



Bayside Christian College  
Early Learning Centre  
Policies and Procedures Manual

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Early   
 Learning  
Centre

<b>Biblical Values and Relationships with Children .....</b>	<b>6</b>
<b>Enrolments and Orientation Policy .....</b>	<b>8</b>
Policy statement.....	8
Procedures.....	9
<b>Behaviour Management Policy.....</b>	<b>14</b>
Policy statement.....	14
Procedures.....	15
<b>Child Safe Environment Policy .....</b>	<b>21</b>
Policy Statement .....	21
Procedures.....	28
Appendix 1.....	35
Appendix 2.....	36
Appendix 3.....	38
Appendix 4.....	43
Appendix 5 .....	45
<b>Code of Conduct Policy (Parents/Guardians, Volunteers and Practicum Students) 47</b>	
Policy statement.....	47
Procedures.....	48
<b>Communication Policy .....</b>	<b>52</b>
Policy statement.....	52
Procedures.....	52
<b>Complaints Policy.....</b>	<b>55</b>
Policy statement.....	55
Procedures.....	55
<b>Delivery and Collection of Children Policy.....</b>	<b>57</b>
Policy statement.....	57
Procedures.....	58
Appendix 1.....	61
Appendix 2.....	62
Appendix 3.....	63
<b>Excursion Policy .....</b>	<b>64</b>
Policy statement.....	64
Procedures.....	64
<b>Inclusion of Children with Additional Needs Policy .....</b>	<b>70</b>
Policy statement.....	70
<b>Occupational Health &amp; Safety Policy.....</b>	<b>74</b>
Policy Statement .....	74
Procedures.....	77

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020


<b>Parents/Guardians Access and Involvement Policy .....</b>	<b>82</b>
Policy statement.....	82
Procedures.....	83
<b>Privacy Policy.....</b>	<b>85</b>
Policy statement.....	85
Procedures.....	87
Related Forms .....	87
Schedule 1.....	88
Schedule 2.....	90
Schedule 3.....	92
Schedule 4.....	93
Schedule 5.....	94
Appendix 1.....	96
Appendix 2.....	97
<b>Qualified Staff Policy.....</b>	<b>98</b>
Policy statement.....	98
Procedures.....	98
<b>Determining The Responsible Person .....</b>	<b>100</b>
Policy statement.....	100
Procedures.....	102
<b>Transition to School Policy .....</b>	<b>105</b>
Policy Statement .....	105
<b>Safe Sleep, Rest and Relaxation Policy.....</b>	<b>106</b>
Policy statement.....	106
Sources.....	108
Procedures.....	108
<b>Water Safety Policy.....</b>	<b>111</b>
Policy Statement .....	111
Procedures.....	114
<b>Accident, Injury and Medical Emergency Policy .....</b>	<b>118</b>
Policy statement.....	118
Procedures.....	119
<b>Administration of Medication Policy .....</b>	<b>122</b>
Policy statement.....	122
Procedures.....	122
<b>Dealing With Medical Conditions In Children Policy .....</b>	<b>125</b>
Policy statement.....	125
Procedures.....	128
Evaluation.....	130

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020




<b>Anaphylaxis Policy .....</b>	<b>131</b>
Policy statement.....	131
<b>Asthma Policy .....</b>	<b>136</b>
Policy statement.....	136
Procedures.....	136
<b>Diabetes Policy .....</b>	<b>140</b>
Policy Statement .....	140
Procedures.....	143
Appendix 1.....	146
<b>Epilepsy Policy .....</b>	<b>148</b>
Policy Statement .....	148
Procedures.....	152
Appendix 1.....	155
Appendix 2.....	156
Appendix 3.....	157
<b>Emergency Management Policy .....</b>	<b>160</b>
Policy statement.....	160
Procedures.....	160
<b>First Aid Policy .....</b>	<b>163</b>
<b>Head Lice Policy .....</b>	<b>164</b>
Policy statement.....	164
Procedures.....	164
<b>HIV/AIDS and Hepatitis Policy .....</b>	<b>166</b>
Policy statement.....	166
Procedures.....	168
Appendix 1.....	170
Appendix 2.....	173
<b>Hygiene Policy .....</b>	<b>174</b>
Policy statement.....	174
Procedures.....	174
Appendix 1.....	178
<b>Illness Policy .....</b>	<b>179</b>
Policy statement.....	179
Appendix 1.....	183
<b>Infectious Diseases Policy.....</b>	<b>184</b>
Policy statement.....	184
Procedures.....	185
Appendix 1.....	186

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



<b>Nutrition and Food Safety Policy (Including Hot Drinks guidelines) .....</b>	<b>190</b>
Policy statement.....	190
Appendix 1.....	196
Appendix 2.....	198
<b>Sun Protection Policy .....</b>	<b>201</b>
Policy statement.....	201
Procedures.....	202
Appendix 1.....	205
<b>FORMS and TEMPLATES .....</b>	<b>206</b>
CODE OF CONDUCT: Acknowledgement Of Receipt .....	207
AUTHORISATION FORM: Delivery And Collection Of Children.....	208
PERMISSION FORM FOR EXCURSIONS WITHIN THE BAYSIDE CHRISTIAN COLLEGE CAMPUS .....	209
EXCURSION FORM: Volunteers.....	209
LETTER FOR STAFF: Re 'acknowledgement and understanding of privacy policy' .....	211
ACKNOWLEDGEMENT FORM: Reading the Privacy Policy.....	212
AUTHORITY FORM: For staff to administer sunscreen provided by the Centre .....	213
PERMISSION FORM: Photographs and Videos .....	214
TEMPLATE: Individual Learning Plan.....	216
TEMPLATE: Incident, injury, trauma and illness record.....	219
TEMPLATE: Excursion Risk Management Plan.....	222

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Biblical Values and Relationships with Children

These values are to be read alongside the following supporting documents:

- The Modern Award and National Employment Standards
- Terms and Conditions of your employment contract with Bayside Christian College
- Bayside Policies
- Victorian Institute of Teachers Code of Conduct
- Professional Standards for Teachers
- Bayside Christian College Staff Handbook
- Bayside Christian College Staff Appraisal Process

At Bayside Christian College, we seek to honour God in lifestyle as well as belief, our lifestyle demonstrating our beliefs.

Accordingly, as a Christian learning community, we hold the following Biblical values, and seek to promote these values among our families and students by the teaching and lifestyle of the Board of Directors, and Staff.


Therefore, it is the expectation of the College that the Board and Staff;

- Give first priority in life to the one true God revealed in the Bible as three persons: Father, Son and Holy Spirit
- Be part of a faith community and attend regularly
- Not use language that is blasphemous or unwholesome
- Be just and fair in all dealings with other people. Not discriminate in relationships against others because of race, beliefs, gender, disability or values
- Be willing to support families and to provide for family needs and to set apart time for God and relaxation
- Honour parents and those set in authority over us
- Respect the sanctity of life in all situations, love others as oneself and avoid actions, words or attitudes that will deliberately hurt others.
- Be quick to forgive where offences have occurred
- Respect the sanctity of marriage
- Respect the property and good name of others.
- Speak truthfully
- Abstain from greed, lust, pornography, gluttony, drunkenness and banned substances
- Handle disputes or grievances in a God honouring and Biblical manner
- Not adhere to teaching or promote occultic beliefs, values or practices


## Communication of Policy

The College will communicate this policy to all staff, the community and appropriate members of the wider community including:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Any person who is offered employment with the College;
- On request, free of charge –
- To employees and contractors of the College to whom it relates or may relate;
- To students, prospective students and parents and guardians of students of the Early Learning Centre.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						 <p>Bayside Christian College</p> <p><small>"Only with Accuracy in Christ"</small></p>
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director	
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020	

## Enrolments and Orientation Policy

### Policy statement

#### Purpose

This policy outlines for prospective families and relevant College staff, the basis and conditions upon which offers to the ELC are made, and the procedures involved in the ELC application and enrolment process.

#### Values

Bayside Christian College is committed to:

- Equal access for all children
- Complying with The Education and Care Services National Regulations 2011
- Complying with the DEECD funding requirements relating to the enrolment of children in government-funded kindergarten places
- Maintaining confidentiality in relation to the details on enrolment forms.

#### Scope

This policy applies to the College, staff and parents/guardians who wish to have their child/ren enrolled, or have child/ren already enrolled, at the Bayside Christian College ELC.

#### Background and Legislation

Relevant legislation may include but is not limited to:

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011
- Disability Discrimination Act 1992
- Equal Opportunity Act 2010 (Vic.)
- Human Rights and Equal Opportunity Commission Act 1986
- Sex Discrimination Act 1984

#### Definitions

**Children with additional needs:** Children whose development or physical condition needs specialist support, or children who may need additional support due to language, cultural or economic circumstances (refer to Inclusion and equity policy).

**Deferrals:** A child who does not attend in the year when the child is eligible for a funded kindergarten place, or officially withdraws from a centre prior to the end of Term 2. These children are considered by DEECD not to have accessed a year of funded kindergarten, and are therefore eligible for DEECD funding in the following year.

**Department of Education and Early Childhood Development (DEECD):** The state government department responsible for the funding, licensing and regulation of children's services in Victoria.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



**Eligible child:** Child who meets the criteria outlined in the Victorian Kindergarten policy, procedures and funding criteria.

**Enrolment application form:** A form to apply for a place at the centre.

**Enrolment application fee:** The \$75 fee charged to cover administrative costs associated with enrolling a child at the centre. This is non-refundable.

**Enrolment form:** A form that collects details regarding individual children. This is completed after a place has been offered by the centre and accepted by the applicant.

**Family Enrolment Bond:** \$500 fee paid when each child in the family begins at the Early Learning Centre. It is refunded when you sever your ties with the Early Learning Centre or can be passed onto the College for those wishing to continue on through the College.

**Fees:** The amount charged to attend a program at the centre.

**Guardian:** Person/s who have been granted lawful authority by a court order for child/ren. The definition of 'guardian' under the Education and Care Services National Law 2011 also means a person who has custody or control of the child but does not include a person providing children's services to a child.

**Kindergarten:** Kindergarten (sometimes known as preschool) is a universal early childhood program, funded by the state government, for children in the year prior to commencing primary school. It may also include an unfunded program for three-year-old children (two years before school).

**Lawful authority:** A power, duty responsibility or authority conferred in relation to a child at common law or under an Act or by an order of a court.

**Siblings:** Sisters and brothers by whole or half blood, adoptions or by marriage, including or to whom foster care is provided by a parent (including an adoptive parent) or guardian of the first mentioned child.

