



Sherwood State School OSHC

Policies and Procedures Manual

Revised November 2023

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Policy Group 1 - Service Philosophy and Goals

1.1 Service Philosophy

The Service's Philosophy has been developed as a foundational principle to the practices of our educators and the delivery of the service to our community. The Philosophy draws upon:

- Educational and Care Services National Law and Regulations
- National Quality Standards
- 'My Time, Our Place' Framework for School Age Care

Philosophy Statement

The Sherwood State School Outside School Hours Care Service aims to support the needs of the children, parents/guardians and staff by creating a nurturing environment and providing quality care at before and after school care plus during holiday periods. We provide fair and versatile opportunities to each child for further development and invite the children to utilise their surroundings within a safe environment to progress in areas such as health and creativity to assist growth in cognitive, physical and social skills.

The daily practices of the service should reflect and reinforce the principles laid out in the United Nations Convention Rights of the Child and the Australian National Quality Framework. Each child is equal and we strive to celebrate their diversity of family culture within our program.

Educators at the service encourage each child to be a valuable member of the community and to make choices and decisions to influence events which have an impact in their world. Children learn and develop skills through active play and direct interaction with their environment. This means children will have the opportunity to engage and make decisions about their activities and how they spend their time, interact with others and use resources on a daily basis. Activities on offer include indoor and outdoor, individual and group play so children can explore and develop a strong sense of self-worth and the value of others. We seek to consider children's opinions and views when programming activities and consider the best interests of the child plus their right to play and learn in a safe, nurturing environment.

We believe in promoting children's emotional wellbeing and resilience; and that happiness, optimism and a sense of fun are key dispositions in developing these. Children are active learners from birth and we strive to establish successful lifelong learning through creating rich, engaging environments that encourage meaningful interactions between children, Educators and parents. We acknowledge that children who learn and participate in positive lifestyle choices including healthy eating and physical activity in childhood are more likely to continue these behaviours throughout life and we promote these in our daily practices.

Educators recognise that parents/guardians and families are the children's primary nurturers and most influential teachers in their lives and believe that mutually respectful and collaborative partnerships between them and the service are vital in caring for their child/ren. All families have the right to equitable access and participation in the community and we seek to provide opportunities to facilitate this and explore the potential in every day events, routines and activities at the centre.

Sherwood State School OSHC respects and encourages diversity, allowing all children and families to share and contribute their skills, strengths, expertise and culture to enrich our service. We value Australia's Aboriginal and Torres Strait Islander cultures as a core part of the nation's history, present and future.

1.2 Goals

Sherwood OSHC has a number of goals on which our service is based. These goals are based on the outcomes for children as outlined in the “My Time, Our Place” Framework for School Age Care. Our goals are to encourage children to:

- **Have a strong sense of identity** – We aim to teach children to demonstrate a capacity for self-regulation, negotiating and sharing behaviours by motivating and encouraging children to succeed when they are faced with challenges
- **Be connected with and contribute to their world** – We demonstrate awareness of connections, similarities and differences between people and how to react in positive ways by encouraging children to listen to others and to respect diverse perspectives
- **Have a strong sense of wellbeing** - We aim to teach children to show self-regulation and manage their emotions in ways that reflect the feeling and needs of others by showing care, understanding and respect for all children
- **Be confident and involved learners** - We aim to teach children to use reflective thinking to consider why things happen and what can be learnt from these experiences by encouraging children to communicate and make visible their ideas, theories, collaborate with children and model reasoning, predicting and reflecting processes and language
- **Be effective communicators** - We aim to teach children to convey and construct messages with purpose and confidence, including conflict resolution and following directions by modelling language and encouraging children to express themselves through language in a range of contexts and for a range of purposes including leading and following directions.

Policy Group 2 – Care for Children

2.1 Interactions and Relationships with Children

Policy Statement

The service will ensure all educators build positive, supportive relationships with children that make them feel safe, secure and included in the service's community. The service encourages interactions with children to be authentic and responsive and be based on fairness, equity, acceptance, empathy and respect for the child's culture, rights and community.

The rights of the child will be paramount when interacting and building relationships. Children will be encouraged, where possible to enhance their sense of agency through empowered decision-making. Children's dignity will be upheld at all times, to feel valued and supported.

Practices to support behaviour will be consistent with positive guidance; recognising the goal of self-regulation and pro-social behaviours are enhanced through learning, a supportive environment, secure relationships and positive self-regard.

The service, through its program and the practices of educators, provide experiences and opportunities for children to interact and immerse themselves in play with their peers. Through experiences and activities fostering group interaction children will enhance their capacity to interact and develop respectful and positive relationship with each other.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(j), and 155-156*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure the Service Philosophy establishes a framework to support the collective practices of the service. • Ensure staff are equipped and suitable to positively guide and support children who attend the service. • Support decision-making, program design and environment considerations that are consistent with empowering children and establishing nurturing relationships
Nominated Supervisor	<ul style="list-style-type: none"> • Model and encourage positive interactions which lead to supportive, trusting and respectful relationships. • Ensure children are provided with opportunities to participate in decision making processes. • Ensure children's views are actively sought and discussed with their responses and perspectives planned into the program with respect and authenticity. • Address conduct and behaviours that are not consistent with policy and procedures. • Ensure parents and relevant others receive communication of the service's policy and procedures to support relationships. • Address behaviour that requires additional support with responsiveness and dignity.
Educational Leader	<ul style="list-style-type: none"> • Guide educator's professional development and practice to promote interactions with children that are positive and respectful. • Establish practice guidelines that ensure interactions with children are given priority and those interactions are authentic, just and inclusive irrespective of difference. • Facilitate children's meetings, recording and documenting their conversations and ideas in a children's meeting book. Educators or other children shall act as a scribe for what children say, making notes for further follow up.
All Staff	<ul style="list-style-type: none"> • Ensure child-initiated, shared-decision making happens across all aspects of the service. • Empower children to access and learn from their own life experiences as well as those of their peers and adults around them. • Be active listeners, observers, scribes and advocates for children.

- | | |
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| | <ul style="list-style-type: none">• Respond to behaviour with positive guidance, re-direction and encouragement.• Seek additional support from the Nominated Supervisor where children's behaviour continues to pose a risk of harm to safety or wellbeing. |
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Procedures

A positive atmosphere and the wellbeing of children attending the service is promoted through attentive and nurturing care and quality interactions between educators and children. Children's emotional development and social relationships are supported by role-modelling and enhanced by educators through conversation, discussion and promotion of children's language and effective communication.

Central to the interaction and engagement between children and educators is the delivery of the service's program. The service's program will reflect (*3.1 Education Program Design and Implementation*):

- Opportunities for children to engage in diverse experiences
- Exploring and engagement with culture, having regard to the community of families
- Support for a range of ages, physical and intellectual developmental stages
- The choice, agency and decision making of children, including contributing to the athletics and physical environment.

In designing the program and activities for the service, educators will consult children about how their input will be used and advised of the outcomes of the decisions made, ensuring children have a voice in their level of participation including:

- areas of interest they would like to explore;
- where and how they would like to play, with others, or alone;
- what they would like to use;
- the adults with whom they feel comfortable and secure;
- when and what they would like to eat; and
- how they prefer to sleep or rest.

Resources and activities will be sourced as to encourage:

- Expression and creativity
- Participation and collaboration
- Reflect and cater to the interests and abilities of children
- Satisfy for the range of ages and developmental abilities
- Accessibility to children allowing for independence and development of mastery

Behaviour Support and Guidance

Educators will receive suitable instruction, support and training to respond to various developmental stages of the differing ages of the children who attend the service. Educators will apply appropriate behaviour support and guidance techniques which will be consistent with the Philosophy Statement of the service.

Educators will involve the children as far as reasonably possible in developing behaviour expectations for the service. These behaviour expectations will be clear, child focused, based on supporting the safety and wellbeing of children and others, easy to understand and will be on display throughout the service. This information is also provided in the *Parent Handbook* issued to all parents/guardians on enrolment.

Educators are required to:

- Model appropriate behaviour, including use of positive language, and tone of voice;
- Monitor children's play, pre-empting potential conflicts or challenging situations and directing children to consider alternative behaviours;
- Use positive guidance and encouragement towards acceptable behaviour when prompting the service behaviour expectations;
- Support children to make choices, accept challenges, manage change, cope with frustration and to experience the consequences of their actions;
- Consider how the environment is impacting on a child

Educators are not permitted at any time to use physical force/restraint or physical, verbal or emotional punishment and practices that demean, humiliate, frighten or threaten a child.

Where exceptional support is required for children to behave in a manner to uphold the safety or wellbeing of themselves or others, the Nominated Supervisor will follow the procedures outlined in *2.7 Supporting Complex Behaviours*.

Social Interactions

Educators will encourage children to promote their social skills and interaction with each other, including support children to develop self-regulation skills. Instances where children are displaying a pattern of behaviour that is impact on the wellbeing of others will be managed through meeting with parents/caregivers to gain a better insight into the drive and best response to the behaviour of concern (see *2.7 Supporting Complex Behaviours*).

Cultural Inclusion

The service will collect information about the diversity of culture and linguistics of the family attending the service at enrolment. The Nominated Supervisor will follow up on any request for considerations and ensure these matters are actioned in the appropriate way.

The service’s program will celebrate a wide variety of cultures, paying particular attention to the cultures identified in the local community. The educators of the service will be supported to enhance their cultural competency through shared learning and a respectful workplace environment.

The service recognise the unique contribution Aboriginal and Torres Strait Islander people make to our Australian communities. The service is committed to acknowledging and respecting the rich history of our first nations people give to our country. In doing so, the service looks to provide opportunities for children to experience and develop their understanding of the customs, traditions, and respect for the land Aboriginal and Torres Strait Islander culture upholds.

Related Policies

- *2.2 Commitment to the Health, Safety and Protection of Children*
- *2.6 Positive Behaviour Support Practices*
- *2.7 Supporting Complex Behaviours*
- *2.11 Supporting Additional Needs with Inclusive Practices*
- *3.1 Education Program Design and Implementation*
- *8.4 Educator Professional Development and Learning*
- *8.9.1 Employee and Management Code of Conduct*
- *8.9.2 Code of Conduct of Interacting with Children and Young People*
- *9.3 Interactions and Communication with Families*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *National Quality Framework – My Time, Our Place*
- *National Quality Standard, Quality Area 1 – Educational program and practice; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(j), and 155-156.*

Policy Controls			
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2.2 Commitment to the Health, Safety and Protection of Children

Policy Statement

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

The Approved Provider will ensure the promotion of safety and wellbeing of children through establishing effective practices, outlining policies and procedures to maintain expected standards and providing guidance and support to staff to meet expectations and display appropriate conduct. All staff are expected to model and encourage behaviour that upholds the dignity and safety of children.

The service recognises their duty to promote both physical and psychological safety of children and staff. The Approved Provider will foster an environment of fairness, dignity and respect for all people. The practices endorsed will seek to be inclusive and free from discrimination. Safety and wellbeing will be supported by fostering and embedding sound practices, including hazard identification and risk-management.

The service's commitment to promoting safety, wellbeing and protection of children includes its service ethical and legal duty to care for children associated with the service whilst not in the care of their parents or other caregivers, notifying Child Safety of any reasonable suspicions of significant harm.

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

Roles and Responsibilities

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

Procedures

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

- Demonstrating their commitment to act consistently with the service's codes of conduct (8.9). Educators will be supervised to adhere to this standard at all times.
- Ensuring educator employment and training procedures support the recruitment and induction of suitable educators, including induction and orientation procedures that equip employees with relevant knowledge and skills to uphold their responsibilities (see 8.3 *Recruitment and Employment of Educators*, 8.5 *Volunteers* and 10.22 *Determining the Responsible Person*).
- Ensuring interactions and relationship with children are supportive and provide positive guidance. Children are to be cared for in an environment that demonstrates respect, upholds dignity and promotes a child's self-regard (see 2.1 *Interactions and Relationships with Children* and 2.6 *Positive Behaviour Guidance*).

- Monitoring for hazards and risks in the physical environment, ensuring risks are managed in a reasonably practicable manner, free from identifiable hazards. Routines and practices are embedded by staff to encourage, role-model and support children’s learning of protective behaviours (see 6.3 *Work Health and Safety* and 10.9 *Risk Management*).
- Children are actively supervised all areas available to children to ensure that they are protected from harm caused by (See 2.20 *Supervision of Children*):
 - Physical injury; and/or
 - Harassment and other non-physical harm to the child, whether caused by other children, staff, parents of other children or any other person.
- Ensuring that staff are not alone at the service with a child, except in an emergency.
- Obtaining written parental permission for children to be photographed at the service. Photographs will be for service use only (see 9.2 *Enrolment* and 8.9.2 *Code of Conduct for Interacting with Children and Young People*).
- Establishing guidelines and practices for children's safe access to facilities, such as toilets and monitoring the Children’s Toileting Policy (see Policy 4.9) is followed at all times.
- Establishing ongoing procedures for the management, screening and monitoring of Blue Card (Working with Children Check) compliance for all relevant persons (see 8.29 *Working with Child Check (Blue Card) Management* and 8.5 *Volunteers*).
- Providing suitable training and instruction for staff on their duty as Mandatory Reporters to identify and respond to allegations or suspicion of harm and abuse (see 2.10 *Handling Disclosures and Reporting Suspicions of Harm*).
- Communicating the P&C’s Risk Management Strategy and Plan to parents, staff and the school community annually through displays, newsletters, training and meetings.
- Develop, review and record risk-management assessments as outlined in 10.9 *Risk Management and Minimisation*, including the Approved Providers endorsement of excursions and their activities ensuring they are identifying and controlling any foreseeable hazards and parents have expressed written permission for their children’s participation (3.5 *Excursions*)
- Reporting incidents and relevant notifications to the Approved Provider and communicating this to the Regulatory Authority as outlined in 4.5 *Incident, Illness, Injury or Trauma* notification and 10.33 *Managing Notifications*.

This policy and its procedures, outlining the service’s commitment to the safety and wellbeing of children and the protection of children from harm, will be reviewed **annually** or as required.

Related Policies

- 2.1 *Interactions and Relationships to Children*
- 2.7 *Supporting Complex Behaviours*
- 2.10 *Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- 2.11 *Supporting Additional Needs with Inclusive Practices*
- 2.16 *Promoting Protective Behaviours*
- 3.3 *Educators Practice*
- 4.9 *Children’s Toileting*
- 8.9 *Employee Code of Conduct*
- 10.8 *Information Handling – Privacy and Confidentiality*
- 8.9 *Applying the Code of Conduct*
- 8.9.1 *Employee and Management Code of Conduct*
- 8.9.2 *Code of Conduct of Interacting with Children and Young People*
- 10.32 *Appropriate Governance*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*

- *Child Protection Act 1999*
- *Department of Education and Training Child Care Provider Handbook*
- *National Quality Standard, Quality Area 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(h), 12*

Policy Controls			
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2.3 Educator to Child Ratios

Policy Statement

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

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

Roles and Responsibilities

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

Procedures

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

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

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

Composition of Qualified Staff

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

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

Volunteers

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

Excursions and Special Activities

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

Related Policies

- 2.20 Supervision
- 3.5 Excursions
- 6.3 Workplace Health and Safety
- 7.2 Drills and Evacuations
- 8.12 Employee Qualifications – Monitoring Progress
- 10.1 Managing Compliance with Legal Obligations
- 10.6 Nominated Supervisor
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 4 - Staffing arrangements; and 7 – Governance and leadership.

E&CS Legislation Compliance

- Education and Care Services National Regulations 13, 122, 123 (1)(d), 136 & 299.

Policy Controls			
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2.4 Arrivals and Departures

Policy Statement

[Education and Care Services National Regulation 102AAC](#) sets out the requirement to assess the risk associated with children arriving safely to OSHC for the development of policies and procedures.

The safe arrival of children risk assessment must—

- Identify and assess any risks that a child's travel between an education and care service and any other education or early childhood service may pose to the safety, health or wellbeing of the child.
- Specify how the identified risks will be managed and minimised.

And consider the following, in respect of a child who travels between an education and care service and any other education or early childhood service—

- The age, developmental stage and individual needs of the child.
- The role and responsibilities of the following persons (if applicable)—
 - In the case of a child who leaves the service premises to travel to an education and care service premises of another education and care service, the nominated supervisor of each service.
 - The child's parent.
 - An authorised nominee named in the child's enrolment record.
 - A person authorised by—
 - the child's parent, or
 - an authorised nominee named in the child's enrolment record.
- The role and responsibilities of the service the care of which the child is entering or leaving.
- The communication arrangements between the service the child is leaving and the service the child is entering including any communication arrangements if the child is missing or cannot be accounted for during the child's travel.
- The procedure to be followed by the service if the service has identified that the child is missing or cannot be accounted for during the child's travel.
- Given the risks posed by the child's travel, the number of educators or other responsible adults that are appropriate to provide supervision.
- The proposed route and destination, including any proximity to harm and hazards.
- The process for entering and exiting—
 - the service premises, and
 - the pick-up location or destination (as required).
- The procedure to be followed by the service to ensure the child leaves the service premises in accordance with regulation 99(4)(b).

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> Ensure practices and budgets reflect quality care and sufficient staffing arrangement to cater for the safe arrival and departure of children.
Nominated Supervisor	<p>The role of the Nominated Supervisor, or in their absence, the Responsible Person is to lead systems and processes to ensure the safe arrival and collection of children and young people. Their responsibilities include:</p> <ul style="list-style-type: none"> Liaising with parents and administrating the booking/attendance systems to accurately understand which children will be attending the session of care. Develop daily collection lists for children to be collected from their classrooms and coordinate educators carrying out this task. Ensure the setting in which children are signed into ASC is orderly and methodical. Follow up on the whereabouts of any children who did not present to the ASC session as expected. Lead the actions to locate missing or unaccounted for children. Ensure the identification of unknown people collecting children is confirmed and match authorisations. Ensure procedures are followed to document children’s attendance.
All Staff	<p>The role of educators is to follow the plans and procedures of the service to ensure children enter and exit OSHC safely. Educator responsibilities include:</p> <ul style="list-style-type: none"> Supervising children as they transition, including collecting younger children from classrooms. Mark children’s arrival Support the Nominated Supervisor or Responsible Person in calling parents, locating children or confirming the identity of people collecting children.
The child’s parent or guardian	<p>Outside of collecting their child(ren) from OHSC, the primary role of the parent is to be the central contact and decision-maker for children’s attendance and movements. Their responsibilities include—</p> <ul style="list-style-type: none"> Requesting sessions of care and notifying the service of absences. Responding to the service’s enquiries to the whereabouts of children (reason they haven’t presented to ASC). Providing written authority for other persons to collect the child. Providing written authority for permission to attend extra-circular activities or otherwise leave the service. Following sign-out procedures to document collection of child(ren).
An authorised nominee	<p>The primary role of the authorised nominee is to collect relevant children from OSHC and/or where relevant provide authority for another person to collect a relevant child. Their responsibilities include—</p> <ul style="list-style-type: none"> Evidencing their identification. Following sign-out procedures to document collection of child(ren). Providing written authority for other persons to collect a child, where relevant.
A person authorised by a parent, or authorised nominee	<p>The role of a person authorised by a parent or authorised nominee is to collect a relevant child. Their responsibilities include—</p> <ul style="list-style-type: none"> Evidencing their identification. Following sign-out procedures to document collection of child(ren).
Communication Arrangements	<p>Communication between the school and OSHC is coordinated via the Nominated Supervisor or Responsible Person in their absence and the school’s administration staff. Given the nature of communication, it is generally limited to phone calls and radio contact to-</p> <ul style="list-style-type: none"> Identify the child’s last known location or likelihood of attending (absent at school)

- | | |
|--|---|
| | <ul style="list-style-type: none"> • Request to use the school's PA system to prompt a child to present to OSHC • Share other relevant information related to the child's location and care (involvement in an incident etc). |
|--|---|

Procedures

ASC

1. Parents can notify of absences via email, phone or the Xplor app (preferred). These details are recorded in Xplor and noted on the relevant role.

Collection and Sign-in

2. Assigned educators will collect the Prep and Yr1 students from their respective classrooms at 3pm each day.
3. Prep students will be walked to the OSHC building where they will be signed in by the educator escorting them.
4. During Term 3-4 each year the Nominated Supervisor will collaborate with educators to equip children with skills for independently making their way to OSHC. Depending on the needs of children, this is typically supported through a transition of assistance through to supervision.
5. Students in Years 2 to 6 are signed in clusters sorted by year level.
6. Each cluster has a specific entrance to one of the hall's doors.
7. An educator will greet children as they line up and sign them in via iPad
8. Children will put away their bags and transition into afternoon tea.

Confirming Absences

9. At approx. 3:15pm it is expected all children have arrived at OSHC. A delegated person is then responsible for confirming the whereabouts of children that have not arrived. The delegated person is supported by the Nominated Supervisor.
10. Where a child's location cannot be confirmed, the following actions will be taken to locate the child and expected attendance by
 - a. checking immediate proximity,
 - b. communicating with the school office, and
 - c. phoning all parents/emergency contacts.
11. OSHC has a walkie talkie available to communicate with the school pick up zone, if a child has presented here by mistake.
12. If a parent needs to be called to confirm a child's location, then at all times the service's communication with families is respectful. OSHC may provide a gentle reminder to notify the service on absences at this time. (The Nominated Supervisor will, if necessary, communicate persistent non-notification issues with the parent in a different forum.)
13. Where a child cannot be located after reasonable effort to identify their whereabouts and where parents/emergency contact cannot be contacted the Police will be notified. These steps and decision-making are illustrated in *2.4.1 Arrival and Accountability Flowchart*

Departures

BSC

1. Children who participate in extra-curricular activities within the school (including pool area) **and** where a parent has signed a permission for early release, may be signed out early as the parent permission advises.
2. The responsible person can sign children in Grade 2 or higher out at 8:30am (teachers on duty to supervise).
3. Prep and Year 1 students will be delivered by an educator directly to their classroom at 8:55am.

ASC and Vacation Care

1. All visitors, authorised nominees and parents sign children out via the iPads located in front of the OSHC office.
2. All visitors and authorised nominees are requested to report directly to the OSHC office.

3. All persons signing a child out must be registered with signed authority to collect the child (except in an emergency):
 - a) parent (unless parent is prohibited by a court order),
 - b) authorised nominee (as recorded on enrolment form), or
 - c) where the parent has provided written authorisation and the departure is in accordance with the parent authorisation
4. Where the departure relates to an emergency a record of the departure will be recorded in an incident report or a note attached to the child's enrolment form (by the Responsible Person in Charge) outlining the details.

Authorised Nominees

1. All authorised persons collecting children must have current Login details for Xplor. If no Login details have previously been set-up or they have expired, then:
 - a) consult with the Nominated Supervisor/Responsible Person in Charge to confirm the authority to collect the child.
 - b) Request and sight identification to confirm the person's identity with enrolment records if setting up an Xplor login.
2. Where staff are unsure of authority, they are to contact parent/guardian to seek clarification and advice.
3. Authorisations are to be kept in the reenrolment record and any updates attached to this documentation (Regulations 161)

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

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

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

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

- a) the child requires medical, hospital or ambulance care or treatment
- b) another emergency

The service will record and report the details of any instances where a child has left the premises due to an emergency. Notification to the Regulatory Authority will be required (*4.5 Incident, Illness, Injury or Trauma & 10.33 Managing Notifications*)

Late Departures

Staff will contact parents if child has not been collected by 6.00pm. A late fee charged per \$15 per 15min increments applies after 6.00pm (*refer to 10.4 Setting, Reviewing and Managing Fees Policy*). In the event a child has not being collected a half hour after closing time (6:00pm) **and** there is no response from a parent, authorised nominee or emergency contact, advice will be sought from the police and an incident report completed (*4.5 Incident, Illness, Injury or Trauma & 10.33 Managing Notifications*).

Departures of Children with Self-Care or Sibling Care Arrangements Policy

The service will apply the following procedure for children who are permitted to leave the premises by way of written instruction from their legal parent/guardian either on their own or with a sibling (excluding where the sibling is an authorised person, who is at least high school age):

1. If parents ask about self-care and sibling arrangements, the service will support families in decision-making by providing relevant information and guidance. OSHC has a collated package of resources to support this conversation – 2.4.2 Self-Care/Sibling Care Arrangement Information.
2. The service will ask that families use this information as a basis for determining the capacity of their child/ren to be left in self-care arrangements.
3. The service will require the parent to provide a proposal which includes the following information along with the written consent to depart notification:
 - o date/s and times of departure;

- how the child will depart the service;
 - child's destination and expected length of journey;
 - mode of transport i.e. on foot or bicycle; and
 - name and date of birth of older sibling collecting the child (if applicable)
4. The service acknowledges that families may use their discretion in determining the capacity of their own children to enter into self-care arrangements.
 5. The proposed request will be forwarded to the Approved Provider for approval before actioning.
 6. The service will communicate with parents and authorised nominees (where relevant) if there are concerns regarding the safety and protection of children departing from the service in this manner. The Nominated Supervisor (or alternative delegate) will not allow the departure of a child if there is a reasonable concern about the safety of wellbeing of the child in doing so.

The Queensland Criminal Code 1899 (Section 364A) states:

- A person who, having the lawful care or charge of a child under 12 years, leaves the child for an unreasonable time without making reasonable provision for the supervision and care of the child during that time commits a misdemeanour.
- Whether the time is unreasonable depends on all the relevant circumstances.

Child Leaving without Permission

1. If a child leaves the service without permission or without the authority described above, the staff will assess the situation immediately and will call the police and a parent as soon as reasonably possible.
2. Staff will not leave the service to follow a child if:
 - a) It will or may leave the other children in the service with insufficient supervision.
 - b) It will or may expose that staff member to an unacceptable risk of personal harm
3. As soon as practical the Approved Provider will be notified of the incident.
4. A notification will be made to the Regulatory Authority of the incident
5. Following the incident, *2.7 Supporting Complex Behaviours* procedure will be followed. Consultation with parents, the Approved Provider and Nominated Supervisor will direct the plan of action moving forward.

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

Children Unaccounted for During the Program

1. In the event that a child is unaccounted for during the operating hours of the program, the Nominated Supervisor will be notified immediately by the educator as soon as the disappearance is discovered/identified.
2. The Nominated Supervisor will undertake a rapid and comprehensive search of the service's premises to locate the child. In the event that the child is not located, the child's parent/guardian will be notified and the police will be called.
3. The Nominated Supervisor will advise the Approved Provider immediately upon calling the police and the Regulatory Authority will be notified using the appropriate forms
4. An incident report will be completed and will include information such as:
 - Date, time and location of the child when they were last accounted for;
 - Details of the supervising educator and the circumstances surrounding their disappearance;
 - Details of actions instigated to locate the child;
 - What the child was wearing and any distinguishing features; and
 - Time parent/guardians and other agencies were contacted.

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *Child Protection Act 1999*
- *Department of Education and Training Child Care Provider Handbook*
- *The Queensland Criminal Code 1899*

- *National Quality Standard, Quality Area 2 – Children’s health and safety; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(f), 12, 99, 158 & 161.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.2-2023/1	Date of review	15/11/23

2.6 Positive Behaviour Support Practices

Policy Statement

OSHC is committed to ensuring all educators' practice and skills are consistent with positive guidance and encouragement towards acceptable behaviour when interacting and supporting children. The service will ensure educators are supported to respond to behaviour with strategies and techniques that promote secure, reciprocal relationships, build a strong sense of wellbeing and upholds a child's dignity and rights.

The service recognises social and self-regulation (emotional) skills are learned. Learning takes place when children have warm confiding relationships with adults who care for them, when children understand which behaviours are acceptable, when feedback and positive-reinforcement for acceptable behaviour is consistent, and where children are immersed in engaging learning activities.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Law section 166 & Education and Care Services National Regulations 155-156*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure that the principles and expectations for responding to and supporting children's behaviour are established and communicated effectively. • Ensure the established practices are consistent with legislation and regulations. • Provide opportunities to support the practices and capacity of educators to respond to children's behaviours.
Nominated Supervisor	<ul style="list-style-type: none"> • Provide supervision and direct support to educators. • Liaise with families to address concerns and relay incidents. • Role-model and guide effective positive behaviour support practices. • Ensure the program is achieving the identified aims and effective in supporting the behaviour of children.
All Staff	<ul style="list-style-type: none"> • Ensure their practices are consistent with the principles of the service's policies and code of conduct in responding to children's behaviour. • Access learning and developmental opportunities to enhance the care and support provided to children. • Communicate with the Nominated Supervisor or Approved Provider where additional support for children is emerging as a need. • Collaborate in delivering and developing the service's program to meet the needs of children.

Procedures

Educators will receive suitable instruction, support and training to understand how they are best to respond to support children's development and individual needs. In responding to children's behaviour and needs, educator's interactions, behaviour support and guidance practices will be consistent with the Philosophy Statement, the service's Code of Conduct, and Education and Care Services legislation at all times (see *2.1 Interactions and Relationships with Children*).

Program

The service recognises the relationship between the design of, and engagement in, the service's program and the behaviour of children of the program. The service is committed to developing a quality and considered program to meet the needs of children and families. All children will be provided with opportunities to guide the development of the program and the Educational Leader will work collaboratively to ensure it aims to meet the needs of all children attending the service.

The service's program will support children's behaviour through:

- Promoting routines that are relaxed and comfortable, children should not be rushed to transition abruptly or wait for unreasonable times.
- Designing for flexibility in routines to maximise choices and child-initiated experiences.

- Being engaging, diverse, challenging and stimulating to cater for the wide developmental needs of children, including:
 - social (group) and independent (solitary) play, and
 - robust and quiet play.

Positive Guidance Strategies

The relationship and interaction between educators and children is critical to effectively supporting and guiding behaviour. The following principles will be used by educators to establish an environment and culture in which the behaviour of children is best supported:

- Role model behaviour that demonstrates the service’s expectations to children.
- Build secure, reciprocal relationships with children through listening with warmth and being available and responsive to needs.
- Communicate with the child to enable them to express their needs, and help you to talk about the service’s expectations.
- Use positive reinforcement and praise to communicate to children when they behave in ways that meet expectations.
- Create a calm, fun and safe environment to reduce anxiety and stress for children and educators.

Educators will respond to children’s behaviour with support, care and teaching. Educators should use positive guidance strategies that include but are not limited to:

<p>Caring gesture/hurdle help</p>	<ul style="list-style-type: none"> • Encouragement, support, and/or assistance offered by an educator to prevent a child becoming frustrated or disengaged with a task or activity. The help can take many forms such as– asking for other children to support, supplying additional materials or information, providing alternative equipment, or assisting with completing some of the initial tasks. • A caring gesture could also include warm attention to help coping with a stressful or difficult situation. Strategic use can help a child whose own self-control is deteriorating to support in gaining composure. • A caring gesture may include using humour to reduce immediate tension and allow a child to avoid a power struggle.
<p>Changing the environment and proximity</p>	<ul style="list-style-type: none"> • Educators should identify the impact on the environmental factors on children’s behaviours (space, noise, routines, level of engagement, social influence). • Identify the factors and issues that could prevent, reduce or modify the situation, to help reduce problematic behaviour. • Likewise, the physical distance between an educator and children can impact on behaviour. Controlling the distance between educators and children can provide an inconspicuous influence. An educator might approach a child when they are using inappropriate behaviour with the aim of cueing them to use more appropriate behaviour.
<p>Prompting</p>	<ul style="list-style-type: none"> • Reminding a child of the service’s expectations or encouraging the child to use a skill or certain behaviour. • Prompting is effective when a child is having difficulty with responding to an instruction or cue. • Prompts can be verbal (directions or suggestions), visual (pictures or photos), a gesture (pointing to objects or a direction), modelling (teaching the skill).

Emotional validation	<ul style="list-style-type: none"> Engaging the child in conversation to support them to understand their behaviour and communication. The educator should be present and engaged with the child. Central to emotional validation is accurate reflection e.g.: <ul style="list-style-type: none"> <i>“...it looks [or seems] like you are (insert emotion) because I can see (trigger/rationale/observation)”</i>. <i>“I hear what you are saying, you seem angry because... let’s see what we can do to help”</i> Recognising the child’s emotions are normal in the circumstances - that they are understood, can drain off emotions to allow constructive dialogue to be facilitated. The conversation may explore the trigger, problem or concern for the child identifying the motivation and drive (interpret events).
Redirection	<ul style="list-style-type: none"> Redirection can involve distracting a child when a trigger or behaviour occurs. Its intention is to guide a child’s behaviour from inappropriate to appropriate. An easy way to alleviate a child’s inappropriate behaviour is to provide something else to engage them with. The substitution could be anything from a learning resource, a toy, a pen and paper for drawing, or it could an educator’s attention until the child is ready to transition to something independently.
Behaviour specific praise (reinforcing desired behaviour)	<ul style="list-style-type: none"> Appealing to cognitive behaviour influences to space thoughts, feeling and behaviours. Social reinforcement (authentic praise) is a powerful reward. Aligning this feedback to include the specific positive aspects of the behaviour increases the effectiveness e.g. <ul style="list-style-type: none"> <i>“(child’s name), I really like the way you are sitting quieting and waiting”</i> <i>“That was great you helped pack up without being asked, (child’s name)”</i> Identify those behaviours you wish to promote, prepare children with information about this, identify children displaying the behaviour, describe behaviour in the form of praise

Conflict Resolution

The service recognises the significant opportunity group activities play in encouraging learning and the development of social skills. The service’s program will seek to include many opportunities for shared experiences for children that promote cooperation and collaboration between children. The service recognises that children will, at times, require support to navigate collaborative play. The role of the service’s educators is to mediate, role-model and guide children to understand the meaning of their interaction to learn life-long skills for positive social interaction.

Supporting Positive Interactions and Relationships

Mediate	<ul style="list-style-type: none"> Facilitate shared understanding through supporting children to express their perspectives. Create an environment where children can communicate constructively.
Role-model	<ul style="list-style-type: none"> Demonstrate social interactions that are warm, respectful, secure and reciprocal. Interactions with children and colleagues demonstrates active listening, self-regulation and collaborative partnerships.
Guide	<ul style="list-style-type: none"> Prompt children to support their understanding and salience of the service’s expectations and their own coping strategies in managing conflict. Proactively support children by teaching using intentionality to support the development of interpersonal skills.

Additional Support

Where a child’s behaviour poses a significant risk to safety of themselves or others and every reasonable attempt to deescalate has been ineffective, the child’s parents or emergency contact will be called to collect the child from the service. Procedures outlined in 2.7 *Supporting Complex Behaviours* will then be followed.

Educators will complete recording and reporting procedures outlined in *4.5 Incident, Illness, Injury or Trauma* when a child has been prematurely collected from the service due to their behaviour.

Prohibited Actions
 Educators are not permitted at any time to use physical force/restraint or physical, verbal or emotional punishment and practices that demean, humiliate, frighten or threaten a child. Discipline must be reasonable in the circumstances. Additionally, corporal punishment must never be used as a disciplinary measure.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.7 Supporting Complex Behaviours
- 2.11 Supporting Additional Needs with Inclusive Practices
- 3.1 Educational Program Design and Implementation
- 3.2 Program Evaluation and Communicating Children's Progress
- 8.9.1 Code of Conduct
- 9.3 Interactions and Communication with Families

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities

E&CS Legislation Compliance

- Education and Care Services National Law Section 166
- Education and Care Services National Regulations 155-156

Policy Controls			
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2.7 Supporting Complex Behaviours

Policy Statement

The service is committed to ensuring children receive positive behaviour support as they learn and develop. OSHC recognises, at times, children display behaviour that is unsuitable for the setting. The behaviours of serious concern are those that risk the safety of the child or others and/or risk the wellbeing of the child or others. On these occasions, the service is committed to plan, support and reflect on opportunities for individual consideration for the best outcomes for children and families.

In responding to behaviours that the service recognises as complex, parents will be invited to collaborate with the Nominated Supervisor (or delegate) to identify strategies to ensure the safety and wellbeing of everyone. Planning will focus on actions to support the child to learn new behaviours (e.g. appropriate communication, social skills and emotional regulation) and reduce the risk of further incidents.

Where opportunities to support the child have been exhausted or where the risks to safety are too extreme, the service may exclude the child from attending either temporarily, or in some cases, permanently.

Auxiliary Documents

- 2.7.1 Positive Behaviour Support Plan

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Establishing processes to ensure children are provided with an opportunity to be supported to learn and enhance behaviours and skills that support them to meet the service's expectations. • Ensure educator's practices support each child's wellbeing and rights in responding to their behaviour. • Provide mechanisms for constructive and collaborative partnerships to identify effective strategies for supporting children's behaviour. • Ensure the safety and wellbeing of all children accessing the service.
Nominated Supervisor	<ul style="list-style-type: none"> • Facilitate a collaborative planning process to understand a child's behaviours and identify suitable strategies and responses to support learning and wellbeing. • Monitor the effectiveness of the developed support plans and communicate areas for further support. • Coordinate plans, including relevant resources and training with the service's educators. • Provided open and supportive ongoing communication with parents/caregivers. • Consult with the Approved Provider where planning and support is not addressing the behaviour needs of the service.
All Staff	<ul style="list-style-type: none"> • Support the preparation, implementation and delivery of positive behaviour support plans. • Followed the developed strategies and communicate relevant information on the effectiveness.

Procedures

Following a significant incident or where it has been identified a child's experience will be improved through intentional behaviour support planning, the Nominated Supervisor (or delegate) will invite the parent/s (or caregivers) of the child to meet to discuss strategies for supporting the child. Depending on the level of risk, the Nominated Supervisor may suspend a child attendance until a positive behaviour support plan is developed.

Initial Intensive Behaviour Support

Depending on the level of support required and the significance of behaviour, the Nominated Supervisor may choose to coordinate some initial intentional support strategies to effectively support a child before needs require escalation to a fully developed positive behaviour support plan. Monitoring the support

provided to children will determine the progress to collaboration with parents/caregivers (formal Positive Behaviour Support Planning).

Initial support planning may be a range of options chosen by the Nominated Supervisor and could include:

- an informal discussion to prompt educators to be intentional in how they respond to a child's needs.
- development of specific strategies to engage the child and positively impact behaviour
- an internal meeting with key staff members to draft an initial plan to support a child's behaviour.

The Nominated Supervisor will communicate the intentions and actions with parents and caregivers, ensuring transparent and collaborative communication in supporting children to meet the service's expectation. Any plans developed to support a child will be an extension of the services positive behaviour support practices (policy 2.6).

Positive Behaviour Support Planning

Positive behaviour support plans have three main components: understanding the child/behaviour, a plan to support the child, steps to assist with implementation.

Understanding the child/behaviour

1. The Nominated Supervisor will invite the parent/s or caregiver/s of the child to meet to discuss the child's behaviour and strategies to support the child
2. The intention of the support plan is to focus on developing the child's skills and learning. Identifying the child's strengths and interests will frame how the service can best support the child's development.
3. Any relevant information about diagnoses, history, health or environmental impacts should be identified.
4. Central to developing strategies to respond to behaviour is understanding the drive and function of any behaviours of concern. The Nominated Supervisor, educators and parents/caregivers should identify any indications to what might help the child.

Support strategies

5. The service's planned actions are developed to promote and encourage acceptable behaviours. Proactive strategies are those that can set the environment up for success.
6. Response strategies are those actions educators will use to de-escalate a child's behaviour in a crisis/incident. There will be an emphasis on early de-escalation.

Implementation

7. Any additional resources, support or training that the effectiveness of the plan is contingent on will be identified and assigned responsibility.
8. Parent/s or caregivers are encouraged to collaborate throughout the planning and implementation of positive behaviour support plans. There will be continual monitoring of the effectiveness and any identified concerns will prompt a re-evaluation of the content and additional supports.

Exclusion

1. Where the Nominated Supervisor reasonably believes:
 - the risk to safety or the impact on the wellbeing of a child(ren) exceeds the capacity (or potential capacity) of the service; and
 - where the opportunity to support a child's behaviour has been exhausted,
2. Either temporary or permanent exclusion can be considered in consultation with the Approved Provider.
3. The Nominated Supervisor will review relevant reports and plans with the Approved Provider and explore an action plan up to and including the possibility of suspending a child's attendance.
4. Any decision to exclude a child will be communicated to the parent/s in writing and will outline the conditions for re-enrolment, where relevant.

Related Policies

- *2.1 Interactions and Relationships with Children*
- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.6 Positive Behaviour Support Practices*
- *2.11 Supporting Additional Needs with Inclusive Practices*
- *4.5 Incident, Illness, Injury or Trauma*

- 9.3 Interactions and Communication with Families
- 10.6 Nominated Supervisor
- 10.33 - Managing Notifications

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; and 5 - Relationships with children; 6 - Collaborative partnerships with families and communities;

E&CS Legislation Compliance

- Education and Care Services National Regulations 155-156.

Policy Controls			
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Date implemented:	1/9/21	Date families notified	
Version:	2.7-2021/1	Date of review	

2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)

Policy Statement

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

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

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

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

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

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> ▪ Ensure the service has suitable resources and materials available to support the Nominated Supervisor to guide the understanding of harmful sexual behaviours. ▪ Establish effective procedures for investigating and actioning concerns.
Nominated Supervisor	<ul style="list-style-type: none"> ▪ Take the lead in listening to and actioning a response to allegations of harmful sexual behaviours. ▪ Liaise with parents and, if needed, other professionals to ensure children are protected and are supported to access suitable assessments or interventions.
All Staff	<ul style="list-style-type: none"> • Provide effective supervision and support to children and young people. • Respond to critical incidents in a timely manner, providing clear and concise information to the Nominated Supervisor for response and management.

Procedures

Child Protection Act 1999 (13E)

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

Prevention and Resourcing

Effective Supervision and Knowledge

The service provides a safe and supportive environment for children by supporting educators' knowledge to address the risks of children being exposed to harmful sexual behaviours. To ensure children's safety, the service continuously evaluates its supervision practices and looks for opportunities to improve them. Effective supervision is a fundamental element of a safe OSHC environment. Educators will be supported to develop sound skills and abilities to provide coordinated and effective supervision.

Initial Instruction

All educators and staff receive training to identify child abuse, including child sexual abuse, upon commencing with Sherwood OSHC. This training is consistent with the procedures set out in the policy - Child Protection and Mandatory Reporting.

Specific Additional Training and Resources

Complimenting the initial child protection training, we provide a range of additional learning materials to promote a robust understanding of harmful sexual behaviours, including online learning modules or webinars, contemporary guidelines, and information papers from reputable sources. These sessions and resources are made available periodically throughout the year as part of a planned approach to professional development.

If further training or support is required, the service will prioritise its availability. Additionally, the service maintains contact information for True (<https://www.true.org.au/>), the organisation with the most relevant expertise in this context. This is complemented by the service's leadership team collating any other relevant local community supports, primarily to parents, should interventions or therapeutic support be required.

Responding to Concerns of Harmful Sexual Behaviours

While every effort is taken to reduce the likelihood of a child being exposed to harmful sexual behaviours, the service remains open to the possibility that it may occur and treats any concerns very seriously.

Identified by the Service

If an educator becomes concerned or suspicious of harmful sexual behaviour occurring at the service, they will follow the steps outlined in the Incidents, Illness, Injury, and Trauma policy. These steps include-

- redirecting any children,
- providing necessary support, and
- documenting the events.

Relevant parents will be notified of the incident as soon as possible, but within 24 hours. Depending on the severity of the incident, the Regulatory Authority may also be notified.

When concerns arise about harmful sexual behaviour, the Nominated Supervisor (or the Responsible Person, if necessary) will assess the service's ability to maintain the safety of children. If the service reasonably believes that children's safety or well-being may be at risk, the child's enrolment will be suspended while further guidance, management action, and planning are taken.

Furthermore, if any service representative believes that the child requires protection, they will follow the steps outlined in the Child Protection and Mandatory Reporting policy.

Complaint of Harmful Sexual Behaviours

Consistent with the Feedback and Complaints policy, parents and children can voice their concerns with a representative of the service at any time. Any representative of the service, including the Nominated Supervisor and educators, will treat complaints and concerns seriously and take the following steps:

1. If educators or other representatives of the service receive complaints or concerns regarding harmful sexual behaviours, as defined in this policy, they should immediately notify the Nominated Supervisor or the Responsible Person. Although the Nominated Supervisor is the preferred contact, relevant concerns can be raised with any representative of the service.
2. The service will document all details of relevant behaviours and incidents using the Complaints Record. The Nominated Supervisor or Responsible Person will then notify a representative of the Approved Provider at the earliest convenience to develop a response plan.
3. This plan will include assigning specific tasks to individuals and will be based on the available information to ensure the safety of all children attending the service, comply with reporting requirements, and collect relevant information to assess the veracity of the complaint.
4. If the information received indicates that the safety or wellbeing of children attending the service is at risk and beyond the capacity of the service to ensure protection, the service may suspend the enrolment of the relevant child pending further guidance, management action (including an investigation), and planning.
5. The service will notify the parents of the child accused of displaying harmful sexual behaviours of the details of the concerns or complaints and offer relevant contacts for community support. If the service believes the child is in need of protection, the steps outlined in the Child Protection and Mandatory Reporting policy will be followed.
6. Once the relevant information and guidance have been collated and established, the Approved Provider and the Nominated Supervisor will determine the appropriate outcome to provide care that safeguards all children attending the service. This may include developing behaviour or care plans.
7. All documentation, communication, and reports will be stored confidentially, as outlined in the Privacy and Confidentiality of Records policy, in a password-protected system.

Related Policies

- *2.1 Interactions and Relationships to Children*
- *2.7 Supporting Complex Behaviours*
- *4.5 Incident, Illness, Injury or Trauma*
- *8.3 Recruitment and Employment of Educators*
- *8.4 Educator Professional Development and Learning*
- *8.9.1 Code of Conduct*
- *9.3 Interaction and Communication with Families*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *10.6 Nominated Supervisor*
- *10.22 Determining the Responsible Person*
- *10.33 Managing Notifications*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 12, 84, 85-86, 168 (2)(b), 175 (2)(d)&(e)*

Policy Controls

Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.10-2021/1	Date of review	15/11/23

2.11 Supporting Additional Needs with Inclusive Practices

Policy Statement

OSHC recognises that additional support may be required for some children depending on their individual needs. The service is committed to ensuring children are able to be supported in accessing the service regardless of their ability or needs. When required the service will partner with the relevant Inclusion Agency to address any barriers of a child's participation within the program.

The service is committed to building the capacity to be inclusive of children with additional needs. The service recognises the value of having children with additional needs participating and belonging to OSHC, and the impact to families of the school community in being able to access quality education and care services for their children.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Support the development of inclusive practices and the capacity of educators to meet the needs of children.
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with the Approved Provider and families to ensure appropriate planning, support and service are delivered to meet the needs of children accessing (or seeking to access) the service.• Engage and coordinate with the Inclusion Agency to access resources and funding to support the service to meet the needs of children.
All Staff	<ul style="list-style-type: none">• Ensure practices support the inclusion, participation and belonging of all children, regardless of individual needs and ability.• Engage in relevant professional development and/or access to professional resources to support the capacity of the service to meet the needs of individual children.

Procedures

Enrolment

The service's enrolment practices will elicit opportunities for parents and/or caregivers to identify any additional needs of the child, and then provide an opportunity to collaborate on how the service will cater for any individual needs of the child.

Where the service recognises further capacity building would be beneficial for a child's participation in the program or additional needs have been identified, the service will request to meet with the parents/caregivers to discuss inclusion support opportunities.

Inclusion Support Practices

Inclusion is a practice where environments and programs are planned and delivered to ensure meaningful participation for all children. Inclusive practices are about actively seeking solutions and strategies to address barriers to children's participation and engagement. Barriers that can impact children include the physical environment, the educators' beliefs and skills, design and structure of the program, and a family's engagement, understanding and expectation of the service.

An essential component of inclusive practices is the relationship building with stakeholders, including children, families and the wider community. Inclusive practices are about the participation and connection with all children who access and use (or potentially use) the service.

Inclusive practices:

- Foster independence and agency
- Provide a voice to children and an opportunity to be heard
- Are respectful and responsive
- Build collaboration and provide teamwork response
- Are meaningful, build on strengths and are enhanced by reflective practice

Inclusion Agency Engagement

The service will seek to address any barriers for a child's participation through capacity building, where the service requires access to additional resources, support or training they will contact the relevant Inclusion Agency (Inclusion Support Queensland) for professional support.

Inclusion Support QLD (KU Children's Services) Contact Details

1800 811 039
 inclusionsupportqld@ku.com.au
 www.inclusionsupportqld.org.au

Related Policies

- 2.1 Interactions and Relationships with Children
- 3.1 Educational Program Design and Implementation
- 4.17 Children with Medical Conditions
- 8.9.1 Code of Conduct
- 9.2 Enrolment
- 9.3 Interactions and Communication with Families

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- Disability Discrimination Act 1992 (Cth)
- Anti-Discrimination Act 1991 (Qld)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.11-2021/1	Date of review	

2.12 Children Who Arrive to OSHC Without a Booking

Policy Statement

The service recognises that on occasions, children may arrive at or be brought to the service when they are:

- Enrolled in the service but have not been booked in for a session; or
- Not enrolled at the service and have not been collected by their parent/guardian/caregiver.

Regardless of the reason for attendance without a booking, OSHC employees will always be required to respond in a manner that upholds the safety and protection of children. The service will observe their duty of care and statutory obligations to support children.

Children arriving at the service with a booking will not engage with the program or participate in the service unless appropriately enrolled. However, every effort will be made to locate parents/caregivers or escalate the response to the appropriate authority.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish suitable procedures for responding to children arriving without a booking.• Monitor incident for additional support and consultation.
Nominated Supervisor	<ul style="list-style-type: none">• Respond to incidents of arriving children without a booking with due care, respect and diligence.• Provide communication to relevant parties as appropriate.
All Staff	<ul style="list-style-type: none">• Ensure all children in the school community are appropriately supported.

Procedures

A child(ren) is known to the service

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

A child(ren) is not known to the service

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

Parents/caregivers are unable to be contacted

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

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.4 Arrivals and Departures of Children
- 2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *Duty of Care*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety*

Policy Controls			
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Date implemented:	1/9/21	Date families notified	
Version:	2.12-2021/1	Date of review	

2.14 Bookings and Cancellations

Policy Statement

OSHC is committed to delivering an efficient and effective service for children and families. Management of the bookings and cancellation is critical in providing a quality and efficient service for the community. Parents and families have a role in communicating bookings and cancellations with the service to ensure effective business practices are supported. The service will ensure the booking administration meets the needs of families through effective communication of clear process and expectations.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure administration practices support the provision of quality care, including compliance with law, regulations and CCS obligations.
Nominated Supervisor	<ul style="list-style-type: none">• Provide effective communication to families to ensure their responsibilities and obligation in notifying the service of obligations.• Monitor and support the application of the service's fees and booking management procedures.
All Staff	<ul style="list-style-type: none">• Support the administration of bookings and cancellation, including documenting notification as required.

Procedures

A child must be fully and actively enrolled at OSHC before any requests for booking can be processed or accepted (see 9.2 *Enrolment*). This includes:

- Enrolment paperwork completed in full
- Relevant supporting documentation (including but not limited to, medical information/action plans, inclusion support plans and immunisation records) provided to the service

Before and After School Care

Permanent Bookings

Bookings for Before and After School Care session can be made by the account holders (typically the child's parents) or an authorised nominee, where consent has previously been obtained. Where the service has reached or exceeded requests for bookings beyond the maximum number of children stipulated in the service approval the procedures outlined in 9.1 *Access for Families* (management of waiting lists) will be followed.

Changes to Permanent Bookings

- Any changes to bookings will require notice of at least **two weeks** (14 days), any notice that is less than two weeks will incur the regular fee.
- All changes must be requested **via email**; any agreements of changes that have occurred outside of the email process will not be acknowledged.

Casual Bookings

- Casual bookings will only be available where OSHC has approved places available. Permanent bookings will take a priority over casual vacancies.
- Casual booking requests must be made **via email**, any agreements of changes that have occurred outside of the email process will not be acknowledged.
- If placement is not available at the time the request is made, the request will be placed on a waiting list. An offer of placement may be made if a position becomes available closer to the requested date.

Cancellations (Advising of Absences)

Should the child not attend a booked (either permanent or casual) OSHC session for any reason, fees for the session are still payable. CCS will apply in accordance with allowable and additional absence provisions.

It is the responsibility of parents (account holders) to advise the service of absences for any reason. The notification must be prior to the start of the session, (i.e. before 2.45pm for ASC).

It is preferred that cancellations are notified via Xplor. Parents (or authorised nominees) should notify the service before the sessions of any planned absences. Notification of a child's absence can be made via:

- Xplor
- Email
- Phone

Any educator receiving a notification of a child's absence will be required to note this in Xplor.

Vacation Care

Program and Forms

Vacation Care bookings must be made via Xplor.

Pupil Free Day bookings must also be made via Xplor. The planned program and relevant information will be emailed. Details including fees, timelines for booking, and session capacities will be noted on the email/program/form. Unless stated otherwise, Pupil Free Days will have the same conditions as vacation care.

All vacation care bookings will be confirmed in Xplor 5 days after their booking form is received. In the event that a requested day is not available, the family will be notified and given the option of going on a waiting list for that session. An offer of placement may be made if a position becomes available closer to the requested date.

Vacation Care Cancellation and Changes to Bookings

Cancellation and changes to bookings for Vacation Care must be made **via Xplor or email** at least **1 week** (7 days) before the closing date for a specific holiday program. Cancellations outside of this timeline will incur a fee, equal to the fee for that session will be charged. No changes to vacation care bookings are permitted within one week of the scheduled holiday program.

Child Care Subsidy

Accessing CCS

It is the responsibility of the parents/caregivers to communicate with Centrelink about their child/ren attending a care service. When the booking is added to the system and the child/ren have attended their first session, a Complying Written Arrangement (CWA) is generated. This requires parents/guardians to approve the booking through their Centrelink online account (accessed through MyGov or the Centrelink app), prior to any CCS being payable to the service as a fee reduction for the family.

Reporting Absences (CCS)

Child Care Subsidy is payable for up to 42 absence days for a child in a financial year for sessions of care a child is enrolled in and did not attend and where there is still a liability to pay a fee for the session.

Once 42 absence days have occurred in a financial year, *Child Care Subsidy* can only be paid for any additional absences where they are taken for a reason set out in Family Assistance Law. These reasons are:

- the child, the individual who cares for the child, the individual's partner or another person with whom the child lives is ill and the service has been given a medical certificate by a medical practitioner
- the child is attending preschool
- alternative arrangements have been made on a pupil-free day
- the child has not been immunised against an infectious disease, the absence occurs during an immunisation grace period and a medical practitioner has certified that exposure to the infectious disease would pose a health risk to the child
- the absence is because the child is spending time with a person other than the individual who is their usual carer as required by a court order or a parenting plan, and the service has a copy of the relevant court order or parenting plan for the child
- the service is closed as a direct result of a period of local emergency

- the child cannot attend because of a local emergency (for example, because they are unable to travel to the service), during the period of the emergency or up to 28 days afterwards
- the individual who cares for the child has decided the child should not attend the service for up to seven days immediately following the end of a period of local emergency

Child Care Subsidy and *Additional Child Care Subsidy* is payable for all additional absences and there is no limit on the number of additional absence days a recipient may claim, providing the absence days are taken for specified reasons and supporting documentation, where required, is provided.

The Nominated Supervisor (or relevant delegate) will liaise with families to ensure relevant supporting documentation is received from families where this is required. Families failing to produce a valid reason and/or supporting documentation may not receive a subsidy payment and will, therefore, be liable for the full fees for the absent session.

Related Policies

- *2.4 Arrivals and Departures of Children*
- *3.5 Excursions*
- *9.1 Access*
- *9.2 Enrolment*
- *9.3 Interactions and Communication with Families*
- *10.4 Setting, Reviewing and Managing Fees*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *A New Tax System (Family Assistance) (Administration) Act 1999*
- *Australian Government Child Care Provider Handbook*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety; 3 – Physical environment; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 99 and 101.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.14-2021/1	Date of review	

2.15 Children's Property and Belongings

Policy Statement

The service acknowledges that children will bring to the service or carry with them certain items of personal belongings. This policy details the types of belongings that children may bring with them on a regular basis and the level of responsibility associated with bringing those belongings.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Establish effective policies to manage the expectations of belongings
Nominated Supervisor	<ul style="list-style-type: none">Provide clear communication to families on the expectations for personal belongings.
All Staff	<ul style="list-style-type: none">Follow the service's policies to guide children's management and care for personal items.

Procedures

Children's Required Belongings

The family will be responsible for providing the child with appropriate belongings and property required for active participation in the service. Such property may include (but is not limited to):

- Footwear;
- Clothing;
- Hats (and sun safety equipment); and
- Bags, lunch boxes and water bottles.

Parents/caregiver will be asked that all personal property and belongings should be clearly named/labelled.

Additional/Special Items

The service will inform parents/caregivers through relevant communication of any additional appropriate personal belongings required at the service for special events etc. Additionally, the service will provide clear communication on any items that might interfere with the program and will guide families for these items to remain at home.

Throughout special program times, i.e. Vacation Care or Pupil Free Days, the children be able to bring with them personal belongings other than typical items (e.g. games and toys). This will be done solely at the discretion and responsibility of the family. No responsibility will be taken whatsoever for any items brought to the service which become lost or damaged as a result.

Care for Belongings

The service will not take responsibility for any of the children's personal property or belongings but will endeavour to:

- Actively encourage children to care for their belongings;
- Remind children when belongings need to be placed in storage, e.g. lunch box into bag;
- Provide suitable storage to keep safe (at parent/family or child request) any item of personal belonging which is either special, expensive or at risk of being damaged;
- Ensure that participation in service activities and experiences does not wilfully damage belongings; and
- Provide protective equipment such as painting smocks for relevant activities.

Related Policies

- 4.8 Sun Safety
- 6.3 Workplace Health and Safety
- 9.2 Enrolment
- 9.3 Interactions and Communication with Families
- 9.9 Acceptance and Refusal of Authorisations
- 10.26 Social Media & ICT Usage

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; and 2 – Children’s health and safety*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.15-2021/1	Date of review	

2.16 Promoting Protective Behaviours

Policy Statement

The service considers its role in the protection of children of paramount importance and therefore takes a proactive approach in supporting families and children through promoting protective behaviours to ensure children's ongoing safety, wellbeing and protection.

Roles and Responsibilities

Approved Provider	Establish effective policies to promote the protective behaviours of children.
Nominated Supervisor	Provide clear communication to families on opportunities to engage with culturally competent protective behaviour strategies
All Staff	Follow the service's policies to promote children's development of protective behaviours.

Procedures

Foundations of Protective Practices

Opportunities to incorporate protective behaviour messages will occur both formally within the program and incidentally as the occasion arises.

On induction, educators will be instructed on the key messages and skills communicated to children to support their ability to act protectively. Central to all promotion is:

- Children understanding the concept of safety and the practicalities of being safe
- Children understand what to do (and who they can go to) when they do not feel safe

Behaviours Promoted at the Service

The Nominated Supervisor and educators will reinforce the protective behaviours of children through the following principles and messages:

- We all have the right to feel safe all of the time;
- Nothing is so awful that we can't talk to someone about it;
- Encouraging children to interact and/or physically touch other children in a safe and non-threatening way; and
- Building on children's problem solving, reasoning and communication skills (e.g. brainstorming safe strategies for unsafe situations).

The Nominated Supervisor and educators actively encourage opportunities to build children's personal safety behaviours/strategies, including:

- While they are playing and interacting in their environment;
- Accessing their community;
- Understanding privacy and personal boundaries; and
- Who to go to for help when feeling unsafe.

The Nominated Supervisor and educators will collaborate with families to support children's learning about personal safety and uphold a culturally competent approach. Collaboration will include the service liaising with school administration to maintain an awareness of additional protective behaviour programs provided within the school setting.

Related Policies

- *2.1 Respect for Children*
- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- *3.5 Excursions*
- *4.9 Children's Toileting*
- *9.3 Communication with Families*
- *9.6 Community Participation and Engagement*
- *10.26 Social Media and ITC Usage*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *Child Protection Act 1999*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.16-2021/1	Date of review	

2.19 Children’s Media Viewing

Policy Statement

At Sherwood OSHC, we are committed to protecting children and ensuring their safety when they are using digital platforms for learning and communication. Our policy is designed to create a secure and positive online environment for children and young people by safeguarding against harm and exploitation, protecting their reputation, data, and privacy, and ensuring that they are not exposed to inappropriate content.

We are informed by relevant guidance in developing procedures including the Best Practice Framework for Online Safety Education and eSafety Early Years program for educators published by the eSafety Commissioner. Our goal is to balance the benefits of using digital devices while safeguarding the well-being and interests of children. We will continue to assess and improve our procedures and collaborate with children and families to create protocols that promote the safe use of devices at OSHC.

Technology can intersect with our service in many ways, including access to technology and the internet at OSHC, taking photos and videos, and social media use by the community, including educators. This policy and its procedures apply to all children, staff, volunteers, and parents using, employed or otherwise connected to OSHC and covers all online activities, digital communications, and use of online learning platforms. Due to the nature of online environments, our policy sets clear expectations for the community to use and interact online in a manner that maintains the safety and well-being of children. Anyone acting in a way that is incompatible with our commitment to the safety and well-being of children may be subject to disciplinary action or unenrolment in the service.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Implementing and monitoring suitable protections for internet connectivity.• Set out clear guidelines for staff around their online interactions and behaviour.• Take reasonable steps to ensure that they adhere to expectations and investigate any alleged breaches.
Nominated Supervisor	<ul style="list-style-type: none">▪ Monitor implementation of safeguards to ensure they are working as intended.▪ Ensure children are supervised using devices and accessing content.▪ Respond to and report concerns.
All Staff	<ul style="list-style-type: none">▪ Follow expectations to ensure children’s safety and well-being is not compromised.▪ Provide supervision during activities where children are accessing the internet.▪ Bring any concerns to the attention of the Nominated Supervisor.

Procedures

Infrastructure and Technology Children and Young People

Children and young people will only access the internet when relevant content restrictions are established. Regardless of internet connection, children and young people must be supervised when using devices, especially when accessing, or there is potential, to access online environments.

It is important that any devices and media made available to children only contain content that is appropriate for their age group. This means that the content should be in line with government classifications, such as G and PG ratings.

Children and young people should not take photos or videos of other children on their personal devices. At times, recording will be supervised via OSHC-owned devices for the purposes of the program and communication with families.

Educators

Educators have access to adequate and appropriate equipment to carry out their tasks effectively, such as programming and documentation. It is strictly prohibited for educators to use personal devices for any documents or material that may contain the personal information of children and families. This includes taking pictures on phones, writing observations on personal devices, and emailing or messaging parents from personal accounts.

To avoid any confusion, educators may use personal devices for work activities that do not involve storing or saving children or family's personal information. For instance, attending webinars, researching programming ideas, and communicating staffing arrangements.

If educators feel that additional equipment is necessary to perform their duties, they should communicate this to the Nominated Supervisor.

Communication and Information Sharing with Families

Child Care Software

The service ensures privacy and data protection by using approved child care software (Xplor) to collect and securely store families' personal and sensitive information, including enrolment and bank details. The system has relevant security features including password protection. The Nominated Supervisor is responsible for the delegation of accounts and functionality to ensure information is handled securely.

Email, Social Media and Other Messaging

Communication with families will only occur through authorised and P&C-operated accounts. Publishing identifying and personal information on social media is only posted in limited exceptions, and where authorisation has been provided in writing.

Service Responsibilities

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

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

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

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

Educator Responsibilities

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

Family Responsibilities

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

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.15 Children's Property and Belongings
- 3.1 Educational Program Design and Implementation

- 3.7 Physical Activity
- 4.3 Hygiene, Health and Wellbeing Practices
- 9.3 Interactions and Communication with Families
- 10.16 Intellectual Property and Copyright

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; and 6 - Collaborative partnerships with families and communities*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	2.19 -2021/1	Date of review	15/11/23

2.20 Supervision of Children

Policy Statement

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

The Approved Provider recognises its obligations for effective supervision to uphold its obligations under *Education and Care Services National Regulations* 83, 99-101, 115, and 123.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> Establish and ensure effective practices and expectation to support the supervision of children. Monitor the service's incident reporting to ensure practices and procedures are meeting the service's obligations.
Nominated Supervisor	<ul style="list-style-type: none"> Monitor and support the practices and capacity of educators to adequately supervise children. Ensure educators have been adequately instructed, trained and supervised to meet the needs of children. Support the response to incidents and children's behaviour, including debriefing and supporting the ongoing learning of the supervising skills of educators
All Staff	<ul style="list-style-type: none"> Implement the service's recommended skills and practices to meet the requirements of the supervision expectations. Communicate concerns to the Nominated Supervisor, Responsible Person, or another relevant delegate.

Procedures

Supervision Expectations

- Ensuring child-to-educator ratios are maintained at all times. These educators counted in the ratios are directly working with children.
- There will be at least two educators at all times on the premises whilst children are in care, one of whom will be a responsible person in the day-to-day charge of the service.
- The planning of activities will reflect supervision requirements, the Nominated Supervisor (or delegate) will ensure consideration is given to the design and arrangement of the environment, the nature, and coordination of activities to ensure it supported by adequate supervision by educators.
- The number of supervising educators for activities will be determined through consideration of:
 - The type of activity (e.g. excursion, swimming);
 - The age and capabilities of the children undertaking the activity;
 - The area in which the activity will be conducted; and
 - The skill and capacity of educators.
- Personal mobile phones are not to be used by educators when supervising children. However, in extenuating circumstances and with the prior consent of the Nominated Supervisor, personal mobile phone usage may be permitted.
- During excursions, children will not be left unsupervised with any other persons (including bus drivers etc.); educator ratios for the service will continue to apply throughout excursions.
- Children will be adequately supervised and supported during access to toilets through educators following the procedures outlined in *4.9 Children's Toileting*.

Effective Supervision Skills

- Scanning – regularly looking around (and beyond the immediate area) to observe all the children in the vicinity;
- Positioning and Proximity – being strategically positioned in order to best observe and/or interact with children;

- Listening – assists in using additional sensory skills to respond to signals children may require, added support or attention; and
- Being diligent and engaged – being aware of children, their traits, moods, and characteristics to anticipate and promptly respond to children’s needs, skills and capabilities.

Educators Supervision Practices

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

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

Educators will be required to do regular headcounts and use educator communication methods when supervising activities indoor or outdoor activities. Where there is a discrepancy or incident with a child’s whereabouts the procedures outlined in 2.4 Arrivals and Departures of Children and/or 4.5 Incident, Illness, Injury or Trauma will be followed.

The Nominated Supervisor will be made aware of children involved in behaviour incidents who may require further support, consistent with 2.6 Positive Behaviour Support Practices and/or 4.5 Incident, Illness, Injury or Trauma.

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

Related Policies

- 2.3 Educator to Child Ratios
- 2.6 Positive Behaviour Support Practices
- 2.7 Supporting Complex Behaviours
- 3.1 Educational Program Design and Implementation
- 3.2 Program Evaluation and Communicating Children's Progress
- 3.5 Excursions
- 4.9 Children’s Toileting
- 8.2 Educational Leader
- 8.17 Fit for Work
- 8.19 Employee Underperformance, Misconduct and Disciplinary Procedures
- 8.9.1 Code of Conduct

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

E&CS Legislation Compliance

- Education and Care Services National Regulations 83; 99-101; 115; 123

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21

Date implemented:	1/9/21	Date families notified	
Version:	2.20-2021/1	Date of review	

2.25 Statement of Intent for Children’s Play

Policy Statement

The service acknowledges and recognises the importance of play for children’s physical development and social and emotional wellbeing, as well as the benefits of allowing children of all ages and abilities to experience challenging opportunities in a variety of environments. The service understands and accepts that children will often be exposed to play environments which, whilst well-managed, carry a degree of risk and sometimes potential danger and will work proactively with all stakeholders to minimise those risks.

Play Principles for the Service

- The service will ensure there are a variety of play spaces, inside and outside where children can play, either in groups or alone.
- The service program will be designed and facilitated to ensure children are able to move freely between relevant play spaces, both inside and outside.
- Equipment, resources and materials that can be used for a variety of purposes will be provided to encourage children to guide their own play.
- Activities offered as part of the service program will be carefully considered for risk and hazards so children have intentionally designed and managed opportunities for play aimed to develop children’s risk awareness.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.6 Positive Behaviour Support Practices
- 3.1 Educational Program Design and Implementation
- 3.2 Program Evaluation and Communicating Children’s Progress
- 8.2 Educational Leader
- 10.27 Self-Assessment and Quality Improvement

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish policies to enhance children’s development through varied and diverse play experiences.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure planning and practices provide high-quality experiences for children to learn and develop.
All Staff	<ul style="list-style-type: none">• Actively participating in play opportunities, including the planning and design of these experiences.

Procedures

“Play is a freely chosen, personally directed, intrinsically motivated behaviour, normally associated with recreational pleasure and enjoyment.”

Educator Responsibilities

Educators will ensure that materials, resources and equipment are set up in such a way as to create an environment which will stimulate children’s play and maximise their opportunities for a wide range of play experiences.

Educators will design and develop the program in order to ensure children have the opportunity to be involved in a variety of types of play including socio-dramatic, creative, exploratory, imaginative, physical and rough and tumble.

When planning play opportunities for children, educators will:

- Be thoughtful and deliberate in their planning ensuring the interests, needs and abilities of the children are known and catered for;
- Empower children to make decisions about their play and leisure-time experiences;
- Ensure all children have equal opportunity for inclusion in play;

- Provide opportunities for both indoor and outdoor play experiences, and that will include both ‘built’ and ‘natural’ elements;
- Provide resources that are accessible, varied, age and ability appropriate, culturally diverse, open-ended and sufficient in number;
- Collaborate with the children and be open to change and spontaneity;
- Encourage children to make decisions and to take responsibility for their own needs;
- Empower children to be creative and seek out possibilities and solutions;
- Encourage children to try and experience new things and experiences; and
- Play with the children picking up on cues, seizing ‘teachable’ moments and ways to scaffold children’s learning.

Related Policies

- *2.1 Interactions and Relationships with Children*
- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.6 Positive Behaviour Support Practices*
- *3.1 Educational Program Design and Implementation*
- *3.2 Program Evaluation and Communicating Children's Progress*
- *8.2 Educational Leader*
- *10.27 Self-Assessment and Quality Improvement*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *United Nations Convention on the Rights of the Child*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; and 5 - Relationships with children;*

Policy Controls			
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Policy Group 3 – Educational Program

3.1 Educational Program Development and Implementation

Policy Statement

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

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

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

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

Roles and Responsibilities

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

Procedures

Foundations of the Program

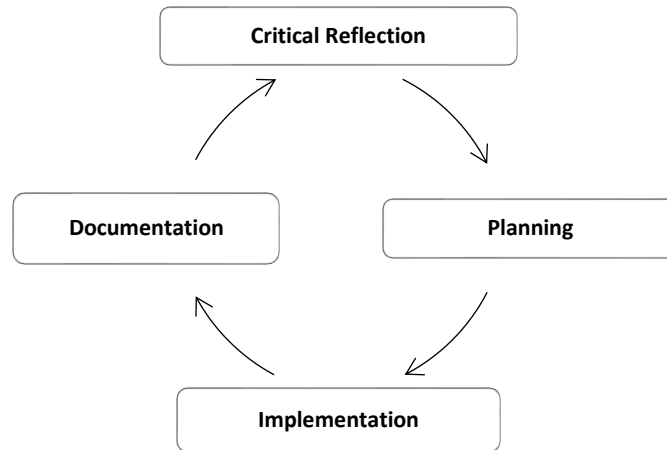
The development and delivery of the OSHC program will be:

- formed from an ongoing cycle of planning, implementing, documenting, and critically reflecting;
- based on the *Principles, Practices and Learning Outcomes of My Time, Our Place*;
- displayed in a prominent location, to be accessible for promotion and input of children and families.
- reflect the developmental needs, interests and individual expression of children who access the service;

- where possible, the program will be designed to encourage children to complete projects and/or extend on ideas over a number of sessions;
- organised so that activities, events and resources are chosen to maximise the facilitation of learning through play and leisure, contribute to the outcomes of the program, and to support children’s wellbeing and development; and
- considers the current knowledge strengths, ideas, culture, abilities and interests throughout design and implementation

Planning Cycle

The service’s Education Leader is responsible for coordinating the design and implementation of the service’s program and ongoing development of educator practices. Their role is central to the service’s planning cycle and delivery of the service’s program.



The Educational Leader, with additional support from the service’s leaders, will engage educators to collaborate in the planning and implementation of the program. Tasks used to support the development of the program and learning cycle include, but are not limited to:

Critical Reflection	<ul style="list-style-type: none"> • Applying an understanding of research, literature and theory, with a particular focus on child development, and play-based learning to enhance the planning and practice of the program. • Question and evaluate what has already been learned or expressed to understand further possibilities. • Consider holistic approaches that support multiple aspects of a child’s wellbeing and development – including physical, cognitive, social, emotional, cultural and spiritual learning or expression. • Provide appropriate opportunities for children to broaden their understanding of the world in which they live by reflecting the broad multicultural and multilingual nature of the community. • Demonstrating a positive approach towards diversity and Australia’s Aboriginal and Torres Strait Islander heritage being integrated into the program. • Activities, experiences, environment and resources are a representation of the intentionality of educators and the service to provide diverse, developmentally-focused and individually-considered learning opportunities. • Opportunities to critically reflect are enhanced through individual and collective opportunities to understand children’s learning and development.
Planning	<ul style="list-style-type: none"> • Program plans are displayed for children and families to understand and to meaningfully contribute to.

	<ul style="list-style-type: none"> • Program plans are developed in collaboration with educators, children and families. The Educational Leader is responsible for coordinating these ideas and intentions. • The program should support, allow and encourage children to complete long-term projects and build upon experiences. • Planning demonstrates flexibility for program delivery by incorporating where children’s ideas, culture and interests have been included. • The service identifies a variety of indoor and outdoor experiences, open-ended resources, natural elements and materials suited to the age, developmental ranges and diversity of all children attending the service. • Activities and experiences that present as high-risk will be risk-assessed and suitably managed to uphold the safety of children and staff.
Implementation	<ul style="list-style-type: none"> • Provides appropriate opportunities for children as individuals and small groups to follow and extend their interests as they choose. • Appropriate opportunities for children to express themselves through creative and imaginative play, including elements of music, dance, drama etc. are enhanced through educator practices. • Educators positively guide and support appropriate opportunities for children to develop a range of life skills such as establishing and maintaining meaningful relationships, working collaboratively with others and self-regulating their own behaviour. • The safety of activities will be supported through appropriate risk-assessment planning. Educators will be responsible for following control measures as identified and responding to any hazards that present. • The Educational Leader is responsible, in consultation with educators, to continually recreate and adapt the indoor and outdoor environments to: <ul style="list-style-type: none"> ○ Meet the needs and interests of all children, including their need for rest or sleep; ○ Facilitate the inclusion of children with additional needs; and ○ Ensure that all children in a multi-age group have positive experiences.
Observation and Documentation	<ul style="list-style-type: none"> • Educators record observations of the children’s experiences, learning and participation. This information is recorded in a manner that demonstrates a deeper understanding of the journey of learning and outcomes. • The service facilitates regular group discussions among staff to extend individual observations and record a deeper discussion and collective understanding. • Documentation reflects a holistic view of children’s learning. • Encourages and provides appropriate opportunities for families to participate in shared decision making and give feedback about the program and their child’s learning. • Documents the developing and emerging abilities and interests of all children.

Leading the Planning Cycle

Every week the Educational Leader will collate, review and consider the written evaluations (documentation) of educators, and evaluate the planned and spontaneous experiences to ensure the identified goals and learning outcomes were achieved. These evaluations will inform future programming decisions in collaboration with all educators, children and families in the creation of future planned activities and experiences for children. This evaluation will be made available to families (in *3.2 Sharing the Program and Children’s Progress with Families*).

The service has a Facebook page which provides a useful platform for a continual communication of events and activities that capture significant events of children.

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

Taking into account all feedback received through these procedures (and those identified in *3.2 Sharing the Program and Children’s Progress with Families*), the Nominated Supervisor and Educational Leader will develop a quarterly report (each term) to the Approved Provider on the evaluation of the effectiveness of the service programs and areas of continued development.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.6 Positive Behaviour Support Practices
- 2.7 Supporting Complex Behaviours
- 2.16 Promoting Protective Behaviours
- 2.19 Children’s Media Viewing
- 2.20 Supervision of Children
- 2.25 Statement of Intent for Children's Play
- 3.4 Homework
- 3.5 Excursion
- 3.7 Physical Activity
- 4.3 Hygiene, Health and Wellbeing Practices
- 5.2 Food and Nutrition
- 6.3 Workplace Health and Safety
- 8.2 Educational Leader
- 8.4 Educator Professional Development and Learning
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 10.9 Risk Management
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.6 Nominated Supervisor
- 10.22 Determining the Responsible Person

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011.
- My Time, Our Place - Framework for School Age Care in Australia.
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.

E&CS Legislative Compliance

- Education and Care Services National Law Section 168.
- Education and Care Services National Regulations 73-76 & 298A.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
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Version:	3.1-2021/1	Date of review	

3.2 Sharing the Program and Children’s Progress with Families

Policy Statement

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

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

Roles and Responsibilities

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

Procedures

Collaboration and Communication with Children

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

Additionally, children’s comments, suggestions and feedback are collected through conversation, observations and the ‘whiteboard’. Children are welcome to add their thoughts and comments on the ‘whiteboard’ at any time.

Educators complete a daily Story of Practice which captures the conversations and observation of children’s experiences. These are collated by the Education Leader each week and are recorded and documented how they were added to the program’s planning and implementation.

Communicating Children’s Learning and Development

The Educational Leader will prepare a monthly evaluation of the service’s program (where there has been a learning focus), these include both the planned and spontaneous activities that children have engaged in. This evaluation will be made available to families via these main channels:

- Stories of Practice (Learning Stories) – these are significant events documented by educators to illustrate children’s learning and wellbeing being enhanced from the service’s program and practice. These stories are collated by the service and are available to parents

- OSHC Facebook page – allows smaller and specific moments to be captured and shared with families. It provides a quick and easily-consumable insight into the learning and experience of their children.

The total communication with families will contain a variety of evaluations including critical reflection of learning/outcomes as well as the progress of children and their experiences at OSHC.

Information Sharing and Partnerships with Families

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

- Conversations with educators
- Facebook page
- Email correspondence and feedback
- Surveys and feedback prompts
- Contribution to the comments and suggestions board (whiteboard)

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.6 Positive Behaviour Support Practices
- 2.7 Supporting Complex Behaviours
- 2.16 Promoting Protective Behaviours
- 2.19 Children’s Media Viewing
- 2.20 Supervision of Children
- 2.25 Statement of Intent for Children’s Play
- 3.4 Homework
- 3.5 Excursion
- 4.3 Hygiene, Health and Wellbeing Practices
- 5.2 Food and Nutrition
- 6.3 Workplace Health and Safety
- 8.2 Educational Leader
- 8.4 Educator Professional Development and Learning
- 9.3 Interactions and Communication with Families
- 9.6 Community Participation and Engagement
- 10.9 Risk Management
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.6 Nominated Supervisor
- 10.22 Determining the Responsible Person

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- My Time, Our Place - Framework for School Age Care in Australia
- Privacy Act 1988 (Cth)
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 73-76 & 298A.*

Policy Controls			
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Version:	3.2-2021/1	Date of review	

3.4 Homework

Policy Statement

To support families and children, the service will endeavour to provide adequate time, quiet space and supervision to enable children to do their homework as necessary, with the express understanding that time in school-age care may be the optimal opportunity for homework completion.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Establish policy to outline the expectation for homework for the service.
Nominated Supervisor	<ul style="list-style-type: none">Support the delivery of the service's homework policy
All Staff	<ul style="list-style-type: none">Support children using OSHC time to access suitable space and resources to support their learning.

Procedures

The Nominated Supervisor is supported to keep a homework list with the names of children whose parents have expressly requested they are encouraged to do homework each day.

Children doing homework will be supervised in a quiet environment, away from the other children if possible. Educators can assist children with projects and homework to the extent possible, taking into consideration supervision and other responsibilities caring for all children in attendance.

Educators will not be responsible for monitoring and signing off on homework.

Related Policies

- 2.20 Supervision of Children*
- 2.25 Statement of Intent for Children's Play*
- 3.1 Educational Program Design and Implementation*
- 8.2 Educational Leader*
- 9.2 Enrolment*
- 9.3 Interactions and Communication with Families*

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011*
- National Quality Standard, Quality Areas: 1 – Educational program and practice; and 6 - Collaborative partnerships with families and communities*

Policy Controls			
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3.5 Excursions

Policy Statement

This service will include excursions as a valuable part of its overall program. Excursions will provide enjoyment, stimulation, challenge, new experiences and a meeting point between the service and the wider community.

Risk assessments will be conducted for each excursion, identifying all foreseeable hazards, and ensuring these are controlled appropriately. The Approved Provider is to confirm the approval of risk-assessments prior to the undertaking of any excursions. Parents are provided copies of risk-assessments on request.

Parent permission will be obtained before a child is taken on an excursion. Consent forms will outline excursion details. Consent forms will be stored in a manner consistent with the record keeping policy.

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

Roles and Responsibilities

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

Procedures

Children's age, interests and abilities will be taken into consideration when planning excursions. Comments, suggestions and feedback from children and families will also be taken into account. When planning excursions, venue and transport costs will be considered, to ensure that excursions are financially viable to families. Alternative arrangements will be planned in case of changed weather conditions.

Excursion Risk Assessments

The service shall not conduct any excursion before the Approved Provider has approved the excursions and endorsed the risk assessment. Both the Approved Provider and Nominated Supervisor are to ensure a comprehensive risk assessment has been documented and endorsed. The Approved Provider and Nominated Supervisor shall also ensure before any child is taken off-site, they have written parent authorisation as expressed below.

When planning an excursion, the Nominated Supervisor will be responsible for facilitating a risk assessment process. Where possible, the risk assessment should collaborate with additional staff to ensure all foreseeable hazards are identified and reasonably controlled. Depending on the level of risk and previous experience, it may be necessary to visit the intended excursion site. Permission from the Approved Provider will need to be sought before staff are permitted to travel to a possible location during work time.

A risk assessment is not required for an excursion if—

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

All excursion risk assessments will follow the service's risk assessment policy (10.9 Risk Management and Minimisation). The risk assessment will:

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

And consider:

3. the proposed route and destination for the excursion;
4. any water hazards;
5. any risks associated with water-based activities;
6. the transport to and from the proposed destination for the excursion;
7. the number of adults and children involved in the excursion;
8. given the risks posed by the excursion, the number of educators or other responsible adults that is appropriate to provide supervision and whether any adults with specialised skills are required (e.g. lifesaving);
9. the proposed activities;
10. the proposed duration of the excursion; and
11. the items that should be taken on the excursion (e.g. mobile phone, emergency contacts).

Vacation Care Risk Assessments

Risk assessments prepared for Vacation Care programs will be submitted to the P&C Executive no later than one meeting prior to the holiday period (e.g. risk assessments would be tabled at March P&C meeting for an April holiday period).

Authorisation from Parents

Written authorisation from a parent or other persons named with authorisation on the enrolment form, will be held by the service before the child is to be taken off-site. The written authorisation for an excursion must contain:

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

Excursion Preparation

1. All educators attending the excursion must read and sign off on the relevant and specific excursion risk assessment/s, prior to attending on the day.
2. The Nominated Supervisor will ensure the excursion checklist (see 3.5.2) is completed prior to departing for the excursion.
3. Adequate steps will be taken when selecting transport (See Policy 3.6 Transport for Excursions).

Viability of Excursion

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

During the Excursion

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

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

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

Supervision

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

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

In the event of injury occurring during an excursion, procedures as set out in the *4.5 Incident, Illness, Injury or Trauma Policy* will be followed.

After the Excursion

Educators will inform the assessment of the evaluation of the excursion. Typical observations and documentation addressing the children's learning and wellbeing outcomes will be recorded. Additionally, at the next team meeting, the excursion and risk management plans will be evaluated collectively.

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.3 Educator Ratios*
- *2.4 Arrivals and Departures of Children*
- *3.1 Educational Program Design and Implementation*
- *3.5.1 Transport for Excursions*
- *7.1 Emergency Equipment and Facilities*
- *4.8 Sun Safety*
- *4.9 Children's Toileting*
- *4.17 Medical Conditions*
- *4.18 Administration of First Aid*
- *9.2 Enrolment and Orientation*
- *9.6 Community Participation and Engagement*
- *9.9 Acceptance and Refusal of Authorisations*
- *10.1 Managing Compliance with Legal Obligations*
- *10.9 Risk Management*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health Safety Act 2011*
- *National Quality Standard, Quality Area 2 – Children's health and safety; 4 - Staffing arrangements; 5 - Relationships with children; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislative Compliance

- *Education and Care Services 168 (2)(g), 99, 100-102*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	3.5-2021/1	Date of review	

3.5.1 Transport for Excursions

Policy Statement

This service includes excursions as a valuable part of its overall program. Excursions provide additional opportunities to extend on children's learning and development and facilitate connection with the wider community. In order for safety to be upheld throughout an excursion, risk assessments will be conducted and specifically consider the hazards and risk-management of transportation. The service is committed to ensuring the safety and protection of children is maintained.

Educators will not be permitted to transport children in their own private vehicle.

Auxiliary Documentation

- 3.5.2 Excursion Risk Assessment Template
- 3.5.3 Excursion Checklist Template

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish policy and standards for the transportation of children during excursions.
Nominated Supervisor	<ul style="list-style-type: none">• Ensuring planning and vehicle selection is consistent with the service's policies.• Respond to incidents with diligence and sound communication to relevant stakeholders.

Procedures

Selecting Transportation

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

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

In the case of children being transported in a bus, the following legislative guidelines shall be followed:

- Bus transport with 13 or more seats does not need to be fitted with seatbelts and child restraints are not required, however, where possible the service will select buses/coaches with seatbelts as a preference.
- Child restraints for four to seven-year olds apply to a bus that has 12 or less seats, with all passengers having to wear seat belts.

Public Transport

- Where public transport is intended to be used on an excursion, a comprehensive risk-assessment will be undertaken to address relevant hazards.

Vehicle Breakdown/Accident

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

Related Policies

- 2.2 *Statement of Commitment to the Safety and Wellbeing of Children*
- 2.3 *Educator Ratios*
- 2.4 *Arrivals and Departures of Children*
- 3.1 *Educational Program Design and Implementation*
- 3.5.1 *Transport for Excursions*

- 7.1 Emergency Equipment and Facilities
- 4.8 Sun Safety
- 4.9 Children’s Toileting
- 4.17 Medical Conditions
- 4.18 Administration of First Aid
- 9.2 Enrolment and Orientation
- 9.6 Community Participation and Engagement
- 9.9 Acceptance and Refusal of Authorisations
- 10.1 Managing Compliance with Legal Obligations
- 10.9 Risk Management

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- QLD Transport Operations (Road Use Management) Act, 1995
- Work Health and Safety Act 2011 and Regulations 2011
- National Quality Standard, Quality Areas: 1 – Educational program and practice; and 2 – Children’s health and safety

E&CS Legislative Compliance

- Education and Care Services National Law Section 167.
- Education and Care Services National Regulations 10-102

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	3.5.1-2021/1	Date of review	

3.7 Physical Activity

Policy Statement

The service aims to provide all children with appropriate, frequent and varied physical activity opportunities, focusing on enjoyment and participation. The service is committed to uphold the Australia Movement Guidelines for Children and Young People. OSHC values their role in establishing life-long healthy habits and behaviours for children. The service also recognises their opportunity in promoting gross and fine motor skill development as part of the services program.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Establish policy to support the service's high-quality care and health promotion.
Nominated Supervisor	<ul style="list-style-type: none">Ensuring planning and service delivery meet the expectation outlined in the service's policies.
All Staff	<ul style="list-style-type: none">Facilitate play and experiences that promote physical activity.Support children to navigate their needs to access physical activity suitable to their individual capacity.Role-model health promotion through engagement in physical activity experiences.

Procedures

Physical Activity in the Program

Children's physical development will be considered and planned as part of the services program (See 3.1 *Educational Program Development and Implementation*). Physical activity will be promoted through games and experiences and will reflect individual children's needs, interests, ages and capabilities.

Educators will set up the environment to:

- Promote safe physical play for children of different age groups and capabilities;
- Stimulate children's interest and curiosity by being creative in their use of equipment and materials;
- Offer a range of challenges and experiences, inviting children to explore, discover and experiment;
- Facilitate the inclusion of children with additional needs; and
- Support children to create their own games and experiences.

Educators will encourage children to help plan and set up physical play activities and equipment. Additionally, they will encourage and provide appropriate support to children to participate in new or unfamiliar physical experiences. Educators will act as positive role models by becoming involved in and enjoying children's physical activities.

Movement Guidelines

The program offered will contribute to the recommended daily physical activity in accordance with the Australia Movement Guidelines for Children and Young People. Programming will be developed to reflect the service's commitment with these guidelines

Physical activity and sedentary behaviour information and guidelines for parents is available as requested. Educators promote conversations and discussions with children to identify healthy physical activity behaviours and habits.

Safe and Supportive Environments

- Playgrounds, indoor and outdoor environments are checked regularly to ensure they are safe and address foreseeable hazards.
- Sun Safety Policy (4.8) will be followed at all relevant times physical activity is organised outdoors.
- Drinking water will be readily available with educators encouraging children to access it.
- A well-maintained first aid kit is on hand at each activity session.

Equipment

- A wide range of safe, adequate and appropriate equipment for physical activity is available for children to access, and there are a variety of facilities available for children to use.
- All play equipment is regularly maintained and cleaned with broken items identified and removed.
- Flexible arrangements are provided that allow children to move resources and equipment inside and/or outside to extend their learning opportunities.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.15 Children’s Property and Belongings
- 3.1 Educational Program Design and Implementation
- 4.3 Hygiene, Health and Wellbeing Practices
- 4.8 Sun Safety
- 4.18 Administration of First Aid
- 9.3 Interactions and Communication with Families
- 10.9 Risk Management

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- My Time, Our Place - Framework for School Age Care in Australia
- Work Health Safety Act 2011
- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; and 3 – Physical environment

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	3.7-2021/1	Date of review	

3.8 Extra-Curricular Activities

Policy Statement

The service understands extra-curricular activities may be provided within or close to the school grounds and that some families may wish to access these for their children who are attending OSHC. For the purpose of this policy extra-curricular activities are only those considered to be on school grounds (including the school pool). Activities outside the premises of the school will be managed via 2.4 Arrivals and Departures (requiring self-care or authorised collection).

The service is supportive of implementing practices which support the needs of children and families without compromising the capacity to provide quality care for all children attending the service. Where possible, the service will work with families to support access to these activities. However, the paramount priority will be the safety of children, where this is potentially compromised or at risk, the service will not be able to cater for extra-curricular activities.

Auxiliary Documentation

- 3.8.1 Extra-Curricular Activities Form

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish policies to support the service's capacity to facilitate access to extra-curricular activities.• Ensure policies and practices meet the legislative requirements for OSHC operations.
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with parents on the expectations and capacity to support access to extra-curricular activities.• Ensure all relevant documentation is completed before allowing a child to depart from the service.
All Staff	<ul style="list-style-type: none">• Ensure all children's departures are consistent with parent's written instructions.

Procedures

1. Parents/guardians will need to provide written instruction (completing and signing an extra-curricular form) before a child will be permitted to leave the care of the service.
2. The parent/s are responsible for informing the service of the details of any extra-curricular activities that the child/ren may be involved in. Details must state departure and/or arrival times **and** if return to the service is expected.
3. The Nominated Supervisor (or delegate) will discuss with the parent/caregiver the impact that this transition may have on the service. Where a transition will impact the safety or supervision of children, children will only be able to leave the service under the procedures outlined in *2.4 Arrival and Departure* (with authorised collection).
4. Children will be required to be independent in transitioning to any extra-curricular activity or be signed-out by the activity provider (where relevant permission has been provided).
5. The Nominated Supervisor is to ensure all documentation is completed in full before a child is permitted to leave the service.

To remove any doubt, a child can only leave the service with the **written permission from a parent** or when **signed out by an authorised person**.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.4 Arrivals and Departures of Children
- 2.20 Supervision of Children
- 9.3 Interactions and Communication with Families
- 9.6 Parent and Community Participation
- 9.9 Acceptance and Refusal of Authorisations

- 10.8 Information Handling (Privacy and Confidentiality)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- My Time, Our Place - Framework for School Age Care in Australia
- Work Health Safety Act 2011
- *National Quality Standard, Quality Areas: 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 99*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
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Version:	3.8-2021/1	Date of review	

3.13 Water Safety

Policy Statement

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

The scope of this policy includes swimming activities, water play and excursions near water.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(iii), 100-102*

Auxiliary Documents

Swimming Ability Form (3.13.1)

Roles and Responsibilities

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

Procedures

All bodies of water present a significant risk to children therefore the service will ensure the following procedures are implemented:

- A comprehensive risk assessment of the venue and activity will be conducted to determine the required educator to child ratio, including a plan for supervision in and out of the water.
- Consideration will also be given to the capacity of educators to rescue children from water.
- Consideration will be given to any specialist skills (e.g. lifesaving) that may be required or beneficial.
- The choice of swimming location will be influenced by capacity to cater for the service's swimming activity safely.
- Parents/guardians must complete a 'Swimming Ability Form' (3.13.2) for each child attending the activity. Information gained through this form will identify children's swimming competence and assist educators to manage their safety while in the water:
 - The swimming ability form will direct the supervision, support and water depth the children will access throughout the activity.
 - These items will be outlined and communicated to parents with excursion details.
- During the swimming activity educators will be positioned both in and out of the water to allow them to directly and actively supervise any child accessing the water.
- Risk assessments and the service's procedures ensure the service fulfils the *Regulations* for first-aid qualification and CPR qualification, anaphylaxis management and emergency asthma management training at all times.
- The service will ensure children requiring any additional support are considered. The service will collaborate with parents to address specific support plans, where relevant.

- Ensure 4.8 Sun Safety Policy is upheld during the activity and role-modelled by staff.

Related Policies

- 2.3 Educator Ratios
- 2.2 Commitment to the Safety and Wellbeing of Children
- 2.11 Support Additional Needs with Inclusive Practices
- 3.1 Educational Program Design and Implementation
- 3.3 Educator Practices
- 3.5 Excursions
- 3.7 Physical Activity
- 4.8 Sun Safety
- 9.3 Communication with Families
- 10.9 Risk Management and Compliance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *National Quality Standard, Quality Area 2 – Children’s health and safety*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(j), and 155-156.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	3.13-2021/1	Date of review	

Policy Group 4 – Supporting Health and Wellbeing

4.2 Infectious Diseases Response

Policy Statement

The service strives to remove immediate and/or serious risks to the health of the children, from possible cross-infection, by adopting appropriate procedures for dealing with infectious diseases, whilst respecting the rights of individual privacy. Accordingly, all people, including children, educators and parents, with infectious diseases will be excluded from attending the service to prevent the diseases spreading to others.

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

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

Roles and Responsibilities

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

Procedures

Monitoring

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

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

Informing the Service of Infectious Disease

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

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

Notification to Parents

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

Responding to Occurrences

Where an infectious disease has been reported to the service, the Nominated Supervisor will email to the Approved Provider (P&C President in the first instance) to inform of the occurrence. The Nominated Supervisor will also provide details of the service's response including relevant guidelines to prevent the spread of the infectious disease. The Approved Provider will express any additional action to be undertaken to ensure all reasonable steps have been followed.

Reporting

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

The Nominated Supervisor will notify the Approved Provider when intending to report an infectious disease case to Queensland Health. Additionally, the Nominated Supervisor may be required to follow the *4.5 Incident, Illness, Injury or Trauma* policy and report a notification to the Regulatory Authority.

Records of infectious disease will be compiled by the Nominated Supervisor. These records (see 4.5.2) will include:

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

This record will be stored confidentially (see *Policy 10.8 Information Handling (Privacy and Confidentiality)*).

Exclusion

All people, including children and educators, who are suffering from any infectious diseases need to be excluded from the service to prevent others from being introduced to the infection. When any such person is found to be showing signs of any infectious disease:

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

Immunisation

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

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

Hygiene Practices

The service will ensure basic hygiene practices are routine to prevent the spread of infectious disease including routine hand washing, covering any cuts or abrasions with a waterproof dressing, and the use of

gloves for touching items/area containing bodily fluid/mucus (see 4.3 Hygiene, Health and Wellbeing Practices)

Related Policies

- 4.3 Hygiene, Health and Wellbeing
- 4.5 Incident, Illness, Injury or Trauma
- 6.3 Work Health and Safety
- 8.17 Fit for Work
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 10.8 Information Handling (Privacy and Confidentiality)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *National Quality Standard, Quality Area 2 – Children’s health and safety*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(c), 12, 85, 88, 172(f)(g)(i).*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	4.2-2021/1	Date of review	

4.3 Hygiene, Health and Wellbeing Practices

Policy Statement

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

Roles and Responsibilities

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

Procedures

Hand Hygiene

- An effective technique to prevent the transmission of disease and illness is through effective hand hygiene, removing both dirt and germs from the hands.
- Educators and children will wash and dry their hands with soap, water and disposable towel when:
 - Handling, preparing and eating of food;
 - Prior to and after giving first aid;
 - After toileting, handling of animals or other activities which could lead to the spread of infection;
 - After coughing, sneezing or blowing their nose; and
 - After contact with/cleaning of body fluids (blood, mucus, vomit, urine, faeces etc.).
- Routine hand washing will be implemented daily by all children before possible contamination activities (e.g. eating breakfast or afternoon tea)
- In the first instance, soap and running water is the preferred method to ensure clean hands.

Hand Sanitisers/Gels

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

Hygiene and Health Promotion

- Signs and posters will be strategically placed around the service to alert children to the need for and the steps to follow for effective hand hygiene.
- Educators will endeavour to observe children's practices when performing hand hygiene providing reminders of effective procedures to follow.

Gloves

- Gloves will be used;
 - When coming into contact with bodily fluids (e.g. blood, mucus, vomit, urine, faeces etc)
 - Food preparation – gloves will be used as required for the food safety practices
 - Cleaning – Gloves will be made available for cleaning

- Used gloves are to be disposed of immediately after use to be inaccessible from children or others.

Service Cleanliness

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

Related Policies

- 3.1 Educational Program Design and Implementation
- 4.2 Infectious Diseases
- 4.5 Incident, Illness, Injury or Trauma
- 5.1 Food Handling and Storage
- 5.2 Food and Nutrition
- 6.1 Space and Facilities Requirement
- 6.3 Work Health and Safety
- 8.17 Fit for Work
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 10.8 Information Handling (Privacy and Confidentiality)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health Safety 2011*
- *My Time, Our Place - Framework for School Age Care in Australia*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 77 & 109.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	4.3-2021/1	Date of review	

4.5 Incident, Illness, Injury or Trauma Policy

Policy Statement

The service proactively strives to avoid injuries or trauma occurring at the service, and to minimise the impact of injuries, illnesses and trauma by responding appropriately and as quickly as possible. The rights and responsibilities of parents with respect to injuries, illnesses or trauma of their children is acknowledged and will be taken into account in administering all procedures.

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

Auxiliary Documentation

- 4.5.1 Incident, Injury, Illness, or Trauma Report

Roles and Responsibilities

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

Procedures

This policy applies to the following events that may occur while children are being cared for by the service:

- **Incident** - any event resulting in or having potential for injury, ill health, damage or other loss.
- **Injury** - any physical harm caused to an individual/s which any reasonable person would have sought medical treatment for or attended hospital (e.g. broken limb).
- **Trauma** - an event or incident that causes physical, emotional or psychological harm.
- **Illness** - any serious illness that the child attended, or ought reasonably to have attended a hospital (e.g. severe asthma attack, seizure or anaphylaxis reaction).

Parental Permission

Written consent from the child's parent will be documented through the enrolment process, giving permission for the following:

- Administer first aid;
- Obtain medical treatment from a medical practitioner, hospital or ambulance;
- Transport a child by ambulance;

Where the child requires medication:

- Authorisation for administration of medication (including self-administering).

On occasion it may be necessary for a child to have a Medical Action Plan. The management of these plans is outlined in *4.17 Children with Medical Conditions*.

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

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

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

1. Staff will address any immediate dangers or hazards (to ensure not further injury/harm occurs).
2. Staff will address any life-threatening circumstances as a priority.
3. Once and if in a stable condition, staff will seek to comfort and calm the child.
4. The Nominated Supervisor will be notified and dependent on circumstances will delegate an educator to call 000 (if not already actioned).
5. The Nominated Supervisor will attend the location and respond to circumstances accordingly.
6. If possible, the parents will be contacted by the Nominated Supervisor or delegated educator to advise of events, seek any emergency authorisations and/or coordinate a plan of action.
7. Dependent on authorisations and circumstances, the following may occur:
 - Medication administered
 - Transportation to hospital
 - Parents collect the child for medical treatment
 - Relevant treatment outlined in medical action plan, or guided by training or emergency services
8. The child will be supervised by an educator and their condition monitored until the parent's arrival.

Illness Response

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

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

Trauma Response

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

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

7. The Responsible Person/Nominated supervisor will be responsible for coordinating a suitable response, where relevant addition or emergency services response may be applicable and called upon.

Other Actions to Support Health and Wellbeing

1. Where specific circumstances do not outline procedures for educators to follow, educators must look to protect the safety and wellbeing of children as a first priority.
2. Where events are of a serious nature, educators should seek advice from emergency services, other professional relevant to the circumstances, or parents to manage the immediate actions/treatment.
3. Following the incident/events being controlled, educators then need to notify management.
4. If not already actioned, the Nominated Supervisor (or delegate) should communicate events to parents.

Recording Incidents, Injuries, Illness or Trauma

An incident, injury, illness or trauma report (see 4.5.1) must be completed, as soon as reasonably practicable after a child is involved in an incident, or suffers an injury, illness or trauma at the service, by the educator who administered care or first aid to the child.

The information which must be included on the report is:

- The child's name and age;
- Date and time of accident/incident;
- Details of injury/incident (including circumstances leading up to the incident);
- Names of anyone who witnessed the incident;
- Parents contacted;
- Treatment and outcome of accident/incident;
- Staff signature and witness signature; and
- Parent's signature confirming knowledge of accident.

The record is to be completed as soon as practicable and within 24 hours.

All incident, illness, injury or trauma report will be stored confidentially (see *10.8 Information Handling (Privacy and Confidentiality)*).

Reporting Incidents, Injuries, Illness or Trauma

All instances of incident, injuries, illness or trauma (as defined above or by regulations) will be reported to the Regulatory Authority following *10.33 Managing Notifications* within 24 hours.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.20 Supervision of Children
- 3.1 Educational Program Design and Implementation
- 3.5 Excursions
- 3.13 Water Activities and Safety
- 4.2 Infectious Diseases
- 4.3 Hygiene, Health and Wellbeing Practices
- 4.6 Medication
- 4.17 Medical Conditions
- 4.18 Administration of First Aid
- 6.3 Work Health and Safety
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.9.1 Code of Conduct
- 9.2 Enrolment and Orientation

- 10.8 Information Handling (Privacy and Confidentiality)
- 10.21 Service Closures
- 10.33 Managing Notifications

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *National Quality Standard, Quality Area 2 – Children’s health and safety*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(b), 12, 85-87, 90, 97, 99, 158, 160-162*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
Date implemented:	1/9/21	Date families notified	
Version:	4.5-2021/1	Date of review	

4.6 Medication Administration

Policy Statement

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

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

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

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

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

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

Roles and Responsibilities

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

Procedures

Permission/Authority

Parents/guardians will be requested through the enrolment procedures (see Policy 9.2) to communicate any long-term medical conditions that require medicine to be administered. Alternatively, families may communicate the need for children to be administered a course medication for a fixed time. Parents/caregivers are required to complete a Medication Authority and Administering Form (see 4.6.1). Parents/caregivers will be required to advise in writing whether their child will be responsible for administering their own medication as well as full details of how, when (i.e. at what intervals) and by whom all such treatment is to be administered.

The management of children with medication condition is outlined further in *4.17 Children with Medical Conditions*.

Educators will only be permitted to administer medication to a child if it is:

- In its original package with a pharmacist's label which clearly states the child's name, dosage, frequency of administration, date of dispensing and is within the expiry date period;
- In accordance with the details outlined in the Medication Authority and Administering Form (see 4.6.1) completed by the parent/guardian.
- Medication may be administered to a child without authorisation in the case of an anaphylaxis or asthma emergency with the Nominated Supervisor/s following such an event notifying as soon as is practicable the parent of the child and the emergency services

Storage

All medication will be stored in a locked cupboard or lockable refrigerated container. Storage should prevent unsupervised access and damage to medicines.

Transporting Medication

The Nominated Supervisor will discuss and agree to the safe transportation of medication with the parents/caregivers. Transportation must uphold the service's commitment to the safety and protection of children.

Administration of Medication

All medication will be administered by the Nominated Supervisor (or a delegated educator) and witnessed by another educator. Administration of medication will be recorded in a Medication Administration Record (see 4.6.1). The Nominated Supervisor and the witnessing educator must fill out and sign the register with the parent signing acknowledgement on the collection of the child.

All unused medication will be returned to the parent on the collection of the child.

Children self-administering medication

The service can permit children over preschool age to self-administer medication however the relevant authority form must be completed by the parent/guardian, prior to the child administering the medication.

This information will be detailed in the child's medical conditions management plan. The medical conditions risk minimisation plan if appropriate, and the location of the child's medication for self-administration must be noted and made available to educators.

Educators will supervise children who are self-administering medications to promote consistency and ensure the welfare of all children using the service. Educators will ensure each child follows all administration of medication, health and hygiene procedures.

The service will record all instances of supervised self-administration of medication as per the procedures articulated within this policy.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.20 Supervision of Children
- 3.5 Excursions
- 4.2 Infectious Diseases
- 4.3 Hygiene, Health and Wellbeing Practices
- 4.6 Medication
- 4.17 Medical Conditions
- 4.18 Administration of First Aid
- 6.3 Work Health and Safety
- 9.2 Enrolment and Orientation
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Health (Drugs and Poisons) Regulation 1996*
- *Public Health (Medicinal Cannabis) Act 2016*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety; 4 - Staffing arrangements; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 90-91, 92 -96, 160-162 and 168 (2)(d)*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	1/9/21
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Version:	4.6-2021/1	Date of review	

4.8 Sun Safety

Policy Statement

The primary purpose of the service's sun safety policy is to ensure that all children attending the service are protected from the harmful effects of the sun. However, the service also recognises the opportunity to promote excellent health and safety practices for children. The service views its sun safety practices as a chance to form good life-long habits and educate children about sun smart behaviour. Procedures will be adopted throughout the year, regardless of season.

The rationale for this policy was provided by the Queensland Cancer Council and is consistent with their Sun Smart Policy Guidelines for Education and Care Settings. Our sun safety policy ensures that all children, staff and visitors attending our service are protected from skin damage caused by harmful UV radiation from the sun.

Children are expected to provide sun safe items (hats, sleeved shirts etc.). The service also recognises other opportunities to plan for minimised exposure to high levels of UV radiation.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(ii)*

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure plans and routines support children's sun safe behaviours and education.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure practices are role-modelled and followed by all children, educators and visitors.• Ensure suitable resources and equipment is available and accessible (spare hats, sunscreen etc.).• Ensure the routine and program identifies opportunities to reduce exposure to high-levels of UV radiation.
All Staff	<ul style="list-style-type: none">• Encourage and educate children on safe sun practices.• Role-model desired behaviours.• Address instances where services policies are not being followed through supportive interactions.

Procedures

Sun safety will be practiced at the service throughout the whole year, regardless of season. Parents will be informed of the sun safe policy when children are enrolled. The sun safe policy will be included in the Family Handbook.

Sun Safe Measure	Directions
Hats	<ul style="list-style-type: none">• Children and staff are to wear hats for all outdoor activities.• The rule: no hat – no outdoor play will be enforced.• Children must bring their own hats to the service. However, in emergency cases only, spare hats are available. Borrowed hats must be placed in OSHC laundry basket at the end of the session.• Children and parents are encouraged to wear brimmed or bucket hats.
Sleeved Shirts	<ul style="list-style-type: none">• Children and staff must wear a top with sleeves to the service. Singlets or sleeveless tops are not permitted. Spare shirts with sleeves are available in spare clothing drawer in case of emergency.
Swimming Clothing	<ul style="list-style-type: none">• For swimming and water play activities, a sleeved sun top must be worn over swim suits. A Lycra top is preferred.

Sunscreen	<ul style="list-style-type: none"> Children and staff will be provided with minimum SPF30 sunscreen. This will be administered prior to outdoor activity sessions between 10am and 3pm or in accordance with the daily peak UV rating for the local area. Parents are to inform the Service of any allergies to sunscreens.
Shade	<ul style="list-style-type: none"> Where possible, educators will operate outdoor activities, including excursions, in shaded areas, especially during the summer months.

Non-compliance

The service, where possible, will have spare items available. When parents do not provide appropriate clothing and equipment for children, the first step is for the Nominated Supervision/Responsible Person in Charge to have a gentle 'prompting' conversation with the parent. Where this does not impact a change, the Nominated Coordinator will meet more formally with the parent to address the concerns.

Role-Modelling

Educators will ensure that all children, staff and visitors attending the service are protected from the harmful UV effects of the sun during the recommended times of the day.

Routine Practices

The Nominated Supervisor will:

- Ensure all sun protection measures are applied to children, staff and visitors while outside when the UV level is 3 or above, which in Queensland, is all year round including:
 - wearing adequate SunSmart clothing and making use of shaded and/or covered areas;
 - wearing hats (ideally broad brimmed) that protect the face, neck and ears; and
 - applying SPF 30+ broad-spectrum, water-resistant sunscreen 20 minutes before going outdoors and reapplying every 2 hours (with parent/guardian permission and allergy safe as required).
- Incorporate educational programs that focus on skin cancer prevention and early detection into the program;
- During outdoor events including excursions, ensure that adequate shade is provided or sought out when exploring locations.

Program planning will identify alternatives when considering outdoor play in high UV radiation times. Where possible this will be avoided, where not possible increased measures of protection will be explored. The Nominated Supervisor will ensure the service is guided by the level of UV risk through monitoring levels. These can be access via the BOM website.

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

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

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.15 Children's Property and Belongings
- 2.16 Promoting Protective Behaviours
- 3.5 Excursions
- 3.7 Physical Activity
- 4.3 Hygiene, Health and Wellbeing Practices
- 9.2 Enrolment
- 9.3 Communication with Families
- 9.9 Acceptance and Refusals of Authorisations

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011*
- Cancer Council Queensland's SunSmart Policy Guidelines – Early Childhood Cancer Council Australia*
- National Quality Standard, Quality Area 2 – Children's health and safety*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(j), and 155-156.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	10/9/21
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Version:	4.8-2021/1	Date of review	

4.9 Children's Toileting

Policy Statement

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

Roles and Responsibilities

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

Procedures

Educators will check the toilet facilities for safety and hygiene prior to the commencement of each session including before school, after school and vacation care. Educators will ensure the facilities are hygienic, functional and free from any foreseeable hazards.

Access

Educators (and any other relevant adult) are not permitted to use the children's toilet facilities during operating hours. Educators (and other adults) are to use the school or OSHC staff toilets.

Children may access the toilets in the New Hall at any time using the buddy system. Additional toilets are accessible for children during each session if needed including the school's boys and girl's toilets.

Supporting Children

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

Additional Support Needs

Educators should understand their role and have suitable skills to support children and uphold their safety and dignity. Staff will be provided with training in the support of children with toileting issues, particularly in

the case of children with high support needs. Training and instruction can be delivered through written communications, direct training and/or meetings. Educators should discuss any concerns or requests for additional training with the Nominated Supervisor.

Escorting children to the toilet

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

Related Policies

- *2.11 Supporting Additional Needs with Inclusive Practices*
- *2.16 Promoting Protective Behaviours*
- *4.3 Hygiene, Health and Wellbeing Practices*
- *4.5 Incident, Illness, Injury or Trauma*
- *6.1 Space and Facilities Requirement*
- *8.9 Employee Code of Conduct*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *8.9 Applying the Code of Conduct*
- *8.9.2 Code of Conduct for Interacting with Children and Young People*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; and 6 - Collaborative partnerships with families and communities;*

E&CS Regulation Compliance

- *Education and Care Services National Regulations 109, 115.*

Policy Controls			
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4.12 Non-Smoking, Illicit Substance and Alcohol-free

Environment

Policy Statement

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

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

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Ensure the service's environment meets the regulatory standard for the environment provided to children accessing the service.
Nominated Supervisor or Responsible Person	<ul style="list-style-type: none">Will provide day-to-day monitoring of compliance and respond to any instances of policy breaches.

Procedures

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

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

Related Policies

- 2.2 *Statement of Commitment to the Safety and Wellbeing of Children*
- 6.1 *Space and Facilities Requirement*
- 6.3 *Workplace Health and Safety*
- 8.9 *Applying the Codes of Conduct*
- 8.9.1 *Employee and Management Code of Conduct*
- 8.9.2 *Code of Conduct for Interacting with Children and Young People*
- 10.1 *Managing Compliance with Legal Obligations*

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011*
- National Quality Standard, Quality Areas: 2 – Children's health and safety; and 3 – Physical environment*

E&CS Legislative Compliance

- Education and Care Services National Regulation 82*

Policy Controls			
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Version:	4.12-2021/1	Date of review	

4.17 Children with Medical Conditions

Policy Statement

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

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

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

Auxiliary Documentation

- Medical Risk Minimisation and Communication Plan

Roles and Responsibilities

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

Procedures

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

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

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

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

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

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

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

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

The Nominated Supervisor will:

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

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

- A photo of the child;
- Details of the specific health care need, allergy or relevant medical condition including the severity of the condition;
- Any current medication prescribed for the child;
- What may trigger the allergy or medical condition (if relevant);
- Signs and symptoms to be aware of as well as the response required from the service in relation to the emergence of symptoms;
- Any treatment/medication required to be administered in an emergency;
- The response required if the child does not respond to initial treatment;
- When to call an ambulance for assistance; and
- Contact details of the doctor who signed the plan.

Medical Risk-Minimisation Plans are developed in consultation with parents of the child. They are to ensure:

- the risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised;
- if relevant, the safe handling, preparation, consumption and service of food;
- if relevant, the parents are notified of any known allergens that pose a risk to a child and strategies for minimising the risk;
- to ensure all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication; and
- if relevant, the child does not attend the service without medication prescribed by the child's medical practitioner in relation to the child's specific health care need, allergy or relevant medical condition.

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

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

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

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

Copy of Policy Provided (*Regulation 91*)

Parents will be provided copies of the *medical risk-minimisation plan* and asked to confirm their approval. Attached to each *medical risk-minimisation and communication plan* will be a copy of this policy (4.17 Children with Medical Conditions). These records will be stored with the child's enrolment.

Communication of Plans and Policies

Medical Management Plans are displayed in the OSHC office behind the office door (or specify other location). This location provides discretion from public view and display for all educators of the service. In addition, any children enrolled with medical needs are communicated to staff in team meetings and daily communication. The Nominated Supervisor is responsible for ensuring all educators, other staff and volunteers are able to identify a child with a specific health care need, allergy or other relevant medical condition and be able to locate their information, plans and medication/s easily.

Risk-Minimisation Plans will be stored with enrolment forms. All risk-minimisation plans will be communicated with staff. Educators will be asked to sign acknowledgement of reading the risk-minimisation plan. This will document the communication and subsequent understanding of what is required

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

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

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

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

Educator Training and Qualifications

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

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

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

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

Responding to Emergency Asthma Incidents

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

Asthma Flare-Up Symptoms

The most common symptoms of asthma are:

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

Practices to Respond to an Asthma Flare-up:

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

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

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

Emergency Asthma Equipment

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

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

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

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

The service will take appropriate action to minimise, as far as reasonably practicable, exposure to known allergens where children have been diagnosed with anaphylaxis. These specific actions will be identified through the risk minimisation planning procedure.

In recognising food allergies are a common (but not the only) source of allergy, in order to minimise the risk of exposure of children to foods that might trigger a severe allergy or anaphylaxis in susceptible children, our service will adopt the following practices:

- Educate children about food allergies and ways to keep people safe;
- Actively discourage children to trade or share food, utensils or food containers;
- Ensure all food handling supports children's medical management plans;
- Request families to label all drink bottles and lunch boxes with their child's name;
- Consider the contents of food and non-food items for inconspicuous triggers;
- Monitor attendances to ensure that meals/snacks prepared at the service do not contain identified allergens when those children are in care; and
- Where a child is known to have a susceptibility to severe allergy or anaphylactic reaction to a particular food, the service will develop policy and implement practice for the management of children, educators or visitors bringing foods or products to the service containing the specific allergen (e.g. nuts, eggs, seafood).

Symptoms of Anaphylaxis

Can include any one of the following:

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

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

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

Responding to Symptoms

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

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

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

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

Emergency Medication

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

This device will be used where

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

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

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

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

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

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

Hypoglycaemia Symptoms

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

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

Symptoms of **severe hypoglycaemia** include being

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

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

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

Hyperglycaemia Symptoms

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

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

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

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

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

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

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

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

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

Educators will then:

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

Self-Administration Records (Regulation 90 (3))

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

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

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *National Quality Standard, Quality Area 2 – Children's health and safety*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(d), 90-96, 158, 162*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	10/9/21
Date implemented:	10/9/21	Date families notified	
Version:	4.17-2021/1	Date of review	

4.18 Administration of First Aid

Policy Statement

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

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

Roles and Responsibilities

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

Procedures

First Aid Supplies and Resources

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

Guided by the *First Aid in the Workplace Code of Practice 2014*, the first aid kit will contain as a minimum:

- Instructions for providing first aid including cardio-pulmonary resuscitation (CPR) flow chart;
- Adhesive strips (assorted sizes) for minor wound dressing;
- Splinter probes (single use, disposable);
- Non-allergenic adhesive tape for securing dressings and strapping;
- Eye pads for emergency eye cover;
- Triangular bandage for slings, support and/or padding;
- Hospital crepe or conforming bandage to hold dressings in place;
- Wound/combine dressings to control bleeding and for covering wounds;
- Non-adhesive dressings for wound dressing;
- Safety pins to secure bandages and slings;
- Scissors for cutting dressings or clothing;
- Kidney dish for holding dressings and instruments;
- Small dressings' bowl for holding liquids;
- Gauze squares for cleaning wounds;
- Forceps/tweezers for removing foreign bodies;
- Disposable nitrile, latex or vinyl gloves for infection control;
- Sharps disposal container for infection control and disposal purposes;
- Sterile saline solution or sterile water for emergency eye wash or for irrigating eye wounds. This saline solution must be discarded after opening;
- Resuscitation mask to be used by qualified personnel for resuscitation purposes;
- Antiseptic solution for cleaning wounds and skin;

- Plastic bags for waste disposal;
- Note pad and pen/pencil for recording the injured or ill person's condition and treatment given;
- Re-usable ice-pack for the management of strains, sprains and bruises. Re-usable or "one off use" ice-packs will be accessible for the management of strains, sprains and bruises.
- Digital thermometer

The service will hold relevant first aid information that will be easy to understand and accessible to educators. Risk assessments will be undertaken to identify the possibility of specific injuries and illnesses such as burns, eye injuries and/or poisoning occurring. In this instance, additional first aid kit contents and facilities may be provided.

First aid responders

All educators are expected to be first aid trained within 12 months of starting employment. Each year the service will hold first aid, CPR, anaphylaxis management and emergency asthma management training (or relevant refresher) for all staff.

While the service would typically exceed qualification requirements, it will ensure that at least one educator with a current first-aid and CPR qualification, anaphylaxis management and emergency asthma management training as required by the *Education and Care Services National Regulations 2011*, is in attendance at any place children are being cared for, and immediately available in an emergency, at all times that children are being cared for by the service.

The closest qualified first aid educator will undertake the initial management of any injuries and illnesses occurring at the service. The initial care provided will be consistent with their level of first aid training and competence. Where an incident reasonably requires medical assistance, an educator will call for treatment/management and the parent will be notified.

Information about the service's first aid procedures and resources will be provided to educators through the induction process on commencement of employment.

First aid records

All incidents requiring first aid treatment will be recorded on the appropriate child or educator reporting forms.

For incidents that require minor first aid (e.g. adhesive strip/ice pack), an entry must be made in the first aid record book. Information to be included in the first aid record book may include:

- The child's name,
- The reason for and where on their person the first aid was applied, and
- Educator name and signature.

For all other injuries (or where there is doubt), the records will follow procedures outlined in *4.5 Incident, Illness, Injury or Trauma* and *10.33 Managing Notifications* procedures.

Injuries to Employees or Visitors

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

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

Documentation of educator or visitor injuries will be recorded on the appropriate form. Please note: reporting to Work Health Safety Queensland (WHSQ) may be required; these details are outlined in *10.33 Managing Notifications*.

Related Policies

- *2.3 Educator to Child Ratios*
- *3.5 Excursions*
- *4.5 Illness, Injury, Incident or Trauma*
- *6.3 Workplace Health and Safety*

- 7.1 Emergency Equipment and Facilities
- 10.6 Nominated Supervisor
- 10.6 Nominated Supervisor
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.22 Determining the Responsible Person

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Privacy Act 1988 and Regulations 2013
- National Quality Standard, Quality Area 2 – Children’s health and safety; 4 – Staffing arrangements

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(a)(iv), 89, 136

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/9/21
Date implemented:	14/9/21	Date families notified	
Version:	4.18-2021/1	Date of review	

4.19 Childhood Immunisation

Policy Statement

The service acknowledges their obligation under the Education and Care Services National Regulation 2011, in ensuring that children are free from the risk of harm. This extends to limiting exposure to health and safety risks that may arise from the incidence of vaccine-preventable diseases. Upon enrolment, the service shall request parents/caregivers to provide their child's immunisation history statement, in order to determine if enrolment and subsequent attendance will be accepted.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Establish procedures to document children's immunisation status to manage the outbreak of infectious disease.
Nominated Supervisor	<ul style="list-style-type: none">Collaborate with families in the collection of immunisation history information.Ensure records are maintained and stored to protect the privacy of families.Communicate the policy and potential exclusion of children in the event of an outbreak of infectious disease.

Procedures

- Through the service enrolment procedures, parents/caregivers will be requested to provide a copy of their child's immunisation history statement. This information will be recorded with the children enrolment details and stored in accordance with the procedures outlined in *10.8 Information Handling (Privacy and Confidentiality)*
- This policy will be available to parents/families on request. Information will also be provided to families via the service Family Handbook. The service's communication will detail the potential impacts on their child's enrolment or attendance if their child's immunisation status is deemed not up to date.
- The service will establish risk management procedures relating to monitoring and managing the spread of vaccine-preventable diseases at the service, this is outlined in *4.2 Infectious Disease*. Procedures will include but not limited to:
 - Monitoring and recording children immunisation status through enrolment;
 - Monitoring and recording staff immunisation status;
 - Communication regarding infectious disease outbreak and management; and
 - Limiting attendance for vulnerable children during times of infectious disease outbreak (if enrolment has been accepted).

Immunisation History Statement

The Nominated Supervisor (or delegate) will request copies of each child's immunisation history upon enrolment. Where a family chooses to refuse to provide a copy of the immunisation history, it will be assumed the child has no immunisation history and may be excluded from the service in the event of an infectious disease outbreak (see *4.2 Infectious Disease*)

- An immunisation history statement says whether a child's immunisation status is up-to-date or not up-to-date. This can be:
 - an official record issued by the Australian Immunisation Register
 - a letter from a recognised immunisation provider (e.g. a GP or immunisation nurse).
- The Personal Health Record (the 'red book') from Queensland Health is not acceptable proof of immunisation because it only contains handwritten updates.

Vulnerable Children

For child/ren who do not have a current immunisation history statement on file, their immunisation status will be considered 'unknown' or 'not up-to-date', until such time as the correct immunisation documentation is provided.

If the parent/guardian does not provide the child's immunisation history statement within the reasonable timeframe allowed, the child's enrolment may be:

- Refused or cancelled;

- Accepted with conditions, such as attendance refused until an Immunisation History Statement or other documentation from a recognised immunisation provider demonstrates full immunisation status; or
- Accepted, with specific conditions in place. Specific conditions may include restricting care during an outbreak of infectious disease at the service.

Families of vulnerable children (i.e. those children whose immunisation status is deemed 'not up to date') whose enrolments have been accepted (with or without conditions) will not be eligible for Child Care Subsidy (CCS)

Medical Contraindication

Enrolment and/or attendance for a child cannot be refused on the basis of their immunisation status if they have a medical contraindication to some or all scheduled vaccines. Whilst not technically vaccinated, these children are still classified as having an 'up-to-date' immunisation status and this should be indicated on their immunisation history statement.

Conscientious Objection

Children of families who have recorded a conscientious objection to vaccination through the 'Australian Childhood Immunisation Register' will have their immunisation status registered as 'not up-to-date'. Acceptance or refusal of enrolment will be as per the procedures of this policy relating to vulnerable children.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 4.3 Hygiene, Health and Wellbeing Practices
- 4.5 Incident, Illness, Injury or Trauma
- 6.3 Workplace Health and Safety
- 8.17 Fit for Work
- 9.1 Access
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 9.9 Acceptance and Refusal of Authorisations
- 10.8 Information Handling (Privacy and Confidentiality)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *A New Tax System (Family Assistance) Act 1999*
- *Public Health Act 2005 (Qld)*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 162 (f).*

Policy Controls			
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4.20 Sleep and Rest

Policy Statement

The service promotes the welfare and comfort for children being educated and cared for at its service by providing opportunities for sleep and rest and with flexible arrangements around this provision. The age, developmental stage and the individual needs of each child will be highly regarded.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(a)(v)*

The service's capacity is up to 200 children over pre-school age (at least 4.5 to 12 years old). While individual needs vary, children and young people enrolled have met normal developmental milestones and their needs are typical of school-age children.

The program and routines are designed to accommodate a variety of play styles and children's diverse needs. The indoor environment has multiple areas where children can engage in solitary play or activities such as reading in a peaceful and quiet setting, with a Zen Zone used specifically for relaxing and quiet activities.

Based on relevant health information, it is not considered normal for the majority of children attending the service to take regular naps during the day. So far, none of the parents have indicated any special sleep or rest requirements for their children.

However, we understand that each child is unique, and there may be individual circumstances such as illness that require a suitable environment for sleep from time to time. In particular, younger children attending the service, especially during after-school care and vacation care, may need appropriate access to rest and relaxation.

Roles and Responsibilities

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

Procedures

Opportunities for sleep, rest and relaxation will be provided following consultation with children and families and with consideration given to the child and family's sociocultural background, routines in place at home and personal preferences.

As part of the educational program, restful activities and downtime experiences will be offered throughout the session/day with children being supported by the Nominated Supervisor and educators to make appropriate decisions regarding participation.

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

Groupings of children are configured to minimise the risk of overcrowding and promote calming experiences and positive interactions.

Educators will be observant of children’s needs, supporting them to communicate their need for comfort, sleep and rest.

Flexibility will be demonstrated in the program with opportunities for children to engage in sleep, quiet and/or downtime experiences as needed.

If children need a place to rest or sleep, they can first relax in the Zen Zone. Alternatively, they can have bedding set up in the OSHC office. The OSHC office (or back room) is suitable due to the ability to supervise children, manage noise levels, and control the environment's temperature, lighting, and ventilation.

If a child is sleeping (or trying to sleep), an educator will be primarily positioned in the office or around the entrance to maintain supervision. The Responsible Person is typically responsible for supervision. When they are otherwise occupied, an educator will fill the supervision needs.

Related Policies

- 2.1 Interactions and Relationships with Children
- 3.1 Educational Program Design and Implementation
- 4.3 Hygiene, Health and Wellbeing
- 6.1 Space and Facilities Requirement
- 9.2 Enrolment

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Privacy Act 1988 and Regulations 2013
- National Quality Standard, Quality Area 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 5 – Relationships with children; and 6 – Collaborative partnerships with families and communities

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(a)(v)

Policy Controls			
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Policy Group 5 – Food and Nutrition

5.1 Food Handling, Preparation and Storage

Policy Statement

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

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

Roles and Responsibilities

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

Procedures

Food Handling

- The Nominated Supervisor will be responsible for ensuring that all food preparation practices and environments are compliant with relevant laws, regulations and guidelines.
- Any educators or children preparing food will ensure adequate hygiene including always washing hands and use of relevant protective equipment (e.g. gloves).
- Any educator or child preparing food must wash their hands in the specified sink before starting any food preparation. Hand washing practices are outlined in *4.3 Hygiene, Health and Wellbeing Practices*
- The service will provide all the necessary food handling equipment and utensils (e.g. gloves, colour-coded cutting boards) to support sound practices.
- Educators will ensure their hair is tied back and clothing is hygienic and appropriate for food preparation.
- Educators who are unwell will not be permitted to handle or prepare food.
- Educators will not be permitted to handle food where their hygiene or practices do not meet the necessary standard.
- All care and attention will be taken when preparing, serving and storing food for children with particular dietary and/or allergy issues. Families may be requested to provide their child's food if the service is unable to cater for their specific need.

Cleaning and Sanitising

- All food preparation surfaces and utensils will be cleaned and sanitised before use (see 5.5 Cleaning and Sanitising).
- Food grade sanitisers are applied to all benchtops and preparation surfaces before and after each occasion the food is prepared.

Food Storage

- After opening perishable items, educators will store food according to manufacturer's directions ensuring all food is suitably covered (airtight containers where required) and, where necessary, refrigerated
- All items will be clearly labelled to include:
 - food item's name;
 - date opened;
 - use by/expiry/best before date; and
 - any other relevant instruction
- The service will ensure regular pest and vermin maintenance is conducted to prevent contamination.
- Perishable food brought from home by children and/or educators can be refrigerated when requested (limited to the service's capacity to do so). These items will be suitably dated and labelled. Any items left at the service for more than 2 days will be disposed of appropriately.
- The refrigerator and pantry will be cleaned weekly
- Weekly inspections will also involve stock (food) rotation and inspection for food requiring disposal (perished or expired etc.)
- Food that is not fit to be eaten is to be immediately disposed of so that it will not be consumed.

Cooking, Food Preparation and Service with Children

- Ensure children who are supporting the preparation or service of food uphold the service's hygiene practice, including handwashing.
- Children will not be allowed in the kitchen or food preparation area unsupervised. Food activities that require heating and/or cooking will be fully risk assessed and supervised by an educator.
- Children who are unwell will not be permitted to handle food, whether it is a food activity or preparation of snacks or meals.

Food Brought to the Service

- Parents/guardians will be provided with information, through the enrolment and orientation process, relating to storage of lunch boxes during vacation care.
- Any issues will be addressed and planned with each individual family directly.

Food Recall

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

Related Policies

- *2.20 Supervision*
- *4.3 Hygiene, Health and Wellbeing*
- *4.17 Children with Medical Conditions*
- *5.2 Food and Nutrition*
- *6.1 Space and Facilities*
- *6.3 Workplace Health and Safety*
- *9.3 Communication with Families*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Food Act 2006 (Qld)*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 77-80*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/9/21

Date implemented:	14/9/21	Date families notified	
Version:	5.1-2021/1	Date of review	

5.2 Food and Nutrition

Policy Statement

This service recognises and acknowledges the importance of providing food that is both nutritious and appropriate to the needs of the children. The service encourages and promotes the health and wellbeing of children by providing positive learning experiences during meal/snack times where good nutritional food habits are developed in a happy, social environment. Parents are supported to understand the benefits of this approach to nutrition for their children.

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

Roles and Responsibilities

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

Procedures

Development and Review of Nutrition Policy

- A detailed nutrition policy has been developed in consultation with families, educators and the service management.
- The policy will be based on information from recognised health authorities, such as the Commonwealth or State Government health department and non-government organisations with recognised expertise in nutrition (e.g. Nutrition Australia, Heart Foundation, Queensland Health).
- The Nominated Supervisor will be responsible to regularly review, and when necessary, ensure that the service obtains formal reviews of this Nutrition Policy from a recognised nutrition authority or a person duly qualified to advise in relation to it.
- The Nominated Supervisor will report to the Approved Provider at least once a year and otherwise whenever a change is made to this Nutrition Policy.

Recommended Food

- Information about healthy food choices is gathered from recognized authorities (i.e. Dietary Guidelines for Children and Adolescents in Australia (NHMR) 2003, Nutrition Australia) and also Queensland Education initiative 'Smart Choices, Healthy Foods'.

Provision of Healthy and Varied Food Choices

- Where the service provides food, educators will seek to provide food, which:
 - is healthy, balanced, varied, age appropriate and consistent with Dietary Guidelines for Children and Adolescents in Australia (NHMR) 2003;
 - includes a good balance of fresh foods, as opposed to pre-packaged and prepared foods;

- III. as far as reasonably possible, meets the dietary needs of children with special dietary needs of which the service has been made aware, or becomes aware.
2. Service menus are planned using a checklist to ensure that food provided is varied and encompasses all food groups. Families, children and educators are encouraged to contribute ideas for the menu.
3. Where breakfast and afternoon tea are provided, a menu for the week will be displayed near the entrance of the OSHC building and by the kitchen.
4. The Nominated Supervisor will discuss with all parents any food allergies and restrictions (including cultural or religious) which are required by the parent to be enforced at the service. Details of these restrictions will be noted on the enrolment form and passed on to educators.
5. The service will seek to accommodate all such reasonable nutritional needs of a child by giving appropriate directions to educators in relation to that child.
6. Where children have special dietary needs, which is not reasonable that the service meet, the Nominated Supervisor will consult with parents and where necessary, the meal will be supplied from home.
7. When parents provide food for their child, healthy food and drink choices are encouraged.
8. The Nominated Supervisor will support menu preparation and purchasing to ensure adequate quantity.

The Eating Environment

1. Social interactions will be encouraged during meal/snack times. Educators will spend this time interacting with the children and model good eating and social habits.
2. Children will be encouraged to use effective hand hygiene, prior to regular service meal times.
3. To ensure safety, children will be encouraged to sit whilst eating and/or drinking.
4. Children eating food at the service, outside the regular meal times of the service, will be encouraged to use effective hand hygiene and to sit while eating.

Serving of Food

1. Independence will be fostered by encouraging children to serve themselves food, under supervision from educators, using appropriate equipment.
2. If educators need to serve food to the children, tongs and/or gloves will be used.
3. At meal/snack times, educators will encourage children to try different foods and to take appropriate portions.

Involving Children

1. Educators involve and consult children when planning the menu and/or food activities and experiences through group meetings and/or children's suggestions.
2. Educators will facilitate children being involved in the preparing and serving of food through 'serve-yourself' routines and activities such as breakfast meals.
3. Educators will encourage and involve children in conversations and routines that promote healthy eating and good nutrition.

Drinking Water

1. The Nominated Supervisor will ensure that children have ready access to cool drinking water.
2. Educators will encourage children to drink extra water during the summer months.
3. Educators will encourage parents to provide children with water to take with them on excursions.

Diverse Cultural Experiences

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

Communication with families

1. The food provided by the service is planned ahead and menus are displayed in a prominent place for families and children.
2. Where parents are required to provide food for their children, the service will provide relevant nutritional information as well as suggestions for healthy food and drink choices,
3. If a child has special food needs e.g. cultural requirements or food allergies, the service will work with parents to develop a plan to meet the child's needs. Parents will inform the service of any changes.
4. Through the Family Handbook, parents are alerted to the service's nutrition policy, and invited to contact the Nominated Supervisor at any time to discuss any comments, concerns or feedback in relation to the Food and Nutrition Policy, and of their child's particular dietary requirements for health or other reasons.
5. The Nominated Supervisor will arrange at least one opportunity every twelve months for parents to have input into the Nutrition Policy.

Professional development

1. Service management will ensure that educators are provided with adequate training and instruction in relation to food handling and storage procedures.
2. Educators will be encouraged to attend professional development on food and nutritional related issues.
3. The service will ensure that information and/or fact sheets relating to food safety and nutrition are readily available for educators.

Food Experiences

1. Food will not be used in the service as punishment or reward for children.
2. Educators will encourage children to learn about food and nutrition through:
 - i. food awareness authorities being included in the service program (e.g. Nutrition Australia);
 - ii. engaging children in conversations about healthy lifestyles and good nutrition;
 - iii. inclusion of children in service meal routines.

Food Safety

1. Supervisors and staff undertaking food handling at the service will be required to have skills and knowledge of food safety including food handling.
2. Food safety and food hygiene training will be provided through such means as external workshops, in-service workshops, induction, in-house training, and workplace documents displayed to feature food safety responsibilities and requirements in accordance with the service's food safety plan.
3. All food will be stored in accordance with packaging requirements or relevant guidelines.
4. The kitchen area is to remain clean and hygienic at all times. Outlined cleaning and sanitising procedures will be followed at all times.
5. The service is aware and manages the risk of certain food to children that may be susceptible to allergies.

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.11 Supporting Additional Needs with Inclusive Practices*
- *2.25 Statement of Intent for Children's Play*
- *3.1 Educational Program Design and Implementation*
- *4.3 Hygiene, Health and Wellbeing Practices*
- *4.17 Children with Medical Conditions*
- *5.1 Food Handling and Storage*
- *6.1 Space and Facilities Requirement*
- *6.2 Resources and Equipment*
- *6.3 Workplace Health and Safety*
- *9.2 Enrolment and Orientation*
- *9.3 Communication with Families*
- *10.8 Information Handling (Privacy and Confidentiality)*

- 10.9 Risk Management

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Child Protection Act 1999
- National Quality Standard, Quality Area 1 – Educational program and practice; 2 – Children’s health and safety; 4 – Staffing arrangements; 6 – Collaborative partnerships with families and communities

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(a)(i), 77-80.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/9/21
Date implemented:	14/9/21	Date families notified	
Version:	5.2-2021/1	Date of review	

Policy Group 6 – Physical Environment, Resources and Safety

6.1 Space and Facilities Requirements

Policy Statement

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

Roles and Responsibilities

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

Procedures

Education and Care Facilities

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

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

Administration Facilities

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

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

Purchasing and Development

- Educators and families will be encouraged to identify suitable opportunities to address concerns with the facilities.
- The QIP will also identify opportunities to enhance the service’s provisions and utilisation of their spaces.
- Purchasing and maintenance will follow the service’s agreed procedures (see 10.3 Budgeting, Procurement and Financial Planning)

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.20 Supervision of Children
- 4.9 Children’s Toileting
- 6.3 Workplace Health and Safety
- 4.12 Non-Smoking, Illicit Substance and Alcohol-free Environment
- 4.20 Sleep and Rest
- 7.1 Emergency Equipment and Facilities
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.2 Approval Requirement
- 10.3 Budgeting and Financial Planning
- 10.7 Insuring Risks
- 10.15 Asset Management
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 81, 103, 105-111, & 113-114*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
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6.2 Resources and Equipment

Policy Statement

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

Roles and Responsibilities

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

Procedures

Education and Care Resources and Equipment

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

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

Administration Resources and Equipment

The service will ensure adequate administrative resources are available to:

- Conduct and support the service's documentation and communication.
- Support efficient business practices and responsibilities in providing quality care.
- The service will gather information and resources for access to advice and support for parents and families.

Purchasing and Development

- The service will plan and budget for the continual development of resources and equipment to support the service's program and practice.
- Educators and families will be encouraged to identify suitable opportunities to purchase suitable equipment and resources.
- The QIP will also identify opportunities to identify resources to enhance the service's provisions
- Care will be taken when purchasing equipment to ensure it complies with relevant Australian Standards (available from Standards Australia) and is suitable for the purpose for which it is intended.
- Purchasing will follow the service's procurement and approval procedures (see 10.3 Budgeting, Procurement and Financial Planning)

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.20 Supervision of Children
- 6.3 Workplace Health and Safety
- 4.20 Sleep and Rest
- 7.1 Emergency Equipment and Facilities
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.2 Approval Requirement
- 10.3 Budgeting and Financial Planning
- 10.7 Insuring Risks
- 10.15 Asset Management
- 10.27 Self-Assessment and Quality Improvement
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 73, 103, & 105.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
Date implemented:	12/10/21	Date families notified	
Version:	6.2-2021/1	Date of review	

6.3 Work Health Safety

Policy Statement

For the protection of children, educators, management and the service as a whole, the service will ensure that its equipment, facilities and premises are safe and clean in keeping with the requirements of the *Work Health and Safety Act, 2011*. See also Policy 7.1 for specific obligations relating to emergency equipment and facilities. The service promotes health and safety awareness for all people involved in the service. Policies and procedures are developed and monitored to reflect safe work practices.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(j), and 155-156*.

Auxiliary Plans and Templates

- 4.1.1 Indoor Checklist
- 4.1.2 Outdoor Checklist

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Exercise due diligence to eliminate or minimise health and safety risk so far as it is reasonably practicable.• Ensure the service has and uses appropriate resources and processes to eliminate or minimise risks to health and safety.• Consult with workers who are directly affected by a health and safety matter so far as it is reasonably practicable.
Nominated Supervisor	<ul style="list-style-type: none">• Lead the risk management procedures for the service.• Consult and collaborate on risk management activities with educators and those who will be directly affected.• Monitor controls to ensure they are working as planned, undertake a review of the risk management processes when needed.
All Staff	<ul style="list-style-type: none">• Take reasonable care for their own health and safety and do not adversely affect the health and safety of other persons.• Comply with any reasonable instruction and co-operate with any reasonable health and safety policy or procedure.• Collaborate with risk assessment planning and delivery.

Procedures

The Approved Provider and Nominated Supervisor both have duties to maintaining a suitable safe and healthy workplace environment. The procedures contained within this policy are presented in two parts:

- Systems and processes to manage risks and support health and safety
- Practices that have been identified to support health and safety

WHS Risk Management

The Nominated Supervisor is responsible for leading the day-to-day monitoring and response to work health and safety issues. The Nominated Supervisor is supported by educators who will assist in completing relevant checklist and inspections of the service premises and play environment. Any hazards identified will be addressed in consultation with the relevant management.

Regular periodic inspections will include but are not limited to:

- the service building and surrounding areas
- cupboards and storage areas
- outdoor areas like car parks, gardens and pathways
- playground equipment

Managing Workplace Risks

Managing workplace risks is a four-stage process to:

- **Identify hazards** – find out what could cause harm

- **Assess risks** – understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening
- **Control risks** – implement the most effective control measure that is reasonably practicable in the circumstances
- **Review control measures** to ensure they are working as planned.

Managing work health and safety risks is an ongoing process that is triggered when any changes affect work activities. Undertaking workplace risk management should be considered when:

- changing work practices, procedures or the work environment
- purchasing new equipment or using new substances
- new information about workplace risks becomes available
- responding to workplace incidents (even if they have caused no injury)
- responding to concerns raised by workers or others at the workplace
- required by the WHS regulations for specific hazards

Hierarchy of risk control is a way of controlling risks that are ranked from the highest level (1) of protection and reliability to the lowest (6).

1. **Eliminate** - remove the hazard and associated risk
2. **Substitute the hazard with something safer** - replace hazardous item
3. **Isolate the hazard from people** - physically separating the source of harm from people by distance or using barriers
4. **Use engineering controls** - uses a mechanical device or process to physically assist and reduce the chance of physical injury or fatigue
5. **Use administrative controls** - work methods or procedures that are designed to minimise exposure to a hazard
6. **Use personal protective equipment (PPE)** – face masks, gloves, aprons and protective eyewear

Consultation

Consultation is a legal requirement and an essential part of managing health and safety risks. A safe workplace is more easily achieved when everyone involved in the work communicates with each other to identify hazards and risks, talks about any health and safety concerns and works together to find solutions. This includes cooperation between the people who manage the work and those who carry out the work or who are affected by the work. By drawing on the knowledge and experience of everyone, more informed decisions can be made about how the work should be carried out safely.

Consultation involves giving others a reasonable opportunity to express their views and contribute to health and safety decisions. This may involve:

- providing a suitable time during work hours for consultation with workers
- allowing opinions about health and safety to be regularly discussed and considered during workplace meetings
- providing workers with different ways to provide feedback, for example using email

The Approved Provider and Nominated Supervisor must take into account the views of staff and families before making a decision. Consultation does not require consensus or agreement but management must allow relevant people to contribute to any health and safety decisions made.

Managing Identified Workplace Hazards (Routine Practices)

Dangerous Substances

The Nominated Supervisor must ensure that:

- All poisons, disinfectants, corrosive substances and other poisonous and/or dangerous substances and items are clearly labelled as per manufacturer safety instructions, kept out of reach of children and placed in a child proof storage facility.
- Risk assessments are conducted for all dangerous substances used at the service and all educators trained in safe usage.
- Unused or unnecessary substances are disposed of in a safe manner.

- All hazardous substances have a safety data sheet (obtained from the manufacturer) which will be kept close to the storage of the product. All hazardous substances are recorded in a register, including a copy of the relevant safety data sheet.
- Storage of medications and service first aid kit/s are accessible to educators but not to children.

Environment Risks and Management

The Nominated Supervisor will be responsible to ensure that the service has adequate heating, ventilation and lighting at all times. The Nominated Supervisor will ensure that educators remove all equipment that is faulty or broken.

Prior to use each day, educators will conduct a documented safety check of all indoor and outdoor spaces and equipment to ensure it is safe for use, free from items which may cause injury, and free from splinters and spiders.

Hazards identified from daily safety checklists (see 4.1.1 and 4.1.2) will be brought to the Nominated Supervisor's attention by the educator. The Nominated Supervisor will notify the school and record the event in a hazard report form (see 6.3.2) and forward it to the relevant persons (school and/or Approved Provider).

Sandpits will be raked prior to use to check for any animal faeces and any potentially dangerous objects.

Facilities and equipment assessed to have potential for injury will not be used or action is taken to allow for safe usage. An entry detailing the problem will be entered into the team communication book and all educators will be instructed on any restrictions necessary on use of equipment or areas.

The Approved Provider will ensure the building is inspected periodically for electrical safety including relevant electrical safety devices. The Nominated Supervisor will coordinate:

- Specified electrical equipment is inspected, tested and tagged by a competent person at recommended intervals and immediately withdrawn from use if it is not safe to use; and
- Specified electrical equipment is connected to a type 1 or 2 safety switch. The safety switch must be tested at prescribed intervals and withdrawn from use if not working properly.

Educators will be instructed in the safe use and storage of electrical equipment associated with their work. The Nominated Supervisor will ensure that all fire safety equipment (extinguishers and blankets) is tagged and tested and in accordance with the *Building Fire Safety Regulation 2008*.

Manual Handling

Management will ensure that all team members have adequate training in relation to safe lifting and manual handling techniques used at the service. Educators must use lifting equipment (e.g. hoist, devices with wheels) as advised by management for use.

The Nominated Supervisor will ensure that appropriate lifting and manual handling techniques are practiced by educators and/or volunteers. Educators must inform the Nominated Supervisor if they have any medical or health issues that may place them at risk of injury when lifting or moving people/objects.

Information regarding appropriate lifting and manual handling techniques will be made accessible to educators through the orientation and induction process, and through ongoing displays of safe techniques.

Sharps/Dangerous Objects

'Sharps' refers to any object that can pierce or penetrate the skin easily, including needles and/or broken glass.

The Nominated Supervisor will make available at the service a sharps disposal kit consisting of disposable gloves, appropriate tongs and a strong puncture proof plastic container with a screw top lid.

As part of the service daily safety checklists, educators may be required to dispose of needles/sharp hazards that are found in playground and sandpit areas as well as clean up broken glass that may be contaminated with blood.

For the collection and disposal of needles and/or dangerous objects:

- Place the container (with lid off) on the ground near the hazard;

- Use gloved hand or tongs to pick up the needle/syringe by the barrel at the end away from the needle. For other dangerous objects, take care when picking them up;
- Place the needle/syringe sharp end first into the container. Do not hold the container while you do this. For other dangerous objects, carefully place them into the container. Replace the lid and seal tightly; and
- Dispose of the container by putting in the wheelie bin or taking it to a public sharps disposal bin.

If you are injured by a used needle:

- Wash with running water and soap as soon as possible;
- Apply a sterile waterproof dressing;
- Seek medical advice; and
- Follow the safe disposal procedures as above and take the needle or syringe with you to the doctor.

Psychosocial Hazards

Example of psychosocial hazards include effects of work-related stress, bullying, violence and work-related fatigue. The service will maintain a supportive environment for its staff and users (children and families).

The protection of children, and the promotion of their safety and wellbeing is covered by many practices outlined in policy 2.2 Commitment to Children's Safety and Wellbeing,

Expectations of conduct are clearly contained within relevant policy, including the service's Code of Conduct (8.9.1) and Code of Conduct for the Interactions and Relationships with Children and Young People (8.9.2)/ At all times work place interactions will be expected to be respectful, courteous and professional.

Instances of harassment and bullying will be taken seriously. Employees have access to complaints mechanisms to support their access to a fair and reasonable workplace environment. Any workplace issues can be addressed to the Nominated Supervisor or Approved Provider free of reprisal or victimization.

Employee's will be fairly managed and have opportunities to address performance and workload issues in appropriate forums, including regular performance review meetings and plans.

Related Policies

- *2.1 Interactions and Relationships to Children*
- *2.7 Supporting Complex Behaviours*
- *2.20 Supervision of Children*
- *3.1 Educational Program Design and Implementation*
- *3.5 Excursions*
- *3.5.1 Transport for Excursions*
- *3.7 Physical Activity*
- *3.13 Water Activities and Safety*
- *4.2 Infectious Diseases*
- *4.3 Hygiene, Health and Wellbeing Practices*
- *4.5 Incident, Illness, Injury or Trauma*
- *4.6 Medication Administration*
- *4.8 Sun Safety*
- *4.9 Children's Toileting*
- *4.12 Non-Smoking, Illicit Substance and Alcohol-free Environment*
- *4.17 Medical Conditions*
- *4.18 Administration of First Aid*
- *5.1 Food Handling and Storage*
- *5.2 Food and Nutrition*
- *6.1 Space and Facilities Requirement*
- *6.2 Resources and Equipment*

- 7.1 Emergency Equipment and Facilities
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.3 Recruitment and Employment of Educators
- 8.7 Workplace Harassment and Bullying
- 8.9.1 Code of Conduct
- 8.17 Fit for Work
- 9.2 Enrolment and Orientation
- 9.5 Feedback and Complaints Handling
- 9.10 Visitors
- 10.6 Nominated Supervisor
- 10.1 Managing Compliance with Legal Obligations 10.8 Information Handling – Privacy and Confidentiality
- 10.7 Insuring Risks
- 10.9 Risk Management
- 10.15 Asset Management
- 10.22 Determining the Responsible Person
- 10.27 Self-Assessment and Quality Improvement
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Work Health Safety Act and Regulations
- Codes of Practice: How to manage work health and safety risks and Work health and safety consultation, co-operation and co-ordination.
- National Quality Standard, Quality Area 2 – Children’s health and safety

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(j), and 155-156.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
Date implemented:	12/10/21	Date families notified	
Version:	6.3-2021/1	Date of review	

6.7 Occupancy Agreement

Policy Statement

OSHC must hold permission from OSHC State School to occupy a premises for the purpose of conducting a centre-based OSHC service, approved under the Education and Care Services National Law Act (2010) and Regulation (2011). The permission to occupy the premises will be outlined in the documented Occupancy Agreement.

Related Policies

- 6.7.1- OSHC Occupancy Agreement

Roles and Responsibilities

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

Procedures

The Approved Provider will demonstrate a right to occupy a premises for the provision of an approved centre-based service (service for school aged children) through completing the Occupancy Agreement (see 6.7.1) with the Principal of Sherwood State School.

The occupancy permit shall be reviewed annually to ensure the obligations of both parties are being appropriately met and that the agreement is current and valid.

Related Policies

- 6.1 Space and Facilities Requirement
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.2 Approval Requirement
- 10.17 Strategic Planning
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 3 – Physical environment and 7 – Governance and leadership.

E&CS Legislation Compliance

- Education and Care Services National Regulations 103, & 107-110.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
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Policy Group 7 - Emergencies

7.1 Emergency and Safety Equipment

Policy Statement

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

Roles and Responsibilities

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

Procedures

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

Emergency Equipment

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

Fire Safety Equipment

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

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

Related Policies

- *2.2 Commitment to the Safety and Protection of Children*
- *2.20 Supervision of Children*
- *3.5 Excursions*
- *3.5.1 Transport for Excursions*
- *3.13 Water Activities and Safety*
- *4.5 Incident, Illness, Injury or Trauma*

- 4.6 Medication Administration
- 4.17 Medical Conditions
- 4.18 Administration of First Aid
- 5.1 Food Handling and Storage
- 6.1 Space and Facilities Requirement
- 6.2 Resources and Equipment
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.3 Recruitment and Employment of Educators
- 8.17 Fit for Work
- 9.2 Enrolment and Orientation
- 9.5 Feedback and Complaints Handling
- 9.10 Visitors
- 10.6 Nominated Supervisor
- 10.1 Managing Compliance with Legal Obligations
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.7 Insuring Risks
- 10.9 Risk Management
- 10.15 Asset Management
- 10.22 Determining the Responsible Person
- 10.27 Self-Assessment and Quality Improvement
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *Building Fire Safety Regulation 2008*
- *Managing the Work Environment and Facilities Code of Practice 2011*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; Quality Area 7 – Governance and leadership*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 97.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
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Version:	7.1-2021/1	Date of review	

7.2 Emergency Evacuation, Lockdown and Drills

Policy Statement

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

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

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

The Approved Provider also recognises their duties to comply with *Education and Care Services National Regulations 2011* (regulations 97 and 168 (2)(e)).

Auxiliary Plans and Templates

- 7.2.1 Emergency Evacuation Plan
- 7.2.2 Lockdown Plan
- 7.2.3 Bomb Threat Checklist
- 7.2.4 Emergency Drill Evaluation Template

Roles and Responsibilities

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

Procedures

Development of Emergency Plans

- The Service will have the following plans prepared for the event of an emergency:
 - Emergency Evacuation Plan (7.2.1)
 - Lockdown Plan (7.2.2)
 - Bomb-Threat Response (below)
- All plans will be based on an assessment of hazards and the types of emergency situation that may arise, including the possible consequences and controls to manage the identified risks.
- Plans will outline:
 - Allocation of roles and responsibilities
 - Lines of communication to coordinate the emergency response
 - Activation of alarms and/or communication channels for staff
 - Floor/site plans with clear identification of a safe route to assembly point
 - Storage and access to role and emergency contact information
 - Instructions on responding to hazard (i.e. use of fire equipment)
- All staff are encouraged to inform the development of these plans. Consultation and feedback with educators will be sourced following each drill
- The ongoing review, management and display/communication of these plans will be outlined through the procedure below

Emergency Evacuation

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

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

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

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

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

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

The Regulatory Authority will be notified, through the 10.33 Managing Notifications policy, of any events in which an emergency evacuation was undertaken.

Lockdown

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

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

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

The Regularity Authority will be notified, through the 10.33 Managing Notifications policy, of any events in which an emergency evacuation was undertaken.

Bomb Threat

A copy of the bomb threat checklist (7.2.3) will be kept in an accessible location in the OHSC office.

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

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

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

A staff member can then use a separate phone to **call 000** (police) to report the threat.

The Regularity Authority will be notified, through the 10.33 Managing Notifications policy, of any events in which an emergency evacuation was undertaken.

Emergency Drills

- Emergency evacuation and lockdown procedures will be carried out at least once a term.
- Both the emergency evacuation and lockdown drill will occur during a BSC session, ASC session, and at the beginning of each Vacation Care program.
- In order to maximise the exposure to the widest range of children, families and staff in attendance, a drill will occur on different days of the week.
- Feedback and guidance will be provided to the children at the conclusion of each drill.
- Each practiced drill will be documented and recorded by the Nominated Supervisor or Responsible Person in Charge (see 7.2.4 *Emergency Drill Evaluation Template*). Each record will include an evaluation of the drill against the service's plans and responses by staff and children. Any concerns will be communicated to the Approved Provider along with the Nominated Supervisors plans to address these concerns.

Related Policies

- 2.2 *Commitment to the Safety and Wellbeing of Children*
- 4.5 *Incident, Illness, Injury or Trauma*
- 4.12 *Non-Smoking, Illicit Substance and Alcohol-free Environment*
- 6.3 *Workplace Health and Safety*
- 7.1 *Emergency Equipment and Facilities*
- 8.3 *Recruitment and Employment of Educators*
- 9.2 *Enrolment and Orientation*
- 9.3 *Interactions and Communication with Families*
- 9.10 *Visitors*
- 10.1 *Managing Compliance with Legal Obligations*
- 10.1.1 *Managing compliance with the National Quality Framework (NQF)*
- 10.1.2 *Approval Requirement*
- 10.1.3 *Responding to and Managing Non-Compliance*
- 10.1.4 *Managing Other Legal Obligations and Requirements*
- 10.32 *Appropriate Governance*
- 10.33 *Managing Notifications*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *Building Fire Safety Regulation 2008*
- *Managing the Work Environment and Facilities Code of Practice 2011*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; Quality Area 7 – Governance and leadership*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 97 and 168(2)(e)*

Policy Controls			
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Version:	7.2-2021/1	Date of review	

7.2.1 Emergency Evacuation Plan

Fire Emergency Action Plan

- R** Remove children from danger.
- A** Alert Emergency Services on **000**, educators and any other persons.
- C** Confine the fire or smoke by closing doors and windows if safe. Control the fire if safe to do so.
- E** Evacuate to Assembly Area!



- P** Pull the pin.
- A** Aim at the base of the fire.
- S** Squeeze the handles together.
- S** Sweep the fire from side to side.



- Sound the alarm.
- Alert staff in all licenced areas.
- Call **000**. Alternatively Call **112**.
- Evacuate all children located in each assigned indoor area. Gather them at their exit point and line them up, ready to evacuate.
- Once all children are lined up, escort them to the designated evacuation meeting area using the planned emergency routes. On arrival, have children sit on the grass in pairs for quick counting. *Move quickly but don't run!*
- Check all rooms and hidden areas in your space to ensure no children have been left behind.
- Close all windows.
- Close all doors and leave unlocked.
- Check school toilets for children.
- Check new hall toilets for children.
- Supervisors to collect the following items:
 - iPad. Sign-in Sheet. Phones
 - Evacuation Folder with Emergency Contact List.
 - Medical Folder with Plans.
 - First Aid Kits and Medication.
- Proceed to the evacuation area.
- Count children and check roll.
- Send one staff member to meet emergency services on the street.

7.2.2 Lockdown Plan



Lock Down Action Plan



1. Once a threat has been realised, a **Supervisor** (or another responsible adult) will alert **Educators** and **Children** by using the 'Active Phrase' (if you are unfamiliar with what the 'Active Phrase' is, please ask a **Supervisor** or senior educator)
2. **Educators** are to guide all **Children** from play areas to a Lock-Down Zone. (If you are unfamiliar with the Lock-Down Zones, please ask a **Supervisor** or **Senior Educator**).
Educators are to ensure all **Children** are accounted for by checking connected areas (i.e. back rooms, bathrooms)
3. Once in the Lock-Down zone **Children** are to sit low to the ground and out of sight from all windows and doors.
Educators will ensure that:
 - i. The lights are turned off
 - ii. All external and internal doors are to be locked from the inside
 - iii. All windows are to be closed
 - iv. Non-essential devices viewable or audible from outside are to be turned off.
4. The **Supervisor** will make a call to the **Police**, the **Government (ECEC)** and the **Principal** while a **Senior Educator** accounts for all **Children** using the session's Roll. While this is occurring, **Educators** will manage the noise within the room and support the **Children** within that space.

7.2.3 Bomb Threat Checklist

DO NOT HANG UP — KEEP CALLER TALKING

Call Details

Date	/	/	Time	:	AM/PM
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Exact Wording of Threat

Prompts

When is the bomb going to explode?	
Where exactly is the bomb?	
When did you put it there?	
What kind of bomb is it?	
What will make the bomb explode?	
Did you place the bomb?	
Why did you place the bomb?	
What is your name?	
Where are you?	
What is your address?	

Caller Description/Characteristics

Voice	Accent; impediment; tone; speech; diction; manner	
Language	Polite; incoherent; irrational; taped; read out; abusive	
Noises/Environment	Voices; machinery; music; noises on the line	
Other	gender of caller; estimated age	

End of Call

Reason Ended		Time	
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Name		Signature		Date	
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7.2.4 Evacuation Drill Evaluation

Drill Details			
Date		Time	
Type of Emergency Responses	Evacuation	Lockdown	Other
Educators Participating			
Number of Children (Attach Role)			

Action	Yes/No	Comment
Educators		
Had all education provided with training or instructions in how to respond?		
Was the procedure clearly displayed?		
Did all educators understand their particular roles and duties?		
Were there any points of the drill that were unclear?		
Were any work health and safety issues noticeable during the drill, e.g. hazards?		
Were children adequately supervised and ratios maintained?		
Were directions given to children clear and accurate?		
Any improvements identified?		
Children		
Were all prepared with information in how to respond to the emergency drill?		
Did the children understand the reason for carrying out the drill?		
Did children understand the directions given by educators?		
Did children follow directions given by educators?		
Did children experience any difficulties?		
Were any children upset by the experience? If so, why?		
Feedback provided by the children after the drill?		
Evaluation		
Was the response timely?		
Did educators and children follow the procedures?		
Were all children and educators accounted for?		
Any issues that need improvement?		
Comments:		

Name		Signature		Date	
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Policy Group 8 – Educators, Staff Members and Volunteers

8.2 Educational Leader

Policy Statement

The service acknowledges the need to establish a suitably qualified and experienced educator or service leader be responsible for the development and implementation of the program. This role should enhance the practices of educators and be focused on building a collaborative approach to incorporate the ideas and suggestions of a wide range of stakeholders to inform the development of the program.

The service recognises the requirement to maintain records of the designated Educational Leader.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the suitability of the Educational Leader has been documented and the Educational Leader's appointment has been agreed to in writing.
Nominated Supervisor	<ul style="list-style-type: none">• Support the Educational Leader to develop and implement the service's program.• Maintain the records for the designation of the Educational Leader.
Educational Leader	<ul style="list-style-type: none">• Agree to their appointment in writing.• Undertake their role collaboratively and with professionalism.
All Staff	<ul style="list-style-type: none">• Support the development and implementation of the service's program through completing their duties in the programming cycle - adding to the service's documentation and critical reflection to their capacity.

Procedures

Educational Leader Appointment

The appointment to the Educational Leader position will be based on identifying a suitably qualified and experienced educator (or another suitable individual) to fulfil the role for the service. The Nominated Supervisor will coordinate with the Approved Provider to identify and assess a suitable candidate. The Nominated Supervisor (or other appointed persons) will document their assessment of the person's suitability. This will be retained in the appropriate records, including their employee file.

The Approved Provider will ensure the designated Education Leader has confirmed their role in writing. The written evidence will be maintained by the service records, including in the employee file (see 10.8 Information Handling).

Programming Cycling Responsibilities

The Educational Leader will be responsible for:

1. Leading the development of the service program, using the My Time, Our Place: Framework for School Age Care in Australia to inform and guide children's learning and development, and ensure that clear goals and expectations have been established;
2. Ensure that curriculum decision making is informed by the context, setting and cultural diversity of the families and the community;
3. Ensure that the foundation for the program is based on the children's current knowledge, ideas, culture and interests;
4. Ensure that each child's learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluating;
5. Ensure that critical reflection and evaluation of children's learning and development is used for planning and to improve the effectiveness of the program;
6. Mentor educators in the implementation of the program, providing professional support to assist with further skills and knowledge and provide opportunities for ongoing reflection and feedback on current practices.
7. Ensure that families have opportunities and support to be involved in the program and service activities as well as contributing to the review of service policies and decisions.

The Approved Provider and Nominated Supervisor will ensure rostering and resources are adequate for the Educational Leader to fulfil their responsibilities.

Related Policies

- 2.1 Interactions and Relationships with Children

- 2.11 Supporting Additional Needs with Inclusive Practices
- 2.19 Children’s Media Viewing
- 2.20 Supervision of Children
- 2.25 Statement of Intent for Children's Play
- 3.1 Educational Program Design and Implementation
- 3.2 Program Evaluation and Communicating Children's Progress
- 3.4 Homework
- 3.5 Excursions
- 4.8 Sun Safety
- 8.8 Employee Performance Monitoring, Review and Management
- 9.3 Interactions and Communication with Families
- 9.6 Community Participation and Engagement
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.27 Self-Assessment and Quality Improvement

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

E&CS Legislation Compliance

- Education and Care Services National Regulations 118 & 148.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	12/10/21
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Version:	8.2-2021/1	Date of review	

8.3 Recruitment and Employment of Educators

Policy Statement

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

Roles and Responsibilities

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

Procedures

Job Analysis

1. Position descriptions will be developed for all employment position.
2. Position descriptions will outline the key functions of the roles and identify essential and desirable selection criteria.
3. The composition, quantity and engagement of the service's staffing arrangements will be decided by the Approved Provider in consultation with the Nominated Supervisor and OSHC Committee.
4. Where possible recruitment activities will be as a result of workforce planning, identifying the upcoming needs of the service.
5. Employment needs may quickly arise and the Nominate Supervisor will be delegated to advertise for casual employees (without management/supervisor responsibility) on this basis. All other instances of recruitment will be instigated with the Approved Providers expressed approval.

Recruitment Activities

6. The table below outlines the *minimum* expected external promotion (open-merit) of available positions when recruiting

Direct Appointment	Internal Advertising Only	External & Internal Advertising
<ul style="list-style-type: none"> • A casual position with no management/supervisory responsibility • Full and part-time position by current casual employees (without promotion) 	<ul style="list-style-type: none"> • Casual position with management/supervisor responsibility 	<ul style="list-style-type: none"> • Any other position
<p><i>Direct appointment and internal advertising only apply to current employees of OSHC. Direct appointments must be endorsed by the Approved Provider.</i></p>		

7. Promotion and advertisement of available position can include:
 - Local newspapers,
 - Job seeking website,
 - Job boards on university or QCAN website, or
 - In the school newsletter.
8. Advertisements will include a description of the position, and an outline of the selection criteria. Candidates will be asked to write a cover letter addressing the selection criteria and provide a copy of their resume.
9. The service will acknowledge receipt of all applications and communicate an expected timeline on when a short-list will be made.

Short-listing Candidates

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

Interviewing

13. Short-listed candidates will be notified to their progression and be invited to interview for the position.
14. Casual appointments will be interviewed by at least one staff members or representatives from the OSHC Committee or the Approved Provider.
15. Full and part-time appointments will be interviewed by a panel of at least three persons (unless there are exceptional circumstances) made up of either:
 - Service representatives;
 - Approved Provider representatives; and/or
 - Appropriate school employees.
16. Interview questions based on the selection criteria for the position will be developed and reviewed prior to the interview date and agree to by the selection panel and/or Approved Provider.
17. Interviews will be held in a manner to be fair and equitable.

Selection

18. The selection panel should score each interview question and tally each individual's final result. Suitability decisions may also include other application information submitted on initial application (resume and cover letter).
19. The selection panel should make a recommendation to the Approved Provider outlining their reason for selection.
20. Where differentiation of candidates is difficult, the progression to reference checks may assist in supporting a preferred candidate.
21. Before offering the position to the preferred candidate, if not already completed, a delegated selection panel member will confirm the suitability of the candidate via at least one, preferably two, referee checks.

Appointment

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

Orientation and Induction

25. All new employees will be given (at least) a 2 hours induction to ensure they are equipped and supported to understand and fulfil their role.
26. Induction will cover, but is not limited to:
 - Receiving the OSHC Employee Welcome Information Pack, containing:
 - Employee Handbook.
 - Employee Record Form.
 - Position Description.
 - Details and location of the Award (Parents and Citizens Associations Award – State 2016).
 - Employment Information Statement (for Queensland Industrial Relations System).
 - Union Information.
 - Confidentiality/Privacy Agreement.
 - Child Protection Information Sheet.
 - Professional Standard in OSHC.
 - Location and orientation of:
 - The service's policies and procedures.
 - National Quality Standard for Education and Care Services.
 - My Time, Our Place Framework for School Age Care in Australia.
 - A walk-through of the service, outlining the key facilities and emergency plans.
 - A discussion with the Nominate Supervisor (or delegate) to outline and introduce:
 - The other educators in the service and their roles.
 - Duty of care responsibilities and supervision practices.
 - Rostering and communication procedures.
 - Programming and documentation procedures.
 - Work Health and Safety procedures and responsibilities.
 - Each educator's first shift will be paired with a suitably experienced educator to 'shadow' them through the role and expectation. The Nominated Supervisor will meet with the new educator at the end of the shift to debrief.

Conflicts of Interest and Recruitment

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

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

Ongoing management of employees where a conflict of interest exist is covered in *10.30 – Managing conflicts of interests*.

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.3 Educator to Child Ratios*
- *8.4 Educator Professional Development and Learning*
- *8.9 Applying the Codes of Conduct*

- 8.9.1 Code of Conduct
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 8.12 Employee Qualifications – Monitoring Progress
- 10.19 Policy Development, Sourcing and Review
- 8.28 Transition from Casual Employment Engagement

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- Fair Work Act 2009(Cth) / Industrial Relations Act 2016 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.

E&CS Legislation Compliance

- Education and Care Services National Regulations 299A.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.3-2021/1	Date of review	

8.4 Educator Professional Development and Learning

Policy Statement

OSHC aims to support and facilitate the development of its employees through providing quality and relevant ongoing training and development. The service is committed to ensure all employees have access to training and development opportunities to ensure regulations and legislative frameworks are met and to foster individual learning and development for educators.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> Ensure budgets and approvals allow for educators to access suitable professional development opportunities to enhance their capacity and skills.
Nominated Supervisor	<ul style="list-style-type: none"> Coordinate the procurement and selection of professional development opportunities that is consistent with delegation and budget. Ensure all educators have fair and equitable access to professional development opportunities and these are aligned with the aims of the service and/or performance plans. Retain records of completed professional development.
All Staff	<ul style="list-style-type: none"> Engage with professional development opportunities. Contribute to the planning and identification of valuable training topics.

Procedures

Internal Opportunities for Development

- The Educational Leader and Nominated Supervisor will support the development of educators' practice through guiding professional reflection, providing access to relevant professional resources and articles, and through supervisory conversations.
- Some of the engagement in professional development activities will be outlined in the employee's learning and development plan (see *8.8 Employee Performance Monitoring, Review and Management*)

External Opportunities for Development

- Complementing the individual learning and development plans of employees, each educator should have fair and equitable access to relevant training opportunities based on their individual needs and with consideration of their professional interests.
- Professional development opportunities may be accessed through:
 - Online learning.
 - On or off-site workshops.
 - Conferences, presentations or learning programs
- The Nominated Supervisor will explore opportunities for team-development opportunities including but not limited to in-service workshops or presentations. The Nominated Supervisor will collaborate with educators on a regular basis to contribute suggestions for the team's training needs.

Training Records

- The Nominated Supervisor will be responsible for ensuring records of all professional development sessions/initiatives are maintained, including copies of certificates and attendance records.

Procurement and Approval

- The Approved Provider be required to approve all professional development intentions and funding, including the service's budget for training and professional development.
- The Approved Provider may delegate specifics, including the facilitator, to the Nominated Supervisor. The Nominated Supervisor will follow *10.13 - Procurement and Purchasing* policy ensure value for money.
- Educators will be paid for attendance at approved training sessions and team meetings, in accordance with the award.

Related Policies

- 8.2 Educational Leader
- 8.8 Employee Performance Monitoring, Review and Management
- 8.25 Employee Remuneration and Entitlements
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.6 Nominated Supervisor
- 10.27 Self-Assessment and Quality Improvement

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.4-2021/1	Date of review	

8.5 Volunteers

Policy Statement

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

The Approved Provider also recognises their duty to comply with *Education and Care Service National Regulations 2011* 168 (2)(i), 149 and 177.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure procedures are created to monitor and maintain suitable management on volunteers to uphold the safety and wellbeing of children. • Ensure records are maintained to demonstrate compliance.
Nominated Supervisor	<ul style="list-style-type: none"> • Ensure compliance with organisational and legislative standards. • Lead a suitable suitability assessment and induction to support a volunteer's engagement, learning and development. • Complete documentation and maintain relevant records.
Responsible Person in Charge	<ul style="list-style-type: none"> • Monitor the conduct of volunteers and interaction with children. • Support learning and development. • Ensure all volunteers under the age of 18 are fully supervised at all times.
All Staff	<ul style="list-style-type: none"> • To support interactions with children and guide learning and development. • Ensure the safety and wellbeing of children through supporting volunteer's understanding of procedures, expectations and interactions. • Report any concerns immediately.

Procedures

Blue Card (Working With Children Check)

Volunteers must hold a blue card before they begin at the service in any capacity. An application to 'Link a cardholder to the organisation' will be lodged to Blue Card Services upon commencement. Copies of the volunteer's Suitability Card (Positive Notice) will be kept on file

Suitability and Induction

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

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

- Sherwood OSHC's *Philosophy Statement* including its commitment to an environment which is safe and friendly to children;
- The location of the service's *Policy and Procedure Manual*, including an outline of key procedures;
- Procedures to follow when harm is disclosed or identified;
- Feedback and complaints procedures and contact information;
- Emergency and evacuation plans, roles and expectations
- Work Health Safety Manual

Conduct and Engagement

1. All volunteers will be asked to acknowledge their understanding and commitment to the Code of Conduct. Volunteers will be held to the same standard of behaviour as all employees.
2. Volunteers will be supported and guided by other educators while participating in the service, with close support provided during the initial orientation shifts. The service will pair the volunteer with an educator to mentor and model the role and expectations.
3. Volunteers will not be responsible for responding to the behavioural needs of children. They will be asked to report any concerns to an educator for support.
4. With the consent of the Approved Provider and only when assessed as being both suitable and competent, volunteer workers *may* be counted towards the educator-to-child ratios for the service, provided they meet the qualification requirements.
5. Volunteers under the age of 18 *must* be fully supervised at all times. Volunteers under the age of 18 will not be counted towards the educator-to-child ratio.

Record of Volunteer Details

The Nominated Supervisor is to record and maintain:

- the personal details of all volunteers including – full name, address, and date of birth; and
- The details of all volunteers timesheet of attendance (recording the details of the date and time each day the volunteer or student participated).

Volunteer records will be stored in accordance with the procedures outlined in *10.8 Information Handling (Privacy and Confidentiality)*.

Related Policies

- *8.10 Orientation and Induction*
- *10.1 Quality Compliance*
- *10.9 Risk Management and Compliance*
- *8.9 Code of Conduct*
- *10.8 Information Handling (Privacy and Confidentiality)*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; Area 4 – Staffing arrangements*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 168 (2)(i), 149 and 177*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	8/08/2019
Date implemented:	25/08/2019	Date families notified	9/08/2019
Version:	8.5-2021/1	Date of review	25/08/2021

8.6 Employee and Volunteer Grievance Policy

Policy Statement

The service aims to maintain a fair and effective work environment through managing employee grievances effectively. OSHC is committed to addressing grievances in a just and timely manner, ensuring the rights of employees and the principle of natural justice are upheld throughout.

It is expected that the representatives of the service (employer) and the relevant employees will be guided by their obligations under relevant industrial instruments. Ideally, employee concerns can be addressed quickly and reasonably before escalation. OSHC recognises that from time-to-time there may be occasions where grievance may be best resolved through utilising external support.

The OSHC is committed to ensuring all grievances are handled fairly and free from bias. Employees should be free to raise a genuine grievance without fear of retribution or victimisation. OSHC is committed to supporting a culture that reflects an openness to address concerns held by employees in a fair and reasonable manner.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011 168 (2)(o), 173(2)b*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> Establish fair and just procedures to manage the resolution of employee grievances, including investigation in a thorough, fair and impartial manner. Manage significant and/or complex grievance matters. Decide appropriate courses of action, including the appointment of a grievance-handler and/or third-party support.
Nominated Supervisor	<ul style="list-style-type: none"> Typically the initial contact for grievance matters, therefore ensuring relevant information is captured and documented. Support the aggrieved (person presenting the grievance) is guided through a fair procedure to resolve their grievance. Where a grievance can be resolved initially, the Nominated Supervisor will be responsible for mediating and handling this process. Communicate details of the grievance to the Approved Provider to notification or further support.
All Staff	<ul style="list-style-type: none"> Maintain privacy and confidentiality where an employee holds information relating to a workplace grievance being handled by the service.

Procedures

Definition

A grievance is any concern or complaint related to an employee's work, especially related to unfair or unjustified treatment. A grievance can be about any act, behaviour, omission, situation or decision impacting on an employee. A grievance can relate to almost any aspect of work including work health safety, training, leave, and rostering etc.

Initial Grievance Notice and Resolution

- Any employees may raise their complaint or concern either verbally or in writing.
- The Nominated Supervisor will be the preferred contact for initial grievances. However, the employee (aggrieved party) will have the ability to raise concerns with the Approved Provider directly.
- The Approved Provider should be the contact for grievances where:
 - the grievance is about the conduct of the Nominated Supervisor.
 - the aggrieved party is not comfortable to take the grievance to the Nominated Supervisor.
 - the aggrieved party is not satisfied with the Nominated Supervisor's handling of the grievance.

- d. the grievance is regarding a matter of administration, management or governance.
- 4. Employees will be able to access the Approved Providers contact details from displayed signage at the service (see 9.5 Complaints and Feedback), if not already provided with these details elsewhere.
- 5. All grievances raised are to be documented on the Grievances Record Form and recorded in the Grievance Register. These records are stored in accordance with the service's information handling policy (10.8) – securely, maintaining privacy and confidentiality through password protection.
- 6. The Nominated Supervisor will notify the Approved Provider of any grievances or disputes raised by employees. The Approved Provider and Nominated Supervisor will discuss and plan who is most suitable to fulfil the role of grievance handler, where grievances have not been able to be resolved informally.
- 7. The grievance handler will consult with the aggrieved party to discuss the matter. They should be free from bias, impartial, have the capacity to manage the complexity and conflict, and be suitable within the criteria listed above (item 3).
- 8. Depending on the seriousness of the allegation, the Approved Provider may need to report the grievance to the Regularity Authority – see *4.5 Incident, Illness, Injury or Trauma* or other workplace authorities – see *10.33 Managing Notifications*.
- 9. The grievance handler will contact the aggrieved party to discuss as soon as practicable (within 24 hours). The grievance handler should the following information:
 - a. the nature and details of the grievance
 - b. the resolution sought
- 10. Where a resolution can be easily sought, the grievance handler will collaborate an action plan with the aggrieved party and confirm the agreement of a resolution. These items will be documented by the grievance handler and the grievance will be considered finalised.

Managing Complex Grievances

- 11. Where resolution is not easily sought due to:
 - a. strong dispute of the nature of the grievance or objection to the allegations,
 - b. the complexity of the allegations,
 - c. previous resolution or dialogue has been unsuccessful, or
 - d. the allegations involve sexual harassment:
 then, escalation to the Approved Provider for handling and management will occur.
- 12. The Approved Provider will take steps to understand the nature of the allegations, where these are unclear. The aggrieved party may have an opportunity to be supported by a union representative at this stage.
- 13. The Approved Provider may choose to proceed in managing the grievance through formal workplace investigation, fact-finding enquiry or mediation to bring a just resolution to the allegations. The nature of the matters raised will determine the appropriateness of the actions available.
- 14. The appointed grievance handler will notify the aggrieved party of the intended proceeding and outline anticipated timelines. If desired by either party, the matter will also be notified to the relevant union.
- 15. The investigation, mediation or other professional support may be coordinated by the Approved Provider or outsourced to an independent professional. Any appointed party should be impartial, free from bias, and have the capacity to undertake the task. The appointed person cannot be the employee's supervisor or manager.
- 16. The investigator (or professional support) will gather relevant information, including statements from the all involved parties and make a determination, recommendation or another relevant outcome to the Approved Provider. Any meetings or conferences discussion the matters will uphold principles of natural justice and procedural fairness. Including the invitation of support persons and obligation for confidentiality. All statements and meetings will be appropriately documented.
- 17. The investigator, if a third-party, will report their findings back to the Approved Provider.
- 18. The Approved Provider will meet formally with the employee at the conclusion of any investigation to outline the recommendations moving forward. These could include disciplinary actions (see 8.19 Employee Counselling and Disciplinary Actions)
- 19. The grievance handler or Approved Provider will advise the aggrieved party of the outcome of any investigation.
- 20. All documentation and reports relating to the matters will remain confidential and be maintained and stored by the Approved Provider.

Quality Improvement

The Nominated Supervisor and Approved Provider will review the grievances register periodically to identify opportunities to enhance the quality and address systemic issues not yet identified.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 6.3 Workplace Health and Safety
- 8.7 Workplace Bullying, Discrimination and Sexual Harassment
- 8.9.1 Code of Conduct
- 8.9.2 Code of Conduct for the Interactions with Children and Young People
- 8.17 Fit for Work
- 8.19 Employee Underperformance, Misconduct and Disciplinary Action
- 8.25 Employee Remuneration and Entitlements
- 10.1.3 Responding to and Managing Non-Compliance
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.30 Conflict of Interest
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Work Health Safety 2011 (Qld)
- Fair Work Act 2009(Cth) / Industrial Relations Act 2016 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- Parents and Citizens Associations Award – State 2016
- National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.6-2021/1	Date of review	

8.7 Workplace Bullying, Discrimination and Sexual Harassment

Policy Statement

All employees have the right to work in a place free from harassment and bullying. OSHC is committed to establishing a culture where all employees are valued, respected and appreciated by their colleagues, supervisors and employers. Workplace bullying, discrimination and sexual harassment can have a significant detrimental impact to the ongoing health and wellbeing employees. Workplace bullying is a psychological hazard that has the potential to harm a person, and it also creates a psychological risk as there is a possibility that a person may be harmed if exposed to it. The following guidelines will be implemented by OSHC to ensure effective reporting and management of allegations of bullying and harassment in the workplace place, therefore reducing the risk of it becoming an acceptable workplace behaviour.

OSHC is an equal opportunity employer. At all stages of the employment relationship (recruitment and selection, terms and conditions of work, training and professional development opportunities, promotion and transfer, retirement, retrenchment and termination) staff will be treated on their merits and valued according to how well they perform their duties.

OSHC believes that all staff should be able to work in an environment free from bullying, discrimination, victimisation, sexual harassment, and vilification. We consider these behaviours unacceptable and they will not be tolerated.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure employees are instructed on suitable conduct for interactions with colleagues or relevant others. • Monitor and respond to instances of inappropriate conduct. • Oversee investigation and response to allegations of harassment, discrimination or bullying.
Nominated Supervisor	<ul style="list-style-type: none"> • Collaborate with the Approved Provider in responding to allegations of harassment, discrimination or bullying. • Support employees to access mechanism to report concerning conduct. • Provide instruction to employees about appropriate interactions with colleagues and others.
All Staff	<ul style="list-style-type: none"> • Ensure interactions with colleagues and others is respectful and free from harassment, victimisation, discrimination or bullying. • Report any instances of concerning conduct to Nominated Supervisor (or relevant other persons with management responsibilities).

Procedures

Workplace bullying is repeated and unreasonable behaviour directed towards a worker or a group of workers that creates a risk to health and safety.

Unreasonable (Bullying) Behaviour

- Means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening
- Examples of behaviour, whether intentional or unintentional, that may be workplace bullying if they are repeated, unreasonable and create a risk to health and safety include but are not limited to:
 - abusive, insulting or offensive language or comments
 - aggressive and intimidating conduct
 - belittling or humiliating comments
 - victimisation (treated unfavourably because they have made or supported a complaint)
 - practical jokes or initiation
 - unjustified criticism or complaints
 - deliberately excluding someone from work-related activities
 - withholding information that is vital for effective work performance

- setting unreasonable timelines or constantly changing deadlines
- setting tasks that are unreasonably below or beyond a person's skill level
- denying access to information, supervision, consultation or resources to the detriment of the worker
- spreading misinformation, malicious rumours or submitting vexatious complaints/allegations
- changing work arrangements such as rosters and leave to deliberately inconvenience a particular worker or workers.
- If the behaviour involves violence, for example, physical assault or the threat of physical assault, **it should be reported to the police.**
- Unreasonable behaviour may involve unlawful discrimination or sexual harassment which, by itself, is not bullying. This behaviour (discrimination and sexual harassment) does not need to be repeated to be unlawful.

Reasonable Management Action

- An employer may take reasonable management action to effectively direct and control the way work is carried out. It is reasonable for managers and supervisors to allocate work and give feedback on a worker's performance. These actions are not workplace bullying if they are carried out in a lawful and reasonable way, taking the particular circumstances into account
- A manager exercising their legitimate authority at work may result in some discomfort for a worker. The reasonableness of the behaviour is viewed through the actual management action rather than a worker's perception of it. It can also include the degree to which there has been a significant departure from established policies or procedures, and whether the departure was reasonable in the circumstances.
- Examples of reasonable management action taken in a reasonable way include:
 - setting realistic and achievable performance goals, standards and deadlines
 - fair and appropriate rostering and allocation of working hours
 - transferring a worker to another area or role for operational reasons
 - deciding not to select a worker for a promotion where a fair and transparent process is followed
 - informing a worker about unsatisfactory work performance in an honest, fair and constructive way
 - informing a worker about unreasonable behaviour in an objective and confidential way
 - implementing organisational changes or restructuring,
 - taking disciplinary action, including suspension or terminating employment where appropriate or justified in the circumstances.

Unlawful Discrimination

- Discrimination on the basis of a protected trait in employment is unlawful (also see *8.3 Recruitment and Employment of Educators*).
- Unlawful discrimination can include where a person or group of people are treated unfairly or less favourably than others because they have a particular characteristic or belong to a particular group of people.
- Protected traits include:
 - sex, age, race, gender identity or sexuality
 - relationship status
 - pregnancy, breastfeeding, family responsibilities or parental status
 - impairment
 - religious belief or activity
 - political belief or activity
 - trade union activity
 - status as a legal sex worker.
 - It is also illegal to discriminate against someone on the basis of an association with a person identified by one of these characteristics

Sexual Harassment

- Sexual harassment includes unwelcome sexual advances, requests for sexual favours or other unwelcome conduct of a sexual nature that could be expected to make a person feel offended, humiliated or intimidated.
- Sexual harassment in the workplace can take many different forms and can include:

- Staring, leering or unwelcome touching;
- Suggestive comments or jokes;
- Unwanted invitations or requests for sex;
- Intrusive questions about a person's private life or body;
- Insults or taunts based on sex;
- Sexually offensive communications (phone, email, SMS or other social media).
- Sexual harassment doesn't have to be repeated or continuous to be against the law.

OSHC treats all instances of **unreasonable behaviour, bullying, discrimination and sexual harassment** very seriously. Employees found to be engaging in this type of conduct (breaching this policy) will undergo disciplinary action, which can include action up to and including termination of employment.

Reporting Bullying, Discrimination and Sexual Harassment

- Incidents of unreasonable behaviour, discrimination, or sexual harassment are to be treated seriously, and immediate action must be taken to report allegations.
- If an employee feels they are a victim of this type of behaviour they should tell the other person directly that their behaviour is harassing and unacceptable. Any person told their behaviour is harassing or unacceptable should immediately stop this behaviour.
- Employees may inform either the Approved Provider, Nominated Supervisor or relevant other person with management responsibilities in person or writing using either the *8.6 Employee and Volunteer Grievance* or *9.5 Feedback and Complaint* procedure (where relevant) of the alleged conduct.
- Staff who make a complaint of bullying, discrimination or sexual harassment will not suffer any victimisation for making the complaint (where the complaint/allegation is made in good faith, i.e. not vexatious). This also applies to staff who agree to be a witness in a complaint/investigation or have a complaint made against them.

Respectful Conduct and Relationships

- OSHC Code of Conduct (8.9.1) guides employee's expected standard of behaviour in the workplace and with colleagues.
- The service's culture and outcomes for children are improved through building respectful relationships with each other. Additionally, it reduces the risk of employees finding unreasonable behaviour acceptable.
- Examples of respectful and behaviour that should be promoted includes:
 - Being polite and courteous to others
 - Being inclusive of individuals and the diversity they bring to the workgroup
 - Raising issues of conflict before escalation, and pursuing these conversations constructively
 - Maintain an individual's privacy and confidentiality
 - Support fair and transparent decision-making

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *6.3 Workplace Health and Safety*
- *8.6 Employee and Volunteer Grievance*
- *8.9.1 Code of Conduct*
- *8.9.2 Code of Conduct for the Interactions with Children and Young People*
- *8.17 Fit for Work*
- *8.19 Employee Underperformance, Misconduct and Disciplinary Action*
- *8.25 Employee Remuneration and Entitlements*
- *10.1.3 Responding to and Managing Non-Compliance*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *10.30 Conflict of Interest*
- *10.32 Appropriate Governance*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*

- *Work Health Safety 2011 (Qld)*
- *Guide for Preventing and Responding to Workplace Bullying (Worksafe Australia)*
- *Anti-Discrimination Act 1991 (QLD)*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.7-2021/1	Date of review	

8.8 Employee Performance Review and Support

Policy Statement

OSHC is committed to delivering quality education and care through providing supportive management to continually develop the performance and practice of its educators. Ongoing and collaborative evaluation of employee's performance will support planning that is focused on building upon the strengths and individual contributions of each employee. Employee performance will be formally and regularly reviewed and evaluated. These formal procedures will be enhanced through informal support and feedback throughout the employee's engagement.

The service also recognises its role in developing employees as part of the National Quality Standards, Quality Area 7 – Governance and Leadership. Individual plans will be created and implemented to support effectively direct every employee's learning and development opportunities.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Lead the performance review and professional support of the Nominated Supervisor. • Establish procedures to ensure all OSHC have plans to enhance their knowledge, skills and ability relevant to their individual performance.
Nominated Supervisor	<ul style="list-style-type: none"> • Coordinate and undertake regular and ongoing supervision and developing planning of employees. • Collect and collate relevant observations and examples to provide relevant feedback to the performance of staff. • Ensure supportive and collaborative plans are implemented as agreed.
All Staff	<ul style="list-style-type: none"> • Complete self-evaluation of performance and collaborate with service leaders in the planning and implementation of professional development activities.

Procedures

The procedures outlined in this policy apply to further developing the performance and practice of educators (and other relevant employees). Instances of misconduct and underperformance are managed through the steps outlined in the policy and procedure, but rather - **8.19 Employee Counselling and Disciplinary Actions**.

Performance Supervision Preamble

- The Nominated Supervisors will be responsible for coordinating performance supervision meetings (review and planning meetings) to ensure all educators (or other relevant OSHC staff) receive an opportunity to understand and contribute to their performance. It may be appropriate that other service leaders are delegated the task of facilitating performance supervision meetings.
- Employees will receive information on the service's performance supervision and management practices in their employee handbook.
- The procedures to develop and support performance should empower employees to identify their unique contributions to the service and highlight methods their practices can be enhanced. OSHC will actively seek to undertake a process that builds and empowers employees, rather than delivering a remedial or corrective approach to developing performance and skills.
- Employee performance and their practices will be framed by their position description, the OSHC Professional Standards and any other relevant document or framework.

The **OSHC Professional Standards** will be the preferred framework used to understand and support educator performance; however, there could be occasions where alternative performance measures are more suitable for specific individuals. The Nominated Supervisor will be responsible for determining which supervisory tools will be used in guiding performance supervision and employee development. Likewise, the Approved Provider will determine the most appropriate performance framework to support the development of the Nominated Supervisor.

Initial Performance Review and Planning

1. The Nominated Supervisor will inform the employee of a time to meet to discuss their employment, their performance and development opportunities. Communication will be positive and time set aside should be adequate for feedback, collaboration and a discussion in identifying development opportunities.
2. The initial performance review and planning meeting will occur between 2 to 3 months after initial employment - once induction learning material has been completed and as a function of finalising an employee's initial probation. Where there are concerns around an employee's performance and their suitability to be engaged beyond the probation period – policy *8.19 Employee Counselling and Disciplinary Actions* will be followed.
3. In preparation of the performance supervision meeting, each employee will be provided with a copy of the OSHC Professional Standards Self-Assessment Tool to complete and forward to the Nominated Supervisor (or delegate) prior to the meeting.
4. A performance meeting will be coordinated to discuss the employee's performance and induction.
5. The meeting will be facilitated in a manner that provides discussion and collaboration. The Nominated Supervisor will come prepared with relevant feedback, including observations and examples. The format of each meeting will have three broad topics:
 - i. Identifying the person's area of strength, skills, and ability ('what has gone well?')
 - ii. Identifying areas of development, growth or vulnerability ('what are the opportunities for development?')
 - iii. Collaborating a plan for learning, development and support ('what needs to happen?')
6. The Nominated Supervisor (or delegate) is responsible for documenting the main points of the meeting and the agreed actions into a plan.
7. Action items should be specific and should outline who is responsible for coordinating specific steps. Approval for paid professional development session will need to be approved by the Approved Provider (see 8.4 Professional Development and Learning)
8. Each plan will state a date of review. Typically, this will be six months. However, this may be negotiated to an alternative timeline where needed.
9. The educator will have an opportunity to review the draft and add any comments before being signed and agreed.

Interim Review

1. The interim review will be planned to occur around the midpoint of the plan's implementation.
2. The plan will outline an interim review date, where the educator and a service leader will have the opportunity to amend any action items if there has been significant change or actions are not meeting their intended aim.

Ongoing Performance Reviews and Planning

1. Employee performance will be monitored through implementing an ongoing review process to reflect and support performance.
2. Each ongoing review will provide an opportunity to reflect and evaluate the previous learning and development opportunities, as well as current performance.
3. The ongoing supervision meetings will include:
 - Self-assessment prior to a supervision meeting
 - Feedback and work examples
 - Supervision meeting identifying of strengths, aspirations and areas for improvement; and
 - A written learning and development plan

Nominated Supervisor Review and Planning

1. The Approved Provider will appoint an appropriate delegate to lead the review and planning of the Nominated Supervisor.
2. The Nominated Supervisor's performance review will follow a similar procedure as all other employees.

Privacy and Confidentiality

- All plans will be stored securely in the respective employee file (see 10.8 Information Handling (Privacy and Confidentiality)).
- Employees will be provided with a copy of each of their plans, once signed and finalised.

Related Policies

- 3.1 Educational Program Design and Implementation
- 8.4 Educator Professional Development and Learning
- 8.12 Employee Qualifications – Monitoring Progress
- 8.19 Employee Underperformance, Misconduct and Disciplinary Actions
- 8.25 Employee Remuneration and Entitlements

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.8-2021/1	Date of review	

8.9 Applying the Code of Conduct

Policy Statement

The Approved Provider expects that all people connected to the service, in particular employees and individuals interacting with children to conduct themselves in a manner that is consistent with a high standard of professionalism and ethical practice.

Employees and those in manager/advisory roles are expected to demonstrate a behaviour that reflects a positive and professional attitude of their work, act collegially, and support the needs and safety of the children and families accessing the service. The OSHC Code of Conduct provides an illustrated expectation of the standard of behaviour expected of all people with responsibility for providing a quality service.

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

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

Auxiliary Documents

- OSHC Code of Conduct
- OSHC Code of Conduct for Interacting with Children and Young People

Roles and Responsibilities

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

Procedures

Employee Code of Conduct Application

1. Employees will be provided with both relevant copies of the service's Code of Conduct prior to commencing employment.
2. Employees will read acknowledge understanding and commitment to the Codes of Conduct.
3. Employees shall be expected to consistently uphold the agreement during their employment with the service.

4. The Nominated Supervisor will be responsible for monitoring and immediately addressing the concern of educator and volunteer conduct.
5. Issues relating to educator conduct will be notified to the Approved Provider.
6. Staff with concern about a manager's (Nominated Supervisor) conduct are encouraged to communicate directly with the Approved Provider.
7. Breaches to a Code of Conduct will be taken seriously. Allegations of breaches of the Code of Conduct by employees will be managed through underperformance and misconduct proceedings (8.19), which may result in action taken by the Approved Provider up to and including termination.
8. Any updates to the Code of Conduct will be required to be acknowledged by all employees, as outlined in item 2.

People with Management and Advisory Responsibility

- All individual with management, governance or advisory responsibility (P&C Executive and OSHC Sub-Committee members) will be provided with copies of the OSHC Codes of Conduct.
- All persons in these positions are expected to act in a manner consistent with the OSHC Codes of Conduct in the discharge of their duty.
- Any reported or suspected breaches of the Code of Conduct will be resolved impartially by an appropriate person, decided by the Approved Provider.
- Breaches to a Code of Conduct will be taken seriously, which may result in action taken by the Approved Provider up to and including suspension or removal from their role.

Conduct for All Persons Interacting with Children

- The service expects all persons interacting with children connected to the service will display the highest level of professionalism, respect and safety.
- The service has outlined expectations for any individual with an opportunity to interact or form relationships with children who access the service.
- Details of this code of conduct will be made available to employees, management, families, volunteers and visitors.
- Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or discipline (as appropriate) up unto and including suspension or exclusion from the service.

Related Policies

- 2.2 Commitment to the Safety and Wellbeing of Children
- 8.3 Recruitment and Employment of Educators
- 8.5 Volunteers
- 8.6 Employee and Volunteer Grievance
- 8.17 Fit for Work
- 8.19 Employee Underperformance, Misconduct and Disciplinary Actions
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints
- 10.1 Managing Compliance with Legal Obligations
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *National Quality Standard, Quality 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 97 and 168(2)(e)*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.9-2021/1	Date of review	

8.9.1 OSHC Code of Conduct

1. General Principle

Sherwood State School P&C Association expects that all persons engaged with any of the operations, support or management of Sherwood Outside School Hours Care (OSHC) will display the highest standards of professional and personal conduct in the discharge of their duties.

2. Coverage

The Sherwood State School OSHC Code of Conduct applies to:

- The Approved Provider (P&C Executive)
- OSHC Sub-Committee
- All OSHC employees
- Volunteers engaged at OSHC

3. Obligations

The conduct of managers, employees and volunteers (personnel) should uphold the service's commitment to safety, professionalism and the service's philosophy in the delivery of education and care of children accessing the service.

In doing so, all relevant persons should:

- Comply with the organisation and community standards of behaviour in dealing with others within and beyond the organisation.
- Comply with the service's policies and procedures and legislative requirements and obligations.
- Perform duties in a responsible and professional manner.
- Display sound stewardship of the service's resources and belongings.
- Promote the service's reputation and the value to quality school-age care into the broader community.
- For persons with working or interacting directly with children – these people must comply with the service *Code of Conduct for Interaction with Children and Young People (8.9.2)*

3. Behaviour Standards

OSHC personnel are expected to:

- Treat everyone with courtesy, respect, consideration throughout their interactions and communication with others.
- Be sensitive and responsive to the dignity and rights of others, refraining from interacting in a manner that impacts on the rights of others, including not engaging in any form of:
 - Harassment
 - Discrimination (e.g. based gender, age, race, impairment, disability, religious beliefs, political beliefs, sexual orientation or identity)
 - Bullying
 - Victimisation
- Act in good faith and honesty with the responsibility and delegation placed within your position.
- Uphold the professional boundaries of the relationships that develop through your engagement, including acting with transparency and ethical standards.

4. Teamwork

OSHC personnel are expected to build cooperation and partnership, and should:

- Foster teamwork and collegiality among all internal stakeholders, expressing gratitude to the effort and contribution others bring.
- Consider the impact on your decision and behaviour on the wellbeing of others – refrain from acting in a manner that would reasonably distress, intimidate, undermine or threaten a colleague or stakeholder.
- Display a constructive attitude when navigating conflict and grievances with others.
- Refrain from acting in any way that would unfairly harm the reputation or position colleagues.

5. Privacy and Confidentiality

OSHC personnel are expected to maintain the service's commitment to privacy and confidentiality, particularly around the service's sensitive and personal information, and should:

- Not share or disclose information that is not consistent with a fair, just or reasonable purpose.
- Ensure that information collected by the service is only used for the purpose intended.
- Ensure the security of information is maintained - as outlined by service policy, procedure and expectations.

6. Stewardship

OSHC personnel are expected protect the resources and finances of the service, and should:

- Use the service’s resources properly and responsibly for legitimate purposes only
- Use resources in a manner that does not contribute to the risk to safety for others, the community or environment,
- Strive to obtain value for the organisation’s purchases and spending.
- Avoid waste and secure service’s belongings against theft or fraud.
- Maintain the integrity and security of the service’s intellectual property.

7. Professionalism

OSHC personnel are expected to be professional and should:

- Perform duties diligently, conscientiously and with integrity to the best of your ability.
- Maintain knowledge of professional and ethical standards relevant to your area of expertise — engaging learning and development opportunities to enhance your capacity to perform, as required.
- Strive to deliver the highest of quality education and care for our community.
- Comply with any relevant legislative requirements.

8. Conflicts of Interest

OSHC personnel are expected to act ethically for the best interest of the service and should:

- Not take improper advantage of any official information gained in the course of our employment.
- Ensure that financial or non-financial interest does not conflict, or appear to conflict, with or compromise the obligations and requirements of your duties and performance.
- Avoid actual or perceived conflicts of interest through transparency in decision-making and declaring potential conflicts of interest for impartial management.

9. Safety and Health

OSHC personnel are expected to uphold a safe and healthy environment and should:

- Uphold a duty of care to children accessing the service and the broader community, responding to concerns about potential harm.
- Take responsibility for the health and safety of yourself and others when carrying our duties.
- Present to your role with adequate fitness, alertness and hygiene to perform the duties.

10. Fairness and Resolution

OSHC personnel are expected to deliver a fair and reasonable response to concerns of others and should:

- Facilitate a fair process for responding to compliance, grievances and disputes.
- Respond with integrity and advocacy for the rights of ourselves and others.
- Uphold ethical decision-making to promote fairness, justice and collaborative partnerships for stakeholders.

11. Reputation

OSHC personnel are expected to promote the interest and character of the service and should:

- Engage the community with respect for individuals and their diversity.
- Promote the service where possible in your professional interactions with others.
- Refrain from presenting yourself as a spokesperson or acting on behalf of the organisation unless authorised to do so.
- Refrain from engaging in any activity that may compromise the integrity and reputation of the service.

12. Compliance Breaches

- All personnel must comply with this Code of Conduct and report any breaches to their manager or the Approved Provider, as appropriate.
- All personnel are expected to report any suspected corrupt, criminal or unethical conduct directly to the Approved Provider.
- Any employee displays conduct inconsistent with the standard outlined in OSHC’s Code of Conduct will be counselled accordingly, and/or disciplined in accordance with the service’s relevant policy and procedure

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.9-2021/1	Date of review	

8.9.2 OSHC Code of Conduct for Interacting with Children and Young People

Guiding Principles

Sherwood State School P&C Association expects that all persons interacting directly with children and young people at OSHC will demonstrate the highest standards of personal conduct to uphold the commitment to safety and wellbeing of children.

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

This Code of Conduct for Interacting with Children and Young People has been developed to support the organisation's *Child and Youth Risk Management Strategy*. Additionally, the service has additional obligation to maintain responsibilities, including (but not limited) to the following provisions:

- *National Quality Framework*
- *National Quality Standard*
- *Education and Care Services National Law and Regulations*
- *Working with Children (Risk Management and Screening) Act 2000 (Qld)*
- *Child Protection Act 1999 (Qld)*
- *Work Health Safety Act 2011 (Qld)*
- *Human Rights Act (2019)*
- *United National Convention on the Rights of the Child*

Conduct Expectations

The OSHC Code of Conduct for Interacting with Children and Young People applies to all people involved with the service, including:

- The Approved Provider (P&C Executive)
- OSHC Sub-Committee Members
- OSHC Employees (including permanent, temporary and casual)
- Volunteers
- Children and Young People
- Parents
- Consultants and Contractors
- Visitors

Relationships (and Professional Boundaries)

All persons will maintain professional boundaries in their relationships with children and families. Education and care professional and the community in which they operate rely on the fostering of positive relationships between adults and children and young people. These settings are places where adults can have a significant influence in the lives of children and young people.

These features make it extremely important that all people involved in the service understand how to foster positive relationships in ways that do not compromise children and young people's welfare. The professional boundaries outlined in this code apply beyond specific education or care premises and extend to the contact, communication and interaction that might be facilitated outside the bounds of the service. For example, where educators have a '*duality of roles*' – meaning they support families of the service in another context as well.

The context and richness of the connection with people to their community can influence the likelihood of stakeholders within the OSHC service sharing social relationship and duality of roles (e.g. being an Educator and a local sporting coach). There can be legitimate reasons, on occasions, to attend social events which

involve private and informal contact with the families that employees of the service work, even more so in rural and isolated settings).

Appropriate ways to manage external interaction may:

Following the guidelines will assist stakeholders in navigating the complexities of creating clear personal and professional boundaries, these form the expectation for people involved in our OSHC service:

- The trigger for external social contact and interaction ought to be generated via the relationship with the event or group, rather than by invitation of children or young people. A request by parents (adults) may be more appropriate. However, the employee will be transparent and either seek advice or disclose the social interaction from service management before proceeding.
- Employees should avoid being alone with children and young people on any occasion.
- People should conduct themselves in a way that will not give others a perception to question their suitability to interact with children or young people. For example, consuming alcohol in a social situation with families of the service in attendance may impact both the perception of professionalism and a person's judgement of a professional boundary.
- All persons privileged with service information should politely refuse to discuss matters relating to the workplace or service and never discuss children or young people's learning or social progress outside of policy guidelines.
- If a person feels unsure or uneasy about a situation, they should discuss it openly with a relevant service manager and if an employee develops an approved plan of action to be followed.
- Employees of the service are required to act consistently with the service's policies and expectation.
- Establish clear expectations for pre-existing non-professional relationships and ensure these are followed.

Inappropriate conduct and boundary violations include:

<p>Personal and Inappropriate Disclosure</p>	<ul style="list-style-type: none"> • Discussing personal details of self, other stakeholders or children in a non-professional forum. • Seeking advice or support for personal matters from people whom you have a professional relationship. • Discussions of a personal or intimate theme with children and young people.
<p>External Contact</p>	<ul style="list-style-type: none"> • Inviting, allowing or encouraging children or young people to attend a staff member's home. • Inviting, allowing or encouraging children and young people access to a staff member's personal internet locations (e.g. social networking sites). • Attending children or young people's homes or their social gatherings. • Being alone with a child or young person outside of professional responsibility. • Offering overnight, weekend, holiday care of children and young people (where this is not through another formal and professional mechanism i.e. employed at a respite facility). • Any secretive or concealed contact or interaction.
<p>Acting Outside Scope of Role</p>	<ul style="list-style-type: none"> • Adopting an ongoing welfare role that is beyond the scope of a person's position or responsibility (e.g. an educator responding as an informal counsellor)
<p>Possessions and Gifts</p>	<ul style="list-style-type: none"> • Giving personal gifts or special favour. • Singling the same children and young people out for special duties or responsibilities.
<p>Violation of Privacy and Dignity</p>	<ul style="list-style-type: none"> • Entering change rooms or toilets occupied by children or young people when supervision is not required or appropriate. • Using toilet facilities allocated to children and young people. • Undressing using facilities set aside for children and young people (where inconsistent with procedures).

People's Language and Communication

All people involved with the service will language and tone that meets community expectations and supports children to feel safe and belonging. The environment children use and access should promote pro-social behaviours and communication. Children should be able to feel psychologically safe and have an opportunity to build interpersonal skills.

All people should display:

Conduct consistent with service expectations includes:

- Caring and compassionate response to children and others.
- Respectful and courteous communication.
- Welcoming and calm tone, being appreciative of the perspectives of others.
- Modelling language and communication that is expected from children

People should never use:

Aggressive and Hostile Interactions	<ul style="list-style-type: none"> • Use of explicit language (swearing and offensive terms). • Abusive, harassing, or derogatory language. • Hostile and threatening language and comments.
Discriminatory and Offensive Behaviour	<ul style="list-style-type: none"> • Using any discriminatory, racial or vilifying language or terms • Disrespectful treatment or interaction to any person based on a personal characteristic (ability, race, sexual orientation, affiliation etc.) • Behaviour that humiliates another person
Personal/ Intimate Themes	<ul style="list-style-type: none"> • Inappropriate comments around or directed towards a child or young person, including: <ul style="list-style-type: none"> ○ Excessive flattering comments. ○ Inappropriate conversation or enquiries of a sexual nature (e.g. questions about a child or young person's sexuality or his/her sexual relationship with others). ○ Inappropriate disclosure or seeking out of advice/support of a personal theme. ○ Sexual-themed jokes or innuendo of a sexual nature • Use of inappropriate pet names • Obscene gestures and language
Tone and Behaviour	<ul style="list-style-type: none"> • Shouting, yelling or aggression. • 'Talking down' to others. • Intimidating behaviour. • Criticising others publicly.

Physical Contact

At times it might be necessary to have physical contact while having the responsibility for caring for children. Adults are required to be responsible for their conduct and personal contact with others, especially children.

Appropriate physical contact may include:

Conduct consistent with service expectations includes:

- Injury management and administration of first aid.
- Demonstrate a skill for the purpose of instructing an activity
- Assisting with personal care of young children
- Non-intrusive gestures to comfort a child or young person who is experiencing grief or distress, such as a hand on the upper arm or upper back
- Non-intrusive touch (e.g. congratulating a child or young person by shaking hands or a pat on the upper arm or back) and accompanying such contact with positive and encouraging words.
- Seeking permission from a child or young person before physical touch.
- Respecting and responding to signs a child is uncomfortable with touch.
- In some circumstances, adults may need to discourage younger children from inappropriate expectations of hugs or cuddles. This should be done gently and without embarrassment or offence to the child.

People should never use or engage in:

- Violent or aggressive behaviour such as hitting, kicking, slapping or pushing.
- Corporal punishment (physical discipline, smacking etc.).
- Kissing or intimate contact.
- Any unwanted touching either personally or with objects (e.g. pencil or ruler).
- Initiating, permitting or requesting inappropriate or unnecessary physical contact with a child or young person (e.g. massage, kisses, tickling games)
- Facilitating situations which unnecessarily result in close physical contact with a child or young person
- Any touching of a sexual nature

Photography and Technology

Photos and information about children are captured by the service as part of the learning experience, communicating with families and the planning cycle. Likewise, technology is used as a tool to store, access and share information with the OSHC community.

All people should display:

Conduct consistent with service expectations includes:

- Using service owned device to capture children's learning.
- Displaying photos and images with consent and in a manner consistent with appropriate information sharing and service policy.

People should never:

- Photograph or film children or young people (via any medium) when not authorised by the Nominated Supervisor, and without expressed parental consent.
- Use images in a manner that is inconsistent with the informed consent provided by parents, e.g. uploading to the services Facebook page when only have permission for in-service display.
- Using personal devised rather than service equipment to capture images or recordings of children without Nominated Supervisor and parent permission and with a valid reason for doing so.
- Storing images or recordings of children and young people on personal equipment or kept in personal locations.

Compliance Breaches

The service expects all persons must comply with this Code of Conduct for Interacting with Children and Young People. Likewise, any persons suspecting breaches of this code are to report details to the Nominated Supervisor or Approved Provider for a response.

Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or discipline (as appropriate) up unto and including suspension or exclusion from the service.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.9-2021/1	Date of review	

8.12 Employee Qualifications – Monitoring Progress

Policy Statement

The service seeks to ensure that all employees enrolled and studying towards relevant qualifications are monitored and supported as they progress through their studies. This ensures that the service strives towards providing a suitably qualified level of educators and maintain compliance with Education and Care Service National Regulations (10 & 299A) for rostering of staff working directly with children.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">Establish processes to monitor and record the progress of employees' qualifications.
Nominated Supervisor	<ul style="list-style-type: none">Coordinate the recording of progress of employees and maintenance of documented evidence.Liaise with employees and the Approved Provider where issues relating to the progress of employees arises.
All Staff	<ul style="list-style-type: none">Submit relevant evidence of qualification progress to the Nominated Supervisor.

Procedures

Employee Qualification and Study

- Employee records gathered during recruitment and induction will document the employee's current qualification enrolment.
- An employee's suitability and employability may be dependent on their continual progress (*actively working*) towards completing their relevant qualification.
- Employees are to notify the Nominated Supervisor when there has been a change in their study/qualification commitment or status. The Nominated Supervisor will notify the Approved Provider of any significant issues or relevant changes.
- Failure to reasonably notify the Nominated Supervisor will be treated seriously, and disciplinary action may be taken (see 8.19 *Employee Counselling and Disciplinary Actions*).

Evidencing Progress

- All employees will be required to evidence the progression of their study and work towards their qualification.
- Typically, this will be through providing a copy of the transcript at the conclusion of each semester (every six months).
- Where this is not suitable, alternative agreements will be arranged with the Nominated Supervisor before the anticipated date that qualification progress would be supplied.

Addressing Changes in Qualification Progress

- Employees who are unable to fulfil their role due to change in their qualification status through no longer being classed as 'actively working towards' (*E&CS National Regulation 10*), may be subject to a review of their engagement with the service (see 8.19 *Employee Counselling and Disciplinary Actions*).

Records

- All records and evidence supplied to the service will be stored and maintained securely in the respective employee file (see 10.8 Information Handling (Privacy and Confidentiality)).

Related Policies

- 8.3 *Recruitment and Employment of Educators*
- 8.4 *Educator Professional Development and Learning*
- 8.8 *Employee Performance Monitoring, Review and Management*
- 8.25 *Employee Remuneration and Entitlements*

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011*

- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 10, 299A*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
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Version:	8.12-2021/1	Date of review	

8.17 Fit for Work

Policy Statement

The service seeks to uphold the safety of all children, community members and employees. To ensure the health, safety and compliance, the service will require all employees are fit and competent to fulfil their duties. The Approved Provider recognises there are common elements that can impact and employee's capacity to safely attend work, including being affected by:

- fatigue
- alcohol and/or other substance(drug) use
- medical fitness (if required for a specific role)
- mental health and wellbeing

All employees are required to report to their relevant manager if they are not in a state (sufficient level of fitness) to attend work. Any employees who present as unfit for work will be stood down with management action to identify the concerns.

The Approved Provider recognises their obligation to comply with Education and Care Services National Regulations 82 & 83.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure established expectations and processes are in place to ensure employees are fit for duty.• Manage and oversee concern about employee presentation and suspension from work.
Nominated Supervisor	<ul style="list-style-type: none">• Be responsible for fairly monitoring and assessing the fitness for work of employees• Immediately stand down any employee suspected to be under the influence of alcohol, other drugs, or where it is not safe for them to continue their role.
All Staff	<ul style="list-style-type: none">• Ensuring they do not present for work in an unfit capacity including under the effects of alcohol, other drugs, or fatigue.• Immediately notifying the Nominated Supervisors of concerns of their fitness for work• Notifying the Nominated Supervisors, or Responsible Person of suspicions colleagues or other individuals are believed to be unfit for work

Procedures

Fatigue

The Nominated Supervisors is responsible for ensuring roster cycles are monitored and reviewed to address the potential for fatigue, especially among employees engaged in split shifts and/or potentially hazardous activities.

Where an employee is not fit to present to work due to fatigue, they are required to notify the Nominated Supervisor or Responsible Person immediately for the management of the roster. Employees should not present to work where they believe they do not have the capacity to fulfil their duties.

Alcohol and Substances

An employee must not be under the influence of alcohol or any other substance while engaged in their duty. The Approved Provider expects that all employees will not present themselves for work after consuming alcohol or other influencing substance (illicit or not).

Where the employee cannot fulfil their role because they have consumed alcohol, they are to immediately notify the Nominated Supervisor, Responsible Person, or the Approved Provider. The relevant manager will follow the roster contingency to find a replacement staff member. Under no circumstances is an employee who has consumed alcohol or influencing substances present for work.

Suspicion of Employee Being Under the Influence

Any employee being suspicious of a colleague (or relevant personnel) being under the influence of alcohol or other substance should report this concern to the Nominated Supervisor or Responsible Person immediately.

Indications of a person being under the influence include:

- Slurred or impaired speech;
- Being aggressive in manner;
- Staggered, jerky movements, could seem uncoordinated;
- Heavy eyes and/or flushed face; and/or
- A dull, tired appearance

The Nominated Supervisor or Responsible Person will assess the presentation of the employee (or relevant person). Where the Nominated Supervisor or Responsible Person holds a reasonable suspicion, an employee is under the influence, they are to immediately stand down the employee and notify the Approved Provider

The Approved Provider determine if the employee should be directed to take an oral or urine test for alcohol or substance at a medical centre. Costs of this test will belong to the Approved Provider.

Where an employee refuses to complete the drug or alcohol test, the Approved Provider will view this as a failure to follow a reasonable and lawful instruction, which may result in disciplinary action up to and including termination.

Prescription Medication

Any drugs prescribed by a medical practitioner must be used in accordance with medical advice. Any non-prescription drugs must be used in accordance with manufacturers' recommendations. If an employee is taking prescription or non-prescription drugs, which could cause drowsiness or otherwise affect their fitness for work, they must advise the Nominated Supervisors so that their ability to work safely can be monitored. If necessary, medical opinion may be obtained.

Related Policies

- *4.5 Incident, Illness, Injury and Trauma*
- *6.3 Workplace Health and Safety*
- *8.6 Employee and Volunteer Grievance*
- *8.9.1 Code of Conduct*
- *8.19 Employee Underperformance, Misconduct and Disciplinary Actions.*
- *9.10 Visitors*
- *10.33 Managing Notifications*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Work Health Safety 2011*
- *National Quality Standard, Quality Areas: 2 – Children's health and safety⁴ - Staffing arrangements; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 82-83*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
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8.19 Employee Underperformance, Misconduct and Disciplinary Actions

Policy Statement

The service acknowledges the need to adequately manage employees to ensure quality care and high standards of safety for children. When responding to instances of employee underperformance or misconduct, the Approved Provider and respective service leaders will respond to performance issues promptly, and in a manner that supports the principles of fairness, natural justice and is compliant with legislative and relevant industrial instruments. The service recognises performance management and/or disciplinary action may be undertaken by the Approved Provider to address underperformance and misconduct issues.

Reasons for underperformance can include:

- Unclear expectations or behavioural standards.
- Interpersonal differences and conflict.
- A mismatch between the capability of the employee and the job they are required to undertake.
- Poor motivation or low morale in the workplace.
- Personal issues, including stress, physical or mental health problems.
- Cultural misunderstanding.
- Workplace bullying.

Not every underperformance issue requires a structured process; continuous feedback and guidance can promptly address issues relating to the performance of employees. The Approved Provider and relevant service leaders should, where possible, encourage feedback and an open discussion in an understanding and supportive environment.

The service recognises there can be a need for formal mechanisms to manage and understand performance and misconduct issues, including workplace investigations and disciplinary actions. In all instances, a fair and just process will be provided to employees to manage a resolution.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Establish fair and reasonable procedures for managing underperformance and misconduct. • Undertake fair and lawful actions in response to employee performance and conduct. • Ensure adequately skilled and capable persons are delegated to handle and investigate instances of underperformance and misconduct. • Ensure disciplinary actions are fair and reasonable.
Nominated Supervisor /Manager	<ul style="list-style-type: none"> • Respond to underperformance or behaviour concerns of employees in a timely and professional manner. • Report significant concerns to the Approved Provider for management and response.

Procedures

Employee Underperformance

Underperformance (or inappropriate conduct) can be exhibited in the following ways:

- unsatisfactory work performance - a failure to perform the duties of the position or to perform them to the standard required
- non-compliance with workplace policies, rules or procedures
- unacceptable behaviour in the workplace
- disruptive or negative behaviour that impacts on co-workers.

Underperformance and **misconduct** are separate and distinct management concepts. Misconduct is a very serious behaviour (including behaviours such as theft or assault), which may warrant summary dismissal or disciplinary action. Whereas underperformance is less serious and requires counselling and potentially performance management planning to support improvement.

The service's counselling and performance procedures will have three distinct (but not necessarily sequential) components:

- Casual conversation (informal counselling and feedback)
- Formal counselling; and
- Performance agreement (or direction).

Responding to Underperformance

Casual Conversation

1. Understanding the reasons for underperformance through a casual conversation (informal counselling and feedback) will be the typical first step. Where an employee can be gently guided to correct any performance issues it the preferred option.
2. The Nominated Supervisor (or appropriate alternative manager) should invite the employee for a discussion to provide feedback on the issues related to the employee's performance/conduct. Before meeting the manager should prepare to develop an understanding of the seriousness of the problem, length the problem has existed and the gap between expectation and what is being delivered.
3. Typically, the casual conversation with the employee should:
 - a. establish the service's expectations;
 - b. identify any reasons for the underperformance; and
 - c. potentially, identify any relevant supports required to improve performance
4. The conversation will be documented by the Nominated Supervisor (or relevant manager). These records should be stored confidentially in the employee's employment file (see *10.8 Information Handling (Privacy and Confidentiality)*)
5. On occasions where a casual conversation has not suitably impacted the employee's performance, the employee will be invited to attend formal counselling. The Approved Provider will be notified of any intention to proceed with formal counselling.

Formal Counselling

6. Proceeding with formal counselling should occur where a casual conversation has not satisfactorily improved performance or where the significance of the underperformance or conduct is serious enough to require a formal response.
7. The employee will be notified in writing of the intention to meet for formal counselling. Written communication with the employee should also include:
 - a. Time, date and location of counselling discussion;
 - b. The matter/s that will be discussed (i.e. specific details of the alleged underperformance/conduct);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
8. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.
9. At the meeting, the relevant manager/employer (as agreed by the Approved Provider) and the employee will review and discuss the matter/s that prompted formal counselling, and the employee will be provided an opportunity to respond. The meeting should be an open discussion, and the employee should have an opportunity to have their point of view heard and duly considered. The employer should listen to the explanation of why the problem has occurred or to any other comments the employee makes.
10. The employer (manager) should discuss the outcomes wish to achieve from the meeting and, where possible, a joint solution should be devised. Emphasis should be placed on common ground with a focus on positive possibilities.

11. Assistance and support, such as further training, mentoring or redefining roles and expectations may be highly effective in employer promoting adequate performance and appropriate conduct.
12. A clear plan of action should be developed with the employee to implement a solution. This can be in the form of a performance agreement or improvement/action plan. This plan should be agreed to by the employer and employee. The document will be stored confidentially (see *10.8 Information Handling (Privacy and Confidentiality)*).
13. Where there are strong disputes over the matters being raised, it may be appropriate to escalate to a workplace investigation (see below) to the established facts.
14. All persons involved with the counselling proceeding must maintain the confidentiality of the matters.

Employee Misconduct

It is generally held that the definition of 'misconduct' involves something more than inappropriate conduct, negligence or error of judgement/an innocent mistake. Misconduct would typically imply an act done wilfully with a wrong intention. Example of misconduct could include:

- Using abusive, harassing or insulting language
- Wilfully contravening workplace policies
- Excessive and ongoing lateness
- Knowingly disclosing confidential information
- Misuse of workplace-owned equipment or resources.

Serious misconduct is more clearly defined. It is conduct that is wilful and deliberate, and that is inconsistent with the continuation of the employment relationship. It is also conduct that causes serious and imminent risk to the health and safety of a person or to the reputation, viability or profitability of the employer's business. Serious misconduct includes:

- theft or fraud,
- assault
- intoxication at work; and
- the refusal to carry out lawful and reasonable instruction consistent with the employment contract.

Responding to Misconduct Allegations

1. All allegations of misconduct will be reported to the Approved Provider. The Approved Provider will delegate a relevant person to handle the matters, including the appointment of an investigator. The Approved Provider reserves the right to appoint an external party to undertake support and complete the investigation.
2. The Approved Provider (or delegate) will take steps to understand the allegations, where these are unclear, including through contacting potential witnesses to the alleged events.
3. The Approved Provider (or delegate) will notify the employee of the allegations in writing. The Approved Provider will request the employee to attend an investigation meeting to provide a response to the allegation/s. The written communication with the employee should also include:
 - a. Time, date and location of misconduct meeting;
 - b. The matter/s that will be discussed (i.e. specific details of the alleged misconduct);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
4. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). The amount of notice given to employees to prepare will depend on the severity of the allegations. However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.

The purpose of a **workplace investigation** is to establish the facts and obtain accurate information in relation to a complaint of misconduct and then form a judgement to what happened. The investigation should determine if allegations actually occurred and identify any mitigating circumstances of the alleged incident/s.

Workplace Investigation

1. The Approved Provider must ensure the person conducting the investigation is not associated or involved in the allegations. An additional person to support the interview through note-taking may also be requested. This person should also not have had any involvement or association.
2. The interview should prepare by gathering all available evidence of the allegations being presented. Additionally, copies of relevant documents (policies, position descriptions, employment contract, and supporting evidence) should be collated.
3. A record of the interview will be maintained by the appointed investigator or note-taker.
4. The meeting will begin by confirming the roles of participants (in particular, the duties and scope of the support person) and the agenda.
5. The employee will be provided with an opportunity to respond to the allegations presented to them. The employee should be provided with sufficient details of the allegations to adequately and fairly respond. The investigator may ask questions to clarify and draw out relevant information.
6. The employee may identify if relevant, additional witnesses that can be interviewed to provide additional information or evidence.
7. Once the employee has provided their response to allegations, the meeting will conclude.
8. Where additional information is required/available or specific witnesses have been identified, the investigator should coordinate the collection of this evidence (*please note: specialist advice should be sought when deciding not to interview named witness*).
9. Witness statement/s should be collected by the investigator in a formal manner. Witness requested to give a statement may invite a support person to the interview. Once the witness has provided a statement, the witness will be asked to sign a copy of the statement. All parties must maintain confidentiality in the investigation. All witness statements will be handled and stored confidentially (*10.8 Information Handling (Privacy and Confidentiality)*).
10. Where new and relevant information has been obtained, the employee must be provided with an additional opportunity to respond (following items 1-5 above).
11. It is critical the employee has had their responses to all allegations against them considered before a decision is made to the findings.
12. Once all relevant information has been collected, the investigator must consider it is more probable than not the allegations being investigated have occurred (known as the Briginshaw principle). Therefore, each allegation must conclude one of the following:
 - a. **Substantiated** (behaviour/allegations found to have occurred)
 - b. **Unsubstantiated** (there is not sufficient evidence to conclude the behaviour/allegation had occurred)
 - c. **Rejected** (there is clear evidence the behaviour/allegations did not occur).
13. The investigator will outline the investigation and their findings in a report that will be submitted to the Approved Provider. The report will remain confidential (*10.8 Information Handling (Privacy and Confidentiality)*).
14. The findings of the investigation will be presented to the employee in an outcome meeting. The employee will be offered an opportunity for a support person at this meeting. The notification of this meeting will be made in writing.
15. Where the investigation has substantiated allegations of misconduct (or serious underperformance), the employer (Approved Provider) will consider the appropriate outcome, and if relevant, disciplinary action/s.

Performance Improvement Plans

1. Where it has been determined the employee has engaged in misconduct (or ongoing underperformance), the Approved Provider will establish as performance improvement plan (PIP) to support the employee to address the issues that have been identified. The PIP will include:
 - a. The desired **outcomes** for the employee's behaviour.
 - b. The **strategies** the employee can use to reach the desired outcome.
 - c. The **support** that can be accessed to assist.
 - d. An outline of **responsibilities** for the employee and employer.
2. The PIP will outline timeframes for the improvement in behaviour to occur. All PIPs will be supported by ongoing counselling by the employer to provide relevant feedback and support.

Disciplinary Actions

The term 'disciplinary action' means the actions taken by an employer in response to misconduct (or ongoing underperformance) in order to correct the employee's behaviour. The purpose of disciplinary action is to turn performance and/or conduct problems around by addressing problems, causes, and solutions.

Before disciplinary actions are taken, the Approved Provider should consider mitigating circumstances and if appropriate opportunity to improve performance has been taken. The Approved Provider should ensure their actions are fair and reasonable in the circumstances. Potential disciplinary action that can be undertaken includes but is not limited to:

- Warning/s
- Change in duties
- Termination

Any disciplinary action undertaken by the Approved Provider will be communicated in writing. The employee will be provided with relevant information to the decision of the employer (Approved Provider).

Termination

Where the Approved Provider seeks to terminate an employee's employment, the employee will be requested to attend a **Show Cause Meeting**. The purpose of this meeting is to ask the employee to provide a rationale (i.e. mitigating factors) as to why their employment should not be terminated.

Summary dismissal (instance dismissal) is the most severe form of termination of employment. Summary dismissal is implemented without any notice or payment in lieu of a period of notice (immediate effect). Summary dismissal can only be undertaken when **serious misconduct** by the employee has been substantiated.

Show Cause Meeting

1. Any termination should be considered as a final resort. The Approved Provider should ensure the action is fair and reasonable in the circumstances.
2. Notification for an employee to attend a show cause meeting will be made in writing, outlining:
 - a. Time, date and location of misconduct meeting;
 - b. The matter/s that will be discussed (i.e. outlining the intention to terminate their employment);
 - c. Notification that the meeting will be their opportunity to respond;
 - d. Notification of who will be in attendance; and
 - e. The opportunity for the employee to invite a support person.
3. At the meeting, the employee will be provided with an opportunity to respond to the intention to terminate their employment.
4. Once the employee has stated their case, the meeting will adjourn. The Approved Provider will consider the response of the employee and make a decision.
5. On recommencement of the meeting, the Approved Provider will outline the decision to the employee and steps moving forward.

In considering termination, the Approved Provider needs to ensure the employee is:

- Not being unfairly dismissed.
- Is given the right notice of termination.
- Is given the right final pay.

Termination Entitlements

Except in the case of summary dismissal, employees terminated as a result of misconduct or enduring underperformance will be given notice as outlined in the Award (or relevant agreement) and will receive any outstanding leave and/or entitlements (where applicable).

A statement of service can be provided, but only on the request of the terminated employee.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 6.3 Workplace Health and Safety
- 8.6 Employee and Volunteer Grievance
- 8.7 Workplace Bullying, Discrimination and Sexual Harassment
- 8.9.1 Code of Conduct
- 8.9.2 Code of Conduct for the Interactions with Children and Young People
- 8.17 Fit for Work
- 8.25 Employee Remuneration and Entitlements
- 10.1.3 Responding to and Managing Non-Compliance
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.30 Conflict of Interest
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *Fair Work Act 2009(Cth) / Industrial Relations Act 2016 (Qld)*
- *Anti-Discrimination Act 1991 (Qld)*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.19-2021/1	Date of review	

8.25 Employee Remuneration and Entitlements

Policy Statement

The Approved Provider recognises the value of a high-quality workforce and acknowledges the contribution that pay and conditions have on employee satisfaction and performance. The Approved Provider/Employer will ensure that all employees are appropriately remunerated and receive entitlements in accordance with conditions that are no less than those prescribed in the relevant award.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the employment conditions for staff is lawful and reflect the relevant industrial instruments.• Respond to request for flexibility and above award conditions with care and timeliness.
Nominated Supervisor	<ul style="list-style-type: none">• Develop and publish a weekly roster that reflects the needs of the business and conditions outlined in the award.• Process and approve timesheets for pay run.• Report concern to the Approved Provider for clarification.

Procedures

Employment Relations

A current copy of the relevant award will be available at the service in a location accessible to employees. All agreement and employment conditions will reflect the minimum conditions outlined in both the award and the Queensland Employment Standards.

All employees will have a current employment agreement signed and held on file. The agreement will reflect the employee's classification and any relevant terms or conditions of their employment.

Workplace Flexibility

Request for flexibility arrangements

1. An employee seeking a workplace flexibility arrangement must make their request in writing (email) to the Approved Provider.
2. The Nominated Supervisor should, without prejudice, support employees to submit their request to the Approved Provider for determination.
3. Requests by the employee should include the following details:
 - a. State the change/request in sufficient detail to facilitate decision-making about the request
 - b. The reason for the request.

Decision-Making (by the Approved Provider)

1. The Approved Provider will acknowledge receipt of the employee's request and communicate potential timeframes for decision-making. The Approved Provider should, unless the circumstance does not permit, make a determination with 21 days.
2. The Approved Provider in considering the request will assess both merit and feasibility including:
 - a. The length of employment.
 - b. Level of qualification.
 - c. Employee's performance, conduct, and work history.
 - d. Financial impact and sustainability.
 - e. Impact on rostering and staffing composition.
3. The Approved Provider may:
 - a. grant the request
 - i. in full;
 - ii. in part; or
 - iii. subject to condition.
 - b. refuse the request.
4. The Approved Provider will give the employee written notice of the decision including the reasons for the decision, where relevant.

Remuneration Negotiation

To ensure the Approved Provider is able to provide a competitive employment arrangement recognising outstanding and/ or exemplary performance including the capacity to retain qualified, experienced and skilful employees, as the employer, they may enter into negotiated arrangements with above award conditions for employees.

In making such a decision, the employer will consider factors including the employee's:

- performance;
- experience;
- qualification and training;
- abilities and skills;
- work ethic and service history;
- feedback; and
- compliance history.

1. Employees may request a review of their remuneration by written request to the Approved Provider.
2. The Approved Provider will advise the employee of any outcome relating to the request.
3. Changes to the remuneration of employees will require formal agreement from the Approved Provider.

Roster

1. Rosters are completed by the Nominated Supervisor.
2. A fortnightly roster is published for staff with at least 7 days' notice.
3. Shift changes and request to fill unexpected vacancies may be communicated with less notice
4. The Nominated Supervisor will endeavour to accommodate the needs of employees where possible and where it will not significantly impact on the operation of the business.
5. Overtime will only be roster where prior approval from the Approved Provider has been granted.

Timesheets

1. All employees are required to document their hours of work a timesheet.
2. All timesheets are to be finalised for approval by Friday each fortnight.

Employment Concerns

Where an employee holds concerns or doubts about their working conditions, including the rate of pay, they should contact the Approved Provider directly for clarification.

Related Policies

- *8.3 Recruitment and Employment of Educators*
- *8.6 Employee and Volunteer Grievance.*
- *8.8 Employee Performance Monitoring and Review*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *Industrial Relations Act 2016 (Qld)*
- *Anti-Discrimination Act 1991 (Qld)*
- *Parents and Citizens Associations Award – State 2016*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.5-2021/1	Date of review	

8.28 Transition from Casual Employment Engagement

Policy Statement

OSHC recognises its employees, particularly casual educators, may seek to have increased stability of their employment. OSHC appreciates the corresponding advantages to the continuity of care and impact on employee wellbeing as a result of a more routine and ongoing employment arrangement.

All requests made to the Approved Provider will be considered on their individual merits and be based on reasonable business needs. The Approved Provider will undertake a fair assessment, balancing employee's wishes and business needs when deciding on the feasibility of an application.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Undertake a fair and reasonable assessment of the capacity of the service to accommodate employee requests.
Nominated Supervisor	<ul style="list-style-type: none">• Support employees to communicate requests to the Approved Provider.• Support decision-making by providing accurate information and judgement to the feasibility or ongoing commitments to employee engagements.
An employee seeking permanent engagement	<ul style="list-style-type: none">• Submit requests in writing with sufficient detail to support the Approved Provider in their decision-making.

Procedures

Request to Transition from Casual

4. A casual employee seeking to transition to a part or full-time engagement must make their request in writing (email) to the Approved Provider.
5. The Nominated Supervisor should, without prejudice, support casual employees to submit their request to the Approved Provider for determination.
6. Requests by the employee should include the following details:
 - a. Type of engagement the employee is seeking (part or full-time).
 - b. Where the request is for part-time, the number of hours per week the employee is seeking.
 - c. The reason for the request.

Decision-Making

5. The Approved Provider will acknowledge receipt of the employee's request and communicate potential timeframes for decision-making. The Approved Provider should, unless the circumstance does not permit, make a determination with 21 days (consistent with flexible work arrangement requests).
6. The Approved Provider in considering the request will assess both merit and feasibility including:
 - a. The length of employment.
 - b. Level of qualification.
 - c. Employee's performance, conduct, and work history.
 - d. Financial impact and sustainability.
 - e. Impact on rostering and staffing composition.
7. The Approved Provider may:
 - a. grant the request
 - i. in full;
 - ii. in part (offering a fixed-term contract or fewer hours than requested); or
 - iii. subject to condition (such as a change in responsibilities).
 - b. refuse the request (only on reasonable grounds).
8. The Approved Provider will give the employee written notice of the decision including the reasons for the decision, where relevant.

Conflicts of Interest

Where the Approved Provider a conflict of interest exists with the employee submitting the request and an Approved Provider, relevant procedures outlined in *8.3 Recruitment and Employment of Educators* will be followed.

Related Policies

- *8.3 Recruitment and Employment of Educators*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Industrial Relations Act 2016 (Qld)*
- *Parents and Citizens Associations Award – State 2016*
- *Anti-Discrimination Act 1991 (Qld)*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.*

E&CS Legislation Compliance

- *Education and Care Services National Regulations 299A.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.28-2021/1	Date of review	

8.29 Working with Children Check (Blue Card) Management

Policy Statement

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

Roles and Responsibilities

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

Procedures

Positive Notice Requirements for Employees, Volunteers and Governance

All employees, volunteers and executive members (Approved Provider members) of management must hold a current and valid Positive Notice for Child Related Employment blue card (or where relevant, have submitted an application for positive notice).

Volunteers **must** hold a positive notice before being engaged at the service in any capacity (see 8.5 *Volunteers*)

Prospective paid employees will not be engaged to work at the service without being in receipt of a current blue card/ or an application has been submitted for a blue card. Evidence of an application must be submitted to the service before being engaged in any employment.

Supporting a Blue Card Application

When supporting a prospective employee (or relevant other) making a blue card application the person supporting an application **must** provide every application with a warning that they must not sign an application for if they are a disqualified person. If an applicant is unsure whether they are a *disqualified person*, they should not complete an application form, and the service's representative should direct them to contact Blue Card Services immediately for further information.

The service representative should ensure they are using the most current version of an application form and that all sections have been completed.

Existing Blue Card Holders (Linking Positive Notice)

All employees, volunteers and executive members of management holding existing blue cards prior to their involvement with the service will be required to have their card validated online. The Nominated Supervisor will record evidence (printout) of their blue card status. Additionally, these persons will need to complete appropriate documentation to have their blue card linked to the service.

The P&C Executive members (the Approved Provider) are required to have a card issued for business operators.

Criminal History Changes

All persons who are required to hold a blue card must advise Blue Card Services if they have had a change in their police information. The employee may not be required to disclose the specific nature of the change to their employer, only that a change has occurred.

Where the Nominated Supervisor or Approved Provider becomes aware of changes to the police information of personnel, they are to report this information to Blue Card Services. A *change in police information notification* form must be lodged and the person **must not** continue in child-related employment (or volunteer engagement) until this has notification has been made.

High Risk Cases

The service’s Child and Youth Risk Management Strategy will outline the specific steps for responding to personnel whom there has been a change in police information. The strategies will include steps to be taken when the service has become aware that an employee/volunteer:

- has been issued with a negative notice
- is a known disqualified person, or
- has had their blue card or exemption card cancelled or suspended

The organisation must ensure the employee/volunteer does not continue to undertake regulated, child-related work within your organisation. This includes any position on a committee or executive where the person’s decision-making impacts on children within the organisation’s service environment

Blue Care Register

A blue card register will be maintained at the service containing the copies of blue cards of all employees, volunteers and executive members of management. The register will be referred to by the Nominated Supervisor/Administrator on a regular basis to track expiry dates.

Exiting Employees and Volunteers

The Nominated Supervisor (or where relevant, the Approved Provider) will notify Blue Card Services when a person leaves their engagement with the service. *An Applicant/cardholder no longer with organisation* form will be lodged to Blue Card Services to notify of this change. A record of this notification will be retained by the service.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 8.3 Recruitment and Employment of Educators
- 8.5 Volunteers
- 10.1 Managing Compliance with Legal Obligations
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *A New Tax System (Family Assistance) Act 1999 (Cth)*
- Australian Government Child Care Provider Handbook
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	
Date implemented:		Date families notified	
Version:	8.29-2021/1	Date of review	

Policy Group 9 – Families and Community

9.1 Access

Policy Statement

OSHC will support families exploring education and care service for their children through providing fair access and relevant information to parents and caregiver. OSHC is available to all eligible school age children, with a primary focus to meet the needs of parents who work or study and for children who attend OSHC State School. The service is non-discriminatory and provides education and care to children and families irrespective of background, culture, religion, gender, sexuality, disability, marital status or income.

All members of the community will receive respectful interactions with OSHC employees and the Approved Provider. OSHC will work collaboratively with potential families to understand and cooperate in planning to meet the needs of children intending to enrol in the service.

OSHC will prioritise children and families who are at risk of serious abuse or neglect or where working (or study) needs of families require the provision of care.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish equitable procedures to support fair access for families to utilise the service.• Ensure waitlist management is fair and effective.• Manage the service's capacity and future increase
Nominated Supervisor	<ul style="list-style-type: none">• Liaise with parents to collate enrolment and waitlist information.• Manage any potential waiting list, including communication with families and prioritising access.

Procedures

Priority of Access

A priority of access is developed where demand for places provided OSHC exceeds those available. In this instance a waiting list will be created and managed by the Nominated Supervisor (or relevant delegate). The priority of access will be given based on:

- the vulnerability of families (risk of serious abuse or neglect)
- the working (or study) needs of families - a child/ren of a sole parent who satisfies, or parents who both satisfy, the activity test through paid employment.
- students of OSHC State School will be given priority over children who attend other schools.

Waiting List

The Nominated Supervisor will report to the Approved Provider when a waitlist is imminent (bookings close to capacity). The Nominated Supervisor will coordinate bookings as to maximise permanent attendance/bookings.

The Nominated Supervisor (or relevant delegate) will provide information to families about the position on any waiting list when requested.

Related Policies

- 2.14 Bookings and Cancellations
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 9.9 Acceptance and Refusal of Authorisations
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.2 Approval Requirement
- 10.4 Setting, Reviewing and Managing Fees

- 10.8 Information Handling (Privacy and Confidentiality)
- 10.22 Determining the Responsible Person
- 10.32 Appropriate Governance
- 10.33 Managing Notifications
- 10.34 Administration of Child Care Subsidy (CCS)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *A New Tax System (Family Assistance) (Administration) Act 1999*
- *Australian Government Child Care Provider Handbook*
- *National Quality Standard, Quality Area: 6 - Collaborative partnerships with families and communities*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/10/21
Date implemented:	14/10/21	Date families notified	
Version:	9.1-2021/1	Date of review	

9.2 Enrolment and Orientation Policy

Policy Statement

The Service acknowledges its duty to ensure accurate and relevant information relating to the specific needs of each child is recorded and available. The Service enrolment process upholds its responsibility to obtain information in relation to the provision of quality education and care.

In addition to collecting enrolment information, the entry of a family into the Service is supported by a welcoming orientation process. The Service recognises that this is a critical step in forming a collaborative partnership with parents, children and families. The Service is committed to ensuring families are provided with relevant information and knowledge to the Service's program, routines, policies and practices.

The Approved Provider also recognises their duty to comply with *Education and Care Service National Regulations 2011* 168 (2)(k) and 160 -162.

Auxiliary Documentation

- 9.2.1 Family Handbook

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure enrolment records are kept for each child and contains the information set out in the <i>Regulations</i> • Ensure enrolment and orientation procedures are inviting and provide key information to new families. • Assess feedback and complaints in reviewing enrolment and orientation procedures.
Nominated Supervisor	<ul style="list-style-type: none"> • To liaise and coordinate enquiries for new enrolments, providing relevant information to parents and caregivers exploring OSHC services. • Undertake a re-enrolment process each year, where existing families update enrolment and booking information. • Collaborate with the Approved Provider to develop orientation practices, including communicating any feedback or complaints raised.
Responsible Person in Charge	<ul style="list-style-type: none"> • Understand the enrolment form contains key information to the care and wellbeing of children accessing the service. • Ensure privacy and confidentiality of enrolment information. • Support children's orientation of the service prior to or on their first arrival.
All Staff	<ul style="list-style-type: none"> • Access enrolment information as required for the provision of care and education of children accessing the service. • Support the orientation of families through active interaction and communication.

Procedures

Contact and Communication

The Nominated Supervisor is the key contact for parents and caregivers interested in accessing and enrolling into the Service. All new parents and families will be invited to meet with the Nominated Supervisor (or other delegate) to discuss the Service's operations and program before commencing with the service.

Family Handbook – is a summary of the Service's information helpful for families using the service. It outlines the Services program routines and key policies. A copy of the Family Handbook can be provided to prospective and new parents.

Families wishing to enrol their child/ren into the service will be provided with a copy of the Family Handbook, which outlines key information for families when using the service. Families will be directed to information on how they can begin the enrolment process.

Enrolment Process

The enrolment process will commence when a new family completes an enrolment form through our online portal 'Xplor. Once the enrolment form is submitted, an automatic email is sent to the Director for approval. The Director will contact the family and organize an initial meeting where the families will be provided with:

- A service enrolment pack,
- A tour of the service

Enrolment in the Sherwood School Aged Care Program (OSHC) is dependent upon a child's enrolment status at Sherwood State School, or past enrolment in the program. To enrol in the service a child must be:

- an enrolled, attending student at Sherwood State School; or
- a student who was enrolled in the OSHC at the conclusion of their grade 6 studies and is currently studying in grade 7; or
- a student enrolled and attending the OSHC in the school term prior to commencement of the school year, but who is enrolled at and attending another school

Xplor prompts families to complete the following information:

The enrolment form must be completed in full and contain the following for each child being educated and cared for. Details to be completed are:	
<input type="checkbox"/> Full name, date of birth and address of the child; <input type="checkbox"/> Gender of the child	
<input type="checkbox"/> Name, address and contact details of:	<input type="checkbox"/> each known parent of the child <input type="checkbox"/> any person who is to be notified of an emergency (if any parent cannot be immediately contacted) <input type="checkbox"/> any person who is an authorised nominee ¹ <input type="checkbox"/> any person who is authorised to consent to medical treatment or medication
<input type="checkbox"/> Details of any court orders, parenting orders ² or parenting plans ³ provided to the approved provider relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child <input type="checkbox"/> Details of any other court orders provided to the approved provider relating to the child's residence or the child's contact with a parent or other person;	
<input type="checkbox"/> Language used in the child's home <input type="checkbox"/> Cultural background of the child and, if applicable, the child's parents	
<input type="checkbox"/> Any special considerations for the child, for example any cultural, religious or dietary requirements or additional needs <input type="checkbox"/> Details of any dietary restrictions for the child	
<input type="checkbox"/> Authorisations for (regulation 161):	<ul style="list-style-type: none"> • medical and hospital treatment • transportation by ambulance service • any regular outings
<input type="checkbox"/> Health and medical information including (regulation 162): <ul style="list-style-type: none"> • The name, address and telephone number of the child's registered medical practitioner or medical service; and <input type="checkbox"/> if available, the child's Medicare number;	
<input type="checkbox"/> Any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy referred to above <ul style="list-style-type: none"> • specific healthcare needs of the child, including any medical condition; and • allergies, including whether the child has been diagnosed as at risk of anaphylaxis 	
<input type="checkbox"/> The immunisation status of the child <input type="checkbox"/> If a staff member has sighted a child health record for the child, a notation to that effect	

The terms of use will also include authorisation for the staff to:

- Administer first aid;
- Obtain medical treatment from a medical practitioner, hospital or ambulance;
- Transport a child by an ambulance;
- Apply/assist to apply SPF+30 sunscreen; and
- Take and/or display children's photographs
- The opportunity to access the service's policy and procedures

¹**Authorised nominee** - means a person who has been given permission by a parent or family member to collect the child from the education and care service

²**Parenting Order** - means a parenting order within the meaning of section 64B(1) of the *Family Law Act 1975*

³**Parenting Plan** - means a parenting plan within the meaning of section 63C(1) of the *Family Law Act 1975*, and includes a registered parenting plan within the meaning of section 63C(6) of that Act.

A child's enrolment **cannot be accepted** if all relevant information (as outlined above) is not completed by parents/caregivers.

Nominated Supervisors should consider the 4.19 - *Childhood Immunisation* policy prior to accepting any bookings and enrolment.

The Nominated Supervisor is to contact **parents** of children indicating an additional need for further clarification, follow-up and planning. The Nominated Supervisor is to ensure 4.17 Children with Medical Conditions is followed for children with additional medical needs (risk assessment, minimisation and communication plan development).

All enrolment records will be stored securely as outlined in the 10.8 *Information Handling [Privacy and Confidentiality]* policy. All information is only to be used for the purpose of which it is obtained. Parents may access their enrolment information at any time.

Orientation

Understanding of the service's environment, routines, care and education practices are important for new families to develop. The Nominated Supervisor on accepting a new enrolment will extend an invitation to parents and families to visit the service for a guided orientation. The Nominated Supervisor will outline key elements (including but not limited to):

- explain the routine and program
- indicate key facilities like toilets, bag racks, hand washing basins etc.
- explain the roles and responsibilities communicating with the service and collecting children
- discuss any medical or additional needs, and/or individual considerations to support the child
- answer any questions or concerns

During a child's first attendance at the Service the Nominated Supervisor/Responsible Person in Charge will sensitively support and welcome the child and take time to demonstrate the service's expectations, routines and facilities (including access to toilets, personal items, food, water etc.) in a manner that reflects the child's needs. This may be completed in large groups, such as at the start of the year with a new cohort of younger children.

Children will be shown who they can approach and talk to if they have a concern. All staff will be encouraged to ensure all children are supported as they build their engagement and orientation into the Service.

Related Policies

- 2.4 *Arrivals and Departures of Children*
- 2.11 *Supporting Additional Needs through Inclusive Practices*
- 2.14 *Bookings and Cancellations*
- 3.1 *Educational Program Design and Implementation*
- 3.5 *Excursions*
- 3.8 *Extra-curricular Activities*

- 4.2 Infectious Diseases
- 4.5 Incident, Illness, Injury or Trauma
- 4.6 Medication Administration
- 4.8 Sun Safety
- 4.12 Non-Smoking, Illicit Substance and Alcohol-free Environment
- 4.17 Medical Conditions
- 4.18 Administration of First Aid
- 4.19 Childhood Immunisation Policy
- 5.1 Food Handling and Storage
- 5.2 Food and Nutrition
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 9.1 Access
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 10.4 Setting, Reviewing and Managing Fees 10.6 Nominated Supervisor
- 10.8 Information Handling (Privacy and Complaints)
- 10.22 Determining the Responsible Person
- 10.34 Administration of Child Care Subsidy (CCS)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Department of Education and Training Child Care Provider Handbook*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; 6 – Collaborative partnerships with families and communities*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168(2)(k) and 160 -162*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/10/21
Date implemented:	14/10/21	Date families notified	
Version:	9.2-2021/1	Date of review	

9.3 Interactions and Communication with Families

Policy Statement

The service acknowledges the importance of effective communication with families and strives to encourage their participation and involvement to enhance the service provided.

Families are welcome to attend the service and talk to educators during its operations. The Approved Provider encourages families to voice their views in a way that will assist the service to be inclusive and responsive to individual's needs and wishes.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> Establishes a culture of openness, transparency and respectfulness.
Nominated Supervisor	<ul style="list-style-type: none"> Be approachable and responsive to families, including making time for discussion. Ensure relevant communication methods are established with families to support meaningful information sharing.
All Staff	<ul style="list-style-type: none"> Are to be inviting, courteous and respectful in all interactions with families.

Procedures

Parents will be able to access their child anytime they are in attendance at OSHC. Parents and caregivers will have access to meet with the Nominated Supervisor throughout daily sessions and/or by pre-arranged appointment to discuss any issues or concerns with respect to their child and/or the service.

On enrolment, a Family Handbook will be provided as part of the service enrolment package. The information contained in the handbook is to guide parents on the expectations for themselves and their child(ren) while they access the service. It will also summarise important aspects of the operations and highlight key policies.

Information for parents will also be communicated through:

1. Emails;
2. Office signage;
3. Meetings between Nominated Supervisor/educators and parents/guardians;
4. Posts and notifications sent through the service social networking site

Related Policies

- 2.11 Supporting Additional Needs with Inclusive Practices
- 3.1 Educational Program Design and Implementation
- 8.9.1 Code of Conduct
- 8.92.2 Code of Conduct for Interaction with Children and Others
- 9.4 Community Engagement and Participation
- 9.5 Feedback and Complaints Handling

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- National Quality Standard, Quality Areas: 6 - Collaborative partnerships with families and communities

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/10/21
Date implemented:	14/10/21	Date families notified	
Version:	9.3-2021/1	Date of review	

9.4 Community Communication and Participation

Policy Statement

The service acknowledges the importance of its local community and seeks to act both in the interests of its community and in enhancing the experience of children as members of the community. The service is committed to practice that reflects Quality Area Six of the National Quality Standards, in particular, building and engaging strong relationships with the community.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure the service's practices reflect the National Quality Framework, including the Service Philosophy reflects the views and wishes of the community.
Nominated Supervisor	<ul style="list-style-type: none">• Establish local connection with individuals and groups and seek out engagement opportunities• Collect and maintain relevant community resources to assist in facilitating and extending connection between families and their community.• Respond to community members with professionalism and in a manner that upholds the service's reputation and philosophy.
Educational Leader	<ul style="list-style-type: none">• Develop a program that is shaped by meaningful engagement with families and the community.
All Staff	<ul style="list-style-type: none">• Display conduct that is inclusive, respectful and inviting to the community.• Respond to opportunities for community connection/engagement with professionalism

Procedures

Engagement through the Program

The service will seek out opportunities for the service to connect and maintain relevant relationships with their local community. The service's planning will reflect opportunities to explore and experience the community surrounding OSHC, and where possible, invite individuals into the service to establish partnerships for children.

Families of the service will be encouraged to suggest suitable and appropriate community venues that may be considered for excursions, incursions etc.

The Educational Leader will be supported to ensure the service's practices are shaped by meaningful engagement with families and the community. The Education Leader will be encouraged to facilitate educators to actively engage in dialogue, open communication and partnerships with families.

Service Delivery and Engagement

The service is committed to upholding a philosophy and program that reflects the needs and worldview of the families that attend and participate. The service will review the Service Philosophy as needed. Opportunities for feedback and information gathering to reflect on the service's connection to the community will be an embedded practice in the quality improvement processes of the service.

Community Services and Resources

The service will retain a collection of helpful resources to support their community of families. The Nominated Supervisor is responsible for collecting and maintaining this catalogue of information and contacts.

Responding to the Community

The Nominated Supervisor will treat all enquiries and concerns seriously. All interactions with community members are to be respectful and courteous. Questions, answers and required information should be responded to promptly and with integrity.

Any concerns about the service which are identified can be managed through *9.5 Feedback and Complaints* policy.

Related Policies

- 3.1 Educational Program Design and Implementation
- 3.5 Excursions
- 8.2 Educational Leader
- 9.5 Feedback and Complaints
- 10.27 Self-Assessment and Quality Improvement

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Privacy Act 1988 (Cth)*
- My Time, Our Place - Framework for School Age Care in Australia
- *National Quality Standard, Quality Area: 6 - Collaborative partnerships with families and communities*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/10/21
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Version:	9.4-2021/1	Date of review	

9.5 Feedback and Complaints Policy

Policy Statement

The service recognises feedback and complaints can be essential to ensuring a high standard of education and care is provided to children accessing the service as well as the broader community. These mechanisms inform quality improvement practices, promote inclusive access to services required to meet the needs of individuals and uphold the rights of children and families.

The service acknowledges the right of children, parents, and others to raise a complaint about any issues that impact the service delivery or the quality of care provided. All individuals will be provided with accessible complaint procedures and information on opportunities to raise a complaint.

Concerns held by stakeholders can range in their level of severity/seriousness. The service's policy reflects this, recognising that **feedback** can be either positive, affirmative communication or alternatively observations about possible suggestions or improvements, whereas **complaints** are a more serious view that something is unsatisfactory or unacceptable. The service is committed to ensuring all claims are handled in a manner consistent with principles of natural justice. Individuals should be free to raise a complaint without fear of retribution or victimisation. The Approved Provider is committed to leading a culture that reflects an openness to address concerns held by stakeholders in a fair and reasonable manner.

The Approved Provider also recognises their duty to comply with the *Human Rights Act (Qld) 2019* and when relevant follow Departmental policy in handling complaints relating to potential violations of any human right, additionally the Approved Provider recognises duties to comply with *Education and Care Services National Regulations 168 (2)(o) and 173(2)b*.

Auxiliary Documentation

- 9.5.1 Complaint Record
- 9.5.2 Complaint Register Template

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Will ensure information about how to provide feedback or make a complaint is provided through enrolment information and staff induction. • Will support the Nominated Supervisor in handling any complaints raised by parents and staff by providing guidance and advice as required. • Periodically review the register of complaints to identify systemic issues not being addressed. • Ensure complaints are managed in a fair manner, giving an opportunity for issues to be managed free from bias. • Provide opportunity for complaints to be raised directly with the Approved Provider where the complainant feels it necessary to do so.
Nominated Supervisor	<ul style="list-style-type: none"> • Lead a culture of fairness and ethical practice, supporting individuals to raise a complaint without fear of retribution or victimisation. • Be the initial point-of-contact for most parent, community and employee raised complaints. • Demonstrate a willingness to constructively address feedback raised by stakeholders.
All Staff	<ul style="list-style-type: none"> • Be open to accept feedback and complaints raised by children and parents (or other stakeholders). • Communicate complaints through reporting lines described in the procedure. • Demonstrate a willingness to access complaints mechanisms, raising concerns or complaints as outlined in the procedure where appropriate.

- | | |
|--|---|
| | <ul style="list-style-type: none">• Acknowledge the opportunity to develop practice as a result of feedback and complaints. |
|--|---|

Procedures

Children

1. Children should be supported to express and raise concerns freely. Sensitivity may be required to fully understand the Children's perspectives and interests. Educators should demonstrate proactive openness to hear and understand the concerns and feedback raised by children.
2. All issues and concerns expressed by children will result in support and guidance by Educators, who will seek a timely and fair resolution.
3. Educators will communicate resolved and unresolved concerns to the Nominated Supervisor.
4. Where a resolution isn't immediately found, educators will model constructive behaviours and skills by assisting children to define the problem, its cause, discuss options and solutions, assess strategies and arrive at an agreed course of action.
5. Issues of a serious nature will be dealt with by the Nominated Supervisor and/or Approved Provider and in the appropriate forum.
6. Serious concerns raised by children will be communicated to parents at the earliest possible convenience, ensuring this is completed by the Nominated Supervisor or Responsible Person in Charge within 24 hours.
7. Serious concerns reaching the threshold for complaint may require incident reporting and notification to the Regulatory Authority (see 4.5 *Incident, Illness, Injury or Trauma* policy and 10.33 *Managing Notifications*).

Parents, Stakeholders and Employees

Parents will be advised of the Feedback and Complaints Policy on enrolment. Details will be contained in the OSHC Family Handbook. Information about the name and position of the person to whom complaints may be directed will be displayed in a prominent location. This will also include their contact information including telephone number and email address..

Feedback

Parent feedback is welcomed and encouraged. Parents are welcome to communicate their feedback constructively at any point. Where concerns cannot be immediately addressed, the Nominated Supervisor will follow up with the parents for discussion and steps to resolution. The person taking the feedback (Nominated Supervisor, educator etc.) should clarify if the person is indeed expressing feedback or if they would like to raise a complaint for further management and/or resolution.

Complaints Process

21. Parents, stakeholders and employees may raise their complaint either verbally or in writing. Any staff member can receive a complaint. Details of the complaint should be directed to the Nominated Supervisor for initial handling.
22. The Nominated Supervisor will be the preferred contact for initial complaints. However, the complainant will have the ability to raise concerns with the Approved Provider directly.
23. The Approved Provider should be the contact for complaints where:
 - a. the complaint is about the conduct of the Nominated Supervisor.
 - b. the complainant is not comfortable taking the complaint to the Nominated Supervisor.
 - c. the complainant is not satisfied with the Nominated Supervisor's handling of the complaint.
 - d. the complaint is regarding a matter of administration, management or governance.
24. Any complaints relating to misconduct of a staff member will be handled in accordance with relevant underperformance or misconduct procedures.
25. All complaints raised are to be documented on the 'Complaints Record' and recorded in the 'Complaints Register'. These records are stored in accordance with the service's information handling policy – securely, maintaining privacy and confidentiality through password protection.

26. The Nominated Supervisor will notify the Approved Provider of any complaints. The Approved Provider and Nominated Supervisor will discuss and plan who is most suitable to fulfil the role of complaint handler. They should be free from bias, impartial, have the capacity to manage the complexity and conflict, and be suitable within the criteria listed above (item 3).

Where a complaint relates to the possible violation or restriction on a **human right**, the Approved Provider will report the details to the Principal for handling. Where the complaint is referred for Departmental handling, the service will be directed by Departmental representatives before proceeding further.

27. Matters of a complaint relating to compliance with the *Education and Care Services National Law and/or Regulations* or the quality of care provided are required to be notified to the Regulatory Authority. If in doubt, a representative should refer to the Regulatory Authority for further guidance and/or assistance.
28. Where the nature of the alleged complaint is suitable to be managed by the Approved Provider (internally), the complaint handler will contact the complainant to discuss (within 48 hours), seeking to identify:
- the nature and details of the complaint
 - the resolution sought
29. Where a resolution can be easily addressed, the complaint handler will collaborate an action plan with the complainant and confirm the resolved status of the complaint. These items will be documented by the complaint handler and the complaint will be considered finalised.
30. Where resolution is not easily sought due to:
- strong dispute of the nature of the complaint or objection to the allegations,
 - the conclusion will benefit from procedural fairness,
 - previous resolutions have been unsuccessful, or
 - there is a conflict of interest;
- the Approved Provider will take steps to either mediate between the relevant parties (if appropriate) or investigate the matter to conclusion.
31. The complaint handler will notify the complainant of the intention to either undertake mediation or investigation. The complaint handler will also outline anticipated timelines of either process with the complainant at this point. All anticipated timelines should be reasonable in the circumstance.
32. The mediation or investigation may be facilitated by the Approved Provider or outsourced to a third-party. Any mediator or investigator appointed should be free from bias, impartial and have the capacity to undertake the task.
33. Where an investigation is undertaken - the investigator will gather relevant information, including statements from the complainant and/or additional information from relevant parties. The investigator's role is limited to establishing the facts based on the evidence at hand and the balance of probability. The investigator will report back to the Approved Provider addressing if they have found the allegation to be either be substantiated or unsubstantiated.
34. The Approved Provider will review the findings of any investigation and provide an outcome to the complainant.
35. All finalised documentation and reports will be stored confidentially (see *10.8 Information Handling (Privacy and Confidentiality)*).

Quality Improvement

The Nominated Supervisor and Approved Provider will review the complaints register periodically to identify opportunities to enhance the quality and address systemic issues not yet identified.

Related Policies

- 8.6 Employee and Volunteer Grievance
- 9.3 Communication with Families
- 9.4 Communication with Community

- 10.8 Information Handling (Privacy and Confidentiality)

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Department of Education and Training Child Care Provider Handbook*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; 6 – Collaborative partnerships with families and communities; and 7 – Governance and leadership*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(o), 173(2)b.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	14/10/21
Date implemented:	14/10/21	Date families notified	
Version:	9.5-2021/1	Date of review	

9.5.1 Complaints Handling Flowchart

9.9 Acceptance and Refusals of Authorisation

Policy Statement

The Approved Provider acknowledges the importance of ensuring parents/guardians/authorised nominees are aware of the process for authority to be given and/or refused for children to participate in relevant aspects of the program through the initial enrolment procedure. Such authorisations and/or refusals must be received in writing and will be handled in accordance with the service's Information Handling (Privacy and Confidentiality) Policy.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(m), 158, 160-162*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will ensure parents have the opportunity to authorise or decline relevant elements of the service's programs• Ensure these requests are followed by the service
Nominated Supervisor	<ul style="list-style-type: none">• Lead the service authorisation and record keeping practices to ensure information is received and collate information in a manner that ensures authorisations are followed as parents have requested.• Communicate with parents and support flexibility of amending authorisations.

Procedures

Through the service enrolment process parents will have opportunity to give and/or refuse authority for the following (including but not limited to) the following:

- Sharing of information, relevant to the care of their child (e.g. health, wellbeing and/or cultural requirements) amongst educators and/or support workers who are working within the OSHC;
- Provision of emergency medical treatment including obtaining any medical, hospital and/or ambulance service in the case of an accident or emergency involving their child;
- Service educators to liaise with other health/medical professionals in relation to the care of their child;
- Service educators to assist their child to apply a SPF 30+ sunscreen prior to outdoor activities; and
- Service educators to take photos of their child to record important events and special activities as part of the program.
- Any personal information shared on social media/publications.

Parent authority, in writing, will be required before any child will be allowed to leave the approved area of the service. This includes (but is not limited to):

- excursions;
- extra-curricular activities; and
- Regular outings.

The service will waive compliance with this policy where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. The service can administer medication without authorisation in these cases, provided they contact the parent/guardian as soon as practicable after the medication has been administered.

Procedures for parents/guardians/authorised nominees to give and/or refuse authority for children's participation is contained within the relevant policies of this service (e.g. Excursions Policy, Extra-curricular Activities Policy etc.).

Parents/guardians are responsible for and have the right at any time to change authorisations given to the service in relation to their child and their child's participation in the program. This may be done through completion of an updated enrolment form or other written authorisation.

Related Policies

- 2.4 Arrivals and Departures of Children

- 2.11 Supporting Additional Needs with Inclusive Practices
- 2.14 Bookings and Cancellations
- 2.15 Children’s Belongings and Property
- 2.19 Children’s Media Viewing
- 3.4 Homework
- 3.5 Excursions
- 3.7 Physical Activity
- 3.8 Extra-Curricular Activities
- 3.13 Water Safety
- 4.5 Incident, Illness, Injury or Trauma
- 4.6 Medication
- 4.8 Sun Safety
- 4.17 Medical Conditions
- 5.1 Food Handling and Storage
- 5.2 Food and Nutrition
- 8.9 Applying the Codes of Conduct
- 8.9.1 Code of Conduct
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 9.2 Enrolment
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management
- 10.1 Managing Compliance with Legal Obligations
- 10.2 Managing compliance with the National Quality Framework (NQF)

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Privacy Act 1988 and Regulations 2013
- National Quality Standard, Quality Area 7 – Governance and leadership

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(m), 158, 160-162.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	19/10/21
Date implemented:	19/10/21	Date families notified	
Version:	9.9-2021/1	Date of review	

9.10 Visitors

Policy Statement

The service seeks to provide an open and friendly environment, which values and actively encourages community participation and inclusion. In doing so, the service will remain compliant with education and care service legislation providing a safe and supervised environment for children. All visitors (and non-authorised persons) will remain in direct supervision by an educator while children are attending the service.

Visitors are defined as all people other than:

- Employees;
- Children enrolled and attending the service; and
- Parents, caregiver, or authorised persons delivering or collecting children from the service.

The service recognises its obligations to comply with section 170 of the *Education and Care Services National Law*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish effective procedures to ensure suitable persons interact directly with children being cared for by the service.• Establish mechanisms to uphold the safety and protection of children being cared for by the service.
Nominated Supervisor	<ul style="list-style-type: none">• Provide supervision and leadership to ensure established procedures are followed.
All Staff	<ul style="list-style-type: none">• Ensure children are not left unsupervised with visitors or unauthorised persons.• Support all visitors to present to the OSHC office to be signed in/identified.• Monitor for and respond to situations that might risk the safety and wellbeing of children.

Procedures

Any persons unknown to educators of the service will be requested to present to the OSHC office in order to identify themselves. The Nominated Supervisor or Responsible Person will confirm their identity with enrolment records.

Invited Visitors

Other visitors to the service could include incursion staff members or other community members supporting the service's program. All invited visitors will be asked to document their visit in the **Visitor Record**. Regardless of their engagement, where children are being provided care and education, an educator will remain in direct supervision of visitors at all times.

Community Members

At times teachers or other relevant school community members may be in the vicinity of the service's activities. Educators welcome collaboration and participation by the school community but will ensure that where children are being provided care and education, an educator will remain in direct supervision at all times

Suspicious or Harassing Persons

Any persons who do not have a valid or suitable reason for being on the premises will be respectfully asked to leave by the Nominated Supervisor, or where this is not practicable, by any other educator.

Where any educator is suspicious or reasonably believes there may be a potential threat to safety or wellbeing for any persons will initiate the service's *Lockdown Plan* (see 7.2.3).

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children

- 2.20 Supervision of Children
- 7.2 Emergency Evacuation, Lockdown and Drills
- 7.2.2 Lockdown Plan
- 8.9 Applying the Codes of Conduct
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.22 Determining the Responsible Person
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *Privacy Act 1988 (Cth)*
- *Work Health Safety 2011 (Qld)*
- *National Quality Standard, Quality Areas: 2 – Children’s health and safety; and 6 - Collaborative partnerships with families and communities.*

E&CS Legislative Compliance

Education and Care Services National Law Act Section 170

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	19/10/21
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Policy Group 10 – Governance, Management and Administration

10.1 Managing Compliance with Legal Obligations

Policy Statement

The Approved Provider is committed to ensure every aspect of OSHC's operations is compliant with all relevant legal obligations through the various roles as a business, employer and Education and Care Service.

The Approved Provider will be assisted by the service's management to develop sound procedures and systems to meet the outcomes and expectations required. The Approved Provider is committed to ongoing quality improvement and will routinely review and assess the efficacy of implemented action to achieve compliance. All employees will be supported and encouraged to communicate issues or concern of legal compliance to their manager or the Approved Provider for the assessment, review and (potentially) the development of practices or procedures.

Any and all instances of non-compliance with legal obligations will be treated seriously. Review and evaluation to address issues will be a priority of the Approved Provider and its management team.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Lead a culture of quality service delivery and sound business practices.• Active in monitoring and supervising service outcomes and practices to ensure the service is meeting obligations and expectations.• Respond diligently to any concern or non-compliant issues, including relevant reporting.
Nominated Supervisor	<ul style="list-style-type: none">• Support the supervision and monitoring of practices and the implementation of procedures.• Immediately notify the Approved Provider of concern or instances of non-compliance.• Provide insight to opportunities for practice and policy development to support the outcomes and compliance of the service.
All Staff	<ul style="list-style-type: none">• Ensure practices and conduct reflect the service policies, procedures and management instructions at all times.• Participate in quality improvement practices and reviews by contributing ideas and perspectives on opportunities for more robust systems and procedures to meet obligations and responsibilities.

Procedures

Awareness of Obligations

The Approved Provider is committed to having a sound understanding of its legal obligations and will maintain an ongoing and contemporary understanding of the responsibilities of themselves and their employees.

The Approved Provider will collaboratively develop and implement policies and procedures to assist in meeting the organisation's legal obligation. This document will aim to reflect and articulate the responsibilities of all employees, managers and volunteers of the organisation.

Commitment to Quality Systems and Practices

All developed and implemented practices should reflect the high-quality expected by the Approved Provider.

The Approved Provider, Nominated Supervisor and all other relevant stakeholders will be supported to collaborate on sound procedures and practices to uphold a commitment to compliant and high-quality practices.

Legislative Context

In addition to compliance with the *Education and Care Services National Law, 2010 and Regulations 2011* (see Policy 10.1), the service will actively work towards compliance with:

- *Family Assistance Law (Child Care Subsidy)*;

- *Working with Children (Risk Management and Screening) Act 2000 and Regulations 2011;*
- *Child protection and workplace safety legislation;*
- *Employment Legislation, including:*
 - *Industrial Relations Act;*
 - *Workplace health and safety legislation/Code of Practice; and*
 - *Anti-discrimination legislation*
- *Any other law(s) that impacts or prescribes how the provision of OSHC should be conducted.*

Compliance monitoring strategies will be implemented, including:

- Developing compliance management tools for use within the service on a regular basis (i.e. checklists and standards);
- Where there are expectations and responsibilities for legislative compliance, the Approved Provider will ensure policy or instruction is provided to ensure employees and volunteers meet the service's obligation.
- The Approved Provider will ensure relevant training and instruction to all employees and volunteers is provided to outline appropriate expectations of conduct and statutory responsibilities.
- Monitor the implementation and compliance of the organisation's policies and compliance systems;
- Review and update compliance checklists on a regular basis or as new information regarding changes to the implementation of regulations, legislation or standards becomes available;
- Seeking reputable organisations to conduct external audits and to provide reports regarding compliance issues to the service on a regular basis; and
- Acting on any relevant recommendations or notification to changes in compliance requirements immediately.

Information will be made accessible to families, volunteers and employees regarding the service policies and procedures in relevant handbooks as well as having access to a full copy of the service policies and procedures at the service.

Updates, changes and other relevant information will be communicated to families, volunteers and employees through appropriate newsletters, flyers and other methods of communication.

Responding to Non-Compliance

Any instances of non-compliance will be addressed with timeliness, ethical integrity and diligence.

In the event of a non-compliant or reportable incident, the Approved Provider will provide all relevant notifications to specific authorities, as it applies.

In responding to compliance incidents and concerns the Approved Provider will take a sound approach to review evidence and resources to address any applicable procedures, practices and expectations. The service will take immediate action to remedy any non-compliance and policy/procedure breaches identified through:

- Internal compliance monitoring activities (in accordance with 10.10)
- External compliance monitoring activities such as:
 - Spot checks undertaken by the Regulatory Authority
 - External audits

Compliance History Record

In accordance with Regulation 167, the service will keep a record of its compliance history and make it accessible upon request. The history must include:

- Details of any amendment of the service approval made by the Regulatory Authority under section 55 of the Law;
- Details of any suspension of the service approval (other than voluntary suspension); and
- Details of any compliance direction or compliance notice issued to the approved provider in respect of the service.

The information in the service's compliance record must not include any information that identifies any person other than the approved provider.

Policy and Procedure breaches

Any action undertaken by employees, volunteers and management that is inconsistent with service policy and procedure shall be considered a breach.

The action taken to remedy breaches may include:

- Reviewing the policy and procedure and updating as required
- Retraining in the policy and procedure
- Undertaking performance management procedures (see 8.19 *Underperformance, Misconduct and Disciplinary Actions*)
- Policy and procedure breaches resulting in non-compliance with the law will be reported in accordance with policy (See 10.33 *Managing Notifications*)

Positive Notice Blue Card Compliance and Breach action

- All employees (Paid or Exemption), volunteers (Volunteer) and executive members of management (Business Owners) must hold a current and valid Working with Children Check – Blue Card.
- Prospective paid employees shall not be engaged to work at the service until appropriate application for a blue card has been made. Required evidence of such application shall be maintained at the service.
- A blue card register will be maintained at the service containing copies of blue cards of all employees, volunteers and executive members of management. The register shall be referred to by the Nominated Supervisor/Administrator on a regular basis to track expiry dates.
- All employees, volunteers and executive members of management holding existing blue cards prior to their involvement with the service shall be required to complete appropriate documentation to have their engagement with the service recorded e.g. <https://www.bluecard.qld.gov.au/pdf/forms/DJAG008-Link-an-applicant-or-cardholder.pdf>.
- All employees, volunteers and executive members of management shall be provided with information regarding their responsibilities in holding a blue card.
- Any breaches to these obligations will be reported to the Approved Provider and immediate action taken to remedy the breach.

Related Policies

- 2.10 *Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- 2.11 *Supporting Additional Needs with Inclusive Practices*
- 2.12 *Managing Duty of Care – Children who Arrive at the Service Without a Booking*
- 3.1 *Educational Program Design and Implementation*
- 6.3 *Workplace Health and Safety*
- 7.1 *Emergency Equipment and Facilities*
- 7.2 *Drills and Evacuations*
- 8.3 *Recruitment and Employment of Educators*
- 8.29 *Working with Children Check (Blue Card) Management*
- 10.1.1 *Managing compliance with the National Quality Framework (NQF)*
- 10.1.2 *Approval Requirement*
- 10.1.3 *Responding to and Managing Non-Compliance*
- 10.1.4 *Managing Other Legal Obligations and Requirements*
- 10.6 *Nominated Supervisor*
- 10.7 *Insuring Risks*
- 10.32 *Appropriate Governance*
- 10.33 *Managing Notifications*

Relevant Laws and Provisions

- *A New Tax System (Family Assistance) Act 1999 (Cth)*
- *Anti-Discrimination Act 1991 (Qld)*
- *Building Fire Safety Regulation 2008 (Qld)*

- *Child Protection Act 1999 (Qld)*
- *Disability Discrimination Act 1992 (Cth)*
- *Education and Care Services National Law Act 2010 and Regulations 2011*
- *Electrical Safety Act 2002 (Qld)*
- *Fair Work Act 2009(Cth)*
- *Fire and Emergency Service Act 1990 (Qld)*
- *Food Act 2006 (Qld)*
- *Health (Drugs and Poisons) Regulation 1996 (Qld)*
- *Industrial Relations Act 2016 (Qld)*
- *Privacy Act 1988 (Cth)*
- *Public Health (Medicinal Cannabis) Act 2016 (Qld)*
- *Public Health Act 2005 (Qld)*
- *Queensland Education (General Provisions) Act 2006 (Qld)*
- *Racial Discrimination Act 1975 (Cth);*
- *Sex Discrimination Act 1984 (Cth)*
- *Transport Operations (Road Use Management) Act 1995 (Qld)*
- *Work Health Safety Act and Regulations 2011 (Qld)*
- *Working with Children (Risk Management and Screening) Act 2000 (Qld)*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

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10.2 Managing compliance with the National Quality Framework (NQF)

Policy Statement

As an education and care service, Sherwood OSHC is committed to provide quality and legislative compliant education and care for our community. In doing so we recognise our obligation to meet statutory requirements outlined in the National Quality Standard and the requirements for Approved Providers and Nominated Supervisors under the *Education and Care Services National Law Act and Regulations*. The management and governance of the service have been designed and developed in such a way as to best fulfil our responsibilities to educate and care for children. The service expects all personnel (staff and the Approved Provider) to carry out the agreed policies and procedures of the service when discharging their duties.

The service's Philosophy (see Policy 1.1) reflects the commitment quality education and care consistent with the National Quality Framework. The service's Philosophy reflects the values promoted by the Approved Provider and the Nominated Supervisor and underpins all elements of the service's operations.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 3.1 Educational Program Design and Implementation
- 8.2 Educational Leader
- 8.8 Employee Performance Monitoring, Review and Management
- 10.6 Nominated Supervisor
- 10.22 Determining the Responsible Person
- 10.1 Managing Compliance with Legal Obligations
- 10.1.2 Approval Requirement
- 10.1.3 Responding to and Managing Non-Compliance
- 10.8 Information Handling (Privacy and Confidentiality)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Develop and implement policies, procedures and systems to uphold compliance with the National Quality Framework. • Monitor and respond to identified issues in a timely and professional manner.
Nominated Supervisor	<ul style="list-style-type: none"> • Implement procedures to ensure the day-to-day compliance of the service. • Address issues in consultation with the Approved Provider.
All Staff	<ul style="list-style-type: none"> • Follow the service's policies and procedures.

Procedures

Policies and Procedures

- The service's policies and procedures have been developed to be consistent with the requirement of the provision of the National Quality Framework.
- The service will regularly review and update written policies for the conduct of the service to reflect best practice and legislative requirements
- The service has developed and managed the implementation of policies required by the *Education and Care Services National Regulation 168* and items outlined in the *National Quality Standard*.

Day-to-Day Compliance

- The Approved Provider will appoint a suitable and qualified Nominated Supervisor for the day-to-day management of the service's operations (see *10.6 Nominated Supervisor*)
- The Nominated Supervisor to be responsible for day-to-day compliance of the NQF through:
 - Monitoring established systems and processes to ensure compliance with the NQF;
 - Providing ongoing training to all service employees on compliance with the NQF;
 - Monitor, record, and acting on non-compliance by the service or its employees (see Policy 10.1.3);

- The Nominated Supervisor is to report on all NQF compliance matters to the Approved Provider; and;
- Maintain up-to-date knowledge of the *Education and Care Services National Law, Regulations* and the National Quality Standard which may affect or require an update to any of the policies and procedures of the service.

Consultation and Collaboration

The Nominated Supervisor and Approved Provider will ensure that all educators within the service:

- Are consulted as appropriate in the development and modification of all relevant policies and procedures;
- Are provided with an up-to-date Educator Handbook containing relevant information to support and guide their understanding of the service's policies and procedures; and
- Are provided with suitable instruction to their obligations in ensuring compliance with Education and Care Legislation on employment (see *8.3 Recruitment and Employment of Educators*)

Professional Support and Supervision

The Nominated Supervisor in conjunction with the Approved Provider is responsible for regular supervision and support of educators (see *8.8 Employee Performance Monitoring, Review and Management*).

Access to Legislation

A copy of the *Education and Care Services National Law* and *National Regulations* will be made accessible at the service's premises at all times for use by the Approved Provider, Nominated Supervisor, staff members, volunteers and parents of children at the service.

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *'My Time, Our Place' Framework for School Age Care*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

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10.2.1 Approval Requirements

Policy Statement

As part of the service risk management and compliance obligations, the Approved Provider and the Nominated Supervisor/Coordinator will jointly be responsible to ensure that the service complies with the approval requirements under the *Education and Care Services National Law 2010 and Regulations 2011*.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 3.1 Educational Program Design and Implementation
- 8.2 Educational Leader
- 10.6 Nominated Supervisor
- 10.22 Determining the Responsible Person
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.3 Responding to and Managing Non-Compliance
- 10.8 Information Handling (Privacy and Confidentiality)

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure service/s does not operate at any time a person or body does not hold a current approval • Submit a written application to the relevant regulatory authority when seeking Provider or Service Approval. • Provide notification of relevant information including Nominated Supervisor information and location information.
Nominated Supervisor	<ul style="list-style-type: none"> • Provide written consent to their role.

Procedures

An application for Provider Approval must be made, in writing, to the relevant regulatory authority prior to the service being operational.

An Approved Provider may apply in writing, to the regulatory authority for Service Approval to operate an education and care service and will be responsible for the management and control of the service.

Information required to be provided to the regulatory authority as part of the service approval process includes, but is not limited to:

- The location and street address of the proposed service; and
- Plans prepared by a building practitioner showing the location of:
 - All buildings, structures, outdoor play and shaded areas;
 - Location of entry and exits;
 - Location of toilets and hand washing facilities;
 - Floor plan showing unencumbered indoor and outdoor spaces; and
 - Calculations verifying regulated space requirements.
- A right to occupy (See Policy 6.7 Occupancy Agreement)

As part of the service approval process, a Nominated Supervisor for the service must be delegated providing written consent to perform in this role (see Policy 10.6). A notification must be made to the Regulatory Authority about the Nominated Supervisor/s (see Policy 10.33).

Whilst the service provides, or aims to provide, education and care for school age children, the Approved Provider and the Nominated Supervisor are jointly responsible to ensure that the service will not operate at any time if some person or body does not hold a current approval in respect of the service.

The Approved Provider/ and the Nominated Supervisor are jointly responsible to ensure that:

- The service complies at all times with the specific conditions of the approval applicable to the service;
- The approval is renewed (by way of payment of annual fee) and kept current in accordance with the legislation; and

- The relevant current Provider Approval and Service Approval is to be kept on display at the service whenever the service is provided education and care to children.

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

Policy Controls			
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10.3 Budgeting, Procurement and Financial Planning

Policy Statement

The Sherwood OSHC Approved Provider seeks to implement measures which provide financial protection and minimise the risk of fraudulent, inappropriate or negligent financial practices. The service takes a responsible approach to fiscal planning and spending to ensure these risks are well managed. The service's financial management practices are designed and implemented to protect both the financial reputation of the organisation and its ongoing viability.

To ensure the effective and efficient management of the service, the Approved Provider and Nominated Supervisor will work collaboratively together to develop workable and responsible budgets and financial planning guidelines for the ongoing operation of the service.

The following principles will be adopted and reflected all purchasing decisions of the service:

- Open, transparent and effective communication;
- Value for money;
- Enhancing the capabilities of local business and industry;
- Environmental protection; and
- Ethical behaviour and fair dealing.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Establish sound processes for the service's financial management consistent with the P&C Accounting Manual. • Ensure budgets are prepared and are adequate to meet the needs of providing quality education and care. • Use judgement and act in a manner that supports the principles of the policy for purchasing decision.
Nominated Supervisor	<ul style="list-style-type: none"> • Monitor the service's day-to-day spending and financial management, ensuring compliance with organisational policy and procedures. • Support the Approved Provider in preparing, reporting and reviewing service budgets and financial reports. • Coordinate and supervise the processing of fees and income. • Use judgement and act in a manner that supports the principles of the policy for purchasing decision. • Report any concerns or issues immediately to the Approved Provider.
All Staff	<ul style="list-style-type: none"> • Follow the service's procedures for spending within the level of authority, approval or delegation.

Procedures

Annual Budget

1. An annual service budget will be prepared for approval by the Approved Provider. It will be collaboratively developed by the Nominated Supervisor, Treasurer and other relevant employees.
2. The service budget will be tabled each year at the P&C AGM.
3. The budget will reflect the provision of quality care and include at least the following items:
 - a. Staffing arrangements (remuneration and associated costs for qualified and adequate staff)
 - b. Facilities and asset maintenance/replacement
 - c. Program, medical and safety equipment (or replacement)
 - d. Professional development needs
 - e. Costs of care (food, consumables etc.)
4. The Approved Provider and Nominated Supervisor may seek external expertise to inform budgets using relevant industry standards.

The service's approved budget will form the standard purchasing delegation for the Nominated Supervisor to purchase or procure items using the following guide to approval.

Purchasing and Procurement

<i>Items under \$500</i>	<ul style="list-style-type: none"> • General purchasing for day-to-day operational items such as groceries, consumables, arts and crafts materials and replaceable items such as sports equipment will be done in accordance with the approved service budget by (or overseen by) the Nominated Supervisor. • The Approved Provider will ensure that the Nominated Supervisor has access to accounts for the efficient purchasing of day-to-day items. • Purchasing of items of less than \$500 includes the use of petty cash or use of bank or other business accounts (e.g. Officeworks or grocery account). • Purchases on the debit card should only be used for items under \$500.
<i>Items \$500 to \$5,000</i>	<ul style="list-style-type: none"> • The purchase value of single items over \$500 should be approved by the Approved Provider prior to purchase, even if the items have been included in the service's annual operational budget. • Other purchase requests must be in writing to the Approved Provider of the service. The responsibility for ordering will be with the service Nominated Supervisor or relevant delegate. • In extenuating circumstances, authorisation for purchases of single items over \$500 may be approved in events of emergency where two approved members of the executive have been contacted and agreed to the expense. Documentation of such discussion will be made and presented at the next Approved Provider meeting.
<i>Items above \$5,000</i>	<ul style="list-style-type: none"> • All purchases over \$5,000 will require two written quotes or research evidence. • Purchases over \$20,000 will require three written quotes or research evidence depending on the scope of purchase.

The Approved Provider will ensure that the purchasing policy does not negatively impact on the efficient operations of the service and that all purchase requests are followed up in a timely manner.

The service will avoid using cash for purchasing, where possible. The Approved Provider has made debit card facilities available. Any staff using the debit card must only do so for purchases they are authorised to make. All records must be retained and stored within Xero (bookkeeping software).

All records will be reconciled by the end of each month. The Nominated Supervisor will work with the bookkeeper and P&C Treasure to provide financial records for evidence of spending.

Related Policies

- *3.5 Excursions*
- *6.1 Space and Facilities Requirement*
- *6.2 Resources and Equipment*
- *8.4 Educator Professional Development and Learning*
- *8.9.1 Code of Conduct*
- *8.25 Employee Remuneration and Entitlements*
- *9.5 Feedback and Complaints Handling*
- *10.1 Managing Compliance with Legal Obligations*
- *10.1.2 Approval Requirement*
- *10.2 Role and Composition of OSHC Subcommittee*
- *10.4 Setting, Reviewing and Managing Fees*
- *10.7 Insuring Risks*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *10.9 Risk Management*
- *10.17 Strategic Planning*
- *10.26 Social Media and ITC Usage*
- *10.30 Conflict of Interest*
- *10.32 Appropriate Governance*

Relevant Laws and Provisions

- *Accounting Manual for Parents & Citizens' Associations (P&C managed services only)*
- *Purchasing Policies and Procedures for Parents and Citizens Associations*
- *Australian Government Child Care Provider Handbook*
- *National Quality Standard, Quality Area 7 – Governance and leadership.*

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10.4 Setting, Reviewing and Managing Fees Policy

Policy Statement

The service aims to provide a quality service to families at a reasonable cost. The Approved Provider will set fees based on the annual budget required for the provision of a quality Outside School Hours Care service in keeping with the service's philosophy statement, program goals, and these policies and procedures. Child Care Subsidy is available to all families who meet eligibility guidelines (including residency, activity and immunisation).

The Service will issue a Statement of Fees to account holders each week consistent with the billing cycle. Account holders (parents and carer) are to notify the Nominated Supervisor if they believe there is an error in their billing or fees charged.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 2011* 168 (2)(n) and 172(2).

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Undertake an annual review of fees charged based on annual budget required for the provision of quality OSHC.• Comply with Child Care Subsidy requirement including the management being 'fit and proper persons'.• Ensure systems to manage fees (including third-party software) and record keeping practices reflect the requirement of the Child Care Provider Handbook.
Nominated Supervisor	<ul style="list-style-type: none">• Respond to concerns or issues raised by parents/account holders.• Ensure practices reflect the requirements outlined in the Child Care Provider Handbook.• Communicate accrued debts and payment issues to the Approved Provider.
Administrator	<ul style="list-style-type: none">• Undertake the issuing of statement and collection of fees as directed by the Approved Provider and procedures below.• Submit session report and enrolment information to Department of Human Services.• Collect payments from parents/account holders and issue receipt.• Monitor account debts and liaise with parents/account holders.

Procedures

Fee information is displayed in a prominent location near the entrance of the OSHC building.

Fees are reviewed annually by the Approved Provider in consultation with the Nominated Supervisor. Typically, fee adjustments will occur at the start of each school year. Fee increases are based on the provision of quality Outside School Hours Care, reflecting the costs associated with meeting the service's philosophy, goals of the program and within the framework of the Service's policy and procedures. Communication of fee changes occur at least **14 days** before making changes to the rate of fees. Notification occurs via email, signage near entrance and the newsletter.

Casual Fees

Where possible, a 14-day notice for casual bookings to be made, however casual bookings can be made, subject to availability, up until the commencement of the session.

Vacation Care Fees

Excursion and incursion fees are compulsory according to days booked and fees will be calculated following a cost analysis for each event.

Issuing of Statements and Payment of Fees

Fees will be paid, for all days booked, by Friday each week.

A statement will be issued via email each week for all families showing the previous week's charges and transactions. The statement will show reduced fees and estimated reduced fees for each child receiving Child Care Subsidy. Accepted payment methods include EFT and direct deposit. A receipt will be issued for all monies received and updated statements will itemise the fees paid.

Child Care Subsidy

The appropriate personnel will keep parents informed about the availability of Child Care Subsidy (CCS) by:

- Advising all parents of their option to apply for Child Care Subsidy with Centrelink through information provided in the family handbook; and
- Making information available for parents in newsletters, on websites, through Facebook page and by email.

To be eligible for reduced fees families are required to provide all personal information as requested on the enrolment form. Full fees will be payable without the subsidy until the service receives current and correct information from the family such as CRNs and that information has been acknowledged by Centrelink. Families should lodge their claim for Child Care Subsidy prior to enrolling their child. Subsidy claims can only be backdated 28 days before the claims were made.

Credit for fees already paid will be made in accordance with the Australian Government's Child Care Provider Handbook.

All CCS records will be kept for 7 years from the last entry on the record in accordance with the Australian Government's Child Care Provider Handbook (see Policy 10.28).

Late Collection Fees

Closing time is 6.00pm. Parents who collect their children after this time will incur a late fee of \$20 for the first 15 minutes and \$1 per minute thereafter.

Overdue Fees

Parents in hardship are encouraged to discuss their matters with the Nominated Supervisor to explore possible options and access to additional supports prior to account being in arrears.

1. Where there are outstanding fees and no payment has been made in at least 2 weeks the Nominated Supervisor will prompt the parent verbally and confirm the agreed arrangement via email.
2. If no payment has been received as agreed or where there has been consistent failure to pay accounts, the Approved Provider will be notified and will contact the parent/account holder for immediate remedy.
3. The Approved Provider will outline the terms of payment of the service and seek to address an ongoing resolution. Parents will be informed that continued enrolment is dependent on the payment of the fees outstanding.
4. Where no contact can be made, or where payment of fees continues to have not been received within the agreed timeframe, the enrolment will be suspended and the debt may be referred to a collection agency (or QCAT).
5. Where resolution through suspension has not been achieved the Approved Provider may, in its discretion, cancel the enrolment and suspend any future attendance.

Cancellations and Refunds

Cancellations of bookings will be made in accordance with the Bookings and Cancellations Policy (see Policy 2.14) and will incur any relevant fees and charges according to such policy.

If a family has permanently cancelled care and their account is in credit, they must provide written instructions to the service indicating:

- A refund is required and have provided account details for transfer, or
- A donation of credit balance to the service

Changes to Collection of Fees

In the event the Service makes changes to the amount or the way in which fees are charged, the Service will communicate this change at least **14 days** before changes taking effect. Communication will occur via email, notices and newsletter updates.

Related Policies

- 2.14 Bookings and Cancellations
- 3.5 Excursions
- 9.2 Enrolment

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Department of Education and Training Child Care Provider Handbook*
- *National Quality Standard, Quality Area 6 – Collaborative partnerships with families and communities and 7 – Governance and leadership*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(n) and 172(2).*

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10.6 Nominated Supervisor

Policy Statement

The Approved Provider acknowledges its obligation to appoint at least one suitable person as the Nominated Supervisor at the service. The appointment of the service's Nominated Supervisor will review all relevant elements of suitability and qualification. The Nominated Supervisor will be delegated with the responsibility for managing the day-to-day operations and compliance of the service. Where the Nominated Supervisor is absent from the service, another suitably qualified and competent educator will act as the Responsible Person in charge.

The Approved Provider recognises its responsibility to comply with *Education and Care Services National Regulations 24, 35 145 & 146*.

Auxiliary Documentation

- 10.6.1 Nominated Supervisor Determination Checklist
- 10.6.2 Nominated Supervisor Delegation
- 10.6.3 Nominated Supervisor Prohibition Notice Declaration
- 10.6.4 Nominated Supervisor Consent Form

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the service operates with a suitable Nominated Supervisor appointed.• Maintain records of the appointment and suitability assessment of each Nominated Supervisor.• Provide notification to the Regulatory Authority where a change in Nominated Supervisor has occurred.
Nominated Supervisor	<ul style="list-style-type: none">• Agree to their appointment in writing

Procedures

Responsibilities and Function

The Nominated Supervisor is responsible for overseeing the overall operations and management of the service. They are to supervise the day-to-day events of the service and coordinate relevant management activities.

Appointment of the Nominated Supervisor

In determining a person's suitability hold the role of Nominated Supervisor, the Approved Provider will ensure that the person/s:

- Be 18 years or over;
- Adequate knowledge and understanding of the provision of education and care to children;
- Ability to effectively supervise and manage an education and care service;
- Compliance history with the National law and other relevant laws; and
- Prohibition history.

Each person offered the role of Nominated Supervisor/s will be deemed suitable by the Approved Provider. The following documents will be completed and retained as evidence suitability and consent of the appointment:

- 10.6.1 Nominated Supervisor Determination Checklist
- 10.6.2 Nominated Supervisor Delegation
- 10.6.3 Nominated Supervisor Prohibition Notice Declaration
- 10.6.4 Nominated Supervisor Consent Form

If uncertainty or concern arises about a candidate's compliance history the Approved Provider will contact the Regulatory Authority and enquire if the person is subject to a prohibition notice in any state or territory.

Suitability Review

Where the Approved Provider has concerns impacting the Nominated Supervisor's ability to meet the requirements of their role, a reassessment will be made of the person's suitability to hold the position of Nominated Supervisor of the service. The re-assessment will review previous determinations and other relevant information and evidence of suitability. The Nominated Supervisor Determination Checklist (10.6.1) will be used to review and evidence any suitability reviews.

Notification to the Regulatory Authority

- When changes occur to Nominated Supervisor appointments at the OSHC service the Regulatory Authority will be notified through the NQA IT System (see *10.33 Managing Notifications*).
- Written consent (10.6.4) will be attached and submitted to the Regulatory Authority via the NQA IT System.

Records

All relevant information relating to the appointment of the Nominated Supervisor will be retained by the Approved Provider (see 10.8 *Information Handling (Privacy and Confidentially)*) including employee details and consent for appointment (*Regulation 145 & 146*).

Related Policies

- *2.1 Interactions and Relationships with Children*
- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *2.3 Educator to Child Ratios*
- *2.4 Arrivals and Departures of Children*
- *2.6 Positive Behaviour Support Practices*
- *2.7 Supporting Complex Behaviours*
- *2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- *2.11 Supporting Additional Needs with Inclusive Practices*
- *2.12 Managing Duty of Care – Children who Arrive at the Service Without a Booking*
- *2.20 Supervision of Children*
- *2.14 Bookings and Cancellations*
- *3.1 Educational Program Design and Implementation*
- *3.5 Excursions*
- *3.13 Water Safety*
- *4.2 Infectious Diseases*
- *4.3 Hygiene, Health and Wellbeing Practices*
- *4.5 Incident, Illness, Injury or Trauma*
- *4.6 Medication Administration*
- *4.12 Non-Smoking, Illicit Substance and Alcohol-free Environment*
- *4.17 Medical Conditions*
- *4.18 Administration of First Aid*
- *4.19 Childhood Immunisation*
- *6.3 Workplace Health and Safety*
- *7.1 Emergency Equipment and Facilities*
- *7.2 Emergency Evacuation, Lockdown and Drills*
- *8.3 Recruitment and Employment of Educators*
- *8.4 Educator Professional Development and Learning*
- *8.5 Volunteers*
- *8.6 Employee and Volunteer Grievance*
- *8.7 Workplace Harassment and Bullying*
- *8.8 Employee Performance Monitoring, Review and Management*
- *8.9 Applying the Codes of Conduct*
- *8.9.1 Code of Conduct*
- *8.9.2 Code of Conduct for Interacting with Children and Young People*
- *8.11 Employee Leave*

- 8.12 Employee Qualifications – Monitoring Progress
- 8.17 Fit for Work
- 8.19 Employee Underperformance, Misconduct and Disciplinary Procedures
- 8.25 Employee Remuneration and Entitlements
- 8.28 Transition from Casual Employment Engagement
- 8.29 Working with Children Check (Blue Card) Management
- 9.1 Access
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 9.9 Acceptance and Refusal of Authorisations
- 10.1 Managing Compliance with Legal Obligations
- 10.3 Budgeting and Financial Planning
- 10.4 Setting, Reviewing and Managing Fees
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management
- 10.19 Policy Development, Sourcing and Review
- 10.27 Self-Assessment and Quality Improvement
- 10.30 Conflict of Interest
- 10.33 Managing Notifications
- 10.34 Administration of Child Care Subsidy (CCS)

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Working with Children (Risk Management and Screening) Act 2000
- National Quality Standard, Quality Areas: 4 - Staffing arrangements; and 7 – Governance and leadership.

E&CS Legislative Compliance

- Education and Care Services National Regulations 24, 35 145 & 146.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	19/10/21
Date implemented:	19/10/21	Date families notified	
Version:	10.6-2021/1	Date of review	

10.7 Insuring Risks

Policy Statement

OSHC recognises and acknowledges the need for a responsible approach to identifying and managing risks and therefore, will ensure there is adequate insurance protection for the service. Employees, children, parents, volunteers and management will be protected from the financial repercussion of public liability through the service's purchasing of suitable insurance.

OSHC also recognises the responsibility to comply with insurance requirements outlined in the *Education and Care Services Law (Section 51) and Regulations (29 & 180)*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure suitable insurance coverage, in particular, Public Liability Insurance is maintained.• Provide evidence of currency to the Nominated Supervisor for recording.• Monitor and respond to assessments of coverage for insurance products for potential liabilities.• Liaise with the relevant insurer when submitting an insurance claim.
Nominated Supervisor	<ul style="list-style-type: none">• Retain evidence of Public Liability coverage at the service's premises.• Monitor and inform the Approved Provider of suspected vulnerabilities in insurance coverage.• Communicate potential insurance claim details to the Approved Provider in a timely manner.

Procedures

Public Liability Insurance

- To comply with *Education and Care Services National Law and Regulations*, the Approved Provider will maintain public liability insurance with a minimum cover of \$10 million.
- Evidence of the Certificate of Currency will be retained at the service premises, through a copy being provided to the Nominated Supervisor on each renewal.

Additional Insurance

- The Approved Provider, as a P&C, will source relevant insurance products through P&C's Qld's advised broker. All insurance will be purchased through a reputable broker or agent.
- Appropriate cover will also be taken for building and contents and other personal accident insurances.
- The Approved Provider will request the Nominated Supervisor monitor and gather information as necessary to enable an informed assessment and decisions on the insurance needs of the service.
- Where relevant, the Nominated Supervisor will provide Approved Provider with relevant details of activities and excursions undertaken as to assess if additional insurance coverage is required. The Approved Provider will liaise with their insurance broker when determining added cover.

WorkCover

- The Approved Provider is responsible for ensuring that the service has adequate worker's compensation insurance for all staff including volunteers.
- WorkCover will be renewed by the Approved Provider in June each year.

Insurance Claims

- The Nominated Supervisor will report any potential instances of insurance claims to the Approved Provider in a timely manner.
- The Approved Provider will collate relevant information and communicate these details with their insurer.
- The Approved Provider (or any relevant delegate) will follow all directions of the insurer and in the case of material or significant claims, seek legal advice for the service where necessary.

Related Policies

- 10.1 Managing Compliance with Legal Obligations

- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.3 Budgeting and Financial Planning
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Education (General Provisions) Act 2006*
- *Work Health and Safety Act 2011*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Law Section 51.*
- *Education and Care Services National Regulations 29 & 180.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
Date implemented:	27/10/21	Date families notified	
Version:	10.7-2021/1	Date of review	

10.8 Information Handling (Privacy and Confidentiality)

Policy Statement

In providing education and care, the service collects, uses and stores personal and sensitive information relating to families, children, staff and others. The service respects the privacy of all individuals and only obtains information which it needs to protect and care for children and handles that information with confidentiality and sensitivity and in keeping with legal requirements.

The service respects and supports the principles of privacy and confidentiality and complies with the Australian Privacy Principles in relation to information gathered and stored by the service. The Approved Provider recognises their duty to ensure information collected by the service is not shared beyond the legislated provision, including:

- to the extent necessary for the medical treatment of a child;
- with the parent of the child;
- with the Regulatory Authority or an authorised officer;
- where authorised or permitted by law; or
- with written consent with the person providing the information.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations* 158, 160-162 & 168 (2)(I), 181 & 183.

Auxiliary Documents

- 10.8.1 Service Records and Retention Schedule

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure staff are instructed on their role and responsibility in maintaining confidential and private information. • Ensure there are suitable facilities and practices maintained by the service to uphold the commitment of privacy and confidentiality.
Nominated Supervisor	<ul style="list-style-type: none"> • Ensure documentation is kept in a manner that upholds the privacy and confidentiality of children and families. • Maintain records to assist in the delivery of quality care and education. • Support the Approved Provider's obligation to maintain compliance with regulations.

Procedures

The service aims to manage personal and sensitive information in an open and transparent way, with clear guidelines relating to how it is collected and stored.

The service will only collect and record information it needs in order to deliver its service, including the responsibilities to protect and care for children, families and educators.

The service is required to maintain the following records and information (see table below):

Record Type	Details	Storage Medium
Child & Family Records	<ul style="list-style-type: none"> • Personal information for children and families • Centrelink Customer Reference Numbers • Authorisations • names, addresses and contact details for family members and authorised nominees • Court orders/parenting plants • children's medical/additional needs details 	Hardcopy and Electronic (softcopy)
	<ul style="list-style-type: none"> • Medical condition details (history, diagnosis, support) • Risk management plans • Action/management plans (including treatment and medication) • Medical practitioner/s details • Immunisation status 	Hardcopy and Electronic (softcopy)

	Incident, Injury, Trauma and Illness	Details of: <ul style="list-style-type: none"> • Events including observations, treatment and/or response • Witnesses • Notification and communication 	Hardcopy and Electronic (softcopy)
	Accounts	<ul style="list-style-type: none"> • Account statement, transactions, and fees paid/owed 	Electronic (softcopy)
Attendance Records		<ul style="list-style-type: none"> • Days of attendance and absence • Persons signing in and out 	Electronic - CCMS
Evaluations of the Educational Program		<ul style="list-style-type: none"> • Evidence of the development of the program (reflections, observations, learning stories, planning documents) • Evaluations of children's wellbeing, development and learning (reflections, observations, photos and stories) 	Hardcopy and Electronic (softcopy)
Staff and Volunteer Record	Employee Personal Details	<ul style="list-style-type: none"> • Personal information on employees such as emergency contact details, qualifications, recognised training and places of previous employment • Blue card records • Rosters and timesheets • Detail of performance reviews and workplace matters • Details of income and payment information 	Hardcopy and Electronic (softcopy)
	Volunteer	<ul style="list-style-type: none"> • Records of volunteers and students including personal details and days and hours participating 	
	Nominated Supervisor	<ul style="list-style-type: none"> • Record of the nominated supervisor and any person in day-to-day charge of the education and care, including suitability information 	
	Responsible Person	<ul style="list-style-type: none"> • A record of the name of the responsible person at each session the service operates 	
	Educational Leader	<ul style="list-style-type: none"> • A record of the name of the person designated as the Educational Leader 	
	Workplace Health & Safety	<ul style="list-style-type: none"> • Details of accidents, incidents and complaints • Risk management assessments • Copies of notifications supplied to WHS 	
Management Records	Records of the service's compliance with the Law	Records of any amendment, suspension, compliance notice or compliance direction, including: <ul style="list-style-type: none"> • Reasons • Dates of effect and/or end dates • Steps to be take 	Electronic (softcopy)
	Complaints and Feedback Records	Information may contain: <ul style="list-style-type: none"> • Details of grievances, allegations, communication • Identifying information about complainants • Investigation details • Recommendations and outcomes 	Hardcopy and Electronic (softcopy)

Permission and Consent

The service obtains the written consent of persons for the use of the information by the service in connection to its operations, delivering the program and complying with its Duty of Care to children, employees and other persons, including those giving the information. This consent is contained within the terms of enrolment.

The service will seek permission to share relevant information as required by law. This is done through the enrolment and other related procedures as new information is received. Families should not unnecessarily refuse relevant and appropriate information to be shared which will improve the service's capacity to meet children's individual needs in the education and care environment.

Relevant information will be shared amongst the educator team, as required, to support children's health, safety and wellbeing.

Record Collection Maintenance

The service aims to manage personal and sensitive information in an open and accountable manner, with clear guidelines relating to how it is collected and stored.

The Nominated Supervisor will ensure that the service's records are reviewed and audited at least twice per year and otherwise immediately after receiving a request from a parent/guardian to update any detail in the child's record. The service will ensure:

- Fair and open information collection practices;
- Processes and practices that ensure information collected about individuals and families is accurate, complete and current; and
- Use and accessibility of personal information is monitored closely.

The service's electronic records will be backed up by the Nominated Supervisor on a regular basis. Any sensitive record will be stored securely on a password protected system.

Access and Requests for Information

Parents may request information from the Approved Provider with regard to their child/ren's participation and attendance at the service, with the exception of where there is a prohibition from a court order (or similar) preventing this access.

Parents are entitled access to:

- Enrolment records and child information/records (relating to their own children)
- Information about the educational program and menu
- Service policies and procedures
- Quality Improvement Plan
- Fees and statements
- Risk assessments

Family enrolment and other personal information can be accessed for the purposes of correcting information held by the service.

Requests for information can be directed to the Nominated Supervisor, Responsible Person and/or Approved Provider. Where there are concerns held to the right to information or breaching of confidentiality, all requests will be managed by the Approved Provider.

Information Security

- The service protects the rights of the individual's privacy by ensuring that the information collected is stored securely:
 - All relevant hard copy records will be stored in a locked filing cabinet
 - All electronic (softcopy) documents will be stored on a service owned or subscribed service only. All electronic devices/files are to be secured with suitable password protection
- The Approved Provider, the Nominated Supervisor or Responsible Person in Charge will have access to information that is sensitive and confidential in nature.
- All persons with responsibility for the security of confidential information will be expected to maintain a high degree of professionalism and conduct. Any breaches of confidential information will be treated seriously.
- Records held by the service are only to be accessed by persons who need them for the proper conduct of the service and to fulfil the service's Duty of Care and responsibilities to children and families.

Document Retention

The service will maintain a document retention schedule (see 10.8.1), which will specify the records to be kept by the service and the length of time required by relevant provisions.

The Nominated Supervisor will report the details of the retention and disposal of documentation/records every year to the Approved Provider.

The Nominated Supervisor will prepare documentation for archiving each year. Archived documents will be clearly labelled with planned retention timelines. All archived documentation will be managed by the Approved Provider and stored securely.

The service recognises the current disposal freeze (Public Records Act 2002) applying to records of allegations, investigations or evidence of child sexual abuse and records containing possible corroborating evidence to support future allegations of child sexual abuse.

Sharing of Information in the Protection from Harm

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

Confidentiality and Conduct

The Approved Provider, Nominated Supervisor and employees of the service are bound by the code of conduct in the sharing of information and maintaining confidentiality. Breaches of the code will be treated seriously as outlined by the relevant disciplinary policy.

Related Policies

- *2.4 Arrivals and Departures of Children*
- *2.7 Supporting Complex Behaviour*
- *2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- *2.11 Supporting Additional Needs with Inclusive Practices*
- *2.14 Bookings and Cancellations*
- *3.1 Educational Program Design and Implementation*
- *3.2 Program Evaluation and Communicating Children's Progress*
- *3.5 Excursions*
- *4.2 Infectious Diseases*
- *4.5 Incident, Illness, Injury or Trauma*
- *4.6 Medication*
- *4.17 Medication Conditions*
- *4.19 Childhood Immunisation*
- *6.3 Workplace Health and Safety*
- *7.2 Emergency Evacuation, Lockdown and Drills*
- *8.3 Recruitment and Employment of Educators*
- *8.5 Volunteers*
- *8.12 Employee Qualification Progress*
- *8.19 Employee Underperformance, Misconduct and Disciplinary Procedures*
- *8.29 Working with Children Check (Blue Card) Management*
- *9.2 Enrolment and Orientation*
- *9.5 Feedback and Complaints*
- *9.9 Acceptance and Refusal of Authorisations*
- *10.1 Managing Compliance with Legal Obligations*
- *10.1.1 Managing compliance with the National Quality Framework (NQF)*
- *10.1.2 Approval Requirement*
- *10.4 Setting, Reviewing and Managing Fees*
- *10.6 Nominated Supervisor*
- *10.22 Determining the Responsible Person*
- *10.33 Managing Notifications*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Department of Education and Training Child Care Provider Handbook*
- *Public Records Act 2002 (Qld)*
- *Privacy Act, 1988 and Regulations 2013*
- *Privacy Amendment (Notifiable Data Breaches) Act 2017*
- *Child Protection Act 1999*

- National Quality Standard, Quality Area 2 – Children’s health and safety

E&CS Legislative Compliance

- Education and Care Services National Regulations 158, 160-162 & 168 (2)(l), 181 & 183.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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Version:	10.8-2021/1	Date of review	

10.9 Risk Management

Policy Statement

The Approved Provider recognises the duty for all aspects of the service to have effective measures to manage the diversity of risks associated with operating the service. OSHC is committed to complying with all legal, regulatory, industry and policy requirements of risk management. To support the responsibilities of the service's personnel OSHC will implement recognised standards and best practice principles in its approach to following a framework and processes to manage service risks.

The Approved Provider will ensure risk management is considered holistically to provide protection and value for each stakeholder group. This purpose and outcomes of effective risk management for our stakeholder groups will include (but is not limited to):

- **Children and Families** – ensuring access to professional service delivery and services that meet their needs and are inclusive, and planning and actions prevent harm.
- **Community** – the service provided is inclusive and accessible, the service does not contribute to the creation or continuance of risk or hazard to the school environment, and resources are not inappropriately distributed or wasted.
- **Employees (and Volunteers)** – are empowered and contribute to professional service delivery, are aware of their duties to contribute to wellbeing and safety of children, families and colleagues.
- **Management and Governance** – There are implemented supports to drive the (operational and financial) sustainability, professionalism and compliance of the service delivered. There is confidence the risks of the service are clearly understood and are managed effectively by all personnel. Decision-making in the organisation is supported by a risk-aware culture – identifying and responding to opportunities early. Learning from events is captured and both successes and failures result in changes to improve.

OSHC is guided by the AS/NZS ISO 31000:2009 11 Principles of Risk Management in our approach and design. Therefore, OSHC is committed to delivering the following:

1. **Creates and protects value** – Our risk management systems and processes contribute safety and protection for our children, families, staff and community.
2. **Integral part of organisational processes** – Managing risks is factored into all parts of service decision-making and planned activities.
3. **Part of decision making** – Risks are managed through informed choices by decision-makers, with the assessment of relevant information driving the most appropriate action.
4. **Explicitly address uncertainty** - Through identifying our potential risks, we can implement controls to minimising the chance of loss or harm, while allowing opportunities to capture benefits and gains.
5. **Systematic, structured and timely** - Process of risk management is consistent across the service to ensure efficiency, consistency and the reliability of outcomes.
6. **Based on the best available information** – We look to understand and consider all available relevant information and are aware that there may be limitations of that information and therefore our processes and plans reflect this.
7. **Tailored** – Our risks are assessed within their contexts, including the consideration of internal and external environmental factors.
8. **Take into account human and cultural factors** - Risk management activities take into consideration people and the service's culture have on effectiveness and outcomes.
9. **Transparent and inclusive** – Our communication and consultation are key to identifying, analysing and monitoring risks effectively.
10. **Dynamic, iterative and responsive to change** – We are flexible and adaptable to our environment and emerging risks. Collectively we continue to identify new risks that present and respond to risks that no longer exist.
11. **Facilitate the continual improvement of organisations** - The maturity of our risk management culture is developed over time to demonstrate the ongoing and consistent performance of risk management practices.

Auxiliary Documentation

- 10.9.1 Risk Assessment Template

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Oversight and monitoring of the service's performance, especially the effectiveness of its control process. • Establish sound processes and expectations in planning, implementing and monitoring risk assessment activities. • Provide oversight and authority for approval of all required risk assessment plans.
Nominated Supervisor	<ul style="list-style-type: none"> • Lead the day-to-day monitoring of risk management plans. • Lead the development and review of current risk management plans. • Ensure all developed plans meet the requirements of the service's obligation to statutory requirements. • Communicate issues and breaches with diligence to the Approved Provider.
All Persons	<ul style="list-style-type: none"> • Must take reasonable care of their own health and safety, take reasonable care for the health and safety of others and cooperate with any decision made to reduce risks to uphold safety.

Procedures

Risk Management Framework

The service's risk management processes will be implemented through the risk management framework illustrated below:



Risk Management Process

The development and management of risks throughout the service is a five-stage process to:

- Establish the context – What is the purpose and intention for the risk management plan
- Identify hazards – find out what could cause harm
- Assess risks – understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening
- Control risks – implement the most effective control measure that is reasonably practicable in the circumstances
- Review control measures to ensure they are working as planned.

The development of risk assessment activities and the management of work health and safety is an ongoing process. Implementation and review of plans can be triggered when:

- 1) it is required by legislation;
- 2) hazards or risks have been identified; or
- 3) there are changes affect work activities that require management.

Changes to work activities take many forms, implementing or reviewing workplace risk management should be considered when:

- changing work practices, procedures or the work environment
- purchasing new equipment or using new substances
- new information about workplace risks becomes available
- responding to workplace incidents (even if they have caused no injury)
- responding to concerns raised by workers or others at the workplace
- required by the WHS regulations for specific hazards

Establishing the Context

The Approved Provider will, in conjunction with the Nominated Supervisor, take responsibility to develop, maintain and monitor a risk management program appropriate to the service, including a method of ensuring that the service takes appropriate steps to comply with:

- The policies and procedures of the service;
- Working with children requirements;
- Work health and safety practices;
- Equal opportunity employment;
- Adequate insurance;
- The service approval status applicable to the service (see *10.1.2 Approval Requirements*) and other relevant laws applicable to the Service; and
- Maintenance of equipment and facilities;

Assessing Risk

Identification of Hazard

- A holistic assessment to identify and critically assess for all foreseeable hazards will be expected.
- The Approved Provider and Nominated Supervisor will be supported through collaboration and risk assessment plans being reviewed by multiple stakeholders.
- Risk assessment plans will use a standardised document for explicit evaluation of hazards identified with any particular context (i.e. environmental risks vs excursions/activities)

Level of Risk

- Risk assessment plans will review the level of risk for any particular hazard against a standard matrix (level of risk is a combination of likelihood and consequence).
- The matrix will assist in identifying the priorities for controls (treatment) and the level of hierarchy to be implemented

Controlling Risks (treatment)

Hierarchy of risk control is a way of controlling risks that are ranked from the highest level (1) of protection and reliability to the lowest (6).

1. Eliminate - remove the hazard and associated risk
2. Substitute the hazard with something safer - replace hazard item
3. Isolate the hazard from people - physically separating the source of harm from people by distance or using barriers
4. Use engineering controls - uses a mechanical device or process to physically assist and reduce the chance of physical injury or fatigue
5. Use administrative controls - work methods or procedures that are designed to minimise exposure to a hazard
6. Use personal protective equipment (PPE) – face masks, gloves, aprons and protective eyewear

Consultation (and Communication)

Consultation is a legal requirement and an essential part of managing health and safety risks. A safe workplace is more easily achieved when everyone involved in the work communicates with each other to identify hazards and risks, talks about any health and safety concerns and works together to find solutions. This includes cooperation between the people who manage the work and those who carry out the work or

who are affected by the work. By drawing on the knowledge and experience of everyone, more informed decisions can be made about how the work should be carried out safely.

Consultation involves giving others a reasonable opportunity to express their views and contribute to health and safety decisions. This may involve:

- providing a suitable time during work hours for consultation with workers
- allowing opinions about health and safety to be regularly discussed and considered during workplace meetings
- providing workers with different ways to provide feedback, for example using email

The Approved Provider and Nominated Supervisor must take into account the views of staff and families before making a decision. Consultation does not require consensus or agreement but management must allow relevant people to contribute to any health and safety decisions made.

The Approved Provider, in conjunction with the service Nominated Supervisor/Coordinator, will develop and manage, through its regular meetings, an annual rolling program of reviews of all of the policies and procedures of the service, to ensure that they comply with relevant requirements.

Monitoring Obligations

The Nominated Supervisor (see Policy 10.1) is responsible to monitor changes in current laws and other regulatory requirements. To do this, the Nominated Supervisor will be proactive in maintaining up-to-date information through subscribing to appropriate information services and industry bodies, and attending all relevant and appropriate forums about these issues.

The Nominated Supervisor informs educators of all such changes and requirements through the educator training program (See Policy 8.4 Educator Professional Development and Learning), regular team meetings and/or relevant communication methods.

Related Policies

- 3.5 Excursions
- 4.5 Incident, Illness, Injury or Trauma
- 6.3 Workplace Health and Safety
- 7.2 Drills and Evacuations
- 10.1 Managing Compliance with Legal Obligations
- 10.6 Nominated Supervisor
- 10.7 Insuring Risks

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Australian Standard on Risk Management - AS/NZ ISO 31000:2009*
- *Working with Children (Risk Management and Screening) Act 2000 and Regulations 2011*
- *Work Health and Safety Act 2011 and Regulations 2011*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children’s health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

Policy Controls			
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Date implemented:	27/10/21	Date families notified	
Version:	1.1-2021/1	Date of review	

10.15 Asset Management

Policy Statement

In order to have sound financial management, meet the requirements of auditing and insurance and for the benefit of future planning, OSHC will maintain assets register. The register will be maintained by the Nominated Supervisor and will itemise the non-consumable assets of the service. To support the accuracy of the register an inspection will be undertaken at least every six months.

Auxiliary Documents

- *OSHC Asset Register*

Roles and Responsibilities

Approved Provider	• Authorise the disposal of significant asset write-off/disposal
Nominated Supervisor	• Maintain the service's asset register – including review, updating and disposal changes.

Procedures

The Nominated Supervisor will maintain an accurate register of the significant (capital) belongings of the service.

The register will include categories such as:

- Furniture;
- ICT Equipment;
- Outdoor/sporting Equipment;
- Kitchen/cooking Equipment; and
- Child-related resources (other than consumables).

New Assets

Every fixed item purchased for the service (other than consumables) will be entered into the register immediately following the purchase. The details to be contained in the register in respect of purchases will include:

- Name or Description
- Asset code
- Date of purchase;
- Item Type (Categorised);
- Purchase price;
- Supplier; and
- Warranty terms (if applicable).

Asset Review

- The register will be reviewed and updated every 6 months, in accordance with the financial year of audit.
- The date of review will be recorded in the asset register

Disposal of Items

- Items may be disposed of when they are damaged, aged or unsuitable for their purpose.
- In the event that items are in need of disposal, Nominated Supervisor will reflect this outcome in the asset register and record the reasons for the disposal
- Any asset being disposed of with a value great than \$500 will be included in either direct communication or formal reporting to the Approved Provider.

Related Policies

- *3.5 Excursions*
- *4.5 Incident, Illness, Injury or Trauma*
- *6.3 Workplace Health and Safety*

- 7.2 Drills and Evacuations
- 10.1 Managing Compliance with Legal Obligations
- 10.6 Nominated Supervisor
- 10.7 Insuring Risks

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Accounting Manual for Parents and Citizens’ Associations
- National Quality Standard, Quality Areas3 – Physical environment; and 7 – Governance and leadership.

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(b), 175 (2)(d)&(e) and 85.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
Date implemented:	27/10/21	Date families notified	
Version:	10.15-2021/1	Date of review	

10.16 Intellectual Property and Copyright

Policy Statement

OSHC is committed to upholding its duties in the use of protected and/or copyrighted materials. The service will not use materials, resources and documents it does not have the authority or permission to use.

For the interest of clarity for all parties, all materials, resources and documents developed by employees or volunteers of OSHC will remain the intellectual property of the employer.

OSHC recognises that for the purposes of operating an OSHC service various written materials, resources and documents need to be developed for compliance and service operations. These written materials include, but are not limited to:

- Policies and procedures manuals;
- Handbooks;
- Templates;
- Registers; and
- Operational Documents and Forms.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Will endorse relevant materials for approval.• Monitor and maintain the integrity of the service's intellectual property.
Nominated Supervisor	<ul style="list-style-type: none">• Monitor the service's compliance with copyright obligations to ensure compliance.
All Staff	<ul style="list-style-type: none">• Ensure authority and permission for before using any material for the service.• Correctly reference and quote relevant materials, where required.

Procedures

Use of Materials

- The Approved Provider, Nominated Supervisor and all staff will ensure the service has relevant permission or authority to use materials, resources and documents before doing so.
- Copyright will be strictly observed with all photocopying and distributing of documents other than those owned by the service which may be copied freely for use of the service.
- Materials that have been purchased and provide copyright authority will be used specifically in accordance with the granted authority and permission for purpose.

Service's Intellectual Property

- All written materials will be marked 'draft' until ratified or endorsed by the Approved Provider.
- Where employees are tasked to develop written materials specifically for the service, these materials will be dated and marked with the name of the service.
- If appropriate, the document will be further marked with the words 'copyright' or the relevant symbol. The document will also be labelled with the author of such document if considered appropriate (determined by the Approved Provider).
- Employees or other agents engaged by the service to produce written materials will observe intellectual property laws ensuring that all direct quotations and ideas are appropriately referenced and acknowledged.

Related Policies

- 8.9.1 Code of Conduct
- 8.19 Employee Underperformance, Misconduct and Disciplinary Procedures
- 10.1 Managing Compliance with Legal Obligations
- 10.1.4 Managing Other Legal Obligations and Requirements
- 10.6 Nominated Supervisor
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management

- 10.32 Appropriate Governance

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Copyright Act 1968*
- *National Quality Standard, Quality Areas 4 - Staffing arrangements; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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Version:	10.16-2021/1	Date of review	

10.17 Strategic Planning

Policy Statement

The service recognises and acknowledges the value of planning for the service's future to ensure ongoing viability and prepare for relevant growth or needs of the service. Therefore, the Approved Provider and the service's leadership group, as a management team, will maintain and committed to periodic review of the service's operations, context and direction and take a planned approach to implementation actions.

Auxiliary Document

- *OSHC Strategic Plan*

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Establish sound processes and support to plan the direction and future of the service.• Work collaboratively to identify areas and opportunities for growth and improvement.
Nominated Supervisor	<ul style="list-style-type: none">• Support the Approved Provider through collating evidence and analysis for the proposal and review of planning.
All Staff	<ul style="list-style-type: none">• Contribute ideas, wishes and insights to the directions and needs of the service.

Procedures

The service's Strategic Plan will be captured and maintained within the scope of the P&C's Strategic plan. Collaborative between the Approved Provider, Nominated Supervisor and other relevant service leaders will support its development and review. The strategic plan will include either a summary, analysis or actions plans for each of the following areas:

- Mission – Why we exist
- Vision – What we aspire to be
- Values – What we believe in
- Strategic Directions – What we want to focus on
- Outcomes/Goals/Objectives – What we want to achieve
- Success Indicators – How we will know we have been successful
- Operations Plan – What we need to do, when, by whom, with what

The Strategic Plan will be reviewed at least annually. Relevant updates will be documented in the working copy of the plan.

Related Policies

- *6.1 Space and Facilities Requirement*
- *6.2 Resources and Equipment*
- *10.2 Role and Composition of OSHC Subcommittee*
- *10.3 Budgeting and Financial Planning*
- *10.7 Insuring Risks*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *10.9 Risk Management*
- *10.6 Nominated Supervisor*
- *10.32 Appropriate Governance*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Accounting Manual for Parents and Citizens' Associations*
- *Support Guide for P&C's*
- *National Quality Standard, Quality Areas: 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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Version:	10.17-2021/1	Date of review	

10.19 Policy Development, Review and Implementation

Policy Statement

OSHC acknowledges the fundamental need for effective policy and procedures to guide and manage the service's delivery and the duties of employees. The service's policies should reflect the statutory obligation of the service and its employees. Therefore, policies should be developed through integrating a wide range of relevant information sources including legislation, guidelines and operating handbooks.

The service's policies and procedures will undergo regular review to support the effectiveness and coverage. The Approved Provider will maintain the authority to approve and endorse developed policy; however, the services employees will have an active role in the facilitating policy review and the drafting of new and amended policy. The service's suite of policies will be reviewed at least **annually** or where required.

The Approved Provider also recognises their duty to comply with *Education and Care Service National Regulations 168, 170-172* to ensure relevant policies are developed, accessible by employees and families. The service will ensure it upholds adequate notification to families where there are changes to policies.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Develop and implement required policies for Regulation compliance. • Support ongoing development and review of service policies to drive quality education and care. • Review and endorse (ratify) proposed policy suggestions. • Ensure access and compliance with policies, addressing concerns as they arise.
Nominated Supervisor	<ul style="list-style-type: none"> • Support the Approved Provider through identifying, drafting and proposing amended changes to policies. • Maintain a record of amendments and changes to service's policies. • Maintain accurate knowledge of service's requirements and advise the Approved Provider of any required policy developments. • Monitor and supervise the implementation and compliance of policies. • Ensure employees, families and other relevant stakeholder are provided with access and information to policies as required.
All Staff	<ul style="list-style-type: none"> • Contribute ideas, wishes and insights to the quality and coverage of policies. • Ensure policies and procedures are followed at all times.

Procedures

Policy and Procedure Quality Standards

- The service will develop policies and procedures which reflect the true nature of the service's operations.
- Where possible, specific roles will be identified to outline responsibilities and delegation.
- Translating legislative obligations will be reflected and explicitly stated.
- The service will ensure that generic policy documents, samples and templates adopted are reviewed and customised to meet the individual and unique circumstance of the service.
- All policies will include references to external documentation, resources, guidelines and principles used to develop or guide the development of the policy.
- Version control will be used to manage policy development and communication records.
- Policy sourcing should also take into consideration other provisions such as copyright laws.

Policy Review

- Policies will be developed or amended either as needed or as a result of periodic review.
- The suite of policies will be reviewed by the Nominated Supervisor each year. The Nominated Supervisor can delegate out aspects of the review to suitably capable educators. The Nominated Supervisor will present a report of the review to the Approved Provider
- Any proposed amendments or policy development will be drafted and submitted to the Approved Provider for ratification/approval.

Policy Approval

- Policies and procedures may be drafted by
 - Suitably capable employees;
 - the Approved Provider; or
 - with prior approval, an appropriate third party.
- Where substantial change is being proposed, the writer should consult with the Approved Provider to discuss a summary of the proposal. Additional consultation may be directed as part of policy development.
- The Approved Provider will review proposed policies and can either:
 - ratify,
 - reject, or
 - request amendments.
- All ratified policies will have the date and version recorded.

Policies Compliance

- Employees are expected to maintain compliance with service policies at all times.
- Employees will be provided with adequate induction to orientate their knowledge of the service's procedures and expectations for performance and conduct.
- Policies will be made accessible, and where possible, will outline clear expectations and responsibilities to support employees in their duty.
- Where employee's conduct for performance is not consistent with the service's policies the employee will be managed by the procedures outlined in 8.19 *Underperformance, Misconduct and Disciplinary Actions*

Policy Accessibility

- The service's full policy and procedure manual will be available at the service's premises for employees, volunteers and families to access when required.

Policy Notification and Communication

- The Approved Provider will ensure families are notified at least 14 days before any policy or procedure referred to in National Regulation 168 takes effect.
- Notification to families will include email messages and signage at the service.
- The date of notification will be recorded on the policy (where relevant)

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *6.3 Workplace Health and Safety*
- *8.3 Recruitment and Employment of Educators*
- *8.19 Employee Underperformance, Misconduct and Disciplinary Procedures*
- *8.9.1 Code of Conduct*
- *9.3 Interactions and Communication with Families*
- *9.5 Feedback and Complaints Handling*
- *10.1 Managing Compliance with Legal Obligations*
- *10.9 Risk Management*
- *10.22 Determining the Responsible Person*
- *10.32 Appropriate Governance*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 4 - Staffing arrangements; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168, 170 -172*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
Date implemented:	27/10/21	Date families notified	
Version:	10.19-2021/1	Date of review	

10.21 Service Closure

Policy Statement

OSHC acknowledges that there may be times when the service is required to close due to both planned and unforeseen circumstances. The service recognises that effective communication and management procedures must be established to meet family expectations, provider requirements and to uphold the safety and care for children.

The Approved Provider recognises the obligation to comply with *Family Assistance Law, Education and Care Service National Law Section 174* and *Education and Care Services National Regulation 175* in notifying the Regulatory Authority of service closures.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the safety and protection of stakeholders accessing the service.• Ensure stakeholders (including government bodies) are suitably notified of any closures, disruptions due to emergency events, or another time the service cannot operate.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure the service is able to fulfil its duty to protect from harm. Where extreme and emergency events hinder the ability to care for children, ensure the safety and protection of children through sound management of service closure.• Deliver sound professional judgement and provide accurate information to the Approved Provider in consulting service closures.• Ensure communication with families and stakeholders adequately notifies of service closure and other relevant requirements.

Procedures

The service will operate as per the approved and advertised opening hours for each session of care where Child Care Subsidy is claimed unless there is an appropriate reason (i.e. emergency closure) and notification is given to:

- the Regulatory Authority (Queensland Government Department of Education - Early Childhood Education and Care); and
- the Australian Government Department of Education.

The service will not close early due to children being collected prior to the approved and advertised closing time unless prior approval has been granted by the Regulatory Authority (Department of Education - Early Childhood and Community Engagement) and the Australian Government Department of Education and Training.

Emergency Closure

Closure of the service may occur in the following instances:

- Extreme weather conditions;
- Emergency situation, such as fire or other external threat;
- Loss of power and/or water.

Determination for closure will be made in consultation with the Approved Provider and/or emergency services personnel, if relevant.

Parent Communication

In the case of immediate closure of the service, the Nominated Supervisor will:

- Contact families to collect the children from the service;
- Ensure the safety of all children and educators involved; and
- Notify the Regulatory Authority and Australian Government in accordance with *Policy 10.33 Managing Notifications*

In the case of planned (or upcoming) closure, the Nominated Supervisor will:

- Communicate with families as soon as reasonably practicable;

- Provide information for the reason for closure; and where possible
- Provide anticipated timelines to the disruption.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 4.5 Incident, Illness, Injury or Trauma
- 6.3 Workplace Health and Safety
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.1.4 Managing Other Legal Obligations and Requirements
- 10.32 Appropriate Governance
- 10.33 Managing Notifications

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Family Assistance Law
- Australian Government DET Child Care Provider Handbook
- National Quality Standard, Quality Areas: 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

E&CS Legislative Compliance

- Education and Care Services National Law S174, Regulation 175

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
Date implemented:	27/10/21	Date families notified	
Version:	10.21-2021/1	Date of review	

10.22 Determining the Responsible Person

Policy Statement

The Approved Provider must ensure that the education and care service has a Responsible Person in day-to-day charge of the service. This policy outlines the process for determining the Responsible Person.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(i)(ii), 150, 117A&B*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure the suitability and capacity of persons identified to fulfil this duty.• Ensure relevant documentation is completed and stored.• Monitor and respond to issues relating to conduct, suitability or underperformance.
Responsible Person in Charge	<ul style="list-style-type: none">• Lead and support the team of educators to provide quality education and care.• Report to the Approved Provider as required.• Develop a sound working relationship with the Nominated Supervisor debriefing relevant information for further management and support.• Demonstrate ability to understand and apply the service's policies and procedures.• Report critical events with diligence and timeliness.• Notify any circumstances that might impact on their suitability or capacity to the Approved Provider.

Procedures

A Responsible Person must be present at all times when the service is educating and caring for children. If the Approved Provider or Nominated Supervisor is absent, an appointed Responsible Person will be placed in day-to-day charge of the service.

The Nominated Supervisor of the service must meet the requirements/conditions of the *Education and Care Services National Law Act 2010 and Regulations 2011*.

In the absence of the Nominated Supervisor, the Approved Provider or Nominated Supervisor will designate an educator, with their written consent, to be placed in the day-to-day charge of the service. This person must meet the requirements/conditions of the *Education and Care Services National Law 2010 and Regulations 2011* with regard to ensuring suitability and that they are not prohibited under the *National Law*.

In determining the Responsible Person, the Approved Provider and/or Nominated Supervisor must determine if that person is suitable. This means considering the capacity of this person to ensure children's safety and wellbeing, having regard to their qualifications, skills, knowledge, work experience and age. This includes the person's:

- understanding of the *Education and Care Services National Law Act 2010 and Regulations 2011 and compliance*;
- understanding of other relevant laws and provisions such as Child Protection, Confidentiality, Grievance Management, Work Health, Food Handling, etc.;
- capacity to implement emergency and evacuation procedures;
- ability to attend to parent inquiries (either directly or by referral);
- capacity to supervise, manage and lead other educators;
- ability to respond to incidents involving children's health and safety;
- ability to respond to incidents involving the health and safety of educators, volunteers and family members present at the service;
- knowledge (extensive) of service policies and procedures including opening/closing procedures;

- capacity to ensure the safety and wellbeing of all children being educated and cared for while they are the Responsible Person;
- ability to effectively make written records of incidents;
- ability to effectively communicate with children, families, staff, school and relevant authorities;
- ability to reflect and evaluate their performance as the Responsible Person; and
- Ability to understand and articulate practice.

The Approved Provider (or Nominated Supervisor on their behalf) will maintain a record with sufficient evidence of the educator’s assessed capability and keep it on file to demonstrate compliance to the Regulatory Authority (e.g. Determining the Responsible Person Checklist, Delegation and Consent form). This will help to show that reasonable steps have been taken to comply with obligations under the *National Law* (See also 10.6.3 & 10.6.4).

The Approved Provider (or Nominated Supervisor on their behalf) will maintain a staff record including the name of the Responsible Person at the service for each time that children are being educated and cared for by the service (National Regulation 150).

In accordance with regulatory requirements, a sign stating the name and position of the Responsible Person in charge must be displayed at all times children are being educated and cared for (Regulation 173).

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.4 Arrival and Departure of Children
- 4.2 Infectious Disease
- 4.5 Incident, Illness, Injury or Trauma
- 4.17 - Children with Medical Conditions
- 6.3 Work Health Safety
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.9 Applying the Code of Conduct
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.33 - Managing Notifications

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Child Protection Act 1999*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; and 7 – Governance and leadership.*

E&CS Legislative Compliance

- *Education and Care Services National Regulations 168 (2)(i)(ii), 150, 117A&B*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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Version:	10.22-2021/1	Date of review	

10.26 Social Media and ICT Usage

Policy Statement

The service acknowledges a key role technology plays in the community and business, especially as a tool for communication. Therefore, the Approved Provider will support the effective and safe use of technology through suitable policies and procedures to ensure devices and tools are used appropriately and in the best interests of the children, families and employees who use the service.

OSHC recognises that their IT equipment is a critical resource in managing the privacy and confidentiality of business, family and employee information. The service is committed to ensuring the management and use of equipment upholds the obligation and commitment to information handling. Likewise, the service understands that social media networking and other online communication platforms are an effective method for communicating with families who use the service. In doing so, OSHC is committed to ensuring and promoting safe and positive communications.

The established guidelines, policies and procedures for:

- the administration of the OSHC social media pages/sites with the intention to ensure communication is respectful, ethical and is consistent with the purpose of community engagement principles.
- the management of children's access to equipment and resources is appropriate and suitably supervised.
- supporting the interaction and relationship of stakeholders and employees of the service to uphold safety and protection.

Employees will be guided on expectation for the use of communication mediums (i.e. social media platforms) that could interfere with their employment and obligations and an employee. The service acknowledges that employees may access social networking sites (such as Facebook, Twitter, Instagram, etc.) to interact with friends, colleagues, and the community. This policy aims to establish guidelines on the access and usage of online social networking, with the aim of upholding safety, protection and reputation for the service and its stakeholders.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Provide guidance and expectations on the use of technology, devices and social media etc. to support the safety and protection of children, families, employees and the business reputation.
Nominated Supervisor	<ul style="list-style-type: none">• Respond and communicate instances of non-compliance.• Ensure the service's equipment and practices reflect the obligation of confidentiality and privacy owed to stakeholders.
All Staff	<ul style="list-style-type: none">• Ensure children are provided with suitable supervision to support the expectations of the service social media and ITC policy.

Procedures

Devices, Technology and Programming

1. The use of electronic devices and technology will be included in the program as a valuable learning tool for children.
2. Potential resources include computer equipment, electronic games, internet access, tablets and cameras.
3. Any internet usage by children will be effectively monitored and supervised by educators. Before any access is facilitated, children will be instructed on expectation and safe usage/access.
4. The service will ensure games and media accessible to children are appropriate for children, using government classifications (G and PG-rated) as the guiding principle.
5. Parents will be instructed to ensure any devices or equipment brought from home is consistent with the service's expectations (especially rating requirements). Any items that are inappropriate will be stored in the office until the child is collected.

Employee Social Media and Communication

Definition

For the purposes of this policy 'social media' and online communication will refer to any online tool, functions or platform that allow people to communicate via the internet. This includes, but is not limited to, applications such as:

- Social networking sites (e.g Facebook, Pinterest, LinkedIn, Instagram);
- Video and photo sharing (e.g YouTube)
- Messaging platforms (Snapchat, Messenger)
- Blogging sites, forum or discussion boards (e.g. Twitter, Reddit)
- Online gaming

Responsibilities

All employees have a duty to uphold the reputation of the service (see *Code of Conduct*). Communication and information sharing via social media/the internet have the potential to harm a stakeholder of the service or harm the service's reputation.

Employees are to recognize their employment relationship extends beyond the hours of work; therefore it is the responsibility of employees to ensure their conduct is consistent with the policies and guidelines of the service when using social media for personal use. Demonstrating professionalism and management of social boundaries is the responsibility of the employee. Interactions with employees and other stakeholders that harasses, threatens, jeopardises trust, or harms the reputation of the service will be treated seriously. Employees engaging in this conduct will be subject to disciplinary action, up to and including termination.

Guidelines

Employees are expected to display conduct consistent with the following guidelines to ensure safety and protection of others, themselves and the service:

- There should not be any personal interaction with children of the service via social media, including being 'friends' or following accounts etc. If a child of the service attempts to interact with you online, **do not respond**. Review your privacy settings and notify the Nominated Supervisor or Approved Provider who will communicate the service's expectation with the family directly¹;
- Harmful, threatening, suggestive or harassing comments are not to be made about fellow employees or stakeholders. This will be viewed as cyberbullying (unlawful conduct) and will prompt disciplinary action;
- The service name cannot be mentioned in online posts or other online commentaries (either directly or implied).
- Privacy and confidentiality must be maintained at all times. Employees should not discuss or disclose work-related matters in any capacity.
- Photos of employees in work uniform are not to be placed online; and
- If anything is posted online by others which may harm the reputation of the service, its employees or stakeholders, and you have the capacity to delete such information, the Approved Provider asks that you do so immediately.

Reporting Breaches

If any employees become aware of:

- conduct or communication that breaches this policy; or
- finds any online material that is potentially dangerous or damaging to the image or people of the service;

Then, the employee should immediately report this information to either the Coordinator or Approved Provider. This disclosure should not be shared with others.

¹Employees who are also family members of children/service users may be excluded from this condition. Disclosure of the relationship with families and children of the service is **essential**. In these extenuating circumstances, the social media responsibilities will be managed on a case-by-case basis by the *Nominated Supervisor* or Approved Provider.

Related Policies

- 2.2 *Statement of Commitment to the Safety and Wellbeing of Children*

- 2.15 Children's Property and Belongings
- 2.16 Promoting Protective Behaviours
- 2.19 Children's Media Viewing
- 2.20 Supervision of Children
- 2.25 Statement of Intent for Children's Play
- 3.1 Educational Program Design and Implementation
- 3.7 Physical Activity
- 4.5 Incident, Illness, Injury or Trauma
- 6.2 Resources and Equipment
- 8.9.1 Code of Conduct
- 8.9.2 Code of Conduct for Interacting with Children and Young People
- 9.9 Acceptance and Refusal of Authorisations
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.9 Risk Management
- 10.15 Asset Management
- 10.16 Intellectual Property and Copyright

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Working with Children (Risk Management and Screening) Act 2000*
- *National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 4 - Staffing arrangements; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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Version:	10.26-2021/1	Date of review	

10.27 Self-Assessment and Quality Improvement

Policy Statement

OSHC acknowledges and recognises that continuous improvement is an integral part of the National Quality Framework. OSHC will take a proactive approach to establish effective processes and systems for evaluating and reviewing current practices and identifying areas and opportunities for improvement. The service recognises self-assessment and continuous improvement is an ongoing process, building upon previous efforts and plans.

The Approved Provider expects the Nominated Supervisor and educators will actively work towards developing a culture of critical reflection, self-assessment and continuous improvement in every aspect of service operations.

The Approved Provider will ensure the service's Quality Improvement Plan is developed, reflecting an assessment of the quality and area of improvement that has been identified. The Approved Provider will be supported by the Nominated Supervisor, educators and OSHC Committee members in developing and reviewing the document at least annually to maintain compliance with *Education and Care Services National Regulations 55 and 56*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure a QIP is developed and reviewed at least annually, and fulfils the requirements outlined in legislation.
Nominated Supervisor	<ul style="list-style-type: none">• Support a culture of continuous improvement and high-quality expectation.
All Staff	<ul style="list-style-type: none">• Provide copy of QIP as requested by the Regulatory Authority.

Procedures

Culture of Continuous Improvement

The Nominated Supervisor and educators will be empowered to identify and respond to opportunities for continuous improvement, which includes continuous monitoring of the quality of collective and individual educator practices.

As part of the service's overall continuous improvement process, all standards and elements of the National Quality Standard will be reviewed on a regular basis in order to identify:

- Effectiveness of current practice in delivering quality outcomes for children, families and educators;
- Improvements to current practices, procedures and service routines; and
- Changes to be implemented as a result of review.

The Nominated Supervisor will be delegated to instruct and manage educators to improve any aspects of practice that has been identified. Where significant changes are required, the Nominated Supervisor will communicate intentions to the Approved Provider.

Quality Improvement Plan (QIP) Development and Review

All stakeholders (management, educators, families and children) will be encouraged to be involved in the service's continuous improvement process with ideas and suggestions for practice improvements welcomed.

The Approved Provider will ensure that a Quality Improvement Plan is prepared and maintained for the service that:

- Contains a statement of philosophy of the service.
- Includes the assessment of the quality of practices of the service against the National Quality Standard and the National Regulations;
- Identifies the areas requiring improvement, goals and the steps to improve; and
- Maintains notes with dates of the progress being made

The Approved Provider will ensure that the service's Quality Improvement Plan is reviewed and revised:

- At least annually; and/or

- Whenever directed by the Regulatory Authority

The Nominated Supervisor is responsible for ensuring all relevant improvement actions are documented in the service's QIP. The Nominated Supervisor will provide reviewed versions of the QIP to the Approved Provider.

QIP Access

The Approved Provider will submit the service's current Quality Improvement Plan to the Regulatory Authority on request.

The QIP will be accessible to educators, families and other relevant stakeholders for review and feedback.

Related Policies

- 2.1 Interactions and Relationships with Children
- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.6 Positive Behaviour Support Practices
- 2.7 Supporting Complex Behaviours 2.25 Statement of Intent for Children's Play
- 3.1 Educational Program Design and Implementation
- 3.2 Program Evaluation and Communicating Children's Progress
- 5.2 Food and Nutrition
- 6.1 Space and Facilities Requirement
- 6.2 Resources and Equipment
- 6.3 Workplace Health and Safety
- 7.2 Emergency Evacuation, Lockdown and Drills
- 8.2 Educational Leader
- 8.3 Recruitment and Employment of Educators
- 8.4 Educator Professional Development and Learning
- 9.3 Interactions and Communication with Families
- 9.5 Feedback and Complaints Handling
- 9.6 Community Participation and Engagement
- 10.1 Managing Compliance with Legal Obligations
- 10.1.1 Managing compliance with the National Quality Framework (NQF)
- 10.3 Budgeting and Financial Planning
- 10.6 Nominated Supervisor
- 10.17 Strategic Planning
- 10.19 Policy Development, Sourcing and Review
- 10.32 Appropriate Governance
- 10.33 Managing Notifications

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- 'My Time, Our Place' Framework for School Age Care in Australia
- National Quality Standard, Quality Areas: 1 – Educational program and practice; 2 – Children's health and safety; 3 – Physical environment; 4 - Staffing arrangements; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

E&CS Legislative Compliance

- Education and Care Services National Regulations 55 &56.

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
Date implemented:	27/10/21	Date families notified	

Version:	10.27-2021/1	Date of review	
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10.30 Conflict of Interest

Policy Statement

OSHC is committed to ensuring that business and operational decisions are not negatively impacted by either a perceived or actual conflict of interest. The service expects all perceived or actual conflicts of interest will be declared and managed. The service recognises conflicts of interest may be pecuniary (relate to money) - actual or potential financial gain, or non-pecuniary without any financial element but may offer advantage for social benefit.

The management of conflicts of interest will be supported by the principles of probity transparency, and accountability. Procedures for managing conflicts of interest will be followed by all relevant decision-making stakeholders (the service's governance, leaders, employees and volunteers).

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure sound management of actual or perceived conflicts of interest.• Act ethically and transparently when managing instances of personal conflicts of interest.
Nominated Supervisor	<ul style="list-style-type: none">• Ensure management plans and declarations are reported to the Approved Provider for approval.• Act ethically and transparently when managing instances of personal conflicts of interest.• Monitor employee compliance and report concerns to the Approved Provider.
All Staff	<ul style="list-style-type: none">• Declare any instances of an actual or perceived conflict of interest.• Ensure compliance with agreements and plans to manage any instances of a conflict of interest.

Procedures

How does conflict of interest arise?

A conflict of interest occurs when the personal/private interests of a person come into conflict with their duty to act in the best interests of the organisation. Conflicts of interest are particularly relevant where the executive, employee or volunteer has a decision-making role.

Declaring Conflict of Interest

It is the responsibility of any persons (Approved Provider, employee or volunteer) to make a relevant declaration of any actual or perceived conflict of interest as soon as this becomes known to the person.

- All employees and volunteers are expected to declare conflicts of interest to the Nominated Supervisor.
- The Nominated Supervisor will report the declarations and management plans to the Approved Provider.
- The Nominated Supervisor and Approved Provider members will declare any of their conflicts of interest to the P&C Executive members.

Responding to a Conflict of Interest

Ideally, all conflicts of interest will be avoided.

Where this is not possible, conflicts of interest can be managed through one of the following strategies:

- **Restrict** – limit or remove the participation of decision making for a person with the conflict of interest.
- **Recruit** – source an independent person to oversee aspects of the relevant processes.
- **Remove** – absolve the responsibility of person/s with conflict of interest.
- **Relinquish** – surrender the private interest that gives rise to the conflict of interest.

A record of the declared conflict of interest and agreed management plans will be maintained. The Approved Provider must be satisfied with the efficacy of the proposed plans with expressed approval before progressing with any actions related to a conflict of interest. Where an Approved Provider member is a party of a conflict of interest, they will remove themselves from the approval of the conflict-of-interest management plans.

Non-Compliance

Failure to either declare or act consistently with agreed conflict of interest plans will be viewed seriously. Employees found to be engaged in conduct that has advantaged themselves or others through unethical or dishonest actions result in disciplinary action up to and including termination.

Related Policies

- *2.2 Statement of Commitment to the Safety and Wellbeing of Children*
- *8.9.1 Code of Conduct*
- *8.19 Employee Underperformance, Misconduct and Disciplinary Procedures*
- *10.1 Managing Compliance with Legal Obligations*
- *10.2 Role and Composition of OSHC Subcommittee*
- *10.3 Budgeting and Financial Planning*
- *10.4 Setting, Reviewing and Managing Fees*
- *10.6 Nominated Supervisor*
- *10.16 Intellectual Property and Copyright*
- *10.32 Appropriate Governance*

Relevant Laws and Provisions

- *National Quality Standard, Quality Areas: 7 – Governance and leadership.*

Policy Controls			
Endorsed by:	Approved Provider	Date Endorsed:	27/10/21
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10.32 Appropriate Governance

Policy Statement

The Approved Provider is responsible to ensure that appropriate governance arrangements are in place to guide service decision making ensuring effective oversight for those with management and control of the service.

Governance (as defined by the Australian Institute of Company Directors) includes the management, rules, relationships, policies, systems and processes whereby authority within an organization is exercised and maintained. Simply put, an organisation's governance controls the manner in which its business is organised, managed and operated. Governance defines who makes the decisions what policies or processes are adopted, how risks are managed and how the organization remains financially viable.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Regulations 168 (2)(l)*

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none">• Ensure relevant suitability and management capability checks are undertaken and reported.• Provide quality management practices to support and guide the service's employees and leadership.• Ensure quality and risk management practices are sound to uphold the principles of protecting children from harm and risk to safety.• Fulfil reporting and notifying obligations.
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Procedures

The Approved Provider will ensure decision making is consistent with the organisation's governance framework (conceptual structure and set of rules) as articulated in the organisation's constitution which outlines how the organisation is managed and controlled.

In the case of a P & C operated OSHC, the P & C as the Approved Provider will ensure that decision making is informed by and consistent with the requirements articulated in the relevant laws and provisions, including (but not limited to):

- Queensland Education (General Provisions) Act 2006
- Accounting Manual for Parents and Citizens' Associations
- P & C Qld - Support Guide for P & Cs
- P & C Qld - Quick Guide for P&C Executive Officers
- Education and Care Services National Law Act, 2010 and regulations 2011
- Family Assistance Law

Succession planning and handover

A governance, management and operations handbook will be developed to form an important part of the organisation's succession planning and to support effective handover. This manual will be used to provide information and training during the handover period.

Management Capability

The executive members of the Approved Provider will be required to demonstrate 'Management Capability' as well as fitness and propriety. Management Capability includes (but is not limited to) the individuals' qualifications, knowledge, skills and experience in the areas of:

- Governance
- Human Resource Management
- Legislation and compliance
- Risk management and minimization
- Delivering quality programs and services

Refer also to Policy 10.34 Administration of Child Care Subsidy and Policy 10.10 Managing compliance with other laws and relevant provisions

Related Policies

- 10.2 Role and Composition of Sub-Committee/Parent Advisory Group
- 10.33 Managing Notifications
- 10.34 Administration of Child Care Subsidy (CCS)

Relevant Laws and Provisions

- Education and Care Services National Law Act, 2010 and Regulations 2011
- Child Protection Act 1999
- National Quality Standard, Quality Area 7 – Governance and leadership

E&CS Legislative Compliance

- Education and Care Services National Regulations 168 (2)(I).

Policy Controls			
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10.33 Managing Notifications

Policy Statement

The Approved Provider recognises its obligation to ensure sound reporting and information sharing is established and effective. The service will ensure notifications are made as required and to the relevant authority. The Approved Provider recognises as an approved Education and Care Service it must notify authorities within statutory guidelines to ensure compliance.

This policy and procedure developed by the service aims to identify specific obligations for staff and management to ensure proper internal and external reporting.

The Approved Provider also recognises their duty to comply with *Education and Care Services National Law Sections 39, 56, 59, 173 & 174* and *Education and Care Services National Regulations 12, 36, 37, 175, 176, & 168 (2)(b)(c)(d)(e)(o)*.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Seek appropriate advice from the Regulatory Authority, when required. • Report all matters outlined in the regulations for notification to the Regulatory Authority. • Report other notifiable information to relevant bodies as required.
Nominated Supervisor	<ul style="list-style-type: none"> • Report relevant matters to the Approved Provider as relevant. • Seek support and advice from the Approved Provider for significant matters. • Communicate with parents routinely, ensuring significant matters are notified in a timely manner, and at a minimum within 24 hours. • Support staff to report and record information timely and accurately. • Ensure compliant storage of reports and information.
All Staff	<ul style="list-style-type: none"> • Record and report information necessary for notification to the Regulatory Authority. • Seek support from the Nominated Supervisor (or relevant other) where required.

Procedures

1. All educators are to communicate any concern, incident or suspicions to the Nominated Supervisor or Responsible Person as soon as practicable.
2. Once an incident has been managed the Nominated Supervisor or Responsible Person has the role in ensuring reporting to the Approved Provider is completed within a lawful and reasonable timeline.
3. The P&C President will be the first contact. Where this is not achievable or suitable the Nominated Supervisor or Responsible person will contact any other of the P&C Executive Members.
4. The Nominated Supervisor and Approved Provider will decide on a plan of action and tasks to be undertaken in order to adequately respond and meet reporting requirements.

Regulatory Authority Notifications

The *Education and Care Services National Law Act 2010 and Regulations 2011* sets out incidents and allegations that are notifiable to the Regulatory Authority while a child or children are being educated and cared for by the service. These are outlined in the following table:

Incidents and Complaints		
Serious incident - Death of a child		As soon as practicable, but within 24 hours
Serious incident	Any incident involving serious illness of a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital	Within 24 hours
	Any incident involving serious injury or trauma to a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital, or a reasonable person would consider that the child would require urgent attention from a registered medical practitioner	
	Any emergency for which emergency services attended	

A child is missing or cannot be accounted for or appears to have been removed from the premises by a person not authorised by a parent	
A child is mistakenly locked in or out of the premises or any part of the premises	
Any complaint alleging that a serious incident has occurred or is occurring at an education and care service, or the National Law has been contravened	
Any incident that requires the approved provider to close, or reduce the number of children attending the service for a period	
The centre-based service is educating and caring for extra child/ren due to an emergency	Within 7 days
Any circumstance at the service that poses a risk to the health, safety or wellbeing of a child attending the service	
Any incident where the approved provider reasonably believes that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service	
Allegations that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service	
Change to information about Approved Provider	
Change to address or contact details of approved provider	Within 7 days
Any change relevant to approved provider's fitness and propriety	
The appointment of receivers or liquidators to the approved provider or any matters that affect the financial viability and ongoing operation of the service	
Death of approved provider	
Notice of any appointment or removal of a person with management or control of service	Within 14 days
Notice of change in name of approved provider	
Change to information about education and care service	
Any change to the hours and days of operation of the service	Within 7 days
Any proposed change to the premises	
Ceasing to operate the education and care service	
A nominated supervisor is no longer employed at the service, is removed from the role or withdraws consent to the nomination	
Adding nominated supervisor(s)	At least 7 days prior to commencement (or as soon as practicable but no more than 14 days after commencement)
Suspension or cancellation of a working with children card or teacher registration of a nominated supervisor, or disciplinary proceedings of a nominated supervisor under an education law	Within 14 days
Intention to transfer service approval	At least 42 days

The Approved Provider/Nominated Supervisor of the service, under the *Education and Care Services National Law Act 2010* will make notifications to the Regulatory Authority through the National Quality Agenda IT System (NQA IT System), or by contacting the office directly.

Department of Education and Training Notification (CCS)

The *Australian Government* require that Providers must notify the *Department Education and Training* of any of the following changes to their service(s), within the timeframe specified. Penalties may apply if providers fail to make required notifications.

Operators must notify about the following matters:

Matters to be notified	Timeframe
The number of anticipated vacancies (an ongoing OSHC full-session vacancy).	By 8.00 pm (AEST) each Friday.
The total hourly fee charged by the service including any change to the fee information.	Within 14 days
Any change to the operating hours.	
Ceasing to operate an approved child care service.	At least 42 days

Ceasing to operate to avoid being in breach of a law of the Commonwealth, a state or a territory or due to circumstances beyond the provider's control (when 42 days' notice cannot be given).	Within 24 hours after ceasing to operate the service.	
Change of physical or postal address of the provider or the service's premises.	No later than 30 days	
Change to the name of the provider or the service.	Within 14 days	
Change contact details (email, website, phone, fax) of the provider or service:		
Information about any new person with management or control of the provider (including any person who becomes responsible for the day-to-day operation of any of the provider's approved child care services)	Within 7 days	
Change of the name or contact details for a person with management or control of the provider (including any person who is responsible for the day-to-day operation of any of the provider's approved child care services)		
The provider becomes aware, because of a background check undertaken for a specified person, that the person: <ul style="list-style-type: none"> ▪ has a serious conviction or finding of guilt for any of the following offences under a law of Australia or of a foreign country <ul style="list-style-type: none"> • an indictable offence punishable by a maximum of two years imprisonment or 40 penalty units • an offence involving violence or a sexual offence • an offence involving fraud, stealing or dishonesty ▪ is an undischarged bankrupt, or ▪ was a director or secretary of a corporation when the corporation went into administration, receivership or liquidation, or at any time during the 12 months beforehand. 		
An event or circumstance in relation to a person with management or control of the provider (including a person responsible for the day-to-day operation of any of the provider's approved child care services) that reasonably indicates that the person is not likely to be a fit and proper person to be involved in the administration of Child Care Subsidy.		
A person stops having management or control of the provider (including when a person stops having day-to-day responsibility for the operation of any of the provider's approved child care services).		
An educator obtains a child care qualification from a registered training organisation		
A provider or a person with management or control of the provider obtains an interest, or is likely to obtain an interest, in a business which may affect their ability to comply with Family Assistance Law, where the approval may benefit the business or where a conflict of interest might reasonably be perceived to exist.		
Change in the status of a working with children card (blue card) for anyone who is required to have such a card		Within 24 hours
The provider enters into administration, receivership, liquidation or bankruptcy, and the details of this event.		
Unexpected closure of any of the provider's approved child care services due to unforeseen circumstances.		
A serious conviction or finding of guilt of a person with management or control of the provider (including a person who becomes responsible for the day-to-day operation of any of the provider's approved child care services),		

All of these notifications can be made through third-party software or the Provider Entry Point (PEP). Specific details, additional matters for notification and timeframes for notification can be accessed on the Department of Education and Training website.

Mandatory Reporting (Child Protection)

Where a staff member of the service has a reasonable suspicion, a child may be in need of protection they are to follow the *2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)* policy and report the matter to Child Safety.

Work Health Safety

The *Work Health and Safety Act 2011* sets out what sort of incidents are notifiable to Work Health and Safety Queensland (WHSQ). An incident is notifiable if it arises out of the conduct of a business or undertaking and results in the death, serious injury or serious illness of a person or involves a dangerous incident. The business must keep a record of each notifiable incident for at least five (5) years from the date notified to WHSQ.

Reports and Records

All relevant reports and records will be stored in accordance with the procedures listed in *10.8 Information Handling (Privacy and Confidentiality)*.

Related Policies

- *2.10 Handling Disclosures and Reporting Suspicions of Harm (Mandatory Reporting)*
- *4.5 Incident, Illness, Injury or Trauma*
- *6.3 Workplace Health and Safety*
- *7.2 Emergency Evacuation, Lockdown and Drills*
- *8.2 Educational Leader Policy*
- *8.7 Workplace Harassment and Bullying*
- *9.3 Interactions and Communication with Families*
- *9.5 Feedback and Complaints Handling*
- *10.1 Quality Compliance Policy*
- *10.5 Approval Requirements under Legislation Policy*
- *10.6 Nominated Supervisor Policy*
- *10.8 Information Handling (Privacy and Confidentiality)*
- *10.9 Risk Management and Compliance Policy*
- *10.22 Determining the Responsible Person*
- *10.34 Administration of Child Care Subsidy (CCS)*

Relevant Laws and Provisions

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Privacy Act 1988 and Regulations 2013*
- *National Quality Standard, Quality Area 2 – Children’s health and safety; and 7 – Governance and leadership*

E&CS Legislative Compliance

- *Education and Care Services National Law Sections 39, 56, 59, 173 & 174*
- *Education and Care Services National Regulations 12, 36, 37, 168, 175 & 176*

Policy Controls			
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10.34 Administration of Child Care Subsidy and Additional Child Care Subsidy (ACCS)

Policy Statement

The service is committed to ensuring that Child Care Subsidy (CCS) and Additional Child Care Subsidy (ACCS) is administered effectively and in accordance with relevant legislation. The procedures outlined in this policy describe the steps taken to ensure compliance with the service's obligations as an approved child care service for the purpose of administering ACCS.

Additional Child Care Subsidy provides additional fee assistance to support vulnerable or disadvantaged families and children. This support recognises the preventative and protective influence of quality child care on a child's health, wellbeing and development, and the importance of continuity of care.

There are four different payments under Additional Child Care Subsidy:

1. Additional Child Care Subsidy (child wellbeing) — to help children who are at risk of serious abuse or neglect
2. Additional Child Care Subsidy (grandparent) — to help grandparents on income support who are the principal caregiver of their grandchildren
3. Additional Child Care Subsidy (temporary financial hardship) — to help families experiencing financial hardship
4. Additional Child Care Subsidy (transition to work) — to help low-income families transitioning from income support to work.

The service recognises that strategies must be in place to ensure the service complies with the requirements for the administration of Child Care Subsidy, including reporting and that the service has an obligation to design and implement procedures for the detection and prevention of fraud in relation to CCS payments.

Roles and Responsibilities

Approved Provider	<ul style="list-style-type: none"> • Ensure the service fulfils its duties for assessment of fit and proper persons. • Ensure only authorised persons has access to the service CCS administration software
Nominated Supervisor and Responsible Persons	<ul style="list-style-type: none"> • Monitor the day-to-day compliance of the services' IT systems to ensure only authorised persons are accessing CCS software. • Support families to access ACCS services as required. • Monitor and respond to 'at-risk' children to ensure access to ACCS (Child Wellbeing) as required.

Procedures

The service will implement the following procedures to comply with the administration requirements of child care subsidy:

- Ensure that only ***authorised persons** within the service have access to the service's licensed software for the administration of CCS
- Ensure that all staff who require access to the system used to administer CCS meet the fit and proper requirements
- Ensure that all committee members of the 'Approved Provider' meet the **fit and proper** (see below) requirements
- Reconcile payments received with payments expected

The service will implement procedures to detect and minimize fraud, including:

- Ensuring all "Persons with Management or Control of the Provider" (e.g. Executive of P & C), "Persons Responsible for the Day-to-Day Operation of the Service" (e.g. Nominated Supervisor, Responsible Person in Charge or Administrator of CCS) meet specified ****fit and proper requirements**
- Ensuring all service finances are handled in accordance with service policy, accounting manuals and best practice guidelines

- Ensuring there is no personal ‘conflict of interest’ of staff or the governing body in the management of CCS
- Ensuring staff are appropriately trained in CCS compliance and the use of service software

**Authorised person means a person who has been identified by the service in writing as having permission to access the service’s CCS administration software and has been provided with a username and password to access the system. Access may include management of enrolments, bookings, absences and cancellations. The Approved Provider will ensure ‘Authorised’ persons are appropriately trained and competent in the use of the software*

Fit and Proper Persons

A ‘fit and proper person’ is a person (who has met the requirements of Section 43 of the Child Care Subsidy Minister’s Rules 2017) which requires a provider to undertake particular suitability checks for each Person with Management or Control of the Provider. These are:

- An Australian National Police Criminal History Check dated no earlier than 6 months from the date the individual was linked to the organisation.
- A Working with Children Check (Blue Card) if the Person with Management or Control is required to hold such a check under their state or territory’s regulatory law.
- National Personal Insolvency Index check performed using the Bankruptcy Register Search service provided by the Australian Financial Security Authority (AFSA) dated no earlier than 3 months from the date the individual was linked to the organisation.
- A Current and Historical personal name extract search of the records of the Australian Securities and Investments Commission (ASIC) dated no earlier than 6 months from the date the individual was linked to the organisation.
- Evidence that the person does not appear on the banned and disqualified register held by ASIC (in the form of a computer printout of the results of the search) dated no more than 3 months from the date the individual was linked to the organisation.

The service understands that evidence of these checks is required in a CCS application and, where personnel are added after CCS approval, the evidence must be made available to be shown to the department on request.

Additional Child Care Subsidy (ACCS)

The service will maintain access to a current copy of the Australian Government Child Care Provider Handbook to support in accessing relevant guidance on ACCS.

As Providers, the service is centrally involved in identifying children who require extra support through Additional Child Care Subsidy (child wellbeing). Providers are not involved in making applications for the other types of Additional Child Care Subsidy, although they may wish to help families whom they think may be eligible by encouraging them to contact Centrelink and apply for additional assistance. Providers will be advised of individuals using their service who are receiving these other payments.

An overview of these types of Additional Child Care Subsidy is available in the Australian Government Child Care Provider Handbook.

ACCS (Child Wellbeing)

Additional Child Care Subsidy (child wellbeing) provides additional child care fee assistance to an individual (or provider) in respect of children at risk of serious abuse or neglect. It helps to address cost barriers families may experience, so that children can either enter or remain engaged with child care.

For the purposes of Additional Child Care Subsidy (child wellbeing), a child is taken to be at risk of serious abuse or neglect if the child is at risk of experiencing harm, as a result of current or past circumstances or events that resulted in the child being subject to, or exposed to, any of the following:

- serious physical, emotional or psychological abuse, or
- sexual abuse, or
- domestic or family violence, or
- neglect.

The Minister’s Rule sets out in detail the circumstances when a child is taken to be at risk of serious abuse or neglect for the purposes of Additional Child Care Subsidy (child wellbeing).

The definition of ‘at risk’ includes situations where the child is likely to experience those circumstances in the future (for example, the future risk is ‘real and apparent’). This allows families to be eligible for the subsidy at the appropriate earliest point and potentially before they are known to a child protection agency.

Any child who is identified as being at risk under state or territory child protection law will meet the definition of at risk and the individual (or provider) will, therefore, be eligible to receive the payment.

There are two ways for the service to access Additional Child Care Subsidy (child wellbeing):

- 1) Giving an Additional Child Care Subsidy (child wellbeing) certificate
- 2) Additional Child Care Subsidy (child wellbeing) determination.

When accessing ACCS the Services will refer to the Australian Government Child Care Provider Handbook for up-to-date information and guidance.

Other Hardship

On a case-by-case basis, the Approved Provider may consider written requests for support from the Approved Provider when the hardship does not meet the threshold for ACCS, however, under Family Assistance Law the service is unable to waive the gap/parent’s co-contribution.

Related Policies

- 2.4 Arrivals and Departures of Children
- 2.14 Bookings and Cancellations
- 4.19 Childhood Immunisation
- 9.1 Access
- 9.2 Enrolment and Orientation
- 9.2 Enrolment and Orientation
- 9.3 Interactions and Communication with Families
- 9.9 Acceptance and Refusal of Authorisations
- 10.1 Managing Compliance with Legal Obligations
- 10.3 Budgeting and Financial Planning
- 10.4 Setting, Reviewing and Managing Fees
- 10.6 Nominated Supervisor
- 10.8 Information Handling (Privacy and Confidentiality)
- 10.21 Service Closures
- 10.26 Social Media and ITC Usage
- 10.33 Managing Notifications

Relevant Laws and Provisions

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook
- National Quality Standard, Quality Areas: 2 – Children’s health and safety; 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

Policy Controls			
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10.35 Promoting and Protecting Human Rights

Policy Statement

The Approved Provider, in providing an OSHC service on behalf of the state, recognises its duties are a *public entity* as defined within the *Human Rights Act (Qld) 2019*.

The Approved Provider is committed to protecting and promoting human rights; therefore, it will ensure the service's functions (the acts and decisions) are compatible with all human rights contained within the Act. In making decisions, the Approved Provider, its delegates and employees are committed to giving proper consideration to human rights relating to these decisions. The Approved Provider, its delegates and employees will be familiar with the Act, including the human rights contained within it:

Human Rights (Human Rights Act 2019 s15-37)	
Civil and political rights	
<ul style="list-style-type: none"> • Recognition and equality before the law • Right to life • Protection from torture and cruel, inhuman or degrading treatment • Freedom from forced work • Freedom of movement • Freedom of thought, conscience, religion and belief • Freedom of expression • Peaceful assembly and freedom of association • Taking part in public life • Property rights • Privacy and reputation 	<ul style="list-style-type: none"> • Protection of families and children • Cultural rights—generally • Cultural rights—Aboriginal peoples and Torres Strait Islander peoples • Right to liberty and security of person • Humane treatment when deprived of liberty • Fair hearing • Rights in criminal proceedings • Children in the criminal process • Right not to be tried or punished more than once • Retrospective criminal laws
Economic, social and cultural rights	
<ul style="list-style-type: none"> • Right to education 	<ul style="list-style-type: none"> • Right to health services

The service and the Approved Provider have developed and will implement fair complaints procedure to address any claim made regarding where the service is alleged to have limited a person's human right. The Association recognises where a complaint relates to unlawful human rights actions or decisions, it will be required to follow relevant Departmental policy and refer these complaints to the school's Principal for further investigation and management.

Procedures

Decision Making and Policy

The Approved Provider will consider the impact on the compatibility of an individual's human rights when developing policy and making a decision for the service, especially those with a direct and explicit connection to any human right.

The Approved Provider will reflect these considerations in the policy documents outlining, where relevant when specific human rights are being protected.

Employees, volunteers and representatives will be expected to act consistent with policy and procedures of the service and make judgements that promote and protect an individual's human rights.

Where issues of human rights incompatibility are identified, the service will act promptly to rectify and respond to the matter.

Complaints

The service has established practices for fair complaints handling (see 9.5 *Feedback and Complaints*), Where an individual believes the service has acted in a way that is incompatible with a person's human rights, the matter will be referred to the Principal for Departmental handling.

Any person (employee, volunteer, child, parent, community member, etc.) has the right to make a complaint if they believe any of their human rights have been infringed.

Where a complainant is not satisfied with the response from the Association or Department, they may be available to pursue the matter to the Queensland Human Rights Commission, via making a submission directly to the Commission.

The service will not prejudice any person's access to further proceedings and will at all times support an individual to access a just outcome.

Communication and Promotion

Information about the service's complaints process is displayed in a prominent location within the service. Additionally, further information is contained within the service's family handbook.

Relevant information will be supplied to families and stakeholders via notices, policy updates and appropriate resources.

The service's program will explore opportunities to promote children's awareness of their rights and the rights of others in innovative and child-focused methodologies.

Training and Orientation

Staff and volunteers will receive training and instruction on their obligation to promote and protect individual rights on commencement of engagement and routinely throughout their time with the service.

Related Policies

- 2.2 Statement of Commitment to the Safety and Wellbeing of Children
- 2.23 Interactions and Relationships with Children
- 8.6 Employee and Volunteer Grievance
- 8.7 Workplace Harassment, Bullying and Discrimination
- 8.9 Code of Conduct
- 9.3 Communication with Families
- 9.4 Communication with Community
- 9.5 Feedback and Complaints
- 10.32 Appropriate Governance

Relevant Laws and Provisions

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook
- National Quality Standard, Quality Areas: 1 – Educational program and practice, 2 – Children's health and safety; 3 – Physical environment, 4 - Staffing arrangements, 5 - Relationships with children; 6 - Collaborative partnerships with families and communities; and 7 – Governance and leadership.

Policy Controls			
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