child from an activity when there is minor misbehaviour or they are being continually disruptive e.g. name calling, being nasty to others, not complying with games, jumping out of turn, dirty looks, pushing etc.

1st Incident
Staff member is to give the child a verbal instruction to cease the behaviour. The Child’s play or activity to continue for the child.
2nd Incident
Child is to be withdrawn from the activity to sit beside the Staff member for 5 minutes.

During this time the child needs to explain to the Staff member what they have done, why they are continuing to do it and why it is not appropriate. The Staff member needs to discuss with the child why this is inappropriate and encourage the child to explain why they should not do it and what they could have done differently.

After the 5 minutes the child may resume the activity.

3rd Incident
Child is to be withdrawn from the activity to sit beside the Staff member for 10 minutes.

Staff Member to complete an “Incident Report”.

Once the 10 minutes is complete the child moves to a quiet indoor activity, they are not allowed to go back to the activity from which they were withdrawn.

Further Incidents relating to the child for that session.

The child will be required to sit outside the office door and read a book until their parents (who will have been contacted) arrive.

The Co-ordinator, in consultation with the Management Committee, may advise parents verbally and in writing that their child may not return to the Centre until parents have met with the Management Committee to discuss further strategies to deal with the behaviour issues. Serious misbehaviour may result in continued suspension and ultimately exclusion. Strategies agreed between the parents, Co-ordinator and Management Committee will be confirmed in writing before the child returns to the Centre.

Unacceptable behaviour during Vacation Care and Pupil Free Days may result in a child being excluded from programmed activities and excursions.

EXCLUSION FOR BEHAVIOURAL REASONS POLICY

The Service has a Duty of Care to all children who attend and staff who work within, the Service. If:

-a child exhibits inappropriate behaviour, or behaviour which threatens the safety or wellbeing of any child or other person in the Service, or smooth running of the program

-in the Co-ordinator’s reasonable opinion, the behaviour amounts, or may amount, to a threat to the safety or wellbeing of any child or other person in Service; and

-the behaviour support and management procedures have been properly applied first but without success, or the behaviour presents such an immediate potential threat that it is not reasonably possible to apply those procedures, then the child whose behaviour is inappropriate or has caused the threat to safety or wellbeing may be excluded from the Service temporarily or, in some cases permanently.
This will also apply if the child;
- refuses to comply with “time-out”
- runs away,
- causes deliberate damage to equipment or vandalism
- has been fighting

First, second and third instance breach of rules which is unacceptable behaviour:

Staff member who was present will write an incident report detailing the incident. Staff member to sign the report and parent/guardian and child requested to do so.

Third incident:
In addition to the above steps, after a third incident has been recorded a letter will be sent to the parent/guardian from the Management Committee, stating that the child cannot return to the Service for one week.

At the end of that week, a meeting will be held between the Co-ordinator, parent and child to discuss possible strategies for including the child back into the program. If the child is included back and the same behaviour continues upon return, the child will be excluded permanently from the Service.

Physical danger to child or others:
If a child’s behaviour causes or may reasonably cause physical danger to other children, staff or the child himself or herself, the parent/guardian of that child will be contacted immediately and asked to collect the child.

The child will be excluded from the program effective immediately and the lifting of the exclusion will be at the discretion of the Co-ordinator and Management Committee.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Dept of Education and Children’s Services SA
5. Article “Successfully dealing with a child who bites” www.careforkids.com.au
BOMB THREAT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all workers are aware of appropriate practices to minimise the risks associated with a bomb threat emergency.

PROCEDURES
1. ACTIONS to be undertaken when a Bomb Threat is received:
   1.1 Try to remain calm;
   1.2 Let caller finish their message;
   1.3 Keep caller on line as long as possible;
   1.4 DO NOT HANG UP – the telephone company may be able to trace the call;
   1.5 Obtain as much information as possible about the bomb;
   1.6 Report the threat immediately to the Nominated Supervisor;
   1.7 The Nominated Supervisor shall immediately report the matter to Police

2. THREAT EVALUATION
   2.1 In order to make a realistic evaluation of the threat, the Nominated Supervisor and Police must be in possession of as much information as possible;
   2.2 Over-reaction to bomb threats shall be avoided by sensible evaluation;
   2.3 A telephone bomb threat may be assessed as:
      2.3.1 Non-specific call – usually the caller will give very little information before terminating the call.
      2.3.2 Specific call – the caller gives specific information and, sometimes, reasons for the threat and the general location of the explosive device.
   2.4 The non-specific threat is more common, but neither can be immediately discounted without further investigation;
   2.5 The decision to evacuate will be made by the Nominated Supervisor, in consultation with the Police.
   2.6 The safety of the children is paramount and supervision ratios for evacuated children shall be the first consideration;

3. Issue of an All Clear:
   3.1 After the QLD Police Service provide the ‘all clear” notice to the Nominated Supervisor he/she shall make suitable enquiries to ensure that the children have not been unduly affected by the incident.
   3.2 The Nominated Supervisor shall formulate an advice to parents for what has occurred and distribute the advice as soon as practicable based on the specific circumstances of the case.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
BUSINESS PLANNING
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall undertake an effective business planning process to enhance operation and our service delivery.

PROCEDURES
1. ANNUAL STRATEGIC PLANNING
1.1 Senior management will undertake a four level analysis of the Centre looking at:
1.1.1 Strengths – what have been our strong points over that past year?
1.1.2 Weaknesses – where have we not done as well as we could have?
1.1.3 Opportunities – how can we improve and grow?
1.1.4 Threats – what circumstances currently exist or could exist that would harm our business?
1.2 Information will be gathered to enable the development of a list of proposed actions;
1.3 The proposed actions will be listed hierarchically based on the overall long term business goal and the operational mission statements.

2. FINANCIAL PLANNING
2.1 In conjunction with the annual strategic plan, senior managers will develop a financial plan, or budget, that will provide a clear picture of the required performance in both income and expenditure;
2.2 Monthly and quarterly income targets shall be set based on a simple formula of fees x projected occupancy;
2.3 Monthly and quarterly expenditure targets shall be set based on known operating costs for the service;
2.4 All expenditure budget categories shall be able to be directly linked to the items in the strategic plan;
2.5 Provision shall be made for long term cost items such as staff leave entitlements, equipment replacement and building maintenance.

3. STAFF APPRAISAL/PERFORMANCE REVIEW
3.1 All staff shall undertake a 3 month probationary and an annual appraisal cycle;
3.2 The goal of the appraisal cycle is continuous improvement of both the individual staff member and the overall service delivery;
3.3 Staff appraisals shall be linked to both the strategic plan performance goals and the financial plan targets;
3.4 The appraisal process is two-way, with staff being encouraged to make suggestions on improved processes and service delivery;
3.5 Information gathered during this process shall be documented and used as a part of the business planning process.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
CHILD SAFETY AND PROTECTION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall actively and conscientiously maintain an environment where children are safe and they are protected from harm.

PROCEDURES

1. STAFF RECRUITMENT
1.1 The appointment of experienced and professional staff shall be the goal of each recruitment exercise;
1.2 In making any decision in relation to the appointment of any staff member, an evidenced-based structured decision making process shall be used;
1.3 This process will use (but is not limited to) such methods as:
   1.3.1 Viewing the Queensland government positive suitability notice (blue card) issued by the Commissioner for Children and Young People;
   1.3.2 Police records checks shall be undertaken on the successful applicant;
   1.3.3 Written references and direct verbal referee reports from previous employers in the child care sector, including the person’s supervisor will be checked.

2. WORK EXPERIENCE, VOLUNTEERS & OTHER VISITORS
2.1 All work experience students, volunteers and other visitors to the centre shall at all times be accompanied and supervised by a staff member;
2.2 Where appropriate, Queensland government positive suitability notice (blue card) issued by the commissioner for Children and Young People shall be required and police records checks shall be undertaken;
2.3 Staff shall undertake professional development that enables the identification of risk areas where work experience students, volunteers and other visitors are concerned.

3. STAFF PROFESSIONAL DEVELOPMENT
3.1 All staff shall undertake annual profession development that specifically relates to the identification and reporting of “harm” to a child;
3.2 The professional development is to be delivered by a professional training organisation or a recognised authority in the specific field.

4. RISK MANAGEMENT AREAS
4.1 The Service shall adopt a Risk Management approach to protect those in our care;
4.2 Specific areas for management will include:
   4.2.1 Communication with the child;
   4.2.2 Self-disclosure;
   4.2.3 Physical contact;
   4.2.4 Location; and
   4.2.5 Favouritism.
4.3 Any observation by any staff member of a breach in these areas shall immediately and urgently report them to the Nominated Supervisor.

5. COMMUNICATION
5.1 No staff member shall make overt personal or suggestive comments regarding a child’s appearance;
5.2 No person shall hold conversations of a sexual nature with children;
5.3 No staff member shall use inappropriate pet names for children;
5.4 No staff member shall use obscene language or gestures, or share explicit jokes;
5.5 No pornographic or overtly sexual material is permitted on site;
5.6 No staff member shall seek or develop any external contact of any kind with a child without the consent of the Nominated Supervisor or and the child’s parents.

6. SELF DISCLOSURE
6.1 No staff member will discuss personal details of their lifestyle choices with the children;
6.2 No staff member will discuss the lifestyle choices of other staff or centre families with the children;
6.3 All staff will maintain confidentiality at all times and will not share personal information about other staff or children.

7. PHYSICAL CONTACT
7.1 At no time will there be any unwarranted and/or inappropriate touching of a child;
7.2 At no time shall a staff member encourage or permit inappropriate physical contact (for example, a massage).

8. LOCATION
8.1 No staff member shall invite a child to their home without suitable justification;
8.2 No staff member shall be alone with a child after hours;
8.3 No staff member shall drive a child unaccompanied unless it is in accordance with the centre policy on child transportation (See section 10).

9. FAVOURITISM
9.1 At all times, all children shall be treated equally and without specific favour;
9.2 Rewards for achieving specific goals shall be consistent and predetermined;
9.3 No staff member shall be permitted to give a gift to any one child (this does not include such events as birthdays where each child receives a gift on their birthday);
9.4 The value of any approved gift (such as birthday or Christmas) shall not exceed a pre-determined maximum amount per child.

10. CHILD TRANSPORTATION IN STAFF/SERVICE VEHICLES
10.1 Any driver must be licensed to drive the class and type of vehicle;
10.2 The motor vehicle must be registered;
10.3 Current driver’s licence and car registration details must be documented by the Nominated Supervisor prior to giving permission for children to be transported in the vehicle;
10.4 Written permission from the parent(s) of the child(ren) being transported is obtained;
10.5 All drivers transporting children in private motor vehicles must hold a current “Positive Notice for Child Related Employment” prior to the activity;
10.6 A fully charged and operational mobile phone must be carried by the driver for the duration of the trip;
10.7 All vehicles that are not sign written with the Centre name and contact phone numbers must carry visible emergency contact details. The details must be displayed
on an A4 (minimum) sign that is visible from outside the vehicle and include Centre name and emergency contact phone numbers;

10.8 The Nominated Supervisor is to consult with the driver to note the most direct route and the estimated time for the trip;

10.9 The Centre shall at all times be aware of proposed pick-up/drop-off times;

10.10 During the Trip:

10.10.1 The number of passengers in the vehicle must not exceed the number of seat belts or in the case of larger vehicles, the number of passengers that the vehicle may be licensed to carry;

10.10.2 The driver is responsible for all passengers being properly restrained in a seatbelt or approved child restraint;

10.10.3 The driver must conform to the Queensland road rules at all times;

10.10.4 The driver must follow the most direct route from pick up to destination.

10.11 Vehicle Breakdown:

10.11.1 In the event of a vehicle breakdown, the driver must immediately call the centre and advise of the exact location and the nature of the problem;

10.11.2 The centre will immediately call the driver back and remain on the phone with the driver until a second vehicle can pick up the child and driver or the attendance of a breakdown repair service (RACQ).

10.11.13 This Centre will not transport children in personal staff vehicles, it is not a service we provide or will take responsibility for, unless the parent/caregiver permits in writing.

11. IDENTIFICATION OF POSSIBLE HARM TO A CHILD

11.1 All staff shall be familiar with the warning signs that a child may have been harmed;

11.2 Staff members shall keep a record of incidents using the appropriate form when a child has shown physical or psychological signs that harm may have occurred;

11.3 Staff members shall keep a record of any incident, including any occasion where the expected duration of a trip with a member of staff was exceeded, where a child has shown physical or psychological signs that harm may have occurred during a trip;

11.4 Staff members shall, as a matter of the highest priority, hold confidential discussions with the Nominated Supervisor if any harm whatsoever is suspected.

12 DISCLOSURE OF HARM BY A CHILD TO A STAFF MEMBER

12.1 Staff shall undertake appropriate professional development in relation to the correct behaviours and actions in managing discloses by a child;

12.2 Staff shall not hold discussions with the child in front of other children or staff members;

12.3 Employees will take detailed notes – dates, times, location and who is present, what questions were asked, any comments made and actions following disclosure;

12.4 The employee concerned will provide immediate and ongoing reassurance to the child;

12.5 It is mandatory that the employee report the disclosure to the Nominated Supervisor;

12.6 The employee to whom the disclosure has been made will be supported by the centre and offered professional counselling if required.

13 REPORTING OF HARM TO A CHILD
13.1 Upon the reasonable assumption that a child has been harmed or is in danger of being harmed, the Nominated Supervisor will contact the licensee or management committee;
13.2 If it is deemed, after discussion, that further investigation is warranted, then the Nominated Supervisor, on behalf of the employee who made the original observation, will report the matter to the Queensland Police Service and the Department of Child Safety to make a notification;
13.3 Reporting to the Police is mandatory where harm caused to a child indicates a criminal offence may have taken place, such as a physical or sexual assault;
13.4 The Licensee will report the harm to the appropriate Queensland Government Department in the appropriate form (SOI1).

14 CONFIDENTIALITY
14.1 Each person who has access to information regarding suspected or disclosed harm has an obligation to observe appropriate confidentiality;
14.2 The Service is unable to promise absolute confidentiality since its policies will require disclosing, internally and externally, certain details involved in responding to any complaint. Furthermore, State authorities can require people to give evidence and to produce relevant documentation.

15. APPENDICES
EXTERNAL AGENCY CONTACTS LIST
Department of Child Safety: 1800 811 810
Police Link 24/7 131 444
Commission for Children and Young People: 1800 688 275
Protect All Children Today: 07 3290 0111
Bravehearts: 07 3290 4474
Domestic Violence Line: 1800 811 811
Kids Help Line: 1800 551 800
Parentline: 1300 30 1300
Victims Counselling & Support Service 1300 130 703

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Queensland Child Protection Act 1999
5. Queensland Children and Young Workers Code of Practice 2006
7. Child Safety Unit (Queensland Health) www.health.qld.gov.au
10. Protect All Children Today (PACT) www.pact.org.au
CODE OF CONDUCT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
The Service shall have a Code of Conduct for all staff that sets the standard for acceptable behaviours in the workplace.

PROCEDURES
1. A Code of Conduct has been developed by the management of the centre.
2. This Code must be adhered to by all staff at all times.
3. All staff are made familiar with the Code of Conduct during Induction.
4. The Code of Conduct shall be prominently displayed in staff areas.
5. The Code of Conduct shall be contained in the staff handbook.
6. Staff shall be expected to know the content of the Code of Conduct and this may be questioned by management from time to time to ensure currency.
7. Modifications to the Code of Conduct may be suggested by staff, however Management will at all times maintain the rights regarding the content.

OAKLEIGH STATE SCHOOL P&C ASSC OSHC CODE OF CONDUCT

1. Perform their duties as outlined by the position description given to them with professionalism, integrity, effectively and efficiently serve the parents and children who use this service as well as all staff and other persons they will have dealings with affiliated with this service.
2. Follow policies and procedures of this service at all times.
3. Show fairness and equity in all dealings with children, parents, other caregivers and staff.
4. Not mistreat other persons; this includes all forms of intimidation, harassment/bullying (including malicious gossip, innuendo, derogatory comments made about staff, contribution and involvement of backstabbing, non-constructive criticism and sarcastic negative comments).
5. I will not allow personal relationships, both inside and outside the work environment, to adversely affect my work performance or official conduct.
6. Not consume alcohol before commencement of duty or any paid training or meetings. Staff will not allow consumption of drugs to adversely affect their work performance of official conduct.
7. Ensure all facilities and resources are used for their proper purpose and with due care and maintenance.
8. Obey lawful direction given by the Nominated Supervisor or Management.
9. Devote themselves to the efficient and effective achievement of the service’s philosophy and goals.
10. Adhere to the highest standard of professional competence, integrity, confidentiality and honesty.
11. Not make derogatory remarks about other child care services to parents/caregivers, as they have the right to choose freely. Staff will not make derogatory remarks about children, other families, parents or staff to parents/caregivers of this service.
REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
Oakleigh SS OSHC 40
COMPLAINTS MANAGEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall actively manage all complaints and make every reasonable effort to positively resolve the complaint to the satisfaction of those involved.

PROCEDURES
1. RESPONSIBILITIES
1.1 The Nominated Supervisor is responsible for the overall management of complaints;
1.2 Senior staff are responsible for the investigation of complaints directly related to their areas of operation.

2. RECEIVING COMPLAINTS
2.1 Complaints should preferably be in writing, addressed to the Nominated Supervisor and signed by the complainant, complete with address and contact details;
2.2 Telephone and verbal complaints will be documented and passed on to the Nominated Supervisor, but wherever possible the complaint should be confirmed in writing;
2.3 Anonymous complaints shall also be recorded, assessed and managed appropriately.

3. MANAGING COMPLAINTS
3.1 All staff that have direct contact with clients will handle straightforward, minor complaints;
3.2 Where a minor complaint cannot be dealt with within a suitable timeframe, they will be acknowledged in writing from the Nominated Supervisor within 5 working days. The letter will detail what action will be taken, who the responsible person will be and the anticipated time for a response where this is known;
3.3 Complaints which cannot be handled by front line staff should be referred to the Nominated Supervisor.
3.4 The Nominated Supervisor will acknowledge the complaint and will liaise with the complainant, in order to keep him/her informed of the progress of the action being taken;
3.5 Any follow up complaint to an original request/complaint will progress immediately to the Nominated Supervisor;
3.6 Serious complaints involving inappropriate behaviour of staff (eg. rudeness, discrimination or harassment) will be directed to the Nominated Supervisor and if appropriate, the Licensee;

3.7 Serious complaints involving personal injury, a breach of the law or financial implications will be directed immediately to the Nominated Supervisor and or Licensee;
3.8 Serious complaints that allege criminal activity will be reported to the police;
3.9 Should the Nominated Supervisor or Licensee consider that a complaint is of a nature that requires the involvement of an independent mediator, facilitator or investigator, a suitable person shall be engaged;
3.10 Where appropriate, the Service shall advise the Office of Early Childhood Education of the issue and seek assistance in the resolution process.
4. RESOLVING THE ISSUES
4.1 The majority of complaints can and will be resolved by the Nominated Supervisor.
4.2 All staff shall have the opportunity to attend professional development on developing and maintain effective relationships with parents and other members of the community;
4.3 In the event of more complex or serious complaints, the approach will be to consult with the complainant as much as is reasonable practicable during the resolution process;
4.4 The aim will at all times be to encourage the complainant to be “part of the solution”;
4.5 In cases where the client does not accept the outcome achieved as a result of following this complaints procedure, the complainant shall be advised of alternative options open to them;
4.6 These include approaching the Office of Early Childhood Education or other appropriate government bodies;
4.7 If differences become irreconcilable, the most appropriate action may be to suggest that the complainant no longer attend the centre.

5. STAFF ISSUES
5.1 No staff member shall be subjected to any abuse, threats, bullying or harassment under the guise of a complaint;
5.2 At all times, the principles of Natural Justice shall be adhered to in the management of complaints;
5.3 All staff shall have the opportunity to attend professional development on developing and maintain effective relationships with parents and other members of the community;
5.4 Staff shall be monitored during the management of a complaint to ensure that there are no adverse health effects;
5.5 Staff shall be given internal, and if necessary external professional counselling to assist them through a serious or difficult complaints process.

REFERENCES

1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
COMMUNITY INVOLVEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We are committed to being a part of the wider community and to recognise the importance of community involvement in educating our children.

PROCEDURES
1. The Nominated Supervisor is responsible to ensure that the Centre holds current contacts and information on relevant community resources.
2. Where ever reasonable and practicable, the centre shall be actively involved in the local community.
3. Local community services such as fire brigade, police services and other groups shall be invited to the Centre to provide the children with a wide variety of educative experiences.
4. If reasonable and practicable, we will undertake excursions to local community facilities.
5. Whenever possible, we shall endeavour to be involved in local activities.
6. The Centre shall make available to all families information on community resources and community events.
7. The Nominated Supervisor shall maintain contact with surrounding neighbours (including businesses) of the centre to explore any ways in which stronger community links can be built.
8. Members of the community will have free access to meet with the Centre Management by appointment, to discuss any issues or concerns with respect to the centre.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Building Links with your Community – ACECQA 2012
CONFIDENTIALITY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
All information, records and materials shall be treated as confidential and only available to authorised persons with a direct need to access the information.

PROCEDURES
1. COLLECTION OF INFORMATION
1.1 Personal and confidential information is only collected for the purposes of:
1.1.1 Providing our Centre;
1.1.2 Researching and developing our Centre;
1.1.3 Reporting to government authorities;
1.1.4 Legislative compliance

2. USE OF INFORMATION
2.1 We will use personal information provided to us to provide for the best care of the children and for the most efficient and effective operation of this Centre;
2.2 We may provide information to government departments and sponsor organisations where we are required or authorised by law to do so;
2.3 We may provide personal information to third parties if we are authorised by the person to do so;
2.4 We may provide personal information to third parties who are undertaking specific authorised activities within or on behalf of the Centre.

3. SECURITY OF INFORMATION
3.1 We will take all reasonable steps to protect the security of information that we hold from misuse, loss and unauthorised access, modification or disclosure;
3.2 Access to information will be restricted to staff with an appropriate need to have access to that information for operational purposes.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. “Leadership in a Quality Service” program - PSCQ 2011
CONSTRUCTION ACTIVITIES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all construction activities are undertaken with consideration to the extra hazards in an environment with children and we shall actively work to ensure the safety of both children and staff.

PROCEDURES
1. Any quotation or tender process for construction activities shall specify that, wherever possible, the activity shall be undertaken outside normal centre operating hours and in accordance with the school procedures.
2. Prior to any construction activity being undertaken, the Nominated Supervisor shall complete a Risk Management exercise on all aspects of the proposed activity.
3. The Nominated Supervisor shall conduct an induction program with the contractor(s) prior to the commencement of any work.
4. Site “housekeeping” shall be a major consideration at all times during the project.
5. The Nominated Supervisor shall monitor all activities to insure any hazards not identified in the initial risk management process are assessed and controls put into place.
6. Following completion of any construction activities, the site shall be thoroughly cleaned and all debris removed.
7. Prior to the site becoming operational, a walk through inspection shall be conducted by the Nominated Supervisor, together with any other person that is deemed appropriate, to ensure that all hazards associated with the construction activity have been eliminated.
8. The Nominated Supervisor shall undertake regular inspections of the area for a three-month period after completion to ensure that no new hazards become apparent.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Queensland Children and Young Workers Code of Practice 2006
5. Queensland Integrated Planning Act 1997
6. Queensland Building Code – Part 22
CONTINUOUS IMPROVEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that the centre has a clear process for continuous improvement and develops a culture that embraces quality systems.

PROCEDURES
1. The process for continuous improvement shall be driven by the staff.
2. All staff will receive training in continuous improvement processes.
3. All staff will be given regular opportunities to review current processes.
4. Specific areas, as listed in the National Quality Standards, shall form the basis for targeted areas of improvement.
5. The goal of the reflective review of current practices will be to identify the:
   5.1.1 Effectiveness of practice for all children and families;
   5.1.2 Relevance of the practice to the Centre and its stakeholders;
   5.1.3 Equity and fairness of the practice for all children, families and educators.
6. The information gathered from the review process shall be analysed.
7. From the analysis, a number of potential improvement options shall be developed.
8. After consultation, a best option shall be picked.
9. A Quality Improvement Plan shall be developed in accordance with the National Quality Standards.
10. The Quality Improvement Plan shall be implemented.
11. The Quality Improvement Plan shall be reviewed at least annually.
12. Improvement is an ongoing process and the Centre will actively work towards developing a culture of continuously improving in every aspect of our operations.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. “Continuous Improvement” program - Synthesis Trainers and Consultants 2012
CONTRACTOR SAFETY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
All contractors who work on our site shall be provided with information and instructions to enable them to operate in a safe way.

PROCEDURES
1. All Contractors will be appropriately qualified.
2. All Contractors shall sign-in on arrival and sign-out on departure for each visit to the Centre and in accordance with the school procedures.
3. Contractors will be briefed on health and safety rules and any hazards that are present in the workplace;
4. Contractor will notify the Centre of any hazards which the contractor may cause;
5. Contractor will comply with the safety requirements of the centre and all applicable laws and standards pertaining to the work undertaken.

REFERENCES
1. Education and Care Services National Regulations 2011
2. Queensland Work Health and Safety Act 2011
4. National Quality Standard
5. Queensland Children and Young Workers Code of Practice 2006
7. Queensland Building Code – Part 22
DELIVERY AND COLLECTION OF CHILDREN
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall actively work to ensure that the delivery and collection of children is a safe, positive and beneficial process that at all times strictly follows our procedures.

PROCEDURES
1. DELIVERY
1.1 On arrival the parent will sign the Attendance Register;
1.2 Attendance Registers will be located in the same position each day;
1.3 The person delivering the child shall enter the child’s name, the exact time and their signature in the Attendance Register;
1.4 The staff member will greet the person delivering the child and both parties will exchange relevant information regarding the child’s routine for the day;
1.5 A normal routine will be followed to provide smooth transition for the child;
1.6 If medication is required on the day, the Centre’s medication form must be completed and signed off by the appropriate staff member before the parent leaves.

2. COLLECTION - NO CHILD WILL BE RELEASED TO ANYONE WHO DOES NOT HAVE PRIOR AUTHORISATION FROM THE PARENT.
2.1 This authorisation must be on the enrolment form, or completed prior to the proposed collection time;
2.2 Persons authorised by parents will be required to show photographic identification when collecting children;
2.2.1 A photocopy of identification will be taken of the authorised nominee if necessary.
2.3 Parents, or authorised persons, must sign out the child by recording the exact time and their signature in the Attendance Register;
2.4 Parents, or authorised persons, must advise staff when taking their child from the centre;
2.5 Wherever possible parents must ring the Centre to advise they will be late to collect their child;
2.6 A late fee, as per Fee Schedule, will be charged per minute to parents for each child not collected and out of the centre after closing time.

3. EMERGENCY COLLECTION
3.1 In the event of a genuine family emergency, only authorised emergency contacts shall be permitted to collect the child.

4. THIRD PARTY COLLECTION
4.1 In the event of the Centre receiving a telephone call advising that a third party who is not an emergency contact will be collecting a child, the following procedure shall be followed:
4.1.1 Full details of the person making the call shall be written down;
4.1.2 The staff member who takes the call shall ask some basic questions to establish the legitimacy of the caller;
4.1.3 Once it appears that the call is a legitimate contact, full details of the person being sent to collect the child shall be written down;
4.1.4 On completion of the phone call, the Nominated Supervisor shall immediately call the parents on the number held by the Centre to carefully confirm the arrangements;
4.1.5 If the parents confirm the arrangements, document the phone call details and then proceed as per the parent request;
4.1.6 When the person arrives to collect the child, confirm the person’s identity by viewing a driver’s licence or similar photographic identification;
4.1.7 Document the identification details and follow normal collection procedures;
4.1.8 If the parents did not make the initial call, reassure the parent that everything is in order and immediately call the police on 000 and advise that there is to be an attempted abduction of a child.
a) Lockdown the building;
b) Follow the instructions given by the police.

5. ATTENDANCE REGISTER
5.1 Staff to ‘sign in’ or ‘sign out’ a child in the Attendance Register when it is noted that a parent has failed to do so;
5.2 Parents are to be reminded of the process and be requested to initial against the entry made by the educator;
5.3 The Nominated Supervisor is to check Attendance Register at the end of each day;
5.4 Parents of children enrolled in the centre have access to their children at any time during normal operation of the Service.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
4. National Quality Standard
DETERMINING THE RESPONSIBLE PERSON PRESENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall at all times have a responsible person present at the Centre.

PROCEDURES
1. The Nominated Supervisor will be the responsible person at the Centre at all times that the Nominated Supervisor is in attendance.
2. In the event of the Nominated Supervisor being absent from the Centre for any reason whatsoever, the Certified Supervisor will be placed in charge of the Centre.
3. The staff record shall include the name of the Nominated Supervisor/Certified Supervisor in charge of the Centre for each time that children are being educated and cared for by the centre.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
DOMESTIC ANIMALS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure the safety of the children and staff by only allowing domestic animals into our Centre that meet strict criteria.

PROCEDURES
1. Domesticated animals shall not be permitted in the Centre at any time, with the following exceptions:
   1.1. Assistance animals shall be permitted at all times;
   1.2. Domesticated animals that belong to the Centre;
   1.3. Farm visit type events;
   1.4. Working Animal information and promotional programs such as Police Dog and Guide Dog events;
   1.5. Other special cases as determined by the Nominated Supervisor following a full risk assessment.
2. If any person brings an unauthorised domestic animal into the Centre, that person shall be advised of the policy and asked to remove premises.
3. If a person who brings a domesticated animal into the Centre refuses to comply with the policy, the Nominated Supervisor shall call the Police immediately.
4. In the event of a stray animal entering any part of the Centre:
   4.1. The children shall be immediately isolated from the animal;
   4.2. If it is safe to do so, a staff member shall attempt to herd the animal away from the Centre;
   4.3. the Nominated Supervisor shall call Animal Control at Brisbane City Council on 07 3403 8888;
   4.4. The children shall at all times be supervised to ensure that no child has the opportunity to approach the animal.

REFERENCE
1. Brisbane City Council www.brisbane.qld.gov.au
2. Workplace Health and Safety Queensland www.deir.qld.gov.au
3. Children and Young Workers Code of Practice 2006
ELECTRICAL EQUIPMENT SAFETY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all electrical equipment is kept in a safe condition and used in accordance with manufacturer’s instructions.

PROCEDURES
1. A register containing a list of all electrical equipment on site and the inspection and testing details shall be kept and maintained in accordance with the school procedure.
2. All electrical equipment which can be connected to the mains electricity supply via a plug is to be inspected, tested and tagged in accordance with the intervals stated in the Regulations, unless it is connected to a circuit permanently fitted with an approved Residual Current Device (RCD) or according to the school procedure service.
4. All electrical work will comply with the school’s electrical procedures and in accordance with this manual.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Electrical Safety Act 2002
5. Electrical Safety Regulation 2002
ENROLMENT AND ORIENTATION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will at all times provide fair and equitable access to our Centre and will operate within all legislative and procedural requirements with the aim of providing the best possible environment for all our children, families, staff and the community.

Objectives:
- To provide a documented and transparent process for admissions and enrolments.
- Impart appropriate information to parents/guardians.
- To demonstrate a commitment to ongoing communication with families and carers about their child/ren’s care.

PROCEDURES
1. ADMISSION
1.1 Families are strongly encouraged to visit the Centre before completing waiting list or enrolment forms;
1.2 The Nominated Supervisor will escort and remain with all visitors whilst they are in the Centre and will provide the prospective family with comprehensive information regarding the service;
1.3 If required, a waiting list will be maintained in order of application and in accordance with Government Priority of Access guidelines;
1.4 The waiting list will be maintained in a timely manner;
1.5 If and when a suitable vacancy occurs, the family will be asked to undertake our enrolment procedure.

2. ENROLMENT
2.1 A brief, pre-enrolment interview will be conducted with the family to ensure that the family have an understanding of the process and how to complete the required paperwork;
2.2 Following completion of the enrolment form, an interview will be conducted with the family by the Nominated Supervisor to ensure that there is clear understanding by all concerned as to the Centres to be provided and the responsibilities of the family;
2.3 At this interview, the family will be given a copy of the Parent & Family Handbook.

3. PRE-COMMENCEMENT
3.1 A child will only begin in care after all required information has been documented and the Centre, if applicable, has received copies of health information;
3.2 Where appropriate, consideration will be given to any specific requests by the parents regarding the enrolment; a $20.00 non-refundable administration fee is applicable.
3.3 An orientation process for parent and child is required prior to the first day of the child’s attendance.

4. INDUCTION & ORIENTATION
4.1 An induction for parents/guardians will be conducted prior to their child’s commencement at the centre;
4.2 Parents are welcome to sit with their child on the first few days to assist with the settling in process;
4.3 Staff will closely monitor children during the initial period of enrolment;
4.4 Parents will also be actively supported by staff.

5. NOTICE OF WITHDRAWAL
5.1 A minimum of one (1) weeks’ notice in writing is required prior to withdrawing a child from the Centre;
5.2 A minimum of one (1) weeks’ notice in writing is required prior to reducing the number of permanent days of attendance;
5.3 Fees
5.4 EXIT must be paid to the end of the notice period.

6. INTERVIEWS
6.1 Each family leaving the Service will be given the opportunity for an exit interview;
6.2 Exit interviews will explore the reasons for leaving the centre and will seek information on the family’s view of centre operations;
6.3 Information obtained at the exit interview will be documented and used as a part of the continuous improvement program.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
EVACUATION AND EMERGENCY EVENTS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall identify and actively plan for and manage any emergency events that take place within our centre.

PROCEDURES
1. Procedures for the following are to be found under their own headings within this manual:
   1.1 Fire Safety Management;
   1.2 Missing Child;
   1.3 Bomb Threats;
   1.4 Unauthorised persons on site;
   1.5 Electrical Safety;
   1.6 Severe Weather Event;
   1.7 Natural Disasters.

EVACUATION PROCEDURES
This section is to be read in conjunction with the Fire Safety Management procedure. Floor plans show evacuation routes are kept as a part of the Fire and Evacuation Plan required under the Building Fire Safety Regulations 2008.
1. The centre will conduct an annual risk assessment that identifies potential emergency events that are relevant to the centre.
2. The annual risk assessment may form part of an overall Workplace Health and Safety Annual Audit.
3. The risk assessment may be conducted by a suitably qualified and registered external agency.
4. The Centre must ensure that a copy of the emergency and evacuation floor plan and instructions are displayed in a prominent position near each exit.
5. The Centre must ensure that the Nominated Supervisor and staff members of the centre have ready access to an operating telephone.
6. All staff within the Centre form the Emergency Response Team.
7. All staff have a direct and overriding duty for the safety of themselves and other persons within the building.
8. At the sound of the evacuation alarm, all staff will move quickly to their designated areas.
9. Staff will assist the children to exit the building via the designated Fire Exit.
10. In the event that the Fire Exit is blocked, the staff will evacuate the children via an alternative exit.
11. All persons will move as quickly as possible to the designated Assembly Area.
12. Upon arriving at the Assembly Area, a roll call will be undertaken to ensure that all persons are accounted for.
13. No person shall return to the building until clearance is given by the Nominated Supervisor.
14. In the case of an actual emergency event (rather than a drill), no person shall return to the building until the “all clear” has been given by the senior attending officer of the Queensland Fire and Rescue Service or the Queensland Police.
REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Queensland Fire and Rescue Service
5. AS 3745-2010 Planning for Emergencies in Facilities
6. Building (Fire Safety) Regulations 2008
EXCURSIONS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall proactively operate at all times to ensure the safety of children and staff on excursions by identifying any hazards and manage the risks appropriately.

PROCEDURES
1. An Excursion Detail and Risk Assessment Form shall be completed when children are to be taken out of the licensed area
2. The Excursion Detail and Risk Assessment Form shall include the following information:
   2.1 The reason for the child/ren to be taken out of the Centre;
   2.2 The number of children to be taken out of the Centre;
   2.3 The date when the child/ren will be taken out of the Centre;
   2.4 The proposed destination;
   2.5 The method of transport;
   2.6 The proposed activity;
   2.7 The cost of excursion;
   2.8 The period when the child/ren will be absent from the Centre;
   2.9 The number of staff members and any other responsible person/s who will accompany and supervise the child/ren;
   2.10 Identification of risks associated with the excursion;
   2.11 Control methods to be used to minimise identified risks;
   2.12 Roles and responsibilities of adults, including parents and volunteers, on the excursion.
3. Following completion of the Excursion Detail and Risk Assessment Form, it shall be submitted to the Management Committee for approval. (No excursion or pricing will be approved until seeking Management approval).
4. The Nominated Supervisor will then seek written authorisation from the child’s parents or approved carer for the child to take part in the excursion.
5. The request for authorisation shall include: The information in Section 2.1 – 2.9.
5.1 It will advise that a risk assessment has been prepared and is available at the Centre.
7. On the Excursion:
   7.1 Appropriate legislation will be met in transporting children, i.e. appropriate child restraint in vehicles;
   7.2 A First Aid kit will be carried by a staff member, including medical action plans and appropriate medication for children, along with the medication form if required.
   7.3 Children’s emergency contact details will be carried by a staff member;
   7.4 A fully charged mobile phone will be carried by a staff member.
8. An Excursion Evaluation Form will be completed by the qualified staff member after the conclusion of the excursion.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
FEES & BOOKING POLICY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
The Centre will set and collect fees that are appropriate, fair and equitable for the Centre. We provide and we shall ensure we are consistent and transparent in the way we manage our fees.

PROCEDURES
Payment options available are: Ezidebit or Direct Deposit into our bank account. We are currently looking into getting an EFTPOS machine.

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<tr>
<th>Fees for 2013</th>
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<tbody>
<tr>
<td>Before School Care</td>
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<tr>
<td>After School Care</td>
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<tr>
<td>Vacation Care</td>
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<tr>
<td>Pupil Free Day</td>
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Late fees apply if children are not collected by 6pm at a rate of $45 from 6:00pm-6:15pm per child; then $20.00 extra for each child for each additional 15 minutes or part thereof.

OUTSTANDING FEES
Notice will be issued when fees are outstanding after one week. The Coordinator will contact the parent where fees are outstanding for two weeks, on the third week an email will be sent out. After the fourth week, this will be followed by written advice that the account will be suspended and your child/ren will be unable to attend OSHC until payment has been made or a payment plan has been put in place.

CHILD CARE BENEFIT/CHILD CARE REBATE
Our service qualifies for CCB (Child Care Benefit). At enrolment families will be encouraged to apply for assessment of eligibility for CCB/CCR (Child Care Rebate) before their child attends OSHC.

This can be done online at http://www.humanservices.gov.au, by visiting a Centrelink office or ringing 132 468. It is the parents/caregivers responsibility to organise details of their CCB/CCR entitlements. Full fees will be charged until Centrelink customer reference numbers (CRN) have been provided to OSHC.

BOOKINGS
Before and After School Care
Bookings must be made by phone, in writing, fax or email to the Centre as the school office does not accept bookings for OSHC.
**Vacation Care**

Bookings will only be accepted on the Vacation Care Booking Form including permission forms for excursions. **Bookings for Vacation care may not be accepted if monies are owed from the previous school term.**

All bookings must be made to the Centre prior to your child’s attendance. Casual or additional bookings must be made 2 full working days in advance. Please be aware when making a casual booking, due to staff/child ratios we may be unable to take your child/ren for that session. It is necessary for the Centre to be advised of any booking before the children attend the Centre. Children must not be left at the Centre unattended prior to the opening times of the Centre.

**ABSENCES AND CANCELLATIONS**

If your child/ren will not be attending a booked session you must notify the Centre by phone, fax or email. Staff will be concerned if a child is booked in for After Care but hasn't arrived from their classroom. The parents/emergency persons will be contacted to check the whereabouts of the child to ensure their safety.

Fees will be charged if a full 2 working days notice is not received for a booked session. The fee incurred will be the full cost of the session.

**REFERENCES**

1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
FIRE SAFETY MANAGEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that the Centre has in place effective and efficient Fire Safety Management systems that provide for the safety of those on site and meet the requirements of the Queensland Building Fire Safety Regulation 2008.

PROCEDURES
1. INDUCTION AND TRAINING
1.1 All persons who work within the Centre shall be given general evacuation instruction during induction;
1.2 All persons shall be given general evacuation instruction at not more than one year intervals;
1.3 All persons who work within the Centre shall be given "first response" instruction in the use of fire fighting equipment no later than one month after commencement;
1.4 All persons who work within the Centre shall be given first response instruction in the use of fire fighting equipment at not more than two yearly intervals;
1.5 Practice fire evacuations shall be undertaken at least once every Before School Care session, After School Care session and each Vacation Care session at least once per term. Records of drills will be held at the Centre and available for viewing.
1.6 Practice evacuations will be undertaken at different times and with different scenarios to ensure that the process does not become stereotyped.

2. DOOR LOCKING
2.1 All doors within the Centre shall be fitted with locking mechanisms that meet or exceed the Building Code of Australia performance requirements for fire evacuation;
2.2 All doors to occupied areas that are kept locked for safety reasons must be fitted with handles and locks that meet the Building Code and must have received the necessary local authority approvals or in accordance with the school procedure.

3. INSTALLATION AND MAINTENANCE OF FIRE SAFETY INSTALLATIONS
3.1 All fire safety devices shall be ready for operation at all times;
3.2 Maintenance of fire safety installations shall only be carried out by suitably qualified persons;
3.3 Any critical defects in fire safety installations shall be notified to the Nominated Supervisor immediately upon detection;
3.4 Any critical defects shall be repaired or rectified as soon as possible, but in any case, no later than one month of detection;
3.5 Documentation /record of maintenance are to be held in the school and a copy given to the centre.
3.6 Practice door locking evacuations shall be undertaken at least once every Before School Care session, After School Care session and each Vacation Care session at least once per term. Records of drills will be held at the Centre and available for viewing.
3.7 Practice evacuations will be undertaken at different times and with different scenarios to ensure that the process does not become stereotyped.
4. FIRE EVACUATION PLANS
4.1 The Service will at all times have on site a Fire Evacuation Plan that meets the requirements of the Building Fire Safety Regulation 2008.
4.2 The Fire and Evacuation Plan shall be reviewed at least annually.

5. EVACUATION (REFER TO THE SPECIFIC SECTION FOR FULL DETAILS)
5.1 In the event of an emergency evacuation, ongoing communication with all areas will be maintained;
5.2 Evacuation procedures shall include instructions for alerting, and communicating with persons in the building.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Queensland Building Fire Safety Regulation 2008
5. Building Code of Australia
7. AS 3745 Emergency control organisation and procedures for buildings, structures and workplaces
8. AS/NZS 2293 Emergency evacuation lighting for buildings
9. AS 3745 2010 Planning for Emergencies in Facilities
FIRST AID
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will ensure that the Centre has an appropriate number of well trained staff who have access to the equipment required to respond to any situation where first aid is required.

PROCEDURES
1. FIRST AID KIT
1.1 The Centre will at all times hold correctly stocked and maintained first aid kits for use within the Centre;
1.2 A first aid kit at the Centre shall contain as a minimum:
   1.2.1 Adhesive strips (assorted sizes) for minor wound dressing;
   1.2.2 Non-allergenic adhesive tape for securing dressings and strapping;
   1.2.3 Eye pads for emergency eye cover;
   1.2.4 Triangular bandage for slings, support and/or padding;
   1.2.5 Hospital crepe or conforming bandage to hold dressings in place;
   1.2.6 Wound/combine dressings to control bleeding and for covering wounds;
   1.2.7 Non-adhesive dressings for wound dressing;
   1.2.8 Safety pins to secure bandages and slings;
   1.2.9 Scissors for cutting dressings or clothing;
   1.2.10 Kidney dish for holding dressings and instruments;
   1.2.11 Small dressings’ bowl for holding liquids;
   1.2.12 Gauze squares for cleaning wounds;
   1.2.13 Forceps/tweezers for removing foreign bodies;
   1.2.14 Disposable vinyl gloves for infection control;
   1.2.15 Sharps disposal container for infection control and disposal purposes;
   1.2.16 Sterile saline solution or sterile water for emergency eyewash or for irrigating eye wounds. This saline solution must be discarded after opening;
   1.2.17 Resuscitation masks to be used by qualified personnel for resuscitation purposes;
   1.2.18 Plastic bags for waste disposal;
   1.2.19 Note pad and pen/pencil for recording the injured or ill person’s condition and treatment given;
   1.2.20 Re-usable or “one off use” ice-packs for the management of strains, sprains and bruises.
1.3 If the risk assessments carried out within the Centre identify the possibility that specific injuries and illnesses such as burns, eye injuries and poisoning may occur, additional first aid kit contents and facilities shall be provided and appropriately trained personnel shall be appointed;
1.4 Checklist for first aid kits shall be completed at least each three months.

2. FIRST AID PERSONNEL
2.1 The Centre shall ensure that there are an appropriate number of suitably qualified (Senior First Aid or equivalent) first aid officers in attendance at the Centre during all operating times;
2.2 First aid personnel shall undertake the initial management of Centre related injuries and illnesses;
2.3 First aid personnel shall not be responsible for ongoing medical care;
2.4 The initial care provided by first aid personnel shall be consistent with their level of training and competence. When the first aid management required is beyond the level of training and competence of the first aid personnel available, the injured or ill person shall be referred to medical assistance;

2.5 Persons with current first aid qualifications should be appropriately qualified until the expiration of their current qualification or three years from their last renewal date whichever is the sooner;

2.6 The need for further training may be necessary whenever change within the workplace is likely to alter the hazards and, therefore, the type of potential injuries or illnesses;

2.7 These needs may be identified as part of a review of first aid equipment, facilities and services and be incorporated in a worker’s training program;

2.8 The validity of some first aid qualifications may be subject to specific requirements, for example refresher training or evidence of proficiency in CPR.

3. BIOLOGICAL HAZARD CONTROL

3.1 The Centre shall carry out a risk management process to determine the appropriate controls for the management of biological hazards that may be encountered during the provision of first aid;

3.2 The risk management process shall use the standard four steps:

3.2.1 Identification;

3.2.2 Assessment;

3.2.3 Control and Implementation;

3.2.4 Monitoring.

3.3 The process used for Identification shall include:

3.3.1 Consultation with first aid personnel, workers and their representatives to identify biological hazards in the workplace;

3.3.2 First aid practices should be surveyed to identify the risk of transmission of infection;

3.3.3 Analysis of incident reports may assist in identifying trends and high-risk areas in the workplace.

3.4 The processes for Risk Assessment, Control and Implementation of Controls shall follow the procedures contained in the Centre policy on Risk Management;

3.5 There shall be a system of supervision to ensure that implemented control measures are being followed and are effective in controlling the risk;

3.6 The effectiveness of the following should be monitored:

3.6.1 Infection control policies and procedures as well as the level of compliance with these policies and procedures;

3.6.2 Information and training programs;

3.6.3 Reporting procedures for incidents involving exposure to blood and body substances.

3.7 First aid infection control practices should be reviewed when:

3.7.1 First aid practice involving exposure to biological hazards is introduced or modified;

3.7.2 Accident investigation indicates that control measures need to be reviewed;

3.7.3 New information about a biological hazard becomes available;

3.7.4 An illness or injury arises as a result of first aid practices;

3.7.5 Work practices change and the risk of injury or illness is increased;

3.7.6 There is any exposure to blood or body substances resulting from first aid activities.
4. RECORD KEEPING
4.1 A first aid recording system shall be maintained at the Centre to:
4.1.1 Identify areas or processes that are likely to give rise to injury or illness;
4.1.2 Review safety procedures for preventing further problems;
4.1.3 Implement safer and healthier work practices;
4.1.4 Identify where first aid facilities and services are most needed;
4.1.5 Keep as evidence of implementation of this standard;
4.1.6 Maintain for workers’ compensation purposes.
4.2 When recording information relating to first aid, the following shall be included in any record:
4.2.1 Name, address, date of birth and sex of injured or ill person;
4.2.2 Contact phone number/s;
4.2.3 Basis of employment, for example, full time, part time, casual, visitor and occupation or an enrolled child;
4.2.4 Nature of injury or illness, for example, fracture, burn, respiratory difficulties;
4.2.5 Bodily location of injury or illness;
4.2.6 How the injury or illness occurred;
4.2.7 Time and location of the incident which caused the injury or illness;
4.2.8 Details of treatment, for example, the first aid treatment given and/or referral to ambulance, doctor, hospital or elsewhere;
4.2.9 Subsequent injury/illness management;
4.2.10 Any other relevant details such as witnesses to the incident;
4.2.11 Name and signature of person completing the record.
4.3 A copy of the first aid record shall accompany an injured or ill person if the person is transferred to a medical service or hospital;
4.4 A worker at the Centre shall be given a copy of their first aid record or have access to that record on request. The original copy of the first aid record shall be retained at the Centre;
4.5 The parent or carer of a child shall be given a copy of their first aid record or have access to that child’s record on request. The original copy of the first aid record shall be retained at the Centre.

5. CONFIDENTIALITY
5.1 Personal information about the health of a worker shall be kept confidential;
5.2 The confidential information includes details of medical conditions, treatment provided and the results of tests. Disclosure of personal information, without that person’s written consent, is unethical and in some cases may be illegal.

6. ADMINISTERING FIRST AID
6.1 The first aid procedures at the Centre are designed to:
6.1.1 Preserve life;
6.1.2 Ensure that ill or injured persons are stabilised and comforted until medical help intervenes;
6.1.3 Monitor ill or injured persons in the recovery stage;
6.1.4 Apply further first aid strategies if the condition does not improve; and
6.1.5 Ensure that the environment is safe and that other persons are not in danger of becoming ill or injured.
6.2 All persons on site shall know what to do, where to go, and from whom to seek first aid;
6.3 All staff and volunteers shall be informed about first aid equipment and facilities via induction;
6.4 Information shall be complete, easy to understand and accessible. Language factors and the literacy levels shall be taken into account when people are informed about the provisions at the workplace;
6.5 Where appropriate, verbal methods (explanations, demonstrations), visual methods (videos, posters) and plain English or other appropriate languages should be used or made available;
6.6 Information about first aid should include an Accident Plan;
6.7 The Accident Plan shall:
6.7.1 Specify the ‘response’ procedures to be followed in an accident situation, such as, notify the Nominated Supervisor or telephone for medical assistance; “000”
6.7.2 Allocate specific tasks involved in such procedures to individuals, for example, Nominated Supervisor to telephone the ambulance;
6.7.3 Include emergency transportation arrangements, for example, who has a driver’s license; location of available vehicle for use;
6.7.4 Detail the location of first aid equipment and facilities at the workplace, including details of personnel responsible for the equipment and facilities;
6.7.5 Specify the role of the first aid provider. In specifying the role of the first aid provider, it is important to remember that this person should not administer assistance beyond their level of qualification.
7.0 Information about first aid facilities and Centre’s services and the accident plan shall be provided to workers on commencement of employment;
7.1 Current information about specific risks in the workplace and changes affecting the provision and use of first aid facilities and services, and procedures detailed in the accident plan shall be available to all workers;

8.0 Information shall be provided through:
8.1.1 Induction programs;
8.1.6 Policy and procedure manuals.
8.1.7 Workers shall be kept up to date on other matters including:
8.1.8 The availability of first aid equipment, facilities and services;
9.0 Up-to-date lists of the telephone numbers of emergency personnel and organisations shall be clearly displayed near central telephone or radio communication systems;
9.1 Key emergency personnel and organisations to be included on such a list are: The nearest ambulance service, the nearest doctor with whom arrangements have been made for and emergency care; if unsuccessful, contact:
9.1.1 The nearest hospital with an accident and emergency department; or just the emergency services. “000”
FOOD – NUTRITION AND HEALTHY EATING
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will promote a healthy, nutritious and a varied food intake in a positive and safe eating environment.

PROCEDURES
1. MEAL TIMES and THE EATING ENVIRONMENT
Mealtimes and the eating environment play a large role in the nutrition outcomes of children.
1.1 Children will be supervised whilst eating at all times;
1.2 Staff will promote a positive, relaxed, social eating environment with children;
1.3 Staff will promote positive discussion about the foods being served and talk about health and nutrition with the children;
1.4 Food will not be used as a punishment or reward, whether by its provision or denial;
1.5 Food preferences of the children will be respected, however in accordance with legislation.
1.6 Cultural food events and practices are celebrated and discussed with the children
1.7 Staff will encourage self-help and, where necessary, assist children at mealtimes;
1.8 Special occasions may be celebrated with culturally appropriate foods, e.g. birthdays, cultural and religious days;
1.9 Parents will be advised when their child is not eating well.

2. SPECIAL DIETARY REQUIREMENTS
2.1 Food allergies and food chemical intolerances are two areas that will be managed;
2.2 The diet of a child with food restrictions should be assessed by a dietician to ensure that it is nutritionally adequate;
2.3 The following steps will be taken with families of child with special dietary requirements:
   2.3.1 A management plan is to be set up with the child’s parent/carer;
   2.3.2 Parent/carer is to provide a letter from a doctor, paediatrician, or specialist or dietician, which includes information about the allergy or intolerance and the special dietary requirements. This should include how long the diet will be necessary;
   2.3.3 Staff are to receive training and support on the child’s allergy/intolerance and special dietary requirements upon the enrolment of the child or as soon as necessary;
   2.3.4 Emergency procedures are to be developed and all staff informed of the procedure if a child’s reaction to a food allergy is severe;
   2.3.5 Review of the child’s condition and diet will be addressed with parents/carer every 6 months.
   2.3.6 If the Centre has child/children with special dietary requirements then:
   2.3.7 Other parents will be informed of the foods that are potentially dangerous to some children within the Centre;
2.3.8 Staff will be conscientious in understanding the allergies and/or intolerances of children in their carer and will access further information when necessary.

3. SPECIAL OCCASIONS AND CELEBRATIONS

3.1 The Nominated Supervisor will ensure parents/carers are aware of the Centre’s policy on the types of food brought into the Service on these occasions.

4. ORAL HEALTH

4.1 The Centre will actively seek, maintain and provide families with current oral health and nutrition resources from recognised authorities;

4.2 The Centre will provide direct access to and encourage the drinking of fresh water frequently;

4.3 The Centre will actively implement our sun protection policy for the prevention of lip cancer;

4.4 Staff/carers will model and actively discuss sound oral health practices;

4.5 Oral health will be incorporated into children’s learning program;

4.6 The Centre will have an action plan for dental injuries;

4.7 The Centre will encourage and support families in seeking dental care where appropriate;

4.8 The Centre will encourage and support sound tooth brushing habits at home.

REFERENCES

1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. The Dietary Guidelines for Children and Adolescents
5. Start Right Eat Right
6. Caring For Infants (Central Sydney Area Health Services)
7. SA Child Care Nutrition Partnership www.chdf.org.au/childcarenutritio
FOOD SAFETY & HYGIENE PRACTICES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure our practices for food storage, handling and preparation are safe and will minimise the possibility of transmission of or contamination by harmful food-borne illness.

PROCEDURES
1. STAFF TRAINING AND DEVELOPMENT
1.1 All staff will undertake annual professional development in safe food handling and hygiene practices as prescribed in the Australia New Zealand Food Standards Code 3.2.2;
1.2 All work experience students, volunteers and other visitors to the Centre will complete training in safe food preparation and handling prior to participating in any food handling activities;
1.3 All work experience students, volunteers and other visitors to the Centre who participate in food preparation and handling will be supervised at all times by a staff member who is qualified in food safety.

2. FOOD PROVIDED BY PARENTS
2.1 All food that is to be brought to the Centre will be required to be placed in an insulated bag with an ice block for transportation, unless brought first thing in the morning.
2.2 Food requiring cold storage will be transferred to the fridge in a timely manner;
2.3 All food will be checked to ensure that the food is not ‘out of date’;
2.4 No ‘out of date’ food will be served to any child;
2.5 If food is to be reheated it will be in accordance with the Standard Code
3.0, including the following:
3.1.1 Only once and then disposed of if not eaten immediately;
3.1.2 Probe thermometers are to be used to check temperature of food that is required to be reheated;
3.1.3 Thermometers are to be sanitised before and after every use.
3.1.4 Staff must advise the Nominated Supervisor when they consider a child’s food is unsafe;
3.1.5 The Nominated Supervisor will discuss any issue of a child’s unsafe food with the child’s parent or carer;
3.1.6 Staff shall role model and encourage children in safe food handling practices;
3.1.7 Food provided by families for special occasions will adhere to the Centre’s policy;
3.1.8 Families will receive regular information on safe food handling practices.

4. HEALTH AND HYGIENE PRACTICES
4.1 All staff will maintain a high level of personal hygiene when performing duties that involve food preparation, food handling or feeding of children. Staff are required to follow the following procedures:
4.1.2 Staff must report to the Nominated Supervisor when they may be suffering from a food-borne disease, e.g. diarrhoea, vomiting, sore throat with fever, or fever;
4.1.3 Staff must ensure outer clothing is of a level of cleanliness that is appropriate for the handling of food that is being conducted;
4.1.4 Staff must ensure that their body, clothing or accessories, including jewellery, does not contaminate food or surfaces likely to come into contact with food;
4.1.5 Staff must completely cover any bandage or dressings on exposed parts of their body with a waterproof covering in a fluorescent coloured bandage whilst handling food.
4.1.6 All work experience students, volunteers and other visitors to the Centre will maintain a high level of personal hygiene when performing duties that involve food preparation, food handling or feeding of children.

5.0 STAFF WILL EMPLOY HYGIENIC PRACTICES AT ALL TIMES:
5.1 Staff must not eat over unprotected food or surfaces likely to come into contact with food;
5.1.2 Staff must not sneeze, blow or cough over unprotected food or surfaces likely to come in contact with food;
5.1.3 Staff must not spit, smoke or use tobacco in areas in which food is handled;
5.1.4 Staff and children must wash their hands immediately before working with food and/or before meal times;
5.1.5 Staff and children must wash hands and/or change gloves if they become soiled during any food preparation or serving;
5.1.6 Staff and children must wash their hands immediately after using the toilet;

6. HAND WASHING INCLUDES:
   a) Use of hand washing facilities;
   b) Use of soap and running water;
   c) Enough time to lather hands and wrist completely (min 20 sec);
   d) Rinsing thoroughly under running water;
   e) Drying with paper towel.
6.1 Staff shall role model and encourage children in hygienic practices including when dealing with food;
6.1.1 Families will receive regular information on safe food hygiene practices.

7. EQUIPMENT
7.1 All fridges and freezers will have their temperatures monitored and recorded daily, or as often as is required, to ensure they remain within the correct range of safe storage temperatures;
7.2 All thermometers will be calibrated every six months and a record kept identifying each thermometer, the date tested and the test results;
7.3 Equipment will be kept clean and/or sanitised and in good working order;
7.4 All staff are to be diligent in monitoring and reporting of faulty equipment;
7.5 A maintenance register will be kept for all equipment;
7.6 Thermometers will be used when reheating food;
7.7 Disposable gloves will be used only once and changed when activities change;
7.8 Utensils shall be washed and/or sanitised following each food related activity to minimise risk of cross contamination.

8. CLEANING AND SANITISING
8.1 Children’s eating areas and food preparation areas will be cleaned and sanitised prior to and after consumption of food;
8.2 A cleaning and sanitising schedule will be maintained and recorded;
8.3 All staff are to be aware of and practice correct cleaning and sanitising processes;
8.4 Material Safety Data Sheets (MSDS) will be held for all chemicals and cleaning products;
8.5 Cleaning and chemical products will be stored securely and separate from any food preparation or food storage areas;
8.6 Cleaning equipment will be maintained in good working order.

9. RUBBISH AND PEST CONTROL
9.1 Food rubbish will be placed in rubbish bags inside bins in such a way that the bags can be tied to prevent spillage;
9.2 Food rubbish bags will be transferred to the main rubbish collection area daily;
9.3 All bins will be washed and disinfected regularly in accordance with the cleaning program.
9.4 All staff will be diligent in the reporting of pest infestation;
9.5 Annual professional pest control measures will be undertaken;
9.6 Good general building maintenance practices will be adhered to and monitored, to reduce the likelihood of pest infestation.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Food Standards Australia New Zealand (Chapter 3 – Australia Only)
5. Queensland Food Safety Act 2006
6. Australian Government Department of Health & Ageing
7. The Dietary Guidelines for Children and Adolescents
8. Start Right Eat Right
9. Caring For Infants (Central Sydney Area Health Services)
10. SA Child Care Nutrition Partnership www.chdf.org.au/childcarenutrition

NOTE: All products will be used in accordance with their Material Safety Data Sheet (MSDS) or manufacturers’ instructions.

EXTERNAL CONTACTS LIST
Queensland Health 07 3234 0938
Brisbane City Council 07 3403 8888
GENERAL HOUSEKEEPING AND MAINTENANCE
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall identify and control all housekeeping hazards and prevent unsafe working conditions throughout the Service.

PROCEDURES
1. All workers are to regularly conduct housekeeping inspections of their work areas, correcting or reporting hazards to management.
2. All empty substance containers no longer required and other refuse is to be removed from the work area and disposed of.
3. Equipment shall be put away in the correct location when not in use.
4. All driveways, passageways, stairways and exits shall be kept clear of obstructions.
5. Access to equipment, electrical control panels, fire extinguishers or fire hoses will not ever be obstructed.
6. All materials shall be neatly stored in appropriate locations, including height levels, and any items stacked shall be checked for stability.
7. All rooms, work areas, playgrounds and public areas shall be clean neat and free of unnecessary materials.
8. Access to emergency equipment (including fire extinguishers, first aid kits, emergency showers etc) is to be kept clear and free from obstruction at all times.
9. Floors shall be kept clean and free from spillages, leaks and drips.
10. Amenities are to be cleaned on a daily basis. Users of amenities have a responsibility to keep the meal areas and toilets clean and tidy.

REFERENCES
2. Queensland Work Health and Safety Act 2011
3. Queensland Work Health and Safety Regulations 2011
5. Creating Safer Environments for Children National Framework 2005
GENERAL HYGIENE PRACTICES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall commit to providing a hygienic workplace by undertaking effective hygiene practices designed to effectively manage the risk of infectious cross-contamination.

PROCEDURES
All staff will undertake annual professional development to remain current with health and hygiene practices that have regard to current community standards, and are in accordance with relevant government guidelines.

All staff will develop skills and gain knowledge to enable them to appropriately role model and discuss hygienic practices with the children.

It is recognised that the maintenance of good personal hygiene is one of the most effective ways we have to protect others and ourselves from illness and all staff and children will be expected to follow good personal hygiene practices such as:

1. Daily bathing;
2. Clean clothes each day;
3. Cover your mouth and nose with a tissue when you sneeze or cough, then dispose of the used tissue appropriately. Wash their hands with soap and water, and dry thoroughly;
4. Clean items that you touch if you are unwell;
5. Discarding tissues after a single use in an hygienic manner;
6. Using personal protection equipment i.e. disposable gloves, when you might be at risk of catching or transmitting an infection;
7. Good dental hygiene that includes regular brushing and flossing of teeth.
8. Regular hand washing.

Hand washing by staff shall be undertaken when:
1. You arrive at the Centre;
2. Before handling food;
3. Before eating;
4. After removing gloves;
5. After going to the toilet;
6. After cleaning up blood, faeces or vomit;
7. After wiping a nose, either a child’s or your own;
8. Before giving medication;
9. After handling garbage;
10. After coming in from outside play; and before going home.

Children’s hands shall be washed:
1. When they arrive at the Centre.
2. Before and after eating and handling food;
3. After going to the toilet;
4. After touching nose secretions;
5. After coming in contact with blood, faeces or vomit;
6. Before engaging in play with other children.
7 Before going home.

**Hands shall be washed using the following method:**
1. Wet hands with running water;
2. Use soap and spread over hands;
3. Rub hands vigorously as you wash them (for a minimum of 10 seconds);
4. Wash your hands all over. Pay particular attention to wash the palms and backs of hands, in between fingers, under fingernails and around wrists;
5. Rinse your hands thoroughly to remove all suds and germs (for a minimum of 10 seconds). Thorough rinsing will help prevent dermatitis from suds;
6. Turn off the tap using paper towel;
7. Pat dry your hands with a new paper towel.

**Oral Hygiene shall be undertaken using the following hygiene practices:**
1. Encouraging children, staff and parents to understand the value of good oral health and tooth brushing;
2. Facilitating group and individual discussion with the children about oral hygiene practices;
3. Encouraging and supporting healthy eating;
4. Providing dental health information to families;
5. Staff will discuss dental hygiene with the children and they are made aware that fruit and water is an alternative when brushing teeth is not possible.

**Cleanliness**
1. The Centre, including the building, grounds, all equipment and furnishings, will be maintained in a thoroughly safe, clean and hygienic condition and in good repair at all times.
2. The cleaning program will include all areas of the Centre.
3. Daily, weekly, monthly and yearly cleaning programs shall be documented and check/verification lists maintained.
4. Sanitation of toys and other equipment shall be undertaken as often as is required to ensure that no cross-contamination occurs.
5. All food preparation and storage is to be undertaken in accordance with the specific policies and procedures.
6. Disposal of waste material shall be managed by:
   7. All waste material will be placed in a plastic lined bin;
   8. Bins are not to be overfilled;
   9. The plastic bin liner must be able to be tied to secure rubbish before removal to waste collection point;
   10. Waste bins will be placed in strategic positions and not in passageways or doorways;

**REFERENCES**
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. National Health and Medical Research Council website
GOVERNANCE AND MANAGEMENT OF THE SERVICE
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall at all times manage the Centre to the highest quality standards and ensure that effective governance strategies are in place.

PROCEDURES
1. All staff and management shall be familiar with the legislative and regulatory requirements of a Centre and shall operate within these at all times.
2. All staff and management shall be familiar with the Centre policies, procedures and handbooks, and shall operate in accordance with these documents at all times.
3. All staff shall maintain the highest standards of confidentiality in accordance with the policies and procedures contained within this manual.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
HAZARDOUS CHEMICALS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall identify and effectively manage all hazardous chemicals that come into the Centre.

PROCEDURES
1. The Nominated Supervisor shall ensure all hazardous chemicals and the quantities at the site are listed on the Hazardous Chemical Register;
2. Material Safety Data Sheets (MSDS) will be obtained from the supplier for each hazardous substance, examples which may include a hazardous chemical are:
   2.1 Paints;
   2.2 Cleaning chemicals;
   2.3 Fuels and gases;
   2.4 Detergents.
3. The Nominated Supervisor will maintain a Register (folder) containing details of the Hazardous Chemicals in the Centre and a copy of the current MSDS for each substance listed.
4. The Nominated Supervisor shall ensure that copies of relevant MSDS’s are also located where any hazardous substances are held or used.
5. New hazardous chemicals brought onto the site are to be recorded in the register and subject to these procedures.
6. At all times, products with the lowest hazard level for the required task will be purchased.
7. All hazardous Chemicals shall be managed strictly in accordance with the instructions contained in the MSDS.
8. Risks associated with the transportation, storage, handling and disposal of all hazardous chemicals will be managed and controlled in accordance with the Centre’s Risk Management practices;
9. At all times, reference must be made to the MSDS for the substance;
10. All hazardous chemicals shall be stored in such a way that unauthorised access to the substance is prevented.
11. Spills and leaks of hazardous chemicals will be cleaned up and disposed of in accordance with instructions provided in the MSDS.
12. All empty chemical containers or disused substances will be removed from the workplace and disposed of correctly.
13. Any exposure to hazardous chemicals shall be managed in accordance with instructions contained within the MSDS.
14. No substance will be used without the correct personal protective equipment being worn by the user, if applicable.
15. All chemical containers will be appropriately and clearly labelled.
16. At no time will any chemical or solution be transferred to any container not specifically designed for that purpose (for example window cleaner into a sprayer bottle).
17. Chemicals shall never be stored in used drink bottles or food containers. Any staff member who does this shall be subject to immediate disciplinary action.
18. Induction and ongoing training must be provided to any worker who may be exposed to a hazardous chemical. Training records shall be kept by the Centre for at least 5 years in accordance with legislation.

19. Hazardous chemicals storage areas will ensure product stability and segregation from any potentially reactive materials.

20. Storage areas will display appropriate placards/signs and emergency information.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. Queensland Work Health and Safety Regulations 2011
11. AS1940 The storage and handling of flammable and combustible liquids
12. AS2507 The storage and handling of Pesticides
13. AS3780 The storage and handling of corrosive substances
14. AS4326 The storage and handling of oxidizing agents
15. AS/NZS1596 The storage and handling of LP Gas
16. AS/NZS3833 The storage and handling of mixed classes of dangerous goods in packages and intermediate bulk container.
INCIDENT, INJURY, TRAUMA AND ILLNESS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all incidents, injuries, traumatic events and illnesses are managed in accordance with legislative requirements with the aim of minimising the impact on the child, children, staff and families.

INCIDENT MANAGEMENT PROCEDURE
1. All incidents (including near misses) are to be reported to the Nominated Supervisor as soon as possible.
2. The Nominated Supervisor, in consultation with the person reporting an incident will record the details of the incident.
3. The Nominated Supervisor shall maintain copies of all Incident Report Forms.
4. Formal Incident Reports shall be kept for a minimum of one year, in accordance with the WHS Regulation 2011.
5. Any incidents listed below must be reported to Workplace Health and Safety Queensland (WHSQ) within 24 hours by completing the appropriate Incident Notification Form – Part A and sending it by mail or fax:
   5.1 Serious Bodily Injury;
   5.2 Work Caused Illness;
   5.3 Dangerous Event;
   5.4 Serious Electrical Incident;
   5.5 Dangerous Electrical Event.
6. A fatality must be notified to Workplace Health and Safety Queensland immediately on 1300 369 915.
7. Any injury that requires medical treatment or causes the fatality of a child in the care of the Centre must be notified to the Office for Early Childhood Education and Care using ACECQA form SOI1 – Notification of Serious Incident.
8. All incidents that occur within the Centre shall be investigated.
9. The aim of incident investigation is to identify all possible causes of the incident to enable control measures to be put into place to reduce the risk of further incidents.
10. Investigations shall proceed within 24 hours of management becoming aware of the incident.
11. The level of effort involved in the investigation shall correspond to the severity or potential severity of the accident.
12. In the case of a serious or complex incident, external assistance may be sought in conducting the investigation.
13. The person investigating the incident shall:
   13.1 Examine the scene before the physical evidence is disturbed;
   13.2 Take samples of any substance which may have contributed to the incident, noting conditions that may have affected the sample;
   13.3 Record comprehensive documentation e.g., photographs, diagrams or video;
   13.4 Determine which items should be preserved;
   13.5 Identify the people involved in the incident, including eyewitnesses;
   13.6 Conduct interviews with witnesses and other relevant personnel;
   13.7 Review all sources of potentially useful information, including design specifications, previous incident reports, drawings, workplace inspection records,
INJURY MANAGEMENT PROCEDURE
1. In the event of an injury to a child or any other person at the Centre, the response shall be in accordance with our First Aid procedures.
2. Following the incident, the circumstances and causes shall be investigated and documented.
3. In the event of medical treatment being required, appropriate external reporting shall be undertaken.

TRAUMA MANAGEMENT PROCEDURE
1. In the event of a traumatic event taking place within the Centre, the Nominated Supervisor will seek urgent expert assistance from external agencies to manage any difficulties encountered by the children, staff or families.
2. The level of assistance sought and the timeframes for management will be dependent on the nature and severity of the traumatic event.
3. The Centre shall be guided by external expert advice as to the appropriate level and timeframes for assistance.
4. The goal following a traumatic event shall be to return to normalised behaviour as soon as possible.

CHILD ILLNESS PROCEDURE
1. In general a child is classified as sick and requires to be taken home when they display one or more of the following:
   1.1 Sleeps at unusual times;
   1.2 Has a fever of 38°C;
   1.3 Is crying constantly as a result of discomfort due to illness;
   1.4 Is reacting badly to medications;
   1.5 In need of constant one to one care;
   1.6 Has two loose bowel motions through the course of the day;
   1.7 Is vomiting;
   1.8 Has green runny nose – indicates infection;
   1.9 Has an unknown skin rash.
2. In the event of any of the above circumstances occurring, the parent will be contacted and asked to take their child home.
3. If a parent cannot be contacted them the Emergency Contacts listed on the enrolment form will be called.
4. In any case of sudden-onset severe illness, an Ambulance will be called to transport the child to hospital.
5. All instances of child sickness will be recorded appropriately.
6. A child who is ill will not be permitted to return to the Centre until the illness has passed (refer to the Service Infection and Disease Control Procedure for more information).

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. Creating Safe Environments for Children National Framework 2005
8. Queensland Health Department
INFECTION AND DISEASE CONTROL
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall proactively work to aim for minimising the risk of infection and the spread of disease throughout the organisation.

PROCEDURES
1. GENERAL CONTROLS
1.1 Hands shall be washed frequently, especially after contact with body fluids (including mucus, saliva, urine, faeces and blood) and after removing disposable gloves.
1.2 Disinfectant hand rub shall be used where hand-washing facilities are not readily available, such as when taking children on excursions.
1.3 Cuts shall be covered with water-resistant dressings.
1.4 Disposable gloves (e.g. latex or vinyl) shall be used for activities that involve contact with body fluids and workers are to be instructed in their use.
1.5 Staff shall be given specific information about infection and disease risks.
1.6 All work practices shall be designed to reduce the risk of infection.
1.7 Equipment and toys purchased for the Centre shall be of a type that can be readily cleaned and disinfected.
1.8 All toys and other objects that the children handle shall be washed and disinfected at least daily and more often if the article becomes contaminated.
1.9 Staff shall not kiss children on the mouth and face.
1.10 Rigorous cleaning programs for surfaces and items that are soiled with body fluids, including toys shall be undertaken.
1.11 A child’s soiled personal clothing and linen shall be placed in a sealed bag named and place in a sealed bin then sent home with the child for washing.

2. STAFF IMMUNISATIONS
2.1 It is strongly encouraged that all staff maintain up to date immunisations for:
2.2 Diphtheria;
2.3 Tetanus;
2.4 Measles;
2.5 Mumps;
2.6 Rubella;
2.7 Hepatitis A;
2.8 Varicella (for those workers who have not had chickenpox);
2.9 Pertussis (whooping cough).
2.10 Where workers refuse vaccination or are unable to be vaccinated for medical reasons or do not respond to vaccination the Nominated Supervisor shall undertake a risk assessment to determine the most appropriate way to protect these workers against infection.
2.11 All risk assessments undertaken in relation to infection and disease control shall give consideration to the way in which the particular infectious disease is spread.
2.12 Appropriate ways to protect non-immune workers might include a combination of preventative measures, outbreak management measures and post-exposure protocols.
3. CHILD IMMUNISATIONS
3.1 All children who attend the Centre shall at all times be up to date with childhood immunisations except under exceptional circumstances as nominated by the Nominated Supervisor.
3.2 The Nominated Supervisor shall check immunisations records for each child upon enrolment.
3.3 Children who are not immunised shall be excluded from the Centre in the event of an occurrence of a notifiable illness.

4. STAFF TRAINING
4.1 Staff shall be supported with formal in-service training that covers modes of spread of infection, immunisation, hygiene (in particular frequent hand washing), reporting requirements and the local public health infrastructure.

5. CONSULTATION
5.1 Key stakeholders shall be consulted in relation to matters contained within this document.

6. EXCLUSIONS
6.1 All parents and carers shall be advised of the Centre policy on medical exclusion upon enrolment, and at regular intervals thereafter;
6.2 The Nominated Supervisor shall be notified by staff immediately a child is suspected of an illness noted by Queensland Health as requiring exclusion;
6.3 The Nominated Supervisor shall immediately contact the child’s parents or carer and discuss the situation;
6.4 The child shall be isolated from other children within the Centre until medical clearance is received;
6.5 In cases where the parents/carers will not acknowledge the disease, the Nominated Supervisor shall exclude the child until a medical clearance is received;
6.6 Staff and children diagnosed with the diseases on the following pages shall be excluded from the Centre in accordance with the periods set by Queensland Health.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Queensland Work Health and Safety Regulations 2011
5. Creating Safe Environments for Children National Framework 2005
INTERACTIONS WITH CHILDREN
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all our interactions with children are professional, appropriate and pays respect and regard to the child as an individual.

PROCEDURES
1. The Centre will provide education and care to the children that at all times:
   1.1 Encourages the children to express themselves and their opinions;
   1.2 Allows the children to undertake experiences that develop self-reliance and self-esteem;
   1.3 Maintains at all times the dignity and rights of each child;
   1.4 Gives each child positive guidance and encouragement toward acceptable behaviour;
   1.5 Has regard to the family and cultural values, age, and physical and intellectual development and abilities of each child.
2. The Centre will provide the children with opportunities to interact and develop respectful and positive relationships with each other and with staff members of, and volunteers at, the Centre.
3. All staff shall at all times role model appropriate and positive behaviours.
4. A standard will be set and maintained with all members of the Centre community as to appropriate interactions with the children.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
INCLUSION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all aspects of the Centre operation are inclusive.

PROCEDURES
STAFF TRAINING AND DEVELOPMENT
1. All staff will commit to ongoing professional development in the areas of cultural and linguistic diversity to nurture an inclusive environment.
2. All staff will demonstrate a safe, warm, caring attitude to provide a positive environment for all who use the Service.
3. Children will be respected without bias, as individuals regardless of their cultural background, disability, gender, beliefs and attitudes.
4. Children’s individual efforts and skills are encouraged, recognised and appreciated and this will be reflected through the Centre programs.
5. External entities and resources will be sort for assistance and ideas about communicating with children and families from culturally and linguistically diverse backgrounds.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Age Discrimination Act 2004 (Cwlth)
5. Disability Discrimination Act 1992 (Cwlth)
7. Privacy Act 1988 (Cwlth)
8. Racial Discrimination Act 1975 (Cwlth)
9. Sexual Discrimination Act 1984 (Cwlth)
LADDERS AND WORK PLATFORMS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all persons who are required to undertake above ground level work do so in a safe manner.

PROCEDURE
1. The Nominated Supervisor must ensure that when a ladder and/or platform is to be that all hazards relating to their use be identified and addressed to ensure risks are minimized and effectively managed as much as possible.
2. The person using the ladder must work in a safe and productive manner to ensure no unnecessary risks are taken.
3. The person using the ladder must ensure that it is secured firmly when in use, either at or near to the top (e.g. clamping the top of the ladder to the roof) or; at or near to the bottom (e.g. tying the bottom of the ladder to pegs secured in the ground or someone holding the ladder).
4. The Nominated Supervisor must ensure that the ladder is only used for the purpose for which it is designed.
5. Only suitable work platforms must be used (stepladders etc). Improvised work platforms shall not be used (e.g. chairs or tables).
6. The work platform being used should not exceed the height of the required task (Use adjustable settings if possible).
7. Children should not be present when ladders and/or work platforms are being used. If this is unavoidable, appropriate safety measures such as extra supervision shall be used to minimise the risks.
8. Ladder/s and/or work platform/s should only be used outdoors when it is safe to do so.
9. The ladder/s and/or work platform/s shall be cleaned, serviced and maintained so that they are always in a safe working condition.
10. The ladder/s and/or work platform/s must be stored safely and correctly to prevent accident and injury when not in use.
11. The storage place for the ladder/s and/or work platform/s should be cleaned and maintained. Each time a ladder is used, it should be checked out for dangerous insects and arachnids in the outer and the inner workings of the ladder.
12. In the event of a ladder or work platform being damaged in such a way that it is not safe or suitable for use then it should be repaired as quickly as possible. Damaged ladder or work platform should be isolated and marked with a suitable ‘Do Not Use’ sign and a general caution should be delivered to all staff by the Nominated Supervisor (this can be written, emailed or verbal).
13. Risk assessments on the use of the ladder/s and/or work platform/s should be carried out at least twice annually with regular re-evaluation of the practices.

REFERENCE
1. Queensland Work Health and Safety Regulation 2011
2. Managing the Risk of Falls at Workplaces Code of Practice 2011
LICENSING, LEGISLATION, GOVERNING BODIES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall at all times operate the Centre in a way that is legislatively compliant.

PROCEDURES
1. Implementation of the Centre’s policies and procedures to ensure compliance.
2. Continuously update and improve on policies and procedures to seek a best practice standard.
3. Develop and maintain regular formal and informal contacts with key regulatory bodies.
4. Maintain memberships of peak industry body organisations to enable timely and effective access to relevant information.
5. Attend workshops, conferences, information sessions and professional development to ensure currency of information.
6. Subscribe to industry journals and websites.
7. Ensure that all required records are kept in the required format.
8. Seek regular feedback on compliance and recordkeeping to continuously improve the processes.
9. Maintain a compliance history log book in accordance with regulatory requirements.

REFERENCE
1. Education and Care Services National Law
2. Education and Care Services National Regulations
4. Office of Early Childhood Education and Care (OECEC)
5. Australian Children Education & Care Quality Authority ACECQA
MANUAL TASKS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall manage the risks associated with manual tasks that are undertaken within the Centre.

PROCEDURES
1. All manual task hazards within the workplace will be identified and assessed using the appropriate Codes of Practice and guidelines.
2. Control measures will be introduced for all manual task hazards that have a significant degree of risk.
3. Workplace layout and equipment design shall be considered first when seeking to minimise risks associated with manual tasks.
4. Mechanical aids will also be used wherever possible.
5. All workers will receive annual general manual tasks training, including safe lifting techniques, at induction and at regular intervals.
6. Sufficient supervision shall be undertaken to ensure the safety of workers when performing manual handling tasks.
7. Where staff spend more than 3 hours per day at computer monitors (continuously for typing and processing) work stations will comply with ergonomic standards:
   7.1 Ergonomic chairs providing height and back adjustment and lumbar support shall be provided to all workers performing screen-based work;
   7.2 Screens will be free of glare, and document holders will be supplied where needed;
   7.3 The Nominated Supervisor shall ensure all workers who perform screen based operations are trained in how to adjust their chairs and workstations for optimum comfort, and the early reporting of overuse, strain and sprain injury symptoms.

REFERENCES
4. Work Health and Safety Regulations 2011
MEDICAL CONDITIONS IN CHILDREN
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall identify children at risk due to medical conditions such as asthma, diabetes and allergies. We shall actively work to minimise the risks and manage the medical condition.

PROCEDURES
1. GENERAL REQUIREMENTS
1.1 Parents will be asked during enrolment if their child has a medical condition;
1.2 Parents must advise the Nominated Supervisor on enrolment if their child has a medical condition;
1.3 If a child has a medical condition, the parents will provide the service with a medical management plan for the child along with the child's enrolment form;
1.4 Details of any medical management plan will be provided to all staff who may have a cause to need such information;
1.5 The medical management plan will be followed by all staff at all times;
1.6 When a medical management plan is received by the Centre, the Nominated Supervisor shall ensure that a risk management plan and a communication plan are developed for that child;
1.7 The risk management plan shall address all relevant requirements for eliminating or minimising the risk for the child and shall consider and address such items as:
   1.7.1 Practices and procedures in relation to the safe handling, preparation, consumption and service of food are developed and implemented;
   1.7.2 Ensuring that all parents and families are advised of any items or foods that are not permitted to be brought into the Centre (i.e. A “Nut-Aware/Free” policy);
   1.7.3 Ensuring that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication;
   1.7.4 Ensuring that the child does not attend the Centre without essential medication.
1.8 The communication plan shall ensure that:
   1.8.1 Relevant staff members and volunteers are informed about the medical conditions policy and the medical management plan and risk minimisation plan for the child; and
   1.8.2 A child's parent can communicate any changes to the medical management plan and risk minimisation plan for the child, setting out how that communication can occur.
1.9 The Centre will ensure that a copy of this medical conditions policy document is provided to the parent of a child enrolled at the Centre if the child has a specific health care need, allergy or other relevant medical condition.
1.10 A child will be permitted to self-administer medication in accordance with the Medical Management Plan.

2. ALLERGIES
2.1 Parents must advise the Nominated Supervisor on enrolment if their child has an allergy;
2.2 An allergy can include but is not limited to:
   2.2.1 Food intolerance;
   2.2.2 Insects;
2.2.3 Plants.
2.3 Parents are to provide the Centre with a doctor’s written letter stating the allergy and the treatment required; OR
2.4 Parents are to provide the Centre with a specific action/emergency plan completed by their child’s doctor;
2.5 Parents are to communicate with and keep staff informed of any changes, as often as required or six monthly.

3. ANAPHYLAXIS
3.1 Parents must advise the Nominated Supervisor on enrolment if their child suffers from an allergic reaction;
3.2 Parents are to provide the Centre with a written medical management plan completed by their child’s doctor stating the allergy and the prevention or treatment for the condition;
3.3 A current photo of the child must be on the medical management plan i.e. No more than 12 months old;
3.4 Medication, including EpiPen if prescribed, must be provided by the parents and staff instructed in its use;
3.5 Medication must be checked for its condition and expiry date every six months by parents and staff;
3.6 Parents are to communicate with and keep staff informed of any changes, as often as required or six monthly;
3.7 The Centre will not admit, or allow any child to attend, that has been prescribed an EpiPen, if that child does not have an EpiPen at the Centre;
3.8 Staff will receive instructions and/or training in anaphylaxis management;
3.9 Staff must ensure that the child’s Anaphylaxis Management Plan is displayed in a prominent place along with the EpiPen, if prescribed;
3.10 EpiPen must be stored within easy reach of adult, out of reach of children, and away from any heat sources;
3.11 All staff of the Centre must be familiar with any children identified with having a Medical Management Plan;
3.12 Staff are to take the following action when an EpiPen or other adrenalin medication has been administered:
3.12.1 Note time given;
3.12.2 Call ambulance by dialling 000;
3.12.3 Notify parents;
3.12.4 Record the event.
3.13 A child will be permitted to self-administer medication in accordance with the Medical Management Plan.

4. ASTHMA
4.1 Parents must advise the Nominated Supervisor on enrolment if their child suffers from asthma;
4.2 Parents are to provide the Centre with a written medical management plan from their child’s doctor stating the triggers to their child’s asthma and the prevention or treatment for it;
4.3 A current photo of the child must be on the medical management plan i.e. No more than 12 months old;
4.4 Medication, if prescribed by the child’s doctor, must be provided by the parents and staff instructed in its use;
4.5 Medication must be checked for expiry date by parents and staff;
4.6 Parents are to communicate with and keep staff informed of any changes, as often as required or six monthly;
4.7 The Centre will not admit, or allow any child to attend, that has been prescribed preventative or treatment medication, if that child does not have the prescribed medication at the Centre;
4.8 Staff will receive instructions and/or training in asthma first aid management;
4.9 Staff must ensure display of the Asthma Management Plan is in a prominent place and prescribed medication is stored appropriately within the Centre;
4.10 A child will be permitted to self-administer medication in accordance with the Asthma Management Plan.
4.11 Asthma First Aid
Step 1. Sit the child upright, be calm and reassuring.
Do not leave the child alone.
Step 2. Give 4 separate puffs of a blue reliever using a spacer or face mask, using the “1 then 4” sequence:
1 puff – child takes 4 breaths
1 puff – child takes 4 breaths
1 puff – child takes 4 breaths
1 puff – child takes 4 breaths
Step 3. Wait 4 minutes
Step 4. If there is little or no improvement repeat steps 2 and 3.
If there is still little or no improvement call an ambulance immediately (DIAL 000).
Continue to repeat steps 2 and 3 while waiting for the ambulance.
4.12 Staff are to take the following action after each incident:
4.12.1 Note type and time medication given;
4.12.2 Notify parents;
4.12.3 Record the event.

5. DIABETES
5.1 Parents must advise the Nominated Supervisor on enrolment if their child suffers from Diabetes;
5.2 Parents are to provide the Centre with a written medical management plan completed by their child’s doctor stating the treatment for the condition;
5.3 A current photo of the child must be on the medical management plan i.e. No more than 12 months old;
5.4 Staff shall be trained to identify the signs of early hypoglycaemia (low blood sugar), which are:
5.4.1 Weakness, trembling or shaking;
5.4.2 Sweating;
5.4.3 Light headedness;
5.4.4 Headache;
5.4.5 Dizziness;
5.4.6 Lack of concentration/behaviour change;
5.4.7 Tearful/crying;
5.4.8 Irritability;
5.4.9 Hunger.
5.5 Numbness around the lips and fingers;
5.6 In the event of a child presenting with any of the above symptoms, the staff shall enact the medical management plan;

5.7 Staff shall also be trained in the management of a severe hypoglycaemic reaction. The symptoms of severe hypoglycaemia are:

5.7.1 Disorientation;

5.7.2 Seizures;

5.7.3 Unconsciousness; and possibly;

5.7.4 Death.

5.8 Severe hypoglycaemia is a medical emergency requiring that the child be transported immediately to medical attention in accordance with the medical management plan.

5.9 A child will be permitted to self-administer medication in accordance with the Medical Management Plan.

REFERENCES
1. Education and Care Services National Law
2. Education and Care Services National Regulations
4. “Staying Healthy in Child Care” – National Health and Medical Research Council
5. Asthma Foundation
6. Anaphylaxis Australia
7. Diabetes Australia
8. National Diabetes Support Service
MEDICATION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will ensure that the correct medication is given to the correct child at the correct time and in the correct dose.

GENERAL PROCEDURE
1. Staff will only administer medication that is in its original, labelled container.
2. Staff will only administer the recommended dose that is printed on the label.
3. Parents are to hand medication to the appropriate staff member.
4. Parents are to complete the Medication Sheet daily.
5. The Medication Sheet shall give accurate details of the times and dosage of medication for each child, which is not to exceed the recommended dose on the labelling.
6. Two staff must be present when any medication is administered.
7. One staff member will administer medication.
8. The second staff member is to check that the type and dose are consistent with the medication sheet and shall observe the administration of the medication.
9. Both staff shall sign the Medication register when child has received the dose.
10. The Centre will not accept an “as required” request from parents for time of delivery of medication unless it is accompanied by a letter from the child’s doctor.
11. All Medications will be stored securely and out of any child’s reach.
12. The administering of medication for long term conditions must be accompanied by a Management Plan from the child’s doctor.
13. A review of medications stored will occur every three (3) months.

SELF ADMINISTRATION PROCEDURE
1. A child over preschool age may self-administer medication if an authorisation for the child to self-administer medication is recorded in the medication record for the child;
2. A child may only self-administer medication where the medication relates directly to a “Medical Condition” (see the specific procedure for definitions) and self-administration forms part of the approved medical management plan for that child.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Framework
4. Children and Young Workers Code of Practice 2006
5. How to Manage Work Health & Safety Risks Code of Practice 2011
MISSING CHILD
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure staff take appropriate and effective action in the event of a child being taken by an unauthorised person or child inexplicably disappearing (lost) from care.

PROCEDURES
1. The missing child (children) should be identified and the last known whereabouts recorded. (The chances of finding a missing child safe are greatest if the child’s absence is noted quickly).
2. In the event that a child disappears inexplicably from the Centre, the supervising staff member shall immediately search the area for the missing child whilst ensuring supervision of existing children continues.
3. If the missing child is not found immediately the staff member shall notify the Nominated Supervisor.
4. The Nominated Supervisor shall coordinate a rapid and comprehensive search of the licensed area for the child.
5. In the event that the child is not located, the Police shall be notified by calling 000.
6. The child’s parents must be notified as soon as possible by the Nominated Supervisor explaining what action has been instigated.
7. All details relating to the incident shall be noted in order to help as much as possible in the investigation and search, including:
   7.1 Date, time and location of the child immediately prior to the disappearance;
   7.2 Who was responsible for the care of the child at the time;
   7.3 What was the child wearing;
   7.4 Any distinguishing features;
   7.5 Circumstances surrounding disappearance;
   7.6 Time parents / other agencies contacted.
8. A record of events should be documented by the Nominated Supervisor or by another member of staff delegated by them.

9. ABDUCTIONS
9.1 In all situations when confronted with an unauthorised person attempting to remove a child from the Centre (abductor), the staff member is to make every effort to ensure that the person is unsuccessful, however, they are not under any circumstances to respond physically to the intruder;
9.2 The staff member is to make every attempt to mentally note their physical features, particularly distinguishing features such as scars, types of clothing and details, their height in relationship to doorways or another fixed point in the building;
9.3 Details of any vehicle used, including model, colour, registration number etc., and direction of travel;
9.4 The staff member is to immediately notify the Nominated Supervisor of the event;
9.5 The Nominated Supervisor or other appropriate staff member shall immediately call the Police on 000;
9.6 The Nominated Supervisor shall then immediately call the parents, explaining what has occurred.
10. DEALING WITH REACTIONS
10.1 It is natural that the child’s parents will be frightened, distressed and angry. Other parents will be rightly concerned for the safety of their own children. The Centre management and staff will also be shocked and upset at any lapse in security;

10.2 All emotions and reactions must be dealt with in a caring and understanding way;
10.3 Until the situation has been fully investigated by Police and management, no comment will be made to the media or other members of the Centre community;
10.4 The Centre will proactively and rapidly work with other agencies to provide any and all debriefing and counselling services for those affected by the incident.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Framework
4. Victims of Crime Association of Queensland Managing Trauma Program
5. Noah’s Ark Preschool UK www.noahsark-preschool.co.uk
NATURAL DISASTERS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall be prepared and equipped to manage the impact of natural disasters on the Centre.

PROCEDURE
1. The following pre-emptive measures shall be undertaken:
   1.1 The Centre shall have sufficient clean storage containers to hold enough water for each person present for 24 hours;
   1.2 The Centre shall consider holding a small store of long-life non-perishable food items in the event of a prolonged lockdown;
   1.3 The Centre shall have sufficient blankets and/or covers on hand to provide warmth if required.
2. In the event of a broadcast warning of an impending event, the Nominated Supervisor shall determine if the Centre will operate during the warning period.
3. If the decision is made to cease operation during the course of a normal operating day, contact will be made with parents and carers to advise of the decision and arrange for children to be exited.
4. If time allows, staff shall undertake the following:
   4.1 All objects that could become hazards during high winds must be anchored or moved indoors;
   4.2 Doors and windows should be firmly locked;
   4.3 Electrical power to the building must be disconnected and all electrical appliances switched off prior to leaving the building;
   4.4 Documents, paper records and computer records shall be secured or moved off-site to a secure location;
   4.5 Any hazardous substances shall be relocated to a secure location to minimize the risk of site contamination;
   4.6 If time permits the Nominated Supervisor shall determine if further protective measures shall be undertaken, such as windows being re-enforced with suitable material such as timber or sheet metal.
5. In the event of a natural disaster occurring with insufficient warning for the Centre to cease operation then the Nominated Supervisor shall:
   5.1 Advise Emergency Services of the status of the Centre and then seek advice as to the appropriate response;
   5.2 Determine if evacuation or lockdown procedure is required;
   5.3 Actively reassure the staff and children;
   5.4 Ensure that staff and children are kept away from windows and glass;
   5.5 Monitor the situation and keep all staff informed as to the required actions;
   5.6 Ensure that any electrical devices that are not required are switched off (including lights);
   5.7 The Nominated Supervisor shall determine if the event has passed;
   5.8 No staff or children should go outside unless the Nominated Supervisor or a suitably qualified person (such as a Police Officer or State Emergency Service supervisor) has given the instruction.
6. All persons will remain inside until the determination by the Nominated Supervisor the event has passed and if it is safe to do so, and other senior staff shall visually
examine the outside of the building and grounds area to determine any immediate hazards.

7. In the event of a severe event with a large amount of damage to the Centre and surrounding area, the Nominated Supervisor shall:
   7.1 Contact local emergency services agencies and seek advice on appropriate response;
   7.2 Attempt to re-establish basic services such as water, toilets, telephone and electricity supply;
   7.3 Conduct a risk assessment of damaged areas and implement appropriate short-term control measures, such as exclusion areas and glass clean up;
   7.4 Brief children and staff as to potential electrical hazards;
   7.5 Restrict water consumption to water that has been stored in containers;
   7.6 Children must not be allowed to play in floodwaters or near places with drains;
   7.7 A safe passage from the Centre to either a car park or a street near the Centre must be established (this can include predetermined evacuation routes).

8. In the aftermath of a natural disaster, normal operation of the Centre shall only be undertaken when it is safe to do so.

9. All workers, children and families shall be given access to professional counselling services to assist in recovery from any psychological trauma experienced.

10. A program of monitoring staff and children for signs of post-traumatic stress disorder shall be undertaken for at least six months following return to normal operation.

11. EMERGENCY CONTACT NUMBERS
   Police/Fire/Ambulance Emergency: 000
   Police Link 24/7 131 444
   State Emergency Service: 13 25 00
   Bureau of Meteorology Information: 1300 659 219
   Energex (power loss) 13 62 62
   Energex (emergency – lines down): 13 19 62
   Kids Help Line: 1800 551 800
   Parentline: 1300 30 1300

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
4. Queensland Work Health and Safety Regulations 2011
5. Australian Bureau of Meteorology www.bom.gov.au
6. UK Severe Storm Service www.bbc.co.uk
7. Queensland Department of Emergency Services www.emergency.qld.gov.au
8. Queensland State Emergency Service (SES)
9. Queensland Disaster Management Guidelines 2005
OUTLINE OF THE PROGRAM
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We recognise the individuality of each child and we will develop our educational programs to challenge each child to expand their knowledge, develop their skills and expand their interests.

PROCEDURES
1. OVERVIEW
1.1 All programming within the Service shall be:
1.1.1 Based on an approved learning framework;
1.1.2 Delivered in accordance with that framework;
1.1.3 Based on the developmental needs, interests and experiences of each child, taking into account their individuality.
1.2 All programs will be based on:
1.2.1 ‘My Time, Our Place’ - Framework for School Aged Care in Australia.
1.3 Our program will contribute to the following outcomes for children:
1.3.1 Children have a strong sense of identity;
1.3.2 Children are connected with and contribute to his or her world;
1.3.3 Children have a strong sense of well-being;
1.3.4 Children are confident and involved learners;
1.3.5 Children are effective communicators.

2. INDIVIDUALITY
2.1 All evaluations will be based on the individual needs of the child;
2.2 Each child will be observed using information gathered from a wide variety of sources;
2.3 Initial assessment will be developed from the information obtained during enrolment as to the skills, experiences and interests of the child, together with the background and expectations of the family;
2.4 Evaluations will be continuously refined by educators from observational records of all children;
2.5 Samples of children’s work can form part of the records kept;
2.6 Assessment of children over pre-school age should focus on evaluations of the child’s well-being, development and learning within the educational program;
2.7 Confidentiality shall be maintained at all times when recording individual observations;
2.8 A minimum of 1 observation per term with an evaluation is to be completed per child, while developing a whole view of the child’s development over a yearly period;
2.9 Observations will incorporate reflection on the child’s participation in a group environment, together with spontaneous activities initiated by the child;
2.10 A child’s progress will be shared with the family, informally and formally;

3. PROGRAM PLANNING
3.1 Educators will outline a plan for each day’s activity that:
3.1.1 Is detailed and flexible;
3.1.2 Balances individual, small group and whole group experiences/tasks;
3.1.3 Balances indoor, outdoor, quiet and active experiences;
3.1.4 Allows large blocks of time and space for children to complete projects;
3.1.5 Is flexible to accommodate changing needs and interests of children;
3.1.6 Allows for transitions to routine times such as eating, toileting and resting.
3.2 Planning developmental and educational programs will be undertaken taking into account the individuality of the children. All programs will:
3.2.1 Be appropriate for the developmental stage of the child;
3.2.2 Consistent with the Centre’s philosophies and goals;
3.2.3 Incorporate recognised development and intelligences areas;
3.2.4 Meet the needs and consider the interests of all children;
3.2.5 Reinforce gender equity and cultural diversity;
3.2.6 Value environmental issues, such as sustainability, recycling, water conservation;
3.2.7 Provide a variety of meaningful experiences;
3.2.8 Encourage children to think, reason, question, experiment and problem solve.
3.3 All planning, both individual and group, will be effectively documented;
3.4 Planning will be driven by defined short and long term outcomes;
3.5 Planning will be refined using information obtained from observations of each individual child;
3.6 Where appropriate, children will participate in the planning process by:
3.6.1 Contributing ideas;
3.6.2 Defining success; and
3.6.3 Assisting with evaluation.
3.7 Where appropriate, parents and carers will participate in the planning process:
3.7.1 Program outlines will be displayed for parents to view;
3.7.2 Parents will be encouraged to give feedback on the program and to contribute appropriate ideas that will enhance the learning experience for the children;
3.7.3 Parent contributions will be incorporated into the final program whenever appropriate and practical;
3.7.4 Parents will be given effective and positive feedback regarding their contributions to the program.
3.8 All programs shall be flexible to allow some spontaneous variation that is responsive to the children’s ideas and participation during the activity.

4. EVALUATION
4.1 All programs will be evaluated according to the goals and outcomes that were set;
4.2 Evaluations will be undertaken on a daily, weekly and individual basis;
4.3 Evaluation will include staff observations, records, children’s involvement, enjoyment and learning, meeting of desired outcome/s, and feedback from families;
4.4 Evaluation will show the program’s strengths and weaknesses and future plans for improvement (by whom and in what timeframe);
4.5 Critical Reflection is a way for educators to reflect on the program and their own practices, beliefs, values and philosophy, and forms part of the evaluation process;

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
PARENT HANDBOOK
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that parents are made aware of the terms, conditions, acceptable behaviours and routines of the Centre.

PROCEDURES
1. A parent handbook shall be developed by the Centre.
2. The handbook will be updated at least annually or more often if required.
3. Parents shall be invited to participate in the development and review of the parent handbook.
4. Where appropriate, the ideas and suggestions made by parents and carers shall be incorporated in the handbook.
5. The parent handbook shall include, but not necessarily be limited to, the following information:
   5.1 General information about the Centre including contact details;
   5.2 Service Philosophy and Goals;
   5.3 Overview of Policy and Procedures;
   5.4 Enrolment and Orientation;
   5.5 Communication processes and protocols;
   5.6 Child Protection;
   5.7 Photographs and images;
   5.8 Priority of Access and Non-Discriminatory Access;
   5.9 Record Keeping;
   5.10 Confidentiality;
   5.11 Parent Code of Conduct;
   5.12 Staffing arrangement;
   5.13 Concerns, Complaints and Suggestions;
   5.14 Arrivals and Departures;
   5.15 Late Collection;
   5.16 Child Code of Conduct;
   5.17 Health and Safety;
   5.18 Health and Hygiene;
   5.19 Illness and Injury;
   5.20 Medication;
   5.21 Daily Routines;
   5.22 Morning and Afternoon tea;
   5.23 Lunch / Menus (where applicable);
   5.24 Behaviour Management;
   5.25 Damage to Equipment of Facilities;
   5.26 Students, Visitors and Volunteers;
   5.27 Excursions;
   5.28 Transport;
   5.29 Clothing;
   5.30 Babysitting by staff;
   5.31 Programming;
   5.32 Personal effects;
   5.33 Child Transport in Staff Vehicles;
5.34 Payment of Fees;
5.35 Outstanding Fees;
5.36 Childcare Benefit;
5.37 Bookings;
5.38 Attendance;
5.39 Child absences.

REFERENCES
1. National Quality Framework
2. Early Childhood Australia www.earlychildhoodaustralia.org.au
PARTNERSHIPS WITH PARENTS AND FAMILIES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will ensure that positive, active and meaningful partnerships are developed and maintained with parents and families.

PROCEDURES
1. Effective partnerships with parents and families shall be actively encouraged at all levels of the Centre operation.
2. Parents and families are welcomed, respected and valued as partners in the children's learning and development.
3. Parents and families will be given a range of choices as to how to become involved in the Centre.
4. Parents and families shall be consulted in matters that affect their children.
5. Every child/parent /carer shall receive support to his/her individual needs.
6. All matters relating to children, parents and staff will be treated with respect and in a confidential manner.
7. Parents will be provided with information about their child's development and routine.
8. The Centre shall have an “open door” philosophy and parents will be encouraged to observe, participate and share in their child's education and care.
9. Any complaints or concerns shall be acted upon promptly and in a confidential manner.

REFERENCES
1. National Quality Framework
2. Early Childhood Australia www.earlychildhoodaustralia.org.au
PURCHASING
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall only purchase equipment, materials and services that represent value for money, adherence to legislative requirements and are quality products and services that are safe for children and staff.

PROCEDURES
1. Prior to the purchase of any regular consumable item for the Centre, the Nominated Supervisor must ensure the appropriate Australian Standard is listed on the purchase order or requested from the Supplier.
2. Following pick up or delivery, purchases must be checked to ensure they comply with Centre requirements by observing the Standards Australia mark on the item or by a specific examination of the item prior to use.
3. Prior to the use of any new non-regular materials, equipment, machinery or hazardous substances a risk assessment shall be carried out when, in the opinion of the Nominated Supervisor it is required.
4. Any risk assessment shall be conducted in accordance with the risk assessment procedure.
5. The purchaser shall conduct the risk assessment, with assistance/advice from the Nominated Supervisor.
6. Where major items (in excess of $5,000 value) are to be purchased, a specification for the required item shall be developed.
7. The specification for major purchases will include the requirements for meeting all relevant Australian Standards or other safety references as required.
8. The Nominated Supervisor shall ensure that all major equipment which is being purchased is inspected at the supplier’s premises prior to delivery and that it complies with all agreed standards.
9. Any substance or chemical purchase shall be preceded by the Centre viewing the Material Safety Data Sheet (MSDS) for the product.
10. The MSDS shall state clearly whether or not the substance is hazardous.
11. Hazardous goods shall be identified and a risk assessment/risk management process undertaken prior to the decision to purchase the product.
12. Non-hazardous goods shall be marked as such and the MSDS shall be kept on file for access by any users of the product.
13. Where services are being purchased checks shall be undertaken to ensure that the supplier is suitably qualified and experienced to undertake the service required.
14. All records of risk assessments, purchasing decision and details provided by the suppliers shall be kept by the Service.
15. All MSDS, hazardous substance assessments shall be distributed and stored as per the hazardous substances procedure.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
3. Children and Young Workers Code of Practice 2006
5. Creating Safe Environments for Children National Framework 2005
RECORD KEEPING
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all required records are kept in an appropriate way.

PROCEDURES
Records required to be kept under the National Education and Care Regulations:
1. EDUCATIONAL PROGRAMS RECORDS
1.1 The Centre must ensure that, for the purposes of the educational program, the following are documented:
1.1.1 For a child preschool age or under assessments of the child’s developmental needs, interests, experiences and participation in the educational program; and assessments of the child’s progress against the outcomes of the educational program;
1.1.2 For a child over preschool age, evaluations of the child’s wellbeing, development and learning.

2. INCIDENT, INJURY AND TRAUMA RECORDS
2.1 The Centre must ensure that an incident, injury, trauma and illness record is kept in accordance with the regulations;
2.2 The incident, injury, trauma and illness record must include:
2.2.1 Details of any incident in relation to a child or injury received by a child or trauma to which a child has been subjected while in care, including:
a) The name and age of the child; and
b) The circumstances leading to the incident, injury or trauma; and
c) The time and date the incident occurred, the injury was received or the child was subjected to the trauma.
2.3 Details of any illness which becomes apparent while the child was in care including:
2.3.1 The name and age of the child;
2.3.2 The relevant circumstances surrounding the child becoming ill;
2.3.3 The time and date of the apparent onset of the illness.
2.4 Details of the action taken by the Centre in relation to any incident, injury, trauma or illness which a child has suffered while in care, including:
2.4.1 Any medication administered or first aid provided;
2.4.2 Any medical personnel contacted;
2.4.3 Details of any person who witnessed the incident, injury or trauma;
2.4.4 The name of any person the service notified or attempted to notify;
2.4.5 The time and date of the notifications or attempted notifications;
2.4.6 The name and signature of the person making an entry in the record, and the time and date that the entry was made.
2.5 The information above must be recorded as soon as practicable, but not later than 24 hours after the incident, injury or trauma, or the onset of the illness.

3. MEDICATION RECORDS
3.1 The Centre will keep a record of all medications held for children in care.
The records will include:
3.1.1 The name of the child;
3.1.2 The authorisation to administer medication (including, if applicable, self-administration), signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication;

3.1.3 The name of the medication to be administered;

3.1.4 The time and date the medication was last administered;

3.1.5 The time and date, or the circumstances under which, the medication should be next administered;

3.1.6 The dosage of the medication to be administered;

3.1.7 The manner in which the medication is to be administered.

3.2 If the medication is administered to the child, the record must include:

3.2.1 The dosage that was administered;

3.2.2 The manner in which the medication was administered;

3.2.3 The time and date the medication was administered;

3.2.4 The name and signature of the person who administered the medication;

3.2.5 If another person is required to check the dosage and administration, the name and signature of that person.

4. STAFF RECORDS

(Including educational leaders, volunteers, vocational students, responsible persons and early childhood teachers)

4.1 Staff records for all staff and the nominated supervisor will include:

4.1.1 The full name, address and date of birth of the person;

4.1.2 Evidence of any relevant qualifications held by the person; or if applicable, that the person is actively working towards that qualification;

4.1.3 Evidence of any approved training (including first aid training) completed by the person;

4.1.4 Positive notice for child related employment (Blue Card).

4.2 The staff record must include the name of the person designated as the educational leader.

4.3 The staff record must include the full name, address and date of birth of each student or volunteer who participates in the centre-based service;

4.4 The Centre must also keep a record for each day on which the student or volunteer participates in the Centre, the date and the hours of participation;

4.5 The staff record must include the name of the responsible person at the centre-based service for each time that children are being educated and cared for by the Centre;

4.6 The approved provider of a centre-based service must keep a record of educators working directly with children that includes the following information:

4.6.1 The name of each educator who works directly with children being educated and cared for by the Centre;

4.6.2 The hours that each educator works directly with children being educated and cared for by the Centre (rosters and timesheets).

4.7 The Centre must ensure that a record is kept of the period that an early childhood teacher is in attendance at the service in accordance with the Regulations;

4.8 The Service will keep a record of the supervisors who are placed in day to day charge of the Service.

5. ATTENDANCE RECORDS

5.1 Children's attendance record are to be kept by the Centre and shall include:
5.1.1 Records the full name of each child attending the Centre;
5.1.2 Records the date and time each child arrives and departs;
5.1.3 Is signed by one of the following persons at the time that the child arrives and departs:
   a) The person who delivers the child to the education and care service premises or collects the child from the education and care service premises;
   b) The nominated supervisor or an educator.

6. ENROLMENT RECORDS
6.1 The Centre will ensure that an enrolment record is kept for each child that includes:
6.2 The full name, date of birth and address of the child;
6.3 The name, address and contact details of:
   6.3.1 Each known parent of the child;
   6.3.2 Any person who is to be notified of an emergency involving the child if any parent of the child cannot be immediately contacted;
   6.3.3 Any person who has been given permission by a parent or family member to collect the child from the Centre;
   6.3.4 Any person who is authorised to consent to medical treatment of, or to authorise administration of medication to, the child;
   6.3.5 Any person who is authorised to authorise an educator to take the child outside the Centre premises.
6.4 Details of any court orders, parenting orders or parenting plans provided to the Centre relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child;
6.5 Details of any other court orders provided to the Centre relating to the child's residence or the child's contact with a parent or other person;
6.6 The gender of the child;
6.7 The language used in the child's home;
6.8 The cultural background of the child and, if applicable, the child's parents;
6.9 Any special considerations for the child, for example any cultural, religious or dietary requirements or additional needs;
6.10 An authorisation, signed by a parent or a person named in the enrolment record as authorised to consent to the medical treatment of the child, for the Centre to seek:
   6.10.1 Medical treatment for the child from a registered medical practitioner, hospital or ambulance service;
   6.10.2 Transportation of the child by an ambulance service.
6.11 If relevant, an authorisation for the Centre to take the child on regular outings;
6.12 The name, address and telephone number of the child's registered medical practitioner or medical service;
6.13 The child's Medicare number;
6.14 Details of any:
   6.14.1 Specific healthcare needs of the child, including any medical condition;
   6.14.2 Allergies, including whether the child has been diagnosed as at risk of anaphylaxis;
   6.14.3 Any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy;
6.15 Details of any dietary restrictions for the child;
6.16 The immunisation status of the child;
6.17 If the child’s health record has been seen by the Centre.

7. COMPLIANCE RECORDS
7.1 The Centre shall keep a record of any compliance matters, including:
7.2 Details of any amendment of the Centre approval including:
  7.2.1 The reason stated by the Regulatory Authority for the amendment;
  7.2.2 The date on which the amendment took, or takes, effect;
  7.2.3 The date (if any) that the amendment ceases to have effect;
7.3 Details of any suspension of the Centre approval (other than a voluntary suspension), including:
  7.3.1 The reason stated by the Regulatory Authority for the suspension;
  7.3.2 The date on which the suspension took, or takes, effect;
  7.3.3 The date that the suspension ends.
7.4 Details of any compliance direction or compliance notice issued to the approved provider in respect of the service, including:
  7.4.1 The reason stated by the Regulatory Authority for issuing the direction or notice;
  7.4.2 The steps specified in the direction or notice;
  7.4.3 The date by which the steps specified must be taken.
7.5 The compliance records must not include any information that identifies any person other than the approved provider;
7.6 Compliance information is not required to be kept on the official compliance records until:
  7.6.1 The time period for a review has expired;
  7.6.2 An application for internal or external review has been made but not yet determined; or
  7.6.3 An application for internal or external review has been determined, and the amendment, suspension, compliance notice or compliance direction was not confirmed.

8. Records required to be kept for Centres operating under the Child Care Management System (CCMS):
8.1 Electronic Enrolment and Attendance Record Reports (or access to copies);
8.2 Attendance records including absences;
8.3 Copies of supporting documentation for Additional Absences for each child;
8.4 Documents to support claims for Special Child Care Benefit and 24-hour care;
8.5 Copies of receipts issued to people, who have paid child care fees;
8.6 Enrolment forms;
8.7 License to operate a child care service issued by the State and Territory in which the Centre operates;
8.8 Current Centre insurance records and policies;
8.9 Accounting records, including cashbooks and journals.

9. Records required to be kept under the Building (Fire Safety) Regulations:
9.1 Records kept by the Centre for the Building (Fire Safety) Regulations shall be stored in a place that reasonably protects them from damage in the event of a fire;
9.2 Annual Occupiers’ Statements;
9.3 Certificate of Building Classification;
9.4 Fire and Evacuation Plan for each building;
9.5 Evacuation Signs and Diagrams for each evacuation route;
9.6 Training records for General Evacuation Instructions;
9.7 Training records for “First Response” fire training;
9.8 Training records for the Emergency Response Team;
9.9 Evacuation practice records;
9.10 Personal Emergency Evacuation Plan (PEEP) for any individual who cannot use the normal evacuation procedures;
9.11 Maintenance records for all fire safety equipment;
9.12 Critical defect notices and details of rectification works;
9.13 Details of inspections by Fire Officers;
9.14 Any other information required by the Act or Regulations.

10. Records required to be kept under other Acts and Regulations:
10.1 The Centre shall keep all other records prescribed under legislation, regulations, local government by-laws and national codes including but not limited to:
10.1.1 Work Health and Safety Act 2011 and Regulations;
10.1.2 Food Safety Acts and National Standards;
10.1.3 Electrical Safety Act and Regulations;
10.1.4 Company and Corporations Act and Regulations;
10.1.5 Taxation Administration Act and Regulations;
10.1.6 Other Taxation legislation;
10.1.7 Child Safety Act
10.1.8 Commission for Children & Young Persons and Child Guardian Act;
10.1.9 Fair Work Act;
10.1.10 Workcover Act;
10.1.11 Local Government Act and Regulations;

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
4. Queensland Work Health and Safety Regulations 2011
5. Queensland Building (Fire Safety) Regulations 2008
6. DEEWR CCMS Instruction Sheet no. 2
7. National Quality Framework
SEVERE WEATHER EVENTS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall effectively manage the impact of severe weather events on the Centre.

PROCEDURES
1. Management and staff at the Centre shall at all times take note of the prevailing weather conditions.
2. The Nominated Supervisor or another delegated staff member shall undertake a daily check of forecasted weather conditions in the area.
3. If there is a forecasted risk of a severe weather developing on that day, hourly checks of the bureau of meteorology website www.bom.gov.au/weather/qld or calls to the recorded information service on 1300 659 219, shall be undertaken. Alternately, a staff member shall listen to a local radio station for warnings.
4. All staff shall also keep an informal watch on the sky at all times and if there appears to be a change developing, the staff member shall advise the Nominated Supervisor who shall undertake a formal check of the weather warnings system.
5. In the event that a severe weather warning is issued, the Nominated Supervisor shall estimate the time before the Centre will come under the influence of the event.
6. The Nominated Supervisor shall advise all staff of the nature and timeframe of the event.
7. In the lead up to the event and in a relevant timely manner staff shall:
   7.1 Remain calm and ensure that the children are not unduly concerned;
   7.2 Move the children into their rooms and check to ensure all children and other staff are accounted for;
   7.3 Pack up outdoor equipment;
   7.4 Secure any outdoor furniture that cannot be put into storage;
   7.5 Pack up and secure toys and small equipment from outside;
   7.6 If time and supervision numbers allow, staff shall be given the opportunity to park vehicles under solid shelter or cover with firmly tied tarpaulins/blankets;
   7.7 Secure all external doors and windows and draw curtains and blinds;
   7.8 Ensure that valuables, medications are packed and secure;
   7.9 Ensure that adequate drinks are available for each person in each area;
   7.10 Check that the Service First Aid kit is accessible;
   7.11 Disconnect all electrical items, external TV/radio aerials and computer modems.
8. During the event, the staff shall:
   8.1 Reassure the children and maintain a positive outlook;
   8.2 Keep the children occupied with suitable activities;
   8.3 Stay inside and shelter well clear of windows, doors and skylights;
   8.4 If the building starts to break up, shelter in the strongest part under a mattress, doona, or a strong table or bench;
   8.5 Keep informed as to the weather events progress, either through the Nominated Supervisor or by listening to a portable radio;
   8.6 Do Not Use electrical equipment or landline telephones.
9. The Nominated Supervisor shall determine if the event has passed.
10. Nominated Supervisor and a senior staff member shall inspect the outside of the Centre for possible damage and/or hazards.
11. Any hazards identified shall be addressed using the process contained in the
Centre’s Risk Management Policy.
12. If minor external clean-up is required, the Nominated Supervisor shall determine the process to be used.
13. In the event that the external area has sustained damage and/or is polluted by debris, the Nominated Supervisor shall contact the appropriate emergency services.
14. No child or staff member shall go outside until the Nominated Supervisor has given an “all clear”.
15. Arrangements shall be made by the Nominated Supervisor to ensure that enough staff are available to answer both telephone and in-person parent enquiries.
16. The Nominated Supervisor shall make arrangements for extended operating hours if the event has likely caused road closures or public transport disruption.
17. Staff and children shall be de-briefed following the event.
18. If required, the Centre shall arrange for staff and/or children to access professional counselling services.
19. EMERGENCY CONTACT NUMBERS
   Police/Fire/Ambulance Emergency: 000
   Police Link 24/7 131 444
   State Emergency Service: 132 500
   Bureau of Meteorology Information: 1300 659 219
   Energex (power loss) 13 62 62
   Energex (emergency – lines down): 13 19 62
   Kids Help Line: 1800 551 800
   Parentline: 1300 30 1300

REFERENCES
1. Australian Bureau of Meteorology www.bom.gov.au
2. Queensland State Emergency Services www.emergency.qld.gov.au
4. Queensland Work Health and Safety Regulations 2011
STAFF DISCIPLINE AND TERMINATION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure fairness and equity at all times in our management of staff, however we shall not hesitate to undertake disciplinary action or termination of an employee if the situation warrants such action.

PROCEDURES
1. If at any time staff are breaching or working outside the outlined expectations, the concerns are to be addressed by the Centre management.
2. The manner in which the issue will be addressed will depend on individual circumstances.
3. All incidents and issues dealt with under this section shall be documented and kept on file for future reference.
4. Counselling Interviews
   4.1 If an issue is seen as a clear breach of legislation and/or Centre Policies and Procedures, a counselling interview will be given;
   4.2 This allows staff to identify any issues that are directly influencing their performance or contributing to the actions taken, and for management to identify any additional support or training required to assist the staff in rectifying the problem.
5. Written Warnings
   5.1 A written warning will be given to a staff member if a breach of obligation is deemed negligent or irresponsible, or if an issue is ongoing;
   5.2 Further warnings may be given if the same issue occurs whilst the staff member is employed at the Centre, however ongoing breaches will result in an escalated process.
6. Formal Investigation
   6.1 A formal investigation will be conducted if evidence is not clear and concise in relation to any alleged staff breaches;
7. Disciplinary Actions
   7.1 Depending on the nature of the breach, a staff member may be placed on probation, demoted or have pay increments withheld pending improved performance.
8. Dismissal
   8.1 Failure by a staff member to modify unacceptable or inappropriate behaviours will result in that staff member being given notice of termination of employment.
9. Instant Dismissal
   9.1 Staff may be instantly dismissed for gross misconduct.

REFERENCES
1. Education and Care Services National Regulations 2011
2. National Quality Standard
3. Child Care Industry Award – State 2003
4. Children’s Services Award – State 2006
5. Workplace Relations Act 2006
6. Fair Work Act 2010
STAFF HANDBOOK
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that staff are made aware of the terms, conditions, acceptable
behaviours and routines of the Centre by providing a staff handbook.

PROCEDURES
1. A staff handbook shall be developed by the Centre.
2. The handbook will be updated at least annually or more often if required.
3 Where appropriate, the ideas and suggestions made by staff shall be incorporated
in the handbook.
5. The staff Centre Service
5.2 Service Philosophy Statement
5.3 Our Goals
5.4 Our Structure and Licensee
5.5 Key Staff Expectations
5.6 The Rights of the Child
5.7 Duty of Care
5.8 Code of Conduct
5.9 Code of Ethics (Team Rules)
5.10 Policies and Procedures
5.11 Accident and Incident Reports
5.12 Alcohol, Drugs and Medication
5.13 Arrivals and Departures
5.14 Award
5.15 Behaviour Management
5.16 Bullying and Harassment
5.17 Car Parking
5.18 Child Protection
5.19 Cleaning
5.20 Communication Standards
5.21 Communication with Management (Staff Meetings)
5.22 Communication with Children
5.23 Communication with Parents
5.24 Computer and Internet use
5.25 Confidentiality
5.26 Continuous Improvement
5.27 Dress Code
5.28 Emergencies
5.29 Enrolment and Fees
5.30 Equipment Use and Care
5.31 Footwear
5.32 Hygiene and Cleaning
5.33 Infectious Diseases
5.34 Intellectual Property
5.35 Leaving Employment
5.36 Lost Property
5.37 Medication
5.38 Opening and Closing of the Service
5.39 Orientation and Induction
5.40 Personal Items
5.41 Probation
5.42 Professionalism
5.43 Programming
5.44 Report Writing and Record Keeping
5.45 Rosters
5.46 Smoking
5.47 Social Media (Facebook, Twitter etc)
5.48 Staff Absences
5.49 Staff Appraisals/ Evaluations
5.50 Staff Disciplinary Process
5.51 Staff Grievances
5.52 Staff Surveys
5.53 Sunsafe/SunSmart
5.54 Supervision of Children
5.55 Telephone and Private Phone (including mobile phone) use
5.56 Time Sheets
5.57 Training and Professional Development
5.58 Workplace Health and Safety

6. The staff handbook is a procedural document of the Centre and forms a part of the conditions of employment.

7. Breaches of the statements in the staff handbook will subject the staff member to disciplinary action.

8. The staff handbook applies to all workers at the Centre, both paid and non-paid.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. Fair Work Australia
STAFF RECRUITMENT, INDUCTION AND RETENTION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall at all times endeavour to recruit and retain staff of the highest quality for our Centre.

PROCEDURES
1. RECRUITMENT
1.1 Staff will be recruited from a variety of sources;
1.2 A recruitment process will be aimed at obtaining the best possible person for the job;
1.3 All positions within the Centre shall have a written Role Statement/Position Description;
1.4 Written applications may be required for the vacant position;
1.5 All potential employees shall be formally interviewed for the position;
1.6 The interview shall explain clearly the role being filled, as well as the philosophy and standards of the Centre;
1.7 The number of people and general composition of the interview panel shall depend on the position being filled;
1.8 Applicants will be directly assessed against suitability for the position;
1.9 Each applicant will be required to supply the names and contact details of three referees, at least one of whom is a former supervisor with direct knowledge of the applicants work performance and capabilities;
1.10 Referee reports shall be obtained for at least the top two applicants;
1.11 Once the decision has been made, the successful applicant’s current manager shall be contacted (if not already) for a final referee report to confirm that the applicant’s current work performance is up to standard;
1.12 The successful applicant may be subject to a Police Criminal Records check request as per the Centre’s child safety procedures.

2. INDUCTION
2.1 The successful applicant shall be given a comprehensive induction to the Centre;
2.2 The induction shall be based on the content of the Staff Handbook.

3. RETENTION
3.1 It is recognised that retention of staff is a vital component of quality service delivery;
3.2 Staff are most likely to remain in a workplace that is inclusive, encouraging, supportive and meets the needs of the individual;
3.3 All staff will be treated with dignity and respect in a safe and supportive team environment;
3.4 All staff will be supported in a manner that most suits the individual;
3.5 All staff will be recognised for the unique skills, insight and talent that they bring to the Centre;
3.6 Staff will be actively encouraged to work both individually and collectively for the best interests of the children;
3.7 Staff members will be individually and collectively rewarded for innovative and insightful improvements in our service delivery;
3.8 Regular feedback will be sought from all staff members to identify potential problems and actively work to rectify problems as they occur.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
4. Leadership in a Quality Service – PSCQ 2011
5. Fair Work Australia
STAFF EDUCATION, TRAINING AND DEVELOPMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that the staff and volunteers of the Centre achieve and maintain a high quality of professionalism to assist in the operation of the Centre.

PROCEDURES
1. All staff have a responsibly for on-going learning and continuous improvement.
2. Following appointment to any position within the Centre, the successful person shall undertake a site-specific induction program.
3. The induction program shall cover:
   3.1 General overview of the Centre;
   3.2 Roles of key people in the organisation;
   3.3 Job description and responsibilities;
   3.4 Rosters and attendance processes;
   3.5 Time recording procedures;
   3.6 Leave entitlements;
   3.7 Notification of sick leave or absences;
   3.8 Out of hours enquires and emergency procedures;
   3.9 Lunch room, washing and toilet locations and appropriate use;
   3.10 Car parking;
   3.11 Work Health and Safety policy and procedures;
   3.12 Roles and responsibilities for health and safety;
   3.13 Incident reporting procedures;
   3.14 Location of emergency exits, assembly point and fire extinguishers;
   3.15 Security procedures.
4. Ongoing and role-specific training needs will be identified in respect of both task and function and in terms of individual workers or groups of workers.
5. Training will be taken in both formal and informal formats.
6. Training may be conducted as in-service programs by the Service staff or by external training organisations.
7. A formal record of all training shall be maintained.
8. Records will include the following details:
   8.1 The type and purpose of the training course;
   8.2 Who conducted the course;
   8.3 Workers attending;
   8.4 Course content;
   8.5 Individual performance/results (where appropriate).

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
5. Queensland Work Health and Safety Regulations 2011
STAFF - YOUNG WORKERS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that any young worker at the Centre is treated with dignity and respect, and that particular hazards in the work environment are eliminated or minimised.

PROCEDURES
1. There shall be comprehensive selection processes when employing a young worker to ensure suitability for the role.
2. Young workers at the Centre shall hold every necessary qualifications needed to work in a child care Centre (e.g. child safety blue card).
3. Young workers must be supervised by a staff member of the Centre at all times.
4. Young workers must be considered when all forms of risk assessment and work health and safety management strategies are implemented or reviewed.
5. All young workers shall receive induction in all workplace health and safety procedures and be provided with access to the documentation that supports these procedures.
6. Young workers must provide a commitment to keep themselves and others safe during their work spent at the Centre.
7. The Nominated Supervisor must ensure that a safe and healthy work environment is provided for young workers at all times.
8. The Nominated Supervisor must ensure that young workers receive encouragement and support from all members of the staff.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Children and Young Workers Code of Practice 2006
STATEMENT OF PRINCIPLES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall actively embrace the Statement of Principles as defined in the National Quality Standard for Early Childhood Education and Care and School Age Care.

STATEMENT OF PRINCIPLES
1. The rights of the child are paramount
Each child has the right to be an active member of the community in which they live; to have their individual and cultural identity recognised and respected; to express their opinions and have their views considered in any decisions that may affect them. The National Quality Standard reflects Australia’s commitment to the United Nations Convention on the Rights of the Child and the obligation of all those who work with children to protect children from harm, respect their dignity and privacy and safeguard and promote every child’s wellbeing.

2. Children are successful, competent and capable learners. Children are active learners from birth, constructing their knowledge, meanings and understanding through their interactions, relationships and experiences. They are able to form opinions, express their ideas, collaborate with others, plan and persist in learning. The starting point for all learning is what children already know. Rich, engaging environments and meaningful interactions, where children’s voices are listened to and acted upon, build on this foundation for successful lifelong learning.

3. Equity, inclusion and diversity. In a fair and just society the intrinsic worth of all children and their families, their strengths and their right to equitable access and participation in the community is clearly visible in all aspects of Centre delivery. Programs for the care, education and recreation of children have a unique opportunity to include children from all family circumstances, cultural backgrounds and levels of ability. In particular, a commitment to the full participation of children with additional needs and their families involves enabling their initial access as well as supporting their day-to-day participation in the program. It requires capturing and maximising resources to support each child’s participation in and engagement with the program. By providing nurturing environments and supportive relationships they ensure that each child is valued for who they are and has opportunities to reach their full potential. One of Australia’s greatest strengths lies in its unique history and diverse heritage. The many different cultures, contexts and values of families and communities contribute to the richness of contemporary Australian society and inform plans for meaningful learning experiences for children.

4. Valuing Australia’s Aboriginal and Torres Strait Islander cultures. An approach that recognises and respects the strengths and contribution each individual and group makes to the Australian community and challenges bias, builds positive relationships and responds sensitively to the particular needs of each child and their family. Such an approach values Australia’s Aboriginal and Torres Strait Islander cultures as a core part of the nation’s history, present and future. This is relevant for all Centres, not only Centres with Aboriginal and Torres Strait Islander children and families enrolled in the service.

5. The role of parents and families is respected and supported. Parents and families are recognised as the child’s primary nurturers and teachers. They have both a right and a responsibility to be involved in decision making affecting their child.
Respectful, collaborative relationships strengthen the capacity and efforts of parents and families and of early childhood education and care and school age care services to support their children and promote each child’s learning and wellbeing.

6. High expectations for children, educators and Centre providers. The best interests of children and their right to learn and develop in a safe and nurturing environment is the primary consideration in all decision making at the Centre and is visible in the actions, interactions and daily work with children. Programs that reflect best practice in the care, education and recreation of children set high standards and expectations for all those responsible for the delivery of the Centre. They have an open and accountable organisational culture that is flexible and responsive to the local community. They continually reflect on their practice to find ways to improve outcomes for children in their Centre.

REFERENCE
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
**SUN PROTECTION**
Implementation Date: August 2013
Review Date: August 2014

**POLICY STATEMENT**
We shall ensure that all staff and children are protected from the harmful effects of the sun and that good practices are followed by all members of the Centre community.

**PROCEDURES**
1. Parents will ensure that their child has an approved style of hat to wear at the Centre.
2. Parents shall apply sunscreen prior to or on arrival at the Centre.
3. Parents shall ensure children’s clothing provides adequate protection from UV rays and that this UVR safe clothing covers exposed areas of skin, which are clothes with sleeves.
4. Staff will actively role model the wearing of hats and protective clothing; Broad Spectrum (30+ broad-spectrum, water resistant sunscreen SPF30) is supplied by the Centre for all children and staff.
5. Sunscreen will be correctly applied to all exposed areas of skin 20 minutes before exposure.
6. Sunscreen will be re-applied every two hours or after water play or if children’s faces and hands have been washed.
7. Good hygiene practices should be observed when applying sunscreen to children including staff washing their hands before and after application.
8. The Centre will limit times for outside play to before 10am and after 3pm. The best times for outdoors are early morning and late afternoon.
9. The use of shade is the safest way to protect children from the sun. All equipment shall be set up only in shaded areas and children shall be directed to play mainly in those areas.
10. The Centre shall rigorously enforce the “No Hat, No Play” rule.

**REFERENCES**
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
3. National Quality Standard
SUPERVISION OF CHILDREN
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We recognise that the welfare and best interest of the individual child will always be our primary consideration and that effective, professional supervision shall be our primary focus as a Centre.

PROCEDURES
1. STAFF TRAINING AND INDUCTION
   1.1 All staff shall undertake a comprehensive induction program upon commencement;
   1.2 All staff shall undertake ongoing professional development to ensure a process of continuous improvement in the care of the children.

2. POSITIONING OF STAFF IN THE ENVIRONMENT
   2.1 Staff shall, at all times, position themselves so as to be able to clearly observe the activities and actions of each child;
   2.2 Staff shall, when planning any activity, consider the physical location of the children and of themselves to ensure supervision is adequate;
   2.3 Staff shall at all times be prepared to modify their position in relation to the children to appropriately manage any risks that may develop;
   2.4 Staff shall be aware of the limitations and variation of supervisory skills when volunteers and/or students are assisting with supervisory responsibilities.

3. SCANNING THE ENVIRONMENT
   3.1 All staff will maintain an active watch on the environment under their supervision;
   3.2 Planned and specific supervision will be undertaken for high risk areas and activities;
   3.3 No staff member will undertake secondary activities such as mobile phone calls or completing paperwork when supervision is being undertaken.

4. LISTENING WHEN CHILDREN PLAY
   4.1 Staff will actively listen to the children during all activities for indicators that the situation is out of the ordinary. For example, water splashing; crying; choking or gasping; offensive or aggressive language; or silence;
   4.2 Staff will listen to the environment in general and act on any sound heard that may indicate an increase risk to the children. For example, thunder.

5. KNOWLEDGE OF THE ENVIRONMENT AND IT’S POTENTIAL RISKS
   5.1 All staff will develop and maintain knowledge of the complete layout and features of the Centre;
   5.2 Staff will undertake risk management assessments in different areas of the Centre on a rotational basis to assist in the process of continuous improvement of skills and knowledge;
   5.3 All staff will be familiar with the Centre Work Health and Safety Policy and Procedures.

6. SETTING UP THE ENVIRONMENT
6.1 Staff will be aware of the importance of supervision when setting up any activities;
6.2 At no time shall any play equipment be placed in a position that increases the risk to the child or to the staff member;
6.3 Staff shall be aware of hazards that are created by children’s activities and actively work to mitigate any risks created. For example, a toy left in a doorway or a chair pushed against a fence shall be removed immediately.

7. TRANSITIONING GROUPS OF CHILDREN
7.1 All staff shall be aware of the increased risk associated with transition times;
7.2 Transitions shall be planned and form a part of the learning activities for the children;
7.3 Transition during activities outside the normal routine shall only be undertaken following a risk assessment by the staff to ensure that all risks have been identified and control measures implemented.

8. CHILDREN’S ARRIVAL AND DEPARTURE FROM THE CENTRE
8.1 All areas of the Centre fall within the responsibility of the staff in relation to management of risk and therefore, any staff member who is present during arrival and departure shall actively work to mitigate risk;
8.2 As a part of overall Work Health and Safety, child drop-off and collection shall be subject to regular Risk Management review;
8.3 All staff shall reinforce the correct procedure for children to be dropped off and collected.

REFERENCES
1. Education and Care Services National Regulations 2011
2. National Quality Standard
3. Queensland Child Protection Act 1999
4. Children and Young Workers Code of Practice 2006
5. Creating Safe Environments for Children National Framework 2005
6. Child Safety Unit (Queensland Health)
7. Commission for Children and Young People and Child Guardian
9. Protect All Children Today (PACT) www.pact.org.au
TELEVISION AND TECHNOLOGY POLICY
Implementation date: October 2014
Review Date: October 2015

POLICY STATEMENT
OSHC will provide a television and technology free environment during Before School Care. For After School Care and Vacation Care, the children have limited time allowance for television and technology.

PROCEDURES
1. The television and technology policy relates to DVD’s, electronic games and computers. These will not be permitted to be used during Before School Care, with the exception of appropriate music being played.
2. Television and technology will be restricted to 3 days per week, alternating between DVD’s, electronic games and computers between 5:00pm and 6:00pm. Due to wet weather or school events, we may put a movie on for the children.
3. OSHC computers may be used every afternoon for homework. Initial time 15 minutes per student, time may vary based on the number of students requiring access during the afternoon.
4. During Vacation Care there will only be short allocated time slots for TV and Technology usage per day. This will be based around number of students and the planned activities for the day.
5. No personal electronic devices, gaming consoles, music devices or iPads to be brought from home during Before and After School Care, unless strictly for homework usage. No social networking sites are to be accessed, (ie: Facebook, Instagram, Twitter etc.)
6. During Vacation Care, personal devices are allowed if the games and music are appropriate, and are permitted during allocated technology times.
7. Staff cannot take responsibility for personal electronic devices, gaming consoles, music devices or iPads that children bring with them from home. Devices will be stored in the office when not in use.
8. Movies and games played at OSHC will be of the G Rated classification. On occasion a PG rated movie may be played if the supervisor deems the classification appropriate for the children in attendance.

REFERENCES
1. Australian Children's Education and Care Quality Authority - Education and Care Services National Law 2011
2. Australian Children’s Education and Care Quality Authority Education and Care Services National Regulations 2011
3. Australian Children’s Education and Care Quality Authority National Quality Standard
TOBACCO, DRUG AND ALCOHOL-FREE ENVIRONMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure the health and safety of persons within the Centre through the provision of a tobacco, drug and alcohol free environment.

PROCEDURES
1. TOBACCO
   1.1 Smoking is not permitted in any areas utilised by the Centre;
   1.2 Smoking is not permitted in any open space 10 metres from the Centre outdoor area or fence line;
   1.3 Staff will not smoke in front of, or in the sight of, children in their care;
   1.4 No persons are allowed to promote cigarette smoking in the workplace, or advertise the fact they smoke to other staff, children or families;
   1.5 Staff who wish to smoke during work hours may do so outside the workplace and in their scheduled lunch break or approved breaks;
   1.6 Students, volunteers and visitors to the service will not be permitted to smoke on the premises and will adhere to the Smoke Free Environment Policy;
   1.7 Parents, family members or relatives of children enrolled at the Centre will not be permitted to smoke on the premises and will adhere to the Smoke Free Environment Policy;
   1.8 The Centre will support and provide assistance for smokers to quit smoking.

2. DRUGS
   2.1 Illegal drugs are not permitted in any areas utilised by the Centre;
   2.2 Pharmaceutical drugs and medications may only be bought into the Centre area with the expressed permission of the Nominated Supervisor;
   2.3 Pharmaceutical drugs and medications may not be taken into any area that may be accessed by the children in care;
   2.4 No staff member or other person who is affected by drugs (including prescription medication) so as to impair his or her capacity to supervise or provide care shall be permitted to remain at the Centre.

3. ALCOHOL
   3.1 Alcohol may not be taken into any area that may be accessed by the children in care.
   3.2 No staff member may consume alcohol on the premises during licensed operation hours.
   3.3 No staff member or other person who is affected by alcohol so as to impair his or her capacity to supervise or provide care shall be permitted to remain at the Centre.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
4. Queensland Work Health and Safety Regulations 2011
5. National Quality Framework
UNAUTHORISED PERSONS ON SITE
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall effectively manage any circumstance where an individual has entered the Centre and has not followed established visitor procedures, regardless of whether the person may or may not be a safety hazard to the children and staff.

PROCEDURES
1. Any member of staff who observes an individual in the Centre who appears suspicious or out-of-place should approach the individual (if safe to do so), ask their name and purpose in the Centre or contact the Nominated Supervisor for assistance.
2. The person approaching the suspicious individual must determine if the person poses a safety hazard or just needs to be made aware of the procedures in place for visiting the Centre.
3. While determining the status of a visitor, every effort must be made to ensure children in our care are safe, feeling secure where possible, continuing to be engaged in their current activities.
4. If need be, children shall be given reassurances as to their own and others safety and well-being.

5. LEGITIMATE VISITOR
   5.1 Identify the person and determine their purpose or need for being in the Service;
   5.2 Escort the person to the office or Nominated Supervisor and have them check in as a visitor;
   5.3 Ensure they are aware of the procedures in place for visiting the Centre for future reference;
   5.4 Staff shall call the Nominated Supervisor and wait until another member of staff can come to relieve them, if safety/supervision issues do not permit them to leave the room;
   5.5 The Nominated Supervisor shall review security to determine how the intruder gained entry.

6. INTRUDER WHO MAY POSE A RISK
   6.1 Politely greet intruder, identify yourself and ask purpose of the visit to the Centre;
   6.2 Ask a colleague to observe your approach to the intruder;
   6.3 Explain that all visitors must report to the office on arrival;
   6.4 If safe to do so, escort the person to the office;
   6.5 Depending on the circumstances and the demeanour of the intruder, the Nominated Supervisor will make every effort to call the Police to report the incident;
   6.6 If the intruder appears agitated, irrational or refuses to leave the building in a peaceful manner, the Nominated Supervisor shall endeavour to calm the person by talking in a low calming reassuring voice whilst trying to gain the attention of a colleague to call the Police;
   6.7 If the Police are called and the individual leaves or attempts to leave prior to the Police arriving, do not attempt to physically detain or restrain the person;
   6.8 Contact the Police to inform the responding officers that the individual has left the building, the direction and means of transport;
6.9 If the individual stays until the Police arrive, inform the officers what has happened and hand the matter over to them;
6.10 Review security immediately;
6.11 Log incident and actions as soon as possible;
6.12 If need be, staff and children shall be given reassurances as to their own and others safety and well-being.

7. INTRUDER WHO MAY BE ARMED OR IS THREATENING
7.1 Alert all staff members;
7.2 Contact the Police immediately;
7.3 Give the Police all the information regarding location of the intruder, a physical and clothing description and the weapon(s) involved;
7.4 Advise the Police of what you are doing to ensure the safety of the children and other staff members;
7.5 Remain on the line until the Police advise you to hang up;
7.6 Monitor the location of the intruder until the Police arrive;
7.7 Unless it is absolutely necessary to prevent harm to a child or staff member, the intruder should not be confronted;
7.8 If it is necessary to confront the intruder, take a colleague with you;
7.9 Determine who will initiate contact with the intruder and who will be the backup person;
7.10 Both staff members should break off contact and leave when it is safe to do so;
7.11 Every effort should be made to attempt to direct the intruder to the main office or away from areas occupied by the children;
7.12 Use casual conversation or body language to calmly direct the situation;
7.13 If the intruder shows a weapon, assure him/her that it is not necessary for him/her to consider using the weapon:
7.14 Back away slowly and leave the area;
7.15 Both of your hands should be up with your palms facing the intruder while slowly backing away;
7.16 Remain calm; do not attempt to disarm the person;
7.17 Once the Police arrive provide them with the following information:
7.17.1 Location of intruder;
7.17.2 Description of intruder;
7.17.3 Any known weapons;
7.17.4 Any statements made by the intruder.
7.18 Be prepared to keep media, parents and other community members out of the Centre. The Police will secure the building;
7.19 All other staff members and official visitors should remain in their designated area/room with the children unless otherwise directed;
7.20 Review security immediately;

REFERENCES
1. Victims of Crime Association of Queensland
2. Victim Support Services Limited
VISITOR SAFETY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all persons who visit our Service are aware of the Centre safety requirements and that these requirements are followed at all times.

PROCEDURES
1. A visitor to the Centre is any person who is not a staff member, parent or authorised nominee or another individual as specifically determined by the Nominated Supervisor.
2. All visitors must report to the office on arrival at the Centre and sign the Visitors Register.
3. Visitors are to be advised of any Safety Policies and Procedures that may be relevant to the purpose and/or time of their visit.
4. All visitors to the Centre will be assessed to ensure that they are wearing suitable clothing to ensure the minimisation of risk to the person.
5. All visitors must be accompanied or supervised by a staff member during their time in the Centre.
6. Any person found on the premises unescorted will be ask by any staff member who observes them if they require assistance and then will direct the person back to the office.
7. All non-public access areas shall be marked by clear signage and/or entry shall be restricted by locked doors.
8. In the event of a fire or other emergency the Emergency Response Team is responsible for ensuring that the visitors are evacuated to safety.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
3. Children and Young Workers Code of Practice 2006
5. Creating Safe Environments for Children National Framework 2005
VOLUNTEERS AND STUDENTS ON PLACEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall at all times manage our volunteers and students on placement effectively.

PROCEDURES
1. Volunteers and students will at all times be treated with dignity and respect.
2. Volunteers and students will be subjected to pre-commencement integrity checks, including referee reports and up to a Police records check if necessary.
3. Volunteers and students must abide by all policies and procedures that govern employed staff.
4. Volunteers and students shall be supervised at all times.
5. Staff must be diligent in their mentoring duties if a student or volunteers is placed to work with them.
6. Consideration shall be given to any particular experiential requirements when rostering volunteers and students.
7. Volunteers and students will be given regular feedback regarding work performance and potential areas for improvement.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
3. Children and Young Workers Code of Practice 2006
5. Creating Safe Environments for Children National Framework 2005
WATER SAFETY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
To ensure that all water related activities have been assessed for risk and benefit, to ensure the safety of children and adults undertaking the activity.

PROCEDURES
1. The Centre will incorporate identification of any water related hazards into the Workplace Health and Safety risk assessment processes.
2. The Centre will incorporate identification of any water related hazards into the risk assessment process for Excursions.
3. In developing risk management strategies, particular attention will be given to the individual skills and experiences of the children.
4. All staff will be provided with information regarding water hazards and water safety.
5. In developing risk management strategies, particular attention will be given to the individual skills and experiences of the staff and educators who will be providing the activity.
6. Any programmed activity where water is involved shall incorporate an educative component for the children regarding water safety.
7. Where the children are to be taught by an external person, the Nominated Supervisor shall be satisfied that external person is a fit and proper person to carry out the activity.
8. Supervisors shall strictly enforce the implementation of all risk management strategies developed regarding water safety.
9. When appropriate, water safety shall be continuously reinforced by educators during regular program activity.

REFERENCES
1. Education and Care Services National Law 2011
2. Education and Care Services National Regulations 2011
WILDLIFE AND PLANTS
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We recognise that our environment shall contain plants and wildlife and that the Centre aims for the management of wildlife and plants to eliminate or minimise any risks to staff or the children.

PROCEDURES
1. Wildlife and plants that shall warrant intervention include:
   1.1 Snakes;
   1.2 Spiders;
   1.3 Cane toads;
   1.4 Bees and wasps;
   1.5 Green ants and Fire ants;
   1.6 Fly, mosquitoes and similar insects;
   1.7 Cockroaches;
   1.8 Rats and mice;
   1.9 Poisonous and dangerous plants, including those that pose an allergen reaction for children and adults.
2. The Centre shall endeavour to operate proactively in the management of these particular hazards. This shall include:
   2.1 Regular maintenance of screens and doors;
   2.2 Regular professional pest control services shall be utilised;
   2.3 Regular yard and lawn maintenance and inspections;
   2.4 Inspections for infestations shall be conducted on a regular basis;
3. In the event of a snake being sighted within the Centre area the following shall be undertaken:
   3.1 Children shall be removed from the area immediately;
   3.2 Staff shall attempt to observe the movements and location of the snake;
   3.3 Under no circumstances will any staff member or other unauthorised person attempt to capture or harm the snake;
   3.4 A licensed snake removal expert shall be contacted immediately and arrangements made for the safe removal of the snake;
   3.5 Children shall only be permitted to return to the area when the Nominated Supervisor is satisfied that the snake has been removed or no longer poses any threat;
4. Regular inspections of the garden and all other plant life shall be carried out to ensure that:
   4.1 No poisonous plant has self-seeded;
   4.2 Plants have not overgrown and present as a hazard to the children generally or during play;
   4.3 Plants that have matured do not now present as a danger to children e.g. Berries that are poisonous or a choking hazard, thorns, etc.; and
   4.4 Plants detected are removed as soon as is practicable.
5. As a general guide, any plant with a strong smell, milky sap, red berries or self-sown seed could be poisonous and is best treated as such until a positive identification is made.
6. Consultation with local council or a suitably qualified person should occur before planting new products or on discovery of unknown specimens.

7. In the event that poisoning by a plant or fungi is suspected IN ALL CASES:
   7.1 Call an Ambulance by dialling 000
   7.2 Contact the Poisons Information Service on 13 11 26
   7.3 Collect a sample of the plant or fungi to aid in its identification, if it can be collected without exposure to further harm.

8. Detection of any infestation of wildlife shall be managed by the contracting of professional and licensed experts to manage the hazard. In the event of a wildlife bite or sting, each case will be managed in accordance with current “best practice” standards of first aid and care; if there is ever any doubt regarding the condition of a child or staff member following suspected bite or sting, the situation is to be treated as an emergency and an Ambulance called.

9. EMERGENCY CONTACT NUMBERS
   Ambulance Emergency 000
   Brisbane City Council 3403 8888
   Poisons Information Service (24hrs 7 days) 13 11 26
   Queensland Herbarium EPA 3896 9318

REFERENCES
1. Education and Care Services National Regulations 2011
2. National Quality Standard
4. Children and Young Workers Code of Practice 2006
6. Queensland Health - Plant Identification
WORKPLACE HARASSMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
Workplace harassment or bullying will not be tolerated in our Centre.

PROCEDURES
1. The Nominated Supervisor shall ensure the following actions are taken to prevent and control exposure to the risk of workplace harassment:
   1.1 Provide all workers with workplace harassment awareness training;
   1.2 Ensure workers are aware of and follow the Centre’s Code of Conduct;
   1.3 Ensure workers are aware of the complaint handling system and how to make a complaint, including the support systems available, options for resolving grievances and the appeals process.

2. Disciplinary action will be taken against a person who harasses a worker or who victimises a person who has made or is a witness to a complaint.
3. Complaints of alleged workplace harassment found to be malicious, frivolous or is based on insufficient grounds may make the complainant liable for disciplinary action.
4. Recognition that people who are harassed can become distressed, anxious, withdrawn, depressed, and can lose self-esteem and self-confidence.
5. Workplace harassment is unacceptable and will not be tolerated under any circumstances.
6. The Centre requires all workers to behave responsibly by complying with this policy, to not tolerate unacceptable behaviour, to maintain privacy during investigations and to immediately report incidents of workplace harassment to the Nominated Supervisor.
7. Management are required to personally demonstrate appropriate behaviour, promote the workplace harassment prevention policy, treat complaints seriously and ensure where a person lodges or is witness to a complaint, that this person is not victimised.

Where workers can go for assistance:
8. A worker who is being harassed can contact the Nominated Supervisor for information and assistance in the management and resolution of a workplace harassment complaint.

Commitment to promptly investigate complaints:
9. The Centre has a complaint handling system which includes procedures for reporting, investigating, resolving and appealing workplace harassment complaints.
10. Any reports of workplace harassment will be treated seriously and investigated promptly, fairly and impartially.
11. A person making a complaint and/or who is a witness to workplace harassment will not be victimised.

Consequences of breach of policy:
12. Disciplinary action will be taken against a person who harasses another worker or who victimises a person who has made or is a witness to a complaint.
13. Complaints of alleged workplace harassment found to be malicious, frivolous or is based on insufficient grounds may make the complainant liable for disciplinary action.

Oakleigh Outside School Hours Care
REFERENCES
1. Prevention of Workplace Harassment Code of Practice 2004
2. Preventing and Responding to Workplace Bullying Draft Code of Practice 2011
4. Queensland Work Health & Safety Regulations 2011
WORK HEALTH AND SAFETY
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will conduct all activities in such a manner that will provide a work environment that eliminates or minimises all risks to the staff, the children and any other person who has contact with the Centre.

PROCEDURES
1. The safety of children, workers and members of the community is paramount in our day to day operations.
2. We will at all times act in a manner that actively role models safe working practices to the children with the intent of making life safer both at the Centre and at home.
3. All stakeholders will be made aware of the Centre’s commitment to Health and Safety by regular appropriate communications.
4. All buildings and equipment will be regularly inspected to ensure they are safe.
5. All workers shall comply with Health and Safety requirements and maintain all required documentation.
6. Specific requirements shall be documented under individual procedures.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
3. Education and Care Services National Regulations 2011
4. National Quality Standard
5. Queensland Safety Codes of Practice 2011/2012
WORK HEALTH & SAFETY - CONSULTATION
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We will actively work to ensure that effective consultation is undertaken in relation to all Work Health and Safety matters.

PROCEDURES
1. DUTY HOLDER CONSULTATION
1.1. If more than one person has a duty prescribed under the Act or Regulations in relation to the same matter (i.e. two educators who share an area), then each person with the duty must consult, cooperate and coordinate activities with all other persons who have a duty in relation to the same matter.

2. MANAGEMENT CONSULTATION WITH WORKERS
2.1. The Person conducting the business or undertaking (PCBU), through the Officer, usually the Nominated Supervisor, shall consult with workers who carry out work for the service who are, or are likely to be, directly affected by a matter relating to work health or safety.

3. CONSULTATION PURPOSE
3.1. To ensure that relevant information about the matter is shared with workers;
3.2. To ensure that workers be given a reasonable opportunity to express their views and to raise work health safety issues in relation to the matter;
3.3. To contribute to the decision-making process relating to the matter;
3.4. To ensure that the views of workers are taken into account by the Centre;
3.5. To ensure that the workers consulted are advised of the outcome of the consultation in a timely way.

4. CONSULTATION PROCESS
4.1. The Centre shall determine if a Work Health and Safety Committee is required;
4.2. If a Committee is required, it shall be formed in accordance with the legislation;
4.3. Where no Committee is required, consolation shall be undertaken at each general staff meeting;
4.4. Consolation and discussions on health and safety matters undertaken at each staff meeting shall be documented, including:
   4.4.1. The names of attendees;
   4.4.2. The matters raised and discussed;
   4.4.3. Any actions to be taken;
   4.4.4. Who would be responsible for those actions;
   4.4.5. The due date for completion; and
   4.4.6. Update and finalisation of any matters previously raised.
4.5. A copy of the document outlined in 4.4 shall be provided to any staff member who was not present at the meeting;
4.6. A copy of the document outlined in 4.4 shall be available for viewing on request from any member of the Centre community;
4.7. The copy of the document to be made available shall be edited in such a way to have regard to privacy, confidentiality and any matters that may be legally or commercially privileged.
5. CONSULTATION WILL ALSO TAKE PLACE WHEN:
5.1. Identifying hazards and assessing risks to health and safety arising from the work carried out or to be carried out by the business or undertaking;
5.2. Making decisions about ways to eliminate or minimise those risks;
5.3. Making decisions about the adequacy of facilities for the welfare of workers;
5.4. Proposing changes that may affect the health or safety of workers;
5.5. Making decisions about the procedures for:
5.5.1. consulting with workers; or
5.5.2. resolving work health or safety issues at the workplace; or
5.5.3. monitoring the health of workers; or
5.5.4. monitoring the conditions at any workplace under the management or control of the person conducting the business or undertaking; or
5.5.5. providing information and training for workers; or
5.5.6. when carrying out any other activity prescribed under a regulation.

6. HEALTH AND SAFETY REPRESENTATIVES
6.1. If required, health and safety representatives will be appointed as per the relevant section of the legislation.

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
WORK HEALTH AND SAFETY - RESPONSIBILITIES
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that all persons are aware of their obligations and responsibilities for safety in the Centre.

PROCEDURES
1. DUTY STATEMENTS
1.1 Duty Statements shall be prepared for each worker;
1.2 Duty Statements shall be distributed to each worker and each committee member, if applicable;
1.3 Copies of the statements shall be signed by each worker and placed on their personal file.

2. PERSON CONDUCTING BUSINESS OR UNDERTAKING (PCBU)
2.1 The PCBU may be the Approved Provider or a Committee member;
2.2 The PCBU has statutory obligations under Section 167 of the Work Health and Safety Act 2011, to ensure that the Service complies with the Act;
2.3 The PCBU has overall responsibility for the health and safety of workers, other persons performing work for the purposes of the business and visitors to the workplace;
2.4 The PCBU must also ensure others are not exposed to risks arising from the business activities;
2.5 The responsibilities of the PCBU include, but are not limited to, the following:
2.5.1 Providing and maintaining a safe and healthy work environment;
2.5.2 Providing and maintaining safe plant;
2.5.3 Ensuring the safe use, handling, storage and transport of substances;
2.5.4 Ensuring safe systems of work;
2.5.5 Providing information, instruction, training and supervision to ensure health and safety;
2.5.6 Monitoring the health of workers and the conditions at the workplace.

3. OFFICER
3.1 The Nominated Supervisor is the “Person in Control” of the workplace and as such has the following specific obligations under the legislation as the Officer:
3.1.1 To exercise due diligence to ensure that the PCBU complies with any duty or obligation that the PCBU may have under the Act;
3.1.2 To maintain an up-to-date knowledge of work health and safety matters;
3.1.3 To verify expertise of other supervisors and educators and to ensure their reliance is reasonable;
3.1.4 To ensure the risk of injury or illness from a workplace is minimised for persons coming onto the workplace to work;
3.1.5 To ensure the risk of injury or illness from any plant or substance provided by the person for the performance of work by someone other than the person’s workers is minimised when used properly;
3.1.6 To ensure there is appropriate, safe access to and from the workplace for persons other than the person’s workers.
3.2 The Officer must ensure that these policies and procedures are at all times adhered to;
3.3 The Officer must ensure that all persons who enter or impact upon the workplace operate at all times to eliminate or minimise the risks associated with the operation of the Centre;
3.4 More than one person may hold the responsibilities and obligations of the role of ‘Officer’.

4. WORKPLACE HEALTH AND SAFETY REPRESENTATIVE (WHSR)
4.1 A Workplace Health & Safety Representative (WHSR) is generally not required at a Centre unless it is requested by workers;
4.2 A WHSR must be elected by fellow workers;
4.3 If elected by fellow workers, the WHSR has the following responsibilities:
   4.3.1 Represent workers on health and safety matters at the workplace and convey any health and safety concerns of workers to management;
   4.3.2 Attend Workplace Health and Safety Committee meetings if a committee has been established;
   4.3.3 Assist in the development, implementation, monitoring and review of agreed workplace health and safety policies and procedures;
   4.3.4 Conduct inspections of the workplace, participating in the identification and assessment of workplace hazards;
   4.3.5 Advise the Nominated Supervisor of findings and make recommendations for the control of any identified hazards;
   4.3.6 In conjunction with the Nominated Supervisor, assist in the investigation of workplace incidents;
   4.3.7 Participate in government workplace health and safety inspections;
   4.3.8 Help resolve any workplace health and safety issues.

5. WORKERS (both paid and voluntary)
5.1 The legislation uses the term “worker” rather than “staff member” as this has a much broader scope. Workers can be paid staff or volunteers and as such, both have the same obligations under the Act;
5.2 To comply with the instructions given for workplace health and safety at the workplace;
5.3 For a worker - to use personal protective equipment if the equipment is provided by the worker's employer and the worker is properly instructed in its use;
5.4 Not to wilfully or recklessly interfere with or misuse anything provided for workplace health and safety at the workplace;
5.5 Not to wilfully place at risk the workplace health and safety of any person at the workplace; and
5.6 Not to wilfully injure himself or herself.
5.7 It should be noted that these policies and procedures are defined as “instructions given” and as such, failure of a worker to follow these policies is a breach of obligations – effectively breaking the law;

REFERENCES
1. Queensland Work Health and Safety Act 2011
2. Queensland Work Health and Safety Regulations 2011
WORK HEALTH AND SAFETY – RISK MANAGEMENT
Implementation Date: August 2013
Review Date: August 2014

POLICY STATEMENT
We shall ensure that hazards in the workplace are identified, risks are assessed and effective controls are implemented and maintained.

PROCEDURES
1. HAZARD IDENTIFICATION
1.1 A hazard is defined as “a source or a situation with a potential for harm in terms of human injury or ill-health, damage to property, damage to the environment, or a combination of these” or, more simply, a hazard is something with the potential to cause harm;
1.2 At the Centre, we shall at all times take a pro-active approach to the identification of hazards;
1.3 We shall identify hazards of the following types:
   1.3.1 The obvious hazard is apparent to the senses (e.g. unlocked cupboards, building defects, faulty electrical equipment);
   1.3.2 The concealed hazard is not apparent to the senses (e.g. electricity, presence of toxic vapours, illness);
   1.3.3 The developing hazard cannot be recognised immediately and will develop over time (e.g. refrigerator not keeping food cold, cracked or broken toy);
   1.3.4 The transient hazard is an intermittent or a temporary hazard (e.g. storms, wet floors, visitor to the Centre).
1.4 The processes that we use to identify hazards shall be in three main areas:
   1.4.1 Strategic risk assessments;
   1.4.2 Operational risk assessment;
   1.4.3 Specific requirements – creditable emergency.
1.5 A Strategic Risk Assessment, incorporating a full walk through of the Centre, shall be undertaken at least once every three months;
1.6 Strategic Risk Assessments shall also be reviewed immediately that new information or an incident (including a “near miss”) occurs;
1.7 The process used for the Strategic Risk Assessment shall be:
   1.7.1 The Centre shall be divided up into equal areas;
   1.7.2 Two staff members shall be allocated to each area;
   1.7.3 The staff members will examine the allocated area, recording all hazards identified using a “Hazard Reporting Form”.
1.8 Operational risk assessments shall be undertaken each day by Centre staff;
1.9 The process used for operational risk assessment shall be:
   1.9.1 Upon commencement each day, each staff member shall examine their workspace and identify any hazards;
   1.9.2 Checklists will be used throughout the day for various activities, e.g. cleaning;
   1.9.3 Prior to closing the Centre at night.
1.10 Any hazards identified shall be managed in accordance with this policy;
1.11 Staff shall also examine the work area during the day to ensure any developing hazards are identified;
1.12 Specific requirement risk assessment e.g., fire, first aid, storms, shall be managed in accordance with the policies and procedures contained within this manual.
2. RISK ASSESSMENT

2.1 When various hazards have been identified, a risk assessment shall be undertaken;

2.2 The risk assessment shall be done using the risk matrix contained within the “Hazard Reporting Form”;

2.3 Risk assessments shall estimate the likelihood and consequences of an event occurring;

2.4 In estimating the likelihood of an event taking place, consideration shall be given to:

2.4.1 How often the task occurs;

2.4.2 How many people are exposed;

2.4.3 The duration of exposure to the hazard;

2.4.4 Quantities of materials or multiple exposure points involved;

2.4.5 The position of the hazard relative to workers and to other hazards;

2.5 Once the “likelihood” has been estimated, the potential consequences shall be assessed;

2.6 Factors to consider when estimating consequences are:

2.6.1 Forces and energy levels involved;

2.6.2 Heights;

2.6.3 Weights;

2.6.4 Speed;

2.6.5 Position of the person relative to the hazard;

2.6.6 Potential for “chain reaction” events;

2.6.7 Concentration of substances;

2.6.8 Volume of material involved.

2.7 The estimation of likelihood and consequence using the Risk Assessment Matrix will give a numerical score of between 1 and 9;
2.8 Scores of 7, 8 or 9 indicate that the risk posed by the hazard is intolerable and must be actively managed immediately;
2.9 Scores of 5 or 6 indicate that the hazard poses some risk and the basic requirements to ensure safety must be put in to place as soon as possible;
2.10 Scores of 1, 2 or 3 indicate that there is minor risk from the identified hazard and that the hazard will be monitored and addressed as soon as practicable;
2.11 Once the scores for all the hazards in the workplace have been calculated, then they shall be place in a rank order using the “Hazard and Risk Register”;
2.12 When the risk scores for all the risks in the workplace have been compared, the resulting ranking will be a guide to the order in which these risks shall be addressed.

3. DEVELOPMENT OF CONTROL MEASURES
3.1 Control measures that adequately eliminate or reduce the risk from each hazard shall be developed and recorded on the “Hazard Reporting Form”;
3.2 Control measures shall be developed using the “Hierarchy of Controls”:
3.2.1 Elimination – can we completely remove the hazard from the Centre?
3.2.2 Substitution – can we replace the hazard with something else that is less risk?
3.2.3 Isolation – can we lock up or fence off the hazard?
3.2.4 Engineering – can the hazard be redesigned to reduce the risk?
3.2.5 Administration – can we introduce rules, policies and procedures to make this safer?
3.2.6 Personal Protective Equipment (PPE) – can we use PPE to reduce the risk?
3.3 In all cases, each stage will be considered before moving down to the next level;
3.4 In some cases, it will be necessary to use more than one control measure to manage the risk;
3.5 Some control measures that are lower on the hierarchy may need to be used as a short-term solution. For example, a barrier put up around broken glass until it can be safely removed.

4. IMPLEMENTATION OF CONTROL MEASURES
4.1 Control measures noted on the “Hazard Reporting Form” shall be reviewed by the Nominated Supervisor in consultation with the WHSR (if appointed) for suitability and practicability;
4.2 Suitable controls shall be put in place in accordance with the priority list previously determined;
4.3 Following the implementation of suitable control measures, the Nominated Supervisor shall determine which of the following measures shall be put in place to ensure that the controls are operational:
4.3.1 Developing new or amending current work procedures;
4.3.2 Communication of the changes to all staff and other stakeholders;
4.3.3 Providing training and instruction to those effected by the measure;
4.3.4 Supervision to ensure controls are being implemented;
4.3.5 Maintenance of any control items to ensure effectiveness.

5. MONITOR AND REVIEW
5.1 The effectiveness of control measures will be formally monitored and reviewed;
5.2 The review process and result shall be noted on the “Hazard Report Form”.

REFERENCES
1. Education and Care Services National Regulations 2011
2. National Quality Standard
4. Queensland Work Health and Safety Regulations 2011
5. Children and Young Workers Code of Practice 2006
7. Raising Children Network
Quality Area 1: Education program and practice

1.1 An approved learning framework informs the development of a curriculum that enhances each child’s learning and development.
1.1.1 Curriculum decision making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing and confidence as learners and effectiveness as communicators.
1.1.2 Each child’s current knowledge, ideas, culture, abilities and interests are the foundation of the program.
1.1.3 The program, including routines, is organised in ways that maximise opportunities for each child’s learning.
1.1.4 The documentation about each child’s program and progress is available to families.
1.1.5 Every child is supported to participate in the program.
1.1.6 Each child’s agency is promoted, enabling them to make choices and decisions and to influence events and their world.
1.2 Educators and Supervisors are focused, active and reflective in designing and delivering the program for each child.
1.2.1 Each child’s learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluation.
1.2.2 Educators respond to children’s ideas and play and use intentional teaching to scaffold and extend each child’s learning.
1.2.3 Critical reflection on children’s learning and development, both as individuals and in groups, is regularly used to implement the program.

POLICY STATEMENT - EDUCATION PROGRAM AND PRACTICE
It is our policy that all our programs nurture the development of life skills and complements children’s experiences, opportunities and relationships at school, at home and in the community.
We shall do that by:

- Operating at all times within My Time, Our Place: Framework for School Age Care in Australia produced by the Commonwealth Government Department of Education, Employment and Workplace Relations for the Council of Australian Governments, 2011.

- Collaboratively reviewing our programs and collectively developing improvements and supporting each child’s individual needs and actively working with each child to ensure his or her knowledge, ideas, culture, abilities and interests are the foundation of the program.
Quality Area 2: Children’s Health and Safety

2.1 Each child’s health is promoted.
   2.1.1 Each child’s health needs are supported.
   2.1.2 Each child’s comfort is provided for and there are appropriate opportunities to meet each child’s need for sleep, rest and relaxation.
   2.1.3 Effective hygiene practices are promoted and implemented.
   2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.
2.2 Healthy eating and physical activity are embedded in the program for children.
   2.2.1 Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.
   2.2.2 Physical activity is promoted through planned and spontaneous experiences and is appropriate for each child.
2.3 Each child is protected.
   2.3.1 Children are adequately supervised at all times.
   2.3.2 Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.
   2.3.3 Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
   2.3.4 Educators, Supervisors and staff members are aware of their roles and responsibilities to respond to every child at risk of abuse or neglect.

POLICY STATEMENT - CHILDREN’S HEALTH AND SAFETY

The health, safety and wellbeing of every child in our care is the primary responsibility of this Centre and all staff will proactively work to ensure that every child’s health and wellbeing is safeguarded and promoted.

We shall do this by:

- Acknowledging the individual health needs of each child and providing an environment that caters for those needs.

- Providing and promoting healthy eating and physical activity and committing to protect each child and to develop and maintain a child safe environment.
Quality Area 3: Physical environment

3.1 The design and location of the premises is appropriate for the operation of the OSHC Centre.
3.1.1 Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose.
3.1.2 Premises, furniture and equipment are safe, clean and well maintained.
3.1.3 Facilities are designed or adapted to ensure access and participation by every child in the service and to allow flexible use, and interaction between indoor and outdoor space.
3.2 The environment is inclusive, promotes competence, independent exploration and learning through play.
3.2.1 Outdoor and indoor spaces are designed and organised to engage every child in quality experiences in both built and natural environments.
3.2.2 Resources, materials and equipment are sufficient in number, organised in ways that ensure appropriate and effective implementation of the program and allow for multiple uses.
3.3 The service takes an active role in caring for its environment and contributes to a sustainable future.
3.3.1 Sustainable practices are embedded in centre operations.
3.3.2 Children are supported to become environmentally responsible and show respect for the environment.

POLICY STATEMENT - PHYSICAL ENVIRONMENT

We shall ensure that at all times the physical environment is safe, suitable and provides a rich and diverse range of experiences that promote children’s learning and development.

We shall do this by:

- Planning for and conducting all activities in such a manner that will provide an environment that eliminates or minimises all risks to the staff, children, students and other members of our community;

- Actively role modelling safe and environmentally sound working practices with the children, with the intent of making life safer both at the service and at home and maintaining the environment to the highest possible standards.
Quality Area 4: Staffing arrangements

4.1 Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing.
4.1.1 Educator-to-child ratios and qualification requirements are maintained at all times.
4.2 Educators, Supervisors and staff members are respectful and ethical.
4.2.1 Professional standards guide practice, interactions and relationships.
4.2.2 Educators, Supervisors and staff members work collaboratively and affirm, challenge, support and learn from each other to further develop their skills and to improve practice and relationships.
4.2.3 Interactions convey mutual respect, equity and recognition of each other’s strengths and skills.

POLICY STATEMENT - STAFFING ARRANGEMENTS

We shall create a safe and predictable environment for children and support warm, respectful and professional relationships.

We shall do this by:

- Employing suitably qualified and experienced educators and supervisors who actively encourage children’s positive engagement in the learning program;
- Actively develop and maintain positive relationships among all staff to contribute to an environment where children feel emotionally safe, secure and happy and;
- Ensuring that all our policies, procedures and guidelines are reflective of our actual day-to-day operations.
Quality Area 5: Relationships with children

5.1 Respectful and equitable relationships are developed and maintained with each child.
5.1.1 Interactions with each child are warm and responsive and build trusting relationships.
5.1.2 Every child is able to engage with educators in meaningful, open interactions that support the acquisition of skills for life and learning.
5.1.3 Each child is supported to feel secure, confident and included.
5.2 Each child is supported to build and maintain sensitive and responsive relationships with other children and adults.
5.2.1 Each child is supported to work with, learn from and help others through collaborative learning opportunities.
5.2.2 Each child is supported to manage their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
5.2.3 The dignity and the rights of every child are maintained at all times.

POLICY STATEMENT - RELATIONSHIPS WITH CHILDREN

We shall at all times ensure that relationships with children are responsive, respectful and promote children’s sense of security and belonging.

We will do this by:

- Creating an environment that allows children to freely explore and engage in active learning;
- Supporting each child’s individual needs and;
- Proactively assisting each child to develop appropriate behaviours in relation to themselves, other children and with adults.
Quality Area 6: Collaborative partnerships with families and Communities

6.1 Respectful and supportive relationships with families are developed and maintained.
6.1.1 There is an effective enrolment and orientation process for families.
6.1.2 Families have opportunities to be involved in the service and contribute to service decisions.
6.1.3 Current information about the service is available to families.
6.2 Families are supported in their parenting role and their values and beliefs about childrearing are respected.
6.2.1 The expertise of families is recognised and they share in decision making about their child’s learning and wellbeing.
6.2.2 Current information is available to families about community services and resources to support parenting and family wellbeing.
6.3 The service collaborates with other organisations and service providers to enhance children’s learning and wellbeing.
6.3.1 Links with relevant community and support agencies are established and maintained.
6.3.2 Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.
6.3.3 Access to inclusion and support assistance is facilitated.
6.3.4 The service builds relationships and engages with the local community.

POLICY STATEMENT - COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

We shall develop and maintain community partnerships that contribute to children’s learning and wellbeing and focus on active communication, consultation and collaboration.

We will do this by:

- Valuing our families and ensuring that our processes for information exchange are effective and flexible to meet a diverse range of circumstances;
- Supporting our families by recognising and responding to individual needs and;
- Working with the wider community to ensure the best outcome for the children in our care.
Quality Area 7: Leadership and service management

7.1 Effective leadership promotes a positive organisational culture and builds a professional learning community.
7.1.1 Appropriate governance arrangements are in place to manage the centre.
7.1.2 The induction of educators, Supervisors and staff members, including relief educators, is comprehensive.
7.1.3 Every effort is made to promote continuity of educators and Supervisors at the centre.
7.1.4 Provision is made to ensure a suitably qualified and experienced educator or Nominated Supervisor leads the development of the curriculum and ensures the establishment of clear goals and expectations for teaching and learning.
7.1.5 Adults working with children and those engaged in management of the centre or residing on the premises are fit and proper.
7.2 There is a commitment to continuous improvement.
7.2.1 A statement of philosophy is developed and guides all aspects of the centre’s operations.
7.2.2 The performance of educators, Supervisors and staff members is evaluated and individual development plans are in place to support performance improvement.
7.2.3 An effective self-assessment and quality improvement process is in place.
7.3 Administrative systems enable the effective management of a quality service.
7.3.1 Records and information are stored appropriately to ensure confidentiality, are available from the centre and are maintained in accordance with legislative requirements.
7.3.2 Administrative systems are established and maintained to ensure the effective operation of the service.
7.3.3 The Regulatory Authority is notified of any relevant changes to the operation of the centre, of serious incidents and of any complaints which allege a breach of legislation.
7.3.4 Processes are in place to ensure that all grievances and complaints are addressed, investigated fairly and documented in a timely manner.
7.3.5 Service practices are based on effectively documented policies and procedures that are available at the service and reviewed regularly.

POLICY STATEMENT - LEADERSHIP AND SERVICE MANAGEMENT

We shall actively work towards achieving best practice in service management by using a process of continuous improvement.

We will do this by:

- Ensuring that our recruitment and management of staff is aimed at getting the best people, and keeping them;
POLICY STATEMENT - LEADERSHIP AND SERVICE MANAGEMENT (CONTINUED)

- Engendering a culture of Quality Management based on a recognised continuous improvement model;

- Developing, maintaining and improving all administrative systems and practices to achieve the best results for the children in our care and;

- Ensuring that all our policies, procedures and guidelines are reflective of our actual day-to-day operations.