**Vacancy:** A place in a program that becomes free as a result of a child leaving the centre, or is available because all places are not filled.

**Vacant funded place:** A government-funded place at the centre from which a child has withdrawn.

## Procedures

The registrar is responsible for:

- Determining the criteria for priority of access to centre programs based on funding requirements and the centre's philosophy

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Providing opportunities (in consultation with staff) for interested families to attend the centre during children's non-contact time on a Friday to view the program.
- Ensuring that enrolment forms comply with the requirements of The Education and Care Services National Regulations 2011 (Regulation 160 (3))
- Managing all enrolment enquiries and room tours.
- Making relevant offers and providing relevant paperwork to families in accordance with this policy and relevant to Enrolment procedures.
- Storing completed enrolment application forms, as soon as is practicable, in a lockable file (Regulation 181)
- Collecting, receipting and banking enrolment deposit fees
- Complying with the Privacy policy of the centre

The Director is responsible for:

- Providing a locked secure file for the storage of completed enrolment forms (refer to Privacy policy)

Complying with the Privacy policy of the centre

The staff are responsible for:

- Reviewing enrolment applications to identify children with additional needs
- Responding to enrolment enquiries on a day-to-day basis and referring people to the Registrar as required
- Responding to parent/guardian enquiries regarding their child's readiness for the program in which they are considering enrolling their child
- Complying with the centre's Privacy policy in relation to the collection and management of children's enrolment information
- Ensuring that enrolment forms are completed before the child commences attending the program.

Parents are responsible for:

- Completing enrolment forms prior to their child's attendance at the centre
- Ensuring that all required information is provided to the service
- Updating information by notifying the centre of any changes through the application and enrolment process.

Important note: Failure to disclose information or providing misleading or false information, may lead to the College withdrawing an offer or terminating your child's/children's enrolment.

## Enrolments Procedure

### Step One – Application for enrolment

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

Parents may submit an 'Application for Enrolment' any time after their child's birth for their child's name to be placed on the waiting list.

Applications for enrolment must be completed using the Bayside ELC Application for Enrolment Form. An application form must be completed for each child seeking a place.

A copy of the child's birth certificate and the non-refundable application fee of \$75.00 must be submitted with the application for enrolment.

Applications close June 30 in the year prior to commencement.

Late applications may be considered once all other applicants have been offered a place, in line with the priority of access criteria of Bayside ELC.

Applicants are listed on the ELC waiting list in order of dates received.

Important note: Entry on the waiting list is not an offer, nor will it guarantee a place in the Early Learning Centre.

Bayside Christian College sends a letter acknowledging receipt of application for enrolment.

### **Step Two – Offer of Place**

Applications for enrolment are reviewed and prioritized by the Directress/Registrar in accordance with the Eligibility and Access Criteria of the ELC.

Letters of offer are sent to families who meet the eligibility criteria and for whom a place is available in Term 3 of the year proceeding commencement at the ELC.

### **Step Three – Acceptance of Place**

To accept an offer, families must complete the 'Bayside Christian College ELC Enrolment Form' and return it to the College with payment of the \$500 family bond\* (refundable when family leaves ELC or transferred if the family continues into Prep, provided all fees are paid in full)

\*\$500 family bond is not payable where a family bond exists from a current/sibling enrolment

Enrolment forms and bond payments (where applicable) must be lodged, within 14 days of date of letter of offer, to secure a place in the ELC.

Following receipt of completed enrolment forms and bond, Bayside Christian College sends a letter to confirm enrolment.

Entrance into the Bayside Christian College Early Learning Centre does not guarantee a place in Prep at Bayside Christian College. Families wishing to enroll for Prep should refer to the [College Enrolment Policy](#) and contact the College Registrar.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Bayside ELC Eligibility and Priority of Access Criteria

### 3 year old kindergarten program

The following children are eligible for attendance in the three-year-old kindergarten program;

- Children who turn 3 years of age on or before 1<sup>st</sup> February of the year in which they will attend kindergarten

Only in exceptional circumstances (as determined by the Directress in consultation with the Head of Primary) may children be able to attend a second year of three-year-old kindergarten, subject to availability of places.

Where there are more 'eligible applicants' than three-year-old places available, the Directress (in consultation with the Head of Primary and College Registrar) will consider applications on the basis of the following priorities;

- Children with siblings who are past/current students attending the ELC or Bayside Christian College
- Children from families who can demonstrate regular church attendance and support the biblical values of the ELC/College
- Date of application

### 4 year old funded kindergarten program

Children who turn 4 years of age on or before 30 April of the year in which they will attend kindergarten and those children assessed as eligible for a second funded year of kindergarten are eligible for attendance in the four-year-old kindergarten program.

Where there are more 'eligible applicants' than four-year-old places available, the Directress (in consultation with the Head of Primary and College Registrar) will consider applications on the basis of the following priorities;

- Children who have attended 3 year old kindergarten at Bayside ELC
- Children with siblings who are past/current students attending the ELC or Bayside Christian College
- Date of application

## Fees and Charges


The College Board sets fees annually.

Fees for each year are outlined on the 'Payment Arrangement Form' and may be payable by installments.

Fees are payable for all days of enrolment regardless of attendance.

Please refer to the current fee schedule for exact costs.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



### Child Care Rebate

A Kindergarten fee subsidy may be available to families on a concession card. The appropriate forms are available from the College office.

### Orientation Procedure

When making the transition from home to the Early Learning Centre it is essential to provide children with a positive experience. The year prior to commencement children attend the ELC with their parents/guardians for an orientation session. Being able to see their environment and the people they will be going to kinder with gives them a sense of confidence and familiarity before they even begin.

At the start of term one there is an orientation process for both three and four year old kinder groups catering for their specific needs.

The three year old program is staggered over approximately a two week period with two groups rotating attendance before the full program commences.

The four year old orientation program begins with the children attending the Centre for only two of their 3 regular days. Parents are encouraged to access the entire program, as quickly as possible, but with consideration for their child's individual needs.

We believe that parents and families know their children best therefore the staff wish to partner with families to ensure a smooth transition into the kinder program.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Behaviour Management Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Helping children develop a relationship with God
- Providing children with a safe and secure environment and the opportunity for positive and respectful interactions with adults and children.
- Recognising that children's behaviour reflects their level of development and is influenced by a range of factors, including family and culture.
- Providing a learning environment that supports the growth and development of each child's self- concept, self-esteem and spirituality.
- Providing a physical and learning environment that aims to prevent behavioural difficulties.
- Helping children learn the consequences of their behaviour and thus develop an understanding of how their actions affect others.
- Working in partnership with parents/guardians and other professionals in issues relating to the guidance of a child's behaviour.
- Helping children to learn to interact effectively, and in doing so to learn to balance their own rights, needs, and feelings with those of others.
- Engaging only in practices which are respectful of, and provide security for, children and in no way degrade, endanger, exploit, intimidate, or harm them psychologically
- Complying with regulatory and legislative requirements.

#### Purpose

To achieve the above listed values by providing a developmentally appropriate behavioural guidance structure for all staff and any other persons involved in the care and education of the children.

#### Scope

This policy applies to all staff, volunteers, parents/guardians, children, and any other persons involved in the care and education of the child.

#### Background and Legislation

The Education and Care Services National Law 2011 Part 6 (166-1) says

Bayside Christian College must ensure that no child being educated and cared for by the service is subjected to:

- a) any form of corporal punishment; or
- b) any discipline which is unreasonable in the circumstances.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Part 6 (166-2) The nominated supervisor of an education and care service must ensure that no child being educated and cared for by the service is subjected to:

- a) any form of corporal punishment; or
- b) any discipline which is unreasonable in the circumstances.

A staff member, or a volunteer at, an education and care service must not subject any child being cared for or educated by the service to:

- a) any form of corporal punishment; or
- b) any discipline which is unreasonable in the circumstances.

## Procedures

The college is responsible for:

- Providing staff with guidelines on Bayside Christian College's expectations of their behaviour, responses and reactions when working with children and their families.
- Supporting staff to gain appropriate knowledge and develop appropriate skills for the implementation of this policy.
- Ensuring that all staff, parents/guardians, students, and volunteers are aware of this policy and that it is implemented within the Early Learning Centre.
- Approving any changes to the policy.
- Approving any additional expenditure or resources.

Qualified staff are responsible for:

- The day-to-day implementation of this policy and where possible resolving behavioural guidance issues directly with the parents/guardians and children concerned.
- Working collaboratively with other staff in implementing this policy and informing staff of the implementation requirements of behavioural guidance plans.
- Using their professional knowledge and experience to develop, in consultation with staff, attitudes and practices that are based on realistic expectations of children's needs and abilities.
- Ensuring procedures are in place for effective daily communication with parents/guardians to understand issues outside the centre that may impact on a child's behaviour
- Providing a program that is age appropriate and based on the individual needs and interests of each child.
- Providing a program that supports the use of positive techniques of guidance, redirection and reinforcement, as opposed to comparison, competition or criticism.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Working cooperatively with parents/guardians on issues relating to the guidance of their child's behaviour, keeping them informed of the techniques and methods used.
- Providing a set of basic developmentally appropriate behavioural guidelines which: Emphasise positive actions
- Give children reasons for the limits
- Behaviour management is implemented in a consistent manner
- The policy is reinforced regularly
- The policy is reviewed regularly for age and cultural appropriateness

All staff are responsible for:

- Working collaboratively with other staff in implementing this policy and behavioural guidance plans.
- Discussing behaviours that cause concern with other staff.
- Providing a physical environment with adequate equipment, variety and challenges for the children.
- Respecting the confidentiality of both the parents/guardians and child when dealing with issues of behaviour guidance concerning an individual child.
- Ensuring that children are not put in a position where they feel frightened, ashamed, embarrassed, insecure, or isolated.
- Recognising that from time to time they will need assistance, advice and/or support and seeking that whenever necessary.

The parents/guardians are responsible for:

- Engaging in communication with staff about their child. (Refer to the Communication Policy)
- Informing staff of any events in the child's life outside the centre which may impact on their behaviour (for example, moving house, relationship issues, new sibling).
- Informing staff of any concerns they have regarding the behaviour of their child or the impact of other children's behaviour on their child.
- Working collaboratively with staff to develop a behaviour guidance plan if required.
- Procedures for the guidance of ongoing unacceptable behaviour.

When dealing with ongoing unacceptable behaviour, qualified staff will:

### Step 1:

Enter into collaborative problem solving with the parents/guardians. Invite parents/guardians to help solve the problem through discussing:

- The ongoing unacceptable behaviour displayed by the child.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



- The parents/guardians and the Early Learning Centre's overall aspirations for the child.
- The types of solutions (strategies) possible in the circumstances.
- What has worked or failed in the past, whether at home or in the centre.
- The child's personal characteristics, such as his/her interests, temperament, age or size.
- Resources/changes required for the individual child's and group program to be implemented (for example, changes to routines, transitions)
- Other resources available such as Preschool Field Officers, referral for specialist assessment, additional adult support. (Written consent from parents/guardians must be given before any intervention/assessment is obtained.)

### Step 2:

The qualified staff member will develop a behaviour guidance plan which is:

- Based on the observations of the child, this may include broader observations of the culture of the room and the interactions of the whole group, including other staff working with the child. Items to consider may include:
- Who is included in the child's play
- Who is excluded from the child's play
- How does the child gain entry into play
- What resources are used in the child's play
- How the staff in the room interact with the child.
- Acceptable to the parents/guardians and any other professionals involved in the care and education of the child.
- Clear and easily followed by all staff, parents/guardians and/or volunteers working with the child.

### Step 3:

- A date is set to review, reflect, evaluate and re-plan. This initially should be within a two-week time frame.

The Head of Primary will become involved when:

- The staff member is concerned that the child's behaviour may put themselves, other children, staff, or others at risk.
- The consultation with the parents/guardians and other professionals and the development of a behavioural guidance plan has not resolved the problem.
- A complaint is received concerning a child's behaviour, for example, the safety of other children is threatened.
- Additional resources are required.

Staff practices:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- Teach children about saying sorry, asking for & giving forgiveness and prayer
- Understand the needs of individual children and those in the group and acknowledge that most children's behaviour is influenced by their developmental stage, the environment, the time of day, actions (modeling) of staff and other children, family experiences and the family cultural background.
- Recognise that some causes of inappropriate behaviour include, anger, frustration, boredom, desire for attention, imitation, tiredness, excitement, jealousy, social clumsiness, high activity levels and too much choice or lack of choice.
- Support children to learn to think for themselves and to be considerate. Help them to think about the effects of their behaviour on other children and look for solutions together. This could involve speaking with the child about the effect of their behaviour on others and then ask the child "What do you think we could do to make sure it doesn't happen again?"
- Teach children to recognise when their behaviour is successful. For example, instead of saying "Good boy for packing up the toys" we can say "Thank you, I appreciate that you packed up the toys".
- Foster a positive self-esteem through acknowledging children
- Giving children information about the things they have achieved that you appreciate and respect and impress you rather than an evaluation or a judgement of them as a person or their work.
- Assist and encourage children to recognise, talk about and manage their feelings; encourage children to think about how others might feel (empathy).
- Anticipate potentially unacceptable behaviours and eliminate situations and physical arrangements that may encourage inappropriate behaviour.
- Encourage children to resolve potential conflicts for themselves, but step in with strategies and suggestions when needed.
- Acknowledge a child's good intentions, (even if they were carried out inappropriately).
- Acknowledge that it is the behaviour that is inappropriate and not the child.
- Acknowledge and accept the child's feelings of anger, frustration or jealousy, even if the reaction seems out of proportion to the cause. Distinguish feelings from the response the child has to those feelings. Encourage the child to talk about their feelings.
- Use language that does not label the child but labels the behaviour.
- Role model considerate and respectful behaviour in all interactions with peers, children and other adults.
- Provide supported opportunities in class for children to practise social skills (such as entering play) and resolution skills for when conflicts arise
- Allow appropriate choices in decision-making and be prepared to accept the child's decision.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Give attention to all children involved in a situation. Comfort a child who may be hurt or upset and talk to the aggressor. Empower the child who has been hurt/upset to express to the other child how they feel.
- Always respond to a situation in a calm manner.

Process for resolution where the Head of Primary becomes involved

### **Step 1: Consultation and investigation phase**

The Head of Primary is responsible for:

- If a complaint has been received, in addition to the procedures outlined below, following the procedures outlined in the Complaints Policy to ensure compliance with centre policy and regulatory and legislative requirements.
- Asking staff for their professional evaluation of the situation and what they believe needs to be done in relation to strategies to be implemented and resources needed.
- Meeting with the parents/guardians of the child displaying the behaviour.
- Meeting with any support agencies involved with the child, if appropriate.
- Assessment of staff skills in the area of guidance.
- Identifying additional training needs for staff in the area of guidance.
- Investigating the availability of extra assistance, financial support, or training, by contacting the regional Preschool Field Officer or agencies involved with the child.

### **Step 2: Resolution phase**


The Head of Primary, following consultation and investigation, will seek to put in place a behavioural guidance plan that has been developed by all parties and is mutually acceptable to all parties and implemented by the staff.

This behaviour guidance plan could include:

- Behavioural assessment of the child and utilising behaviour intervention programs or specialists (if not already undertaken).
- Incorporation of the identified strategies into the qualified staff member's program at the Early Learning Centre.
- Consultation with other staff responsible for the care and education of the child in regard to the implementation of the behaviour guidance plan.
- Maintaining ongoing consultation with parents/guardians. This may be a joint responsibility of the qualified staff member and the Head of Primary
- Reducing the amount of time the child attends the centre, or requesting the parent/guardian to remain with the child.
- Additional staff for the room (depending on the availability of funds).
- A behavioural and/or developmental assessment of the child (if not already undertaken).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- A behavioural intervention program or obtaining specialist advice
- A referral to a parent support program to obtain assistance or other support services for the family .
- Reporting process to the Head of Primary
- Maintaining confidentiality in relation to information gained about the child and their family.
- Clear timeframes for review and evaluation.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						 <p>Bayside Christian College</p> <p><small>"Only with Security in Christ"</small></p>
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Child Safe Environment Policy

### Policy Statement

#### Purpose

This policy will provide a clear set of guidelines and procedures to ensure:

- all children attending Bayside Christian College ELC are provided with a safe environment
- all reasonable steps are taken by the Approved Provider, educators and staff to ensure the health, safety and wellbeing of children attending the service
- timely and effective intervention for children and young people who may be at risk of abuse or neglect.

#### Values

Bayside Christian College ELC has a moral and legal responsibility to ensure that all children are safe in their care, and will provide training, resources, information and guidance to support this. Bayside Christian College ELC is committed to:

- Ensuring that the health, safety and wellbeing of children at the service is protected at all times while also promoting their learning and development
- Fulfilling its duty of care (refer to Definitions) obligations under the law by protecting children from any reasonable, foreseeable risk of injury or harm
- Ensuring that people caring for children at the service act in the best interests of the child, and take all reasonable steps to ensure the child's safety and wellbeing at all times
- Supporting the rights of all children to feel safe, and be safe, at all times
- Developing and maintaining a culture in which children feel valued, respected and cared for
- Encouraging active participation from parents/guardians and families at the service, and ensuring that best practice is based on a partnership approach and shared responsibility for children's health, safety, wellbeing and development
- Promoting children's development and wellbeing.

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC, including during offsite excursions and activities.

#### Background and Legislation

"Every child has the right to live a full and productive life. It is up to all of us to ensure our children grow up in environments that build confidence, friendship, security and happiness, irrespective of a person's family circumstances and background"  
(Protecting the safety and wellbeing of children and young people – refer to

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Sources). The protection of children, one of the most vulnerable groups in society, is a shared community responsibility and involves ensuring that all children are safe, their needs are met and the possibility of child abuse is minimised.

The Children, Youth and Families Act 2005 (CYFA) provides the legislative basis for the provision of services to vulnerable children, young people and their families, and places children's best interests at the heart of decision-making and service delivery. Under the Education and Care Services National Regulations 2011, the Approved Provider must ensure that all educators and staff are familiar with current policies and procedures with regard to child protection, including state and territory legislative responsibilities and their obligations under these laws (Regulation 84).

Under the law, early childhood educators are not currently required to undertake mandatory reporting (refer to Definitions), though this is subject to change. Approved Providers must keep informed of, and comply with, all legislative changes as they occur.

Early childhood educators, in daily contact with children and their families, are well placed to observe when a child appears to be at risk of harm arising from abuse or neglect. Services have a duty of care (refer to Definitions) to act immediately to protect and preserve the safety and wellbeing of the children in their care. Any person who believes, on reasonable grounds, that a child is in need of protection may report their concerns to Child Protection (refer to Definitions) (Protecting the safety and wellbeing of children and young people – refer to Sources).

The *Education and Care Services National Law Act 2011* and the *Education and Care Services National Regulations 2011* require that approved services protect children from any harm and hazards, and to adequately supervise children at all times. Adult supervision is a key factor in creating and maintaining child safe environments. Active supervision together with risk minimisation strategies can prevent or reduce the risk of injury to children (refer to Supervision of Children Policy).

Risk minimisation strategies, supported by clear policies and procedures for specific areas of child safety, will help ensure the environment and practices at the service are child safe. Policies and procedures must be developed in relation to all matters specified in Regulation 168(2), including emergency and evacuation, water safety, sun protection, delivery and collection of children, and incident, injury, trauma and illness. Risks in the child's physical environment can be minimised by ensuring the safety of buildings, grounds, equipment, materials and furniture used at the service, and the safe storage and use of dangerous substances such as cleaning products and chemicals.

### Legislation and standards

Relevant legislation and standards include but are not limited to:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- *Children, Youth and Families Act 2005* (Vic), as amended 2011
- *Child Wellbeing and Safety Act 2005* (Vic), as amended 2012
- *Charter of Human Rights and Responsibilities Act 2006* (Vic), as amended 2011
- *Education and Care Services National Law Act 2011* (Vic): Sections 165, 166, 167
- *Education and Care Services National Regulations 2011* (Vic): Regulations 84, 85, 86, 99, 100, 101, 102, 168(2)(h)
- *Family Law Act 1975* (Cth), as amended 2008 and 2011
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
  - Standard 2.3: Each child is protected
    - Element 2.3.1: Children are adequately supervised at all times
    - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
    - Element 2.3.4: Educators, co-ordinators and staff members are aware of their roles and responsibilities to respond to every child at risk of abuse and neglect
- *National Quality Standard*, Quality Area 3: Physical Environment
  - Standard 3.1: The design and location of the premises is appropriate for the operation of a service
    - Element 3.1.1: Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose
    - Element 3.1.2: Premises, furniture and equipment are safe, clean and well maintained
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
  - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
    - Element 7.1.5: Adults working with children and those engaged in management of the service or residing on the premises are fit and proper
- *Occupational Health and Safety Act 2004* (Vic)
- *Working with Children Act 2005* (Vic)
- *Working with Children Regulations 2006* (Vic)

## Definitions

**Abuser:** A person who mistreats and/or harms a child or young person.

**Abuse:** (In the context of this policy) refers to physical and/or emotional mistreatment, and/or lack of care of the child. Examples include sexual abuse, the witnessing of family violence and any non-accidental injury to a child.

**Bullying:** Repeated verbal, physical, social or psychological behaviour that is harmful and involves the misuse of power by an individual or group towards one or

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



more persons. Bullying occurs when one or more people deliberately and repeatedly upset or hurt another person, damage their property, reputation or social acceptance.

**Child:** In Victoria, under the Children, Youth and Families Act 2005, a child or young person is a person under 18 years of age.

**Child abuse:** An act or omission by an adult that endangers or impairs a child's physical and/or emotional health and development. Child abuse can be a single incident but often takes place over time. Abuse, neglect and maltreatment (refer to Definitions) are generic terms used to describe situations in which a child may need protection. Child abuse includes any and all of the following:

- **Physical abuse:** When a child suffers or is likely to suffer significant harm from an injury inflicted by a parent/guardian, caregiver or other adult. The injury may be inflicted intentionally, or be the consequence of physical punishment or the physically aggressive treatment of a child. Physical injury and significant harm to a child can also result from neglect by a parent/guardian, caregiver or other adult. The injury may take the form of bruises, cuts, burns or fractures, poisoning, internal injuries, shaking injuries or strangulation.
- **Sexual abuse:** When a person uses power or authority over a child, or inducements such as money or special attention, to involve the child in sexual activity. It includes a wide range of sexual behaviour from inappropriate touching/fondling of a child or exposing a child to pornography, to having sex with a child.
- **Emotional and psychological abuse:** Involves continuing behaviour by adults towards children, which erodes social competence or self-esteem over time<sup>4</sup>. It occurs when a person engages in inappropriate behaviours, such as rejecting, ignoring, threatening or verbally abusing a child, or allowing others to do so (Office of the Child Safety Commissioner (OCSC), Victoria).
- **Racial, cultural and religious abuse:** Conduct that demonstrates contempt, ridicule, hatred or negativity towards a child because of their race, culture or religion (OCSC).
- **Neglect:** Refer to definition below.
- **Exposure to domestic/family violence:** When children and young people witness or experience the chronic, repeated domination, coercion, intimidation and victimisation of one person by another through physical, sexual and/or emotional means within intimate relationships (adapted from the Australian Medical Association definition).

**Child FIRST:** A Victorian community-based intake and referral service linked with Family Services. Child FIRST ensures that vulnerable children, young people and their families are effectively linked to relevant services, including Child Protection ([www.cyf.vic.gov.au/family-services/child-first](http://www.cyf.vic.gov.au/family-services/child-first)).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



**Child sex offender:** Someone who sexually abuses children, and who may or may not have prior convictions.

**Child protection:** The term used to describe the whole-of-community approach to the prevention of harm to children. It includes strategic action for early intervention, for the protection of those considered most vulnerable and for responses to all forms of abuse.

**Child Protection Service (also referred to as Child Protection):** The statutory child protection service provided by the Victorian Department of Human Services, to protect children and young people at risk of abuse and neglect. This service also works closely with Family Services (including Child FIRST) to support the assessment and engagement of vulnerable children and families in community-based services ([www.cyf.vic.gov.au/child-protection-family-services/home](http://www.cyf.vic.gov.au/child-protection-family-services/home)).

**Code of conduct:** A set of rules or practices that establish a standard of behaviour to be followed by individuals and organisations. A code of conduct defines how individuals should behave towards each other, and towards other organisations and individuals in the community (refer to Code of Conduct Policy).

**Disclosure:** (In the context of this policy) refers to a statement that a child or young person makes to another person that describes or reveals abuse.

**Domestic/family violence:** The repeated use of violent, threatening, coercive or controlling behaviour by an individual against a family member(s) or someone with who they have or have had an intimate relationship, including carers.

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury. In the context of this policy, duty of care refers to the responsibility of education and care services to provide children with an adequate level of care and protection against foreseeable harm and injury.

**Maltreatment:** (In the context of this policy) refers to physical and/or emotional mistreatment, and/or lack of care of the child. Examples include sexual abuse, the witnessing of family violence and any non-accidental injury to a child.

**Mandatory reporting:** The legal obligation of certain professionals and community members to report when they believe, on reasonable grounds, that a child is in need of protection from harm.

A broad range of professional groups are identified in the CYFA as „mandatory reporters“. Mandated staff members must make a report to Child Protection as soon as is practicable after forming a belief, on reasonable grounds, that a child or young person is in need of protection from significant harm as a result of physical injury or sexual abuse, and the child’s parents/guardians are unwilling or unable to protect the child (Protecting the safety and wellbeing of children and young people – refer to Sources).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

To have reasonable grounds to believe a child is in need of protection, a mandatory reporter should believe both that there is risk of significant harm as a result of physical injury or sexual abuse, and that the parents/guardians are unwilling or unable to protect the child (Sections 162(c)(d) and 184 of the Children, Youth and Families Act 2005 (amended in 2011)). Section 182 of the Children, Youth and Families Act 2005 (amended in 2011) lists those who are mandated to report.

Mandatory reporters must report the abuse/neglect to:

- police, by calling 000, if the offence requires immediate police attention, or
- Child Protection authorities<sup>5</sup>, if they suspect, on reasonable grounds, that a child is suffering abuse or neglect, or wish to discuss their concerns about a child or young person.

**Neglect:** The failure to provide a child with the basic necessities of life, such as food, clothing, shelter, medical attention or supervision, to the extent that the child's health and development is, or is likely to be, significantly harmed (Victorian Department of Human Services).

**Negligence:** Doing, or failing to do something that a reasonable person would, or would not do in a certain situation, and which causes another person damage, injury or loss as a result.

**Notifiable complaint:** A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DEECD within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DEECD for confirmation. Written reports to DEECD must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Offender:** A person who mistreats and/or harms a child or young person.

**Perpetrator:** A person who mistreats and/or harms a child or young person.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

**Reasonable grounds:** A person may form a belief on reasonable grounds that a child or young person is in need of protection after becoming aware that the child or young person's health, safety or wellbeing is at risk and the child's parents/guardians are unwilling or unable to protect them. There may be reasonable grounds for forming such a belief if:

- a child or young person states that they have been physically or sexually abused
- a child or young person states that they know someone who has been physically or sexually abused (sometimes the child may be referring to themselves)
- someone who knows the child or young person states that the child or young person has been physically or sexually abused
- a child shows signs of being physically or sexually abused (see details in Appendix 2 of Protecting the safety and wellbeing of children and young people – refer to Sources)
- the person is aware of persistent family violence or parental substance misuse, psychiatric illness or intellectual disability that is impacting on the child or young person's safety, stability or development
- the person observes signs or indicators of abuse, including non-accidental or unexplained injury, persistent neglect, poor care or lack of appropriate supervision
- a child's/young person's actions or behavior may place them at risk of significant harm and the parents/guardians are unwilling or unable to protect the child.

**Voluntary (non-mandated) notification:** A notification to the Child Protection Service by a person who believes that a child is in need of protection. Section 183 of the Children, Youth and Families Act 2005 (amended in 2011) states that any person who believes, on reasonable grounds, that a child is in need of protection, may notify a protective intervener of that belief and of the reasonable grounds that the belief is based on. Under this part of the Act, notifications are made out of moral obligation, rather than legislative obligation. The person making the notification is not expected to prove the abuse, and the law protects the anonymity of the person making the notification.

**Young person:** In Victoria, under the Children, Youth and Families Act 2005, a child or young person is a person under 18 years of age.

### Sources

- Charter of Human Rights and Responsibilities Act 2006 (Vic), amended in 2011: [www.austlii.edu.au/au/legis/vic/consol\\_act/cohrara2006433/](http://www.austlii.edu.au/au/legis/vic/consol_act/cohrara2006433/)
- Childsafety Australia: [www.childsafetyaustralia.com.au/](http://www.childsafetyaustralia.com.au/)
- Choose With Care: Building child safe organisations – an information and training program: [www.childwise.net](http://www.childwise.net)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Department of Education and Early Childhood Development (DEECD): [www.education.vic.gov.au/ecsmangement/educareservices/csprotocols.htm](http://www.education.vic.gov.au/ecsmangement/educareservices/csprotocols.htm)
- Victorian Department of Human Services: [www.dhs.vic.gov.au](http://www.dhs.vic.gov.au)
- Office of the Child Safety Commissioner: [www.kids.vic.gov.au](http://www.kids.vic.gov.au)
- Protecting the safety and wellbeing of children and young people – A joint protocol of the Department of Human Services Child Protection, Department of Education and Early Childhood Development, Licensed Children's Services and Victorian Schools:  
[www.eduweb.vic.gov.au/edulibrary/public/stuman/wellbeing/protecting\\_childre\\_n\\_protocol\\_27\\_5\\_10.pdf](http://www.eduweb.vic.gov.au/edulibrary/public/stuman/wellbeing/protecting_childre_n_protocol_27_5_10.pdf)
- Safeguarding Children accreditation program, Australian Childhood Foundation: [www.childhood.org.au](http://www.childhood.org.au)
- Service Agreement Information Kit for Funded Organisations:  
<http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement/1.introduction/1.1-about-the-kit>
- The United Nations Convention on the Rights of the Child: [www.unicef.org/crc](http://www.unicef.org/crc)
- What is Child Abuse?: [www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/child-protection/what-is-child-abuse](http://www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/child-protection/what-is-child-abuse)
- Working with Children (WWC) Check:  
[www.justice.vic.gov.au/workingwithchildren](http://www.justice.vic.gov.au/workingwithchildren)

## Procedures

The Approved Provider is responsible for:

*In relation to child protection matters:*

- Ensuring that the Nominated Supervisor and staff members at the service who work with children are advised of current child protection legislation, its application, and any obligations that they may have under that law (Regulation 84)
- Identifying the potential for and signs of child abuse at Bayside Christian College ELC, and developing and implementing effective prevention strategies in consultation with the Nominated Supervisor and educators/staff (refer to Appendix 1 – Child protection risk assessment and Appendix 4 – Child safety review checklist)
- Ensuring recruitment and induction processes for educators, staff and contractors are in line with this policy (refer to Appendix 5 – Guidelines for the recruitment of staff and volunteers)
- Screening all educators, staff, contractors, volunteers and students, including undertaking criminal history checks (if required), Working with Children Checks (except for individuals under the age of 18, registered teachers or police officers), reference checks and interviews (refer to Qualified Staff Policy)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring that volunteers/students, parents/guardians and other visitors to the service are not left with sole supervision of individual children or groups of children
- Ensuring that where the service has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is on the service premises
- Ensuring clear procedures are in place for reporting suspected child abuse and management of complaints (refer to Appendix 3 and the Complaints Policy)
- Ensuring educators, staff, contractors, volunteers and students undertake appropriate training and education on child protection, including recognising the signs and symptoms of child abuse (refer to Definitions), knowing how to respond, and understanding processes for reporting and managing concerns/incidents (refer to Appendix 3 – Incident/concern management and reporting guidelines)
- Offering support to the child and their family, and to educators and staff in response to concerns or reports relating to the health, safety and wellbeing of a child at Bayside Christian College ELC
- Developing co-operative relationships with appropriate services and/or professionals (including Child FIRST) in the best interests of children and their families
- Identifying and implementing appropriate programs and practices to support the principles of a child safe organisation, in consultation with the Nominated Supervisor and educators/staff at the service (refer to Appendix 2 – Child safe organisations and the Safeguarding Children accreditation program (refer to Sources))
- Notifying DEECD, in writing, within 24 hours of becoming aware of a notifiable complaint (refer to Definitions) or allegation regarding the health, safety and/or welfare of a child at Bayside Christian College ELC
- Maintaining confidentiality at all times (refer to Privacy Policy).

*In relation to providing a child safe environment at the service:*

- Ensuring children are adequately supervised and that educator-to-child ratios are maintained at all times
- Ensuring parents/guardians have completed the enrolment form including details of authorised nominees, and permission forms for excursions and administration of medication (refer to Delivery and Collection of Children Policy, Excursions Policy, and Administration of Medication Policy)
- Ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to the Service policies section of this policy)
- Conducting risk assessments for excursions and considering children's safety when leaving the service premises
- Ensuring all equipment and materials used at the service meet relevant safety standards (refer to Service policies section of this policy)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children
- Implementing and practising emergency and evacuation procedures (refer to Emergency Management Policy)
- Ensuring there are appropriate procedures in place for the safe delivery and collection of children (refer to Delivery and Collection of Children Policy)
- Ensuring that the Nominated Supervisor, educators and all staff at the service who work with children are aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
- Implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
- Identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy (refer to Sources)
- Protecting the rights of children and families, and encouraging their participation in decision-making
- Ensuring the Nominated Supervisor, educators, staff, contractors, volunteers and students are kept informed of any relevant changes in legislation and practices in relation to this policy.

The Nominated Supervisor is responsible for:

*In relation to child protection matters:*

- Ensuring that they are aware of current child protection legislation, its application and any obligations that they may have under that law
- Keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy
- Arranging appropriate training and education for educators and staff on child protection, including recognising the signs and symptoms of child abuse (refer to Definitions), knowing how to respond, and understanding processes for reporting and managing concerns/incidents (refer to Appendix 3 – Incident/concern management and reporting guidelines)
- Identifying the potential for child abuse at Civic Kindergarten, and developing and implementing effective prevention strategies in consultation with the Approved Provider and educators/staff (refer to Appendix 1 – Child protection risk assessment and Appendix 4 – Child safety review checklist)
- Ensuring that where the service has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is on the service premises
- Identifying and implementing appropriate programs and practices to support the principles of a child safe organisation in consultation with the Approved Provider and educators at the service (refer to Appendix 2 – Child safe

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



organisations and the Safeguarding Children accreditation program (refer to Sources))

- Co-operating with other services and/or professionals in the best interests of children and their families
- Ensuring that families are made aware of support services available to them (such as Child FIRST), and of the assistance these services can provide
- Ensuring that no child is left alone (or is out of sight) with a contractor, visitor, volunteer, student or parent/guardian at the service
- Implementing the procedures for reporting suspected child abuse and management of complaints (refer to Appendix 3 and the Complaints Policy)
- Notifying the Approved Provider immediately on becoming aware of a concern, complaint or allegation regarding the health, safety and welfare of a child at Bayside Christian College ELC
- Offering support to the child and their family, and to educators and staff in response to concerns or reports relating to the health, safety and wellbeing of a child at Bayside Christian College ELC
- Implementing and reviewing this policy in consultation with the Approved Provider, educators, staff, contractors and parents/guardians
- Maintaining confidentiality at all times (refer to Privacy Policy).

*In relation to providing a child safe environment at the service:*

- ensuring that all educators and staff who work with children are aware of this policy, and are supported to implement it in the service
- protecting the rights of children and families, and encouraging their participation in decision-making at the service
- ensuring that all children are adequately supervised at all times (refer to Supervision of Children Policy and Interactions with Children Policy)
- ensuring learning environments are established that provide sufficient space, and include carefully chosen and well-maintained resources and equipment that will help enhance the quality of children's learning and experiences
- organising/facilitating regular safety audits of the following:
  - Emergency equipment
  - Playgrounds and fixed equipment in outdoor environments
  - Cleaning services
  - Horticultural maintenance
  - Pest control
- Ensuring that all cupboards/rooms are labeled accordingly, including those that contain chemicals and first aid kits, and that child-proof locks are installed on doors and cupboards where contents may be harmful
- Ensuring that all contractors/visitors sign in to the visitor's log book
- Ensuring the physical environment at the service is safe, secure and free from hazards for children
- Conducting risk assessments for excursions and considering children's safety when leaving the service premises

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring all equipment and materials used at the service meet relevant safety standards (refer to the Service policies section of this policy)
- Ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children
- Implementing and practising emergency and evacuation procedures (refer to Emergency Management Policy)
- Ensuring there are appropriate procedures in place for the safe delivery and collection of children (refer to Delivery and Collection of Children Policy)
- Ensuring that all educators and staff at the service who work with children are aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
- Implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
- Identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy (refer to Sources)
- Keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy.

Certified Supervisors and other educators/staff are responsible for:

*In relation to child protection matters:*

- Keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy
- Undertaking appropriate training and education on child protection, including recognising the signs and symptoms of child abuse (refer to Definitions), knowing how to respond, and understanding processes for reporting and managing concerns/incidents (refer to Appendix 3 – Incident/concern management and reporting guidelines)
- Identifying the potential for child abuse at Bayside Christian College ELC, and developing and implementing effective prevention strategies in consultation with the Approved Provider and the Nominated Supervisor (refer to Appendix 1 – Child protection risk assessment and Appendix 4 – Child safety review checklist)
- Ensuring that where the service has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is on the service premises
- Identifying and implementing appropriate programs and practices to support the principles of a child safe organisation in consultation with the Approved Provider and Nominated Supervisor at the service (refer to Appendix 2 – Child safe organisations and the Safeguarding Children accreditation program (refer to Sources)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Co-operating with other services and/or professionals (including Child FIRST) in the best interests of children and their families
- Informing families of support services available to them (such as Child FIRST), and of the assistance these services can provide
- Ensuring that no child is left alone (or is out of sight) with a contractor, visitor, volunteer, student or parent/guardian at the service
- Implementing the procedures for reporting suspected child abuse and management of complaints (refer to Appendix 3 and the Complaints Policy)
- Notifying the Nominated Supervisor or the Approved Provider immediately on becoming aware of any concerns, complaints or allegations regarding the health, safety and welfare of a child at Bayside Christian College ELC
- Offering support to the child and their family, and to other educators and staff in response to concerns or reports relating to the health, safety and wellbeing of a child at Bayside Christian College ELC
- Maintaining confidentiality at all times (refer to Privacy Policy)
- Reviewing this policy in consultation with the Approved Provider, Nominated Supervisor, educators, staff, contractors and parents/guardians.

*In relation to providing a child safe environment at the service:*

- Maintaining learning environments that provide sufficient space, and include carefully chosen and well-maintained resources and equipment to ensure a safe environment
- Maintaining a regular cleaning schedule for all equipment to avoid cross-infection (refer to Hygiene Policy)
- Maintaining a clean environment daily, and removing tripping/slipping hazards as soon as these become apparent
- Conducting a daily check of the building, ensuring all children are signed out of the service, doors and windows are closed and locked, and appliances are switched off etc. A written record of the daily check should be kept, signed by an educator and filed for future reference
- Actively supervising children at all times
- Educating and empowering children to talk about events and situations that make them feel uncomfortable
- Ensuring children are adequately supervised at all times
- Ensuring the physical environment at the service is safe, secure and free from hazards for children
- Conducting risk assessments for excursions and considering children's safety when leaving the service premises
- Ensuring all equipment and materials used at the service meet relevant safety standards
- Ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children
- Implementing and practising emergency and evacuation procedures

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring there are appropriate procedures in place for the safe delivery and collection of children (refer to Delivery and Collection of Children Policy)
- Ensuring that children at the service are not subjected to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
- Implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
- Identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy (refer to Sources)
- Protecting the rights of children and families, and encouraging their participation in decision-making
- Keeping up to date and complying with any changes in legislation and practices in relation to this policy.

Parents/guardians are responsible for:

- Reading and complying with this policy
- Reporting any concerns, including in relation to potential for child abuse, to the Nominated Supervisor
- Abiding by the service's Code of Conduct.


Volunteers and students, while at the service, are responsible for following this policy and its procedures.

### Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- Regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to child safety concerns
- Monitor the implementation, compliance, complaints and incidents in relation to this policy
- Keep the policy up to date with current legislation, research, policy and best practice
- Revise the policy and procedures as part of the service's policy review cycle, or as required
- Notify parents/guardians at least 14 days before making any changes to this policy or its procedures (Regulation 172(2)).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Appendix 1

### Child Protection Risk Assessment

A child protection risk assessment process helps in the identification of the potential for child abuse in the service, and enables appropriate strategies to be developed to minimise risk.

It is important to create awareness among employees, contractors, visitors and volunteers of possible risks to children from abuse, and how to implement a range of strategies to protect children from these risks.

Risk factors	Level of risk to children	Strategies to reduce risk	Evaluation
e.g. Appointment of a sex offender	High	Recruitment processes	Recruitment processes have been developed that include running all relevant criminal history and working with children related checks.
Opportunities for a child to be isolated within the program/premises			
Opportunities for a child to be taken away from the program/premises			
Close physical contact with an adult other than an educator			
Physical environment			
High staff turnover			
Limited staff turnover (with little outside scrutiny of the program)			
Unauthorised access by other people to the service (such as strangers or non-custodial parents)			
Staff not recognising signs of abusive behaviour			
Staff not raising concerns/suspicions of abuse			
Low levels of awareness of child protection issues			
Low levels of commitment to preventing abuse by management/staff			
Lack of appropriate incident management procedures			
Access to multimedia and information technology			

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

## Appendix 2

### Child Safe Guidelines

This table provides some examples of practices that may be implemented to support the principles of a child safe organisation.

Child safe principle	Practices
The organisation welcomes children, their parents/guardians and families	<ul style="list-style-type: none"> <li>• Educators, staff, volunteers and students readily interact with children in an age-appropriate and respectful way</li> <li>• Children are treated as individuals: educators and volunteers strive to understand each child's particular interests and needs</li> <li>• Educators, staff, students and volunteers listen to children and encourage their participation</li> </ul>
The organisation recognises that children are vulnerable	<ul style="list-style-type: none"> <li>• Educators, staff, students and volunteers accept it is their role to protect children involved with their organisation</li> <li>• Educators, staff, students and volunteers accept there is a difference in power between a child and an adult</li> <li>• The service maintains appropriate educator-to-child ratios</li> <li>• Policies are in place to minimise risk involved in one-to-one situations between a child and an adult</li> <li>• Equipment and activities are appropriate for the ability and age of the children</li> <li>• Children are supported and comforted in an appropriate way, consistent with the child's wishes</li> <li>• Information about children is treated confidentially</li> </ul>
The organisation recognises and responds to children with additional needs, including disabilities	<ul style="list-style-type: none"> <li>• The service is accessible to all children</li> <li>• Educators, staff, students and volunteers relate to all children in a respectful and developmentally-appropriate manner</li> <li>• Policies are in place to guide the physical and psychological care requirements of all children</li> </ul>
The organisation actively encourages the participation of Aboriginal children	<ul style="list-style-type: none"> <li>• Educators, staff, students, volunteers and other children acknowledge and show respect for Aboriginal culture</li> <li>• Policies acknowledge that an Aboriginal child's cultural identity is fundamental to their overall wellbeing</li> </ul>
The organisation recognises, and responds to, the particular needs of children from diverse cultural, linguistic and religious backgrounds	<ul style="list-style-type: none"> <li>• Cultural diversity is welcomed and celebrated</li> <li>• Activities offered are representative of the cultural and religious mix of the local community</li> <li>• Educators, staff, students, volunteers and other children acknowledge and show respect for diversity</li> </ul>

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

Child safe principle	Practices
The organisation encourages children to participate in decision-making	<ul style="list-style-type: none"> <li>Children are asked their views, and these views are respected and taken into consideration in decision-making</li> <li>Children are involved in discussing appropriate behaviour</li> </ul>
The organisation carefully recruits and manages its employees, contractors and volunteers	<ul style="list-style-type: none"> <li>The service has policies on staff and volunteer recruitment and management, covering: <ul style="list-style-type: none"> <li>recruitment processes, including skills and qualifications required</li> <li>background-checking and screening processes for all employees, contractors and volunteers</li> <li>Working with Children Checks and police checks</li> </ul> </li> <li>The service has a Code of Conduct that outlines acceptable behaviour by educators, staff, students, volunteers and contractors</li> <li>There is a clear and accessible complaints procedure for use by children, parents/guardians and employees</li> <li>Parents/guardians can access the service policies on request</li> </ul>
The organisation ensures that its commitment to child safety is clear and shared by all	<ul style="list-style-type: none"> <li>A child protection policy (such as this Child Safe Environment Policy) is in place and accessible</li> <li>Educators, staff, students, volunteers, contractors and parents/guardians are aware of the service's child protection policy</li> </ul>
The organisation ensures employees, contractors and volunteers are informed about child safety and receive training, where appropriate	<ul style="list-style-type: none"> <li>The service has a clear staff development policy that includes areas of child development, child protection, risk management and safety</li> </ul>

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

## Appendix 3

### Incident/concern management and reporting guidelines

Individuals working with children or young people have a duty of care to support and protect them. Where there is a belief, on reasonable grounds, that a child/young person has been harmed or is at risk of harm, adults in contact with or working with that child/young person are ethically bound to act to maintain their safety and wellbeing. For some professionals, there is also a legal obligation to report the concern to the appropriate authorities.

Acting on a belief that child abuse has occurred, or is occurring, can be the first important step in stopping the abuse and protecting the child from further harm.

It is a Child Protection worker's role to investigate and prove significant harm, so other professionals need only provide reasonable grounds for their belief.

### General guidelines

- The best interests of the child should always be the primary consideration, with due regard to confidentiality and fairness to the person against who the allegation is made.
- Children should be encouraged to approach any person in the service to express concerns about their treatment, and should be made to feel confident that they will be taken seriously.
- Employees and volunteers must be clear about who they are expected/permitted to approach when expressing concerns.
- Any investigation undertaken by the service must ensure procedural fairness and natural justice for a person suspected of abusing a child.
- Records must be kept about any child safety concern or complaint, and stored in accordance with the service's Privacy and Confidentiality Policy. These records must contain information about the action taken, including any internal investigation and any reports made to statutory authorities or professional bodies.
- Everyone at the service must be made aware of the need to report serious matters involving child protection to external authorities.
- Privacy must be maintained, and information must only be disclosed on a need-to-know basis.
- Instances of physical and sexual abuse of children are crimes and must be reported to the police. If a child discloses any such abuse, the service must listen, respond and report to both the police and child protection authorities.
- A report to the appropriate authorities can be made even if educators/staff and others working with children at the service do not have all the necessary information.
- Permission is not required from parents/guardians of a child where abuse is suspected, and parents/guardians do not need to be notified that a report has been made.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Forming a professional judgment

Forming an objective and professional judgment can be based on:

- warning signs (or indicators) of harm or potential harm, that have been observed or inferred
- knowledge of child development
- knowledge of cultural backgrounds
- knowledge of any difficulties experienced or support currently being received by a family
- consultation with colleagues and other professionals
- professional obligations and duty of care responsibilities
- established service protocols
- individual service procedures
- legal requirements, such as mandatory reporting.

Gathering information Action	Details
Make notes	Record your observations, and date and sign the entries
Continue to observe	Record your observations, and date and sign the entries
Consult colleagues	Access support and advice from your colleagues, compare notes and brainstorm possible strategies to address areas of concern
Develop action plans based on service procedures	Understand and consult the policies and procedures of Civic Kindergarten when determining what action to take
Talk to other agencies about helping the family	Collaborate with or engage community health services, local government services, Child FIRST, regional Department of Human Services/Child Protection officers and disability services. You may wish to instigate a case meeting
Talk to the child	Do this with respect for the child or young person's need for privacy and confidentiality
Talk to the parents/guardians	Only do this when it will not jeopardise the safety of the child or young person

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



## Signs or indicators of harm

- Physical signs of abuse or neglect may include, but are not limited to, bruises (especially in places such as the neck, upper arm etc), burns, sprains, bites, cuts, fractures, frequent hunger, malnutrition, poor hygiene and inappropriate clothing.
- Behavioural signs of abuse (physical, sexual and emotional) or neglect may include, but are not limited to, wariness or distrust of adults, fear of parents/guardians and of going home, fear when other children cry/shout, excessive friendliness to strangers, being very passive and/or compliant, having/claiming to have headaches and/or stomach pains, displaying sexual behaviour that is unusual for the child's age, frequent rocking, sucking and biting, having difficulty sleeping, being withdrawn, aggressive and/or demanding, being highly anxious, having delayed speech, acting like a much younger child, and often being tired and falling asleep.
- Disclosures by the child concerned, or by other parties.

## Reporting

- There are two types of notifications to be made in relation to significant concerns for the safety or wellbeing of a child: a referral to Child FIRST (Family Services) or a report to Child Protection.
- To report concerns that are life threatening, ring Victoria Police on 000.
- To report concerns about the immediate safety of a child within their family unit, call the nearest DHS office in your region during business hours. To report concerns after hours or on weekends, call the Child Protection Crisis Line on 13 12 78 (24 hours, 7 days a week and toll free within Victoria). Note: this is an emergency service for weekends and after hours only, and cases reported to the Child Protection Crisis Line will be referred to the relevant DHS office on the following working day.
- Provide the following information:
  - the child's name, age and address
  - the reason for believing that the injury or behaviour is the result of abuse or neglect
  - the reason why the call is being made at this point in time
  - an assessment of immediate danger to the child/ren (the person making the report may be questioned regarding knowledge of the current location of the alleged abuser/s)
  - a description of the injury or behaviour observed
  - the current location of the child
  - knowledge of other services that support or are involved with the family
  - any other information about the family
  - any specific details that will help the child, such as cultural background, need for an interpreter or disability support requirements.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- A notification should still be made, even if the notifier does not have all the necessary information.

### **Making a report to Child FIRST**

A report to Child FIRST should be considered if, after taking into account the available information, the staff member forms a view that raising their concerns will have a low-to-moderate impact on the child, and that the immediate safety of the child will not be compromised. This may include circumstances when there are:

- significant parenting problems that may be affecting the child's development
- family conflict, including family breakdown
- families under pressure, due to a family member's physical or mental illness, substance misuse, disability or bereavement
- young, isolated and/or unsupported families
- families experiencing significant social or economic disadvantage that may adversely impact on a child's care or development.

Child FIRST provides a consolidated intake service to Family Services within sub-regional catchments. Child FIRST ensures that vulnerable children, young people and their families are linked effectively into relevant services, and this may be the best way to connect children, young people and their families with the services they need.

### **Making a report to Child Protection**

A report to Child Protection should be considered if, after taking into account all of the available information, the staff member forms a view that the child is in need of protection because:

- the harm or risk of harm has a serious impact on the child's immediate safety, stability and/or development
- the harm or risk of harm is persistent and entrenched, and is likely to have a serious impact on the child's safety, stability and/or development
- the child's parents/guardians are unwilling or unable to protect the child or young person from harm.

Upon receipt of a credible report, Child Protection will seek further information, often from professionals who may already be involved with the child or family, to determine whether further action is required. In determining what steps to take, Child Protection will also consider any concerns previously reported with regard to the child or young person. In most circumstances, Child Protection will inform the notifier of the outcome of investigations.

In considering a duty of care to report concerns of child abuse and/or neglect, it is important to remember that:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- it is not necessary to prove that abuse has taken place, only to provide reasonable grounds for the belief
- permission from parents/guardians or caregivers is not required to make a notification, nor do they need to be informed that a notification is being or has been made
- if a notification is made in good faith, the notifier cannot be held legally liable for any consequences, regardless of the outcome of the notification
- the identity of the notifier will remain confidential unless the notifier chooses to inform the child and/or family, or if the notifier consents in writing to the disclosure of their identity, or if the court decides that this information must be disclosed
- the notifier may have an ongoing role, including:
  - acting as a support person in interviews with the child or young person
  - attending a case conference
  - participating in case-planning meetings
  - continuing to monitor the child's behaviour and their interactions with others
  - observing/monitoring the conditions of a protective court order that may relate to access or contact with a parent/guardian
  - liaising with other professionals and child protection officers in relation to a child or young person's wellbeing
  - providing written reports for case-planning meetings or court proceedings in relation to the child's wellbeing or progress.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 4

### Child Safety Review Checklist

This checklist will assist organisations to identify risks and issues in relation to the protection of children, and the requirements for appropriate amendments to be made to a service's policy and practices, or training and support for staff.

	Child safe standard question	Yes, describe how	No or only partly, describe what needs to be done	Person responsible for any action required	Timeline and review date
Clear and public commitment to child safety	Is there a child protection policy (such as this Child Safe Environment Policy) for the service?				
	Have employees, contractors and volunteers read and understood the policy?				
	Are parents/guardians made aware of this policy on enrolment of their child at the service?				
Children's rights to safety and participation	Are children welcomed, consulted and respected at the service?				
	Are the indoor and outdoor environments physically safe?				
	Is a safety assessment conducted for all activities?				
	Do service programs stimulate children and meet their physical, emotional,				

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

	intellectual, social and recreational needs?				
	Are children with additional needs and from different backgrounds encouraged to participate? If so, do they actually participate?				
Employment of Staff and volunteers	Are there adequate screening procedures for staff, volunteers and students on placement?				
Support for staff and volunteers	Is there a code of conduct policy that explains the acceptable and unacceptable behaviours of parents/guardians, volunteers and students at the service?				
	Are employees aware of the risk of harm to children and the different types of harm (refer to Definitions)?				
Reporting a child safety concern	Do staff understand and feel confident about the process for reporting and acting on concerns about child safety?				
	Have staff identified other support, assistance and resources they feel they need to assist in providing a child safe environment?				

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 5

### Guidelines for the recruitment of staff and volunteers

The processes for the recruitment and selection of employees, contractors and volunteers demonstrate our commitment to maximising the safety of children and deterring unsuitable and inappropriate persons from attempting to work at Civic Kindergarten. Civic Kindergarten is committed to the following processes.

#### Preparation for recruitment

- An explicit statement of our commitment to child safety is included in all advertising promotion for the organisation.
- Job advertisements clearly state our commitment to child safety.
- Job descriptions include a statement about our commitment to maintaining a child safe environment and clearly outline responsibilities and accountability.
- The selection process includes:
  - consideration of a Working with Children Check (and a criminal history record check, where appropriate)
  - confirmation of identity, which involves sighting an original birth certificate or extract, a driver's licence or a passport
  - verification of qualifications
  - thorough reference checks: at least two referees are contacted (including the current or most recent employer) in person or via telephone and all referees must have observed the applicant working with children first-hand.

#### Interview process


- At least three people are on the interview panel including, where possible, a gender mix and a person external to the service or someone with HR/interviewing experience.
- Questions are behavioural-based and ask the interviewee to provide examples of their past behaviour in specific situations relevant to the job being applied for.
- Questions regarding relationships with children, professional boundaries, resilience and motivation, teamwork, accountability and ethics are values-based.
- Questions are based on key selection criteria.
- Candidates are asked about their attitudes, aspirations and motivations.
- More detail is asked for when answers seem incomplete.

#### Ongoing management

- Information provided to the employee on commencing work at the service includes the *Child Safe Environment Policy*, *Code of Conduct Policy*, *Complaints Policy* and *Qualified Staff Policy*.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- The letter of offer includes a statement about what is expected of the staff member in terms of commitment and responsibilities for child safety.
- Orientation and induction covers information about values, attitudes, expectations and workplace practices in relation to maintaining a child safe environment.
- Regular meetings are held between employees, volunteers and the Approved Provider.
- A mentoring or buddy system between employees is in place.
- Training and education with regard to child safety is provided for all employees, contractors and volunteers.
- Resources and support are provided for all employees, contractors and volunteers to ensure a child safe environment.
- Employees, contractors, volunteers and visitors are treated with respect.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Code of Conduct Policy (Parents/Guardians, Volunteers and Practicum Students)

Bayside Christian College Early Learning Centre provides an open, welcoming and safe environment. We believe that all parents/guardians, volunteers and practicum students play a crucial and valuable role in the effective operation of the centre and in enriching the children's program.

This code of conduct for parents/guardians, volunteers and practicum students outlines the type of practice we require all adults working and volunteering at our centre to follow. It will assist in ensuring the safety and wellbeing of children, families and staff. It does not provide all the answers but is a broad outline of behavioural principles, expectations and ideals

The College has a legal responsibility to provide a safe and happy environment for all children and staff.

### Policy statement

#### Values

The Early Learning Centre is a place of learning for young children and therefore the rights of the child will be considered first and foremost.

Bayside Christian College is committed to:

- The wellbeing of each child having fundamental importance.
- The provision, as far as practicable, of a safe and secure environment.
- Providing an open and welcoming environment where everyone's contribution is valued and respected.
- Encouraging parents/guardians, volunteers and community members to support and participate in our centre's program.

#### Purpose

This policy will provide guidelines to promote desirable and appropriate behaviour to ensure that all interaction with children and adults is respectful, honest, courteous, sensitive, tactful and considerate.

#### Scope

This code of conduct applies to all adults, including parents/guardians, volunteers, extended family, visitors and other association members while involved in any activities related to the centre.

#### Background and legislation

This may include, but is not limited to:

- The Education and Care Services National Law 2011
- Children, Youth and Families Act 2005

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Child Wellbeing and Safety Act 2005
- Disability Discrimination Act 1992
- Equal Opportunity Act 2011
- Human Rights and Equal Opportunity Commission Act 1986
- Occupational Health and Safety Act 2004
- Sex Discrimination Act 1984
- Workplace Relations Act 1996

The College needs to ensure all parents/guardians, volunteers, staff, students and any other persons involved in the Early Learning Centre, adhere to clear guidelines regarding appropriate interaction and communication with one another, and with children at the centre.

## Procedures

General guidelines for interactions

- **Safety:** Comply with all policies and procedures of Bayside Christian College. These are displayed at the Early Learning Centre. Be aware of emergency evacuation procedures.
- **Ethical conduct:** Pray regularly. Always act in the best interests of children, their families and users of the Early Learning Centre.
- **Support:** Work in a cooperative and positive manner.
- **Communication:** Use courteous and acceptable verbal and nonverbal language. Refrain from the use of profane, insulting, harassing, aggressive or otherwise offensive language.
- **Respect:** Value the rights, religious beliefs and practices of individuals. Refrain from actions and behaviour that constitute harassment or discrimination.
- **Confidentiality:** Comply with the Early Learning Centre's Privacy Policy. Respect the confidential nature of information gained, or behaviour observed, whilst participating in the program, in relation to other children and adults.
- **Children's program:** If participating in the program seek guidance and direction from staff. If unsure ask staff for further information. Behaviour guidance of the children is the responsibility of staff, immediately refer any issues or concerns related to managing children's behaviour to staff.

The staff are responsible for:

- Respecting the individual needs, cultural practices and beliefs of families in all interactions, both verbal and non-verbal.
- Working with colleagues and parents/guardians to provide an environment that encourages positive interactions and supports constructive feedback.
- Providing guidance to parents/guardians and volunteers through positive role modeling and, when appropriate, clear and respectful directions.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring practices and procedures are in place to ensure that parents/guardians on duty, or other adults participating in the program, are not placed in a situation where they are left alone with a child.

The parents/guardians are responsible for:

- Abiding by the standards of conduct as set out in this policy
- The withdrawal or suspension of a child's place in the program due to the parents/guardians serious breach of the code of conduct. This action will only be taken if no other alternatives are deemed appropriate by the College.

## Emergency situations

In an emergency situation, where it is believed that staff, children or parents/guardians are at immediate risk (for example violence has been threatened or perpetrated) the staff members and the Head of Primary involved need to be able to act quickly and decisively.

The Principal is delegated the authority to determine suitable actions, which may include, but may not be limited to:

Applying immediately for a restraining order (via the legal system).

Suspending the relevant person/s from attending Early Learning Centre until the Head of Primary has investigated and decided on an appropriate course of action. If required, notify the parents/guardians that alternate arrangements will need to be organised for the delivery/collection of their child to ensure that the suspended person does not attend the centre.

Suspension of a child's place in the program due to the suspended person still attending the Early Learning Centre after they have been advised not to.

## Standards of Conduct

Behavioural practices to follow

In relation to children:

- Pray regularly for children
- Be a positive role model at all times.
- Always speak in an encouraging and positive manner.
- Listen actively to children and offer empathy, support and guidance where needed.
- Regard all children equally and with respect and dignity.
- Physical contact with children other than your own should be avoided unless directed by staff or if the safety of a child is compromised (this should be reported immediately to staff).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Inform children if physical contact is required for an activity and ask them if they are happy to proceed.
- All interactions with children should be undertaken in full view of other adults.
- Never do things of a personal nature for a child that they can do themselves, for example, assisting them in going to the toilet or changing their clothes.

#### In relation to other adults (including staff)

- Use respectful, encouraging and accepting language.
- Respect the rights of others as individuals.
- Give encouraging and constructive feedback rather than negative criticism.
- Accept staff decisions and follow their directions at all times. Speak with the staff member if you have a problem complying with any directions.
- Be aware of routines and guidelines for children's play within the centre, abide by them and seek advice when unsure.
- Be aware of emergency evacuation procedures.
- Discipline of children is the responsibility of staff and therefore any matters or concerns related to managing children's behaviour should be referred to staff immediately.
- Avoid approaching staff to discuss a child during a session. Seek an alternative time when staff are free from contact duties with children.
- Refrain from public criticism of children and adults at Bayside Christian College Early Learning Centre.
- Any issues or grievances should be raised as outlined in the Complaints Policy.
- Under NO circumstance should a child, parents/guardians or member of staff be approached directly in a confrontational manner.
- Smoking is prohibited on Bayside Christian College property at all times.


#### In general

- Bayside Christian College Early Learning Centre staff are responsible for the children that are enrolled and signed in, that is those children attending the children's program.
- Parents/guardians, and other persons attending with children not enrolled in the program, are responsible for supervision of their children at all times. This is particularly important, for example, during outdoor time as the climbing equipment may be set-up for four to five year-olds and could be hazardous for younger siblings participating in the program.
- Adults are responsible for all children who accompany them, for example while on duty, drop off and pickup time, ensuring they do not inhibit or disrupt the program in any way
- Parents/guardians must clean up after their children and leave all areas as they were found.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Staff may ask parents/guardians to remove children not enrolled and signed into the program if they are disturbing the program.
- Parents/guardians will also be responsible for children's behaviour when attending other activities and the child is not signed into the program, for example working bees, family nights.

#### Related Forms

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Communication Policy

### Policy statement

#### Principles

Bayside Christian College is committed to:

- Promoting a friendly, comfortable and cooperative relationship between parents/guardians and staff through daily contacts.
- Listening to parents/guardians. Fostering a spirit of co-operation between the parents/guardians of the children attending the Early Learning Centre
- Supporting an environment, that is sensitive to the cultural, language and social background of families.

#### Purpose

This policy will provide guidelines for communication between parents/guardians, volunteers and staff, both formal and informal.

#### Scope

This policy applies to parents/guardians, volunteers and staff

#### Procedures

The College is responsible for:

- Ensuring a notice board is provided in the main entrance of the Early Learning Centre.
- Providing a regular newsletter (together with the staff) to inform parents/guardians of centre events, changes to policies, information on the children's program etc.
- Ensuring the Early Learning Centre handbook is reviewed annually and copies are available for new families.
- Providing access to interpreters, translated materials and other resources as needed to implement this policy.
- Ensuring parents/guardians are informed of practicum students participating in the program via a notice on the parent notice board which details the nature of the visit and a photograph of the practicum student.

The staff are responsible for:

- Greeting families on arrival at the Early Learning Centre and welcoming the child into the program.
- Ensuring the current program is displayed in the main entrance and that parents/guardians are informed of the location in their orientation to the Early Learning Centre.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020


- Providing daily opportunities for direct contact with parents/guardians, for example during parents/guardians participation in the program, before or after program times, and by telephone or email
- Using a communication box, placed in the entrance, for parents to anonymously note areas of concern, provide suggestions etc.
- Providing access for parents/guardians to the centre at any time their child is attending a program at the Early Learning Centre.
- Ensuring all communication with parents/guardians is sensitive to the cultural and social backgrounds of each individual family, their lifestyles and their child-rearing practices.
- Providing access to interpreters, translated materials and other resources as needed to implement this policy.
- Providing parents/guardians with information about how the educational program at the Early Learning Centre is developed and the philosophy on which it is based.
- Consulting with parents/guardians when developing the educational program.
- Offering a variety of opportunities for parents/guardians to participate directly in the children's program, including spending time with the children, assisting with activities, excursions and special events and volunteering special skills to share with the children.
- Encouraging parents/guardians to contribute their suggestions regarding any aspect of the program through discussions with the staff.
- Providing the parents/guardians with opportunities for communication about their child, either informally before or after the program, or by appointment during the staff member's non-contact time with the children and encouraging parents/guardians to take up these opportunities.
- Developing strategies which contribute to a partnership approach with parents to create a two- way process of knowledge and information sharing.
- Providing opportunities for parents/guardians to discuss the individual records the qualified staff member has recorded of their child.
- Providing information regarding the educational program through bulletin boards and regular newsletters, which will show an understanding of, and consideration for, the relevant languages and cultural diversity of the families using Bayside Christian College Early Learning Centre.
- Staff will keep families up to date on the program, children's learning, matters of interest and up coming events through information posted on bulletin boards and sent home through notices and email

The parents/guardians are responsible for:

- Informing a staff member of the child's arrival at the centre.
- Participating in the program, this may include spending time at the Early Learning Centre, assisting with activities, excursions and special events.
- Offering suggestions to the staff on items of interest to the child.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Communicating with staff about special events in the child's life at home, for example the arrival of a new baby, grandparents visiting from overseas, moving house.
- Collecting information from the family's pigeon hole or pocket on a regular basis and reading the information provided.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	



## Complaints Policy

### Policy statement

The following policy complies with the current regulations as outlined in The Education and Care Services National Law 2011 and The Education and Care Services National Regulations 2011.

### Values

Bayside Christian College is committed to:

- Providing an environment of mutual trust and open communication where the expression of opinions is encouraged.
- Considering situations from all perspectives and responding in a manner which promotes an environment conducive to collaborative problem solving.
- The resolution, where possible, of complaints to the mutual satisfaction of those involved.
- Fairness and equity in dealing with disputes, complaints and complainants.
- Compliance with all legislative and statutory requirements.
- Keeping confidential, where practicable, the information provided by any person involved with a complaint.

### Purpose

This policy will provide guidelines for:

- Receiving and dealing with complaints at the Early Learning Centre.
- Compliance with legislative requirements.
- Investigating complaints.
- Attempting to resolve the complaint to the mutual satisfaction of those involved.

### Scope

This policy applies to the staff, parents/guardian, and any other person involved in the operation of the children's centre.

### Procedures

The parents/guardians are responsible for:

As soon as practicable communicating any concerns relating to the Early Learning Centre:

- In the first instance, if comfortable to do so, raising any concerns directly with the person/persons involved in order to resolve the concerns without recourse to the complaints procedure
- Raising any concerns with the teacher

The staff are responsible for:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Where possible/practicable responding to and resolving issues as they arise.
- As soon as practicable, referring unresolved issues to the Head of Primary.
- Informing the Head of Primary as soon as practicable if a complainant has been referred to them.

It is recommended practice to keep a record of minor complaints, for example, if parents/guardians are complaining that items of clothing are going missing on a regular basis, this may result in changes such as parents/guardians requested to label jackets and the provision of a lost property box.

A written report should include:

Details of the event or incident

- The name of the person who initially made the complaint
- If relevant, the name of the child concerned and the condition of the child, including, where available, a medical or incident report
- Any other relevant information relating to the complaint.
- Respecting the confidential nature of information relating to the complaint.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Delivery and Collection of Children Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- The delivery of a program which ensures the safe delivery and collection of children
- Fulfilling our duty of care to all children.
- Encouraging families to deliver and collect their child/ren on time, for the programs in which they are involved.
- Complying with all legislative requirements.

#### Purpose

To provide clear guidelines for parents/guardians, authorised persons and staff in relation to their responsibilities for the delivery and collection of children at the Early Learning Centre.

#### Scope

This policy applies to all parents/guardians, authorised persons, staff, volunteers and students working within the Early Learning Centre.

#### Definitions

**Authorised person:** A person for whom the parents/guardians have given written authority to collect the child. This person must be aged 15 years or more.

Delivery of the child at the Early Learning Centre begins once the child and parents/guardians, or authorised person, arrive on the premises and enters the time and signs the attendance book, or when the parents/guardians or authorised person leaves the child at the centre.

**Collection of the child:** Collection of the child from occurs once the parents/guardians or authorised person has entered the time and signed the attendance book prior to their departure with the child from the premises, or when the parents/guardians, or authorised person, leaves the premises with the child

**Late collection:** When a parent/guardian or authorised person collects their child/ren from the program after the designated time for the program to end.

**Attendance book:** The book provided for the person who delivers and collects the child from, or a staff member, to sign and record the time of arrival and departure of each child being cared for, or educated by the Early Learning Centre.

**Program:** The course/activity in which a child is enrolled and which has specific hours of attendance

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Procedures

The Head of Primary is responsible for:

- Providing parents/guardians with a copy of this policy, when their children commence and ensuring a copy is available for inspection at all times
- Ensuring staff are provided with an attendance book for use in the program which meets the requirements of the The Education and Care Services National Regulations 2011.
- Being available to assist in the situation of the late collection of a child

It is the responsibility of parents/guardians to collect their child promptly at the conclusion of the session. The College recognises however that there may be isolated occasions when parents/guardians may be delayed through no fault of their own. The College also has a responsibility for staff who have other tasks to complete after the conclusion of the session.

The staff are responsible for:

- Welcoming children into the program
- Keeping the children's enrollment records up-to-date
- Displaying an up to date list of telephone numbers near each telephone for the DHS regional Children's Services Adviser, Child Protection CrisisLn, and the local police station.
- Ensuring the attendance book is available outside the main entrance for parents/guardians or carers to sign in their child/ren on their delivery to and to record the time of delivery.
- Checking the attendance book periodically and, if required, completing the entry/ies as per the requirements of the The Education and Care Services National Regulations 2011. This includes checking that children who are signed in are in attendance.
- Reminding parents/guardians/authorised persons/or carers, who continually do not complete the attendance book, of 's procedures for the delivery of children.

Note: Once the attendance book has been signed and time of delivery entered by the parents/guardians, carer, or authorised person or the parents/guardians, carer, or authorised person leaves, the supervision of children on the premises becomes the responsibility of the staff members at the centre.

### ***Procedures for the dispersal of children at the end of session/day:***

- Parents/guardians/authorised persons and siblings etc. are to remain in the waiting room or outside. Qualified staff member is to be seated with the children on the mat area. The assistant will be positioned at the adjoining door to ensure that children do not leave the building without the person

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

responsible for collecting them. Children will remain seated until the qualified staff member or assistant calls their name.

- Requesting parents/guardians/authorised persons wishing to speak with the qualified staff member or assistant involved in the dispersal of children, that they will need to wait until all of the children have departed.
- Ensuring the attendance book is available in the entrance for parents/guardians or authorised person to sign out their child/ren on collection from and to record the time of departure.
- Checking the attendance book as soon as is practicable after all children have departed and, if required, completing entries as per the requirements of the The Education and Care Services National Regulations 2011.
  - Note: Once the attendance book has been signed and the time of collection noted, the children's supervision is the responsibility of the parents/guardians or authorised person while they are still on the premises.
- Releasing a child to the parents/guardians, or a person authorised to collect the child. This information is provided on the child's enrolment form. If a staff member is concerned that releasing a child to the parents/guardians, or a person authorised to collect the child, could put the child at risk, the procedures outlined in Appendix 3 should be followed.
- Implementing procedures as outlined in Appendix 2 if the parents/guardians telephone to advise that a person not listed on their child's enrolment form as an authorised person will be collecting the child.

### ***Late collection of a child***

In the situation where the parents/guardians or authorised person is 10 minutes late in collecting their child/ren and has not notified that they will be late, the qualified staff member is responsible for:

- Contacting the parents/guardians, and if they are not available contacting the other persons authorised to collect the child/ren on the child/ren's enrolment form, requesting that they collect the child/ren.
- If a staff member needs to leave, contacting the Head of Primary to relieve the staff member or organise relief staff. Centres need to ensure that two staff members (one qualified and one unqualified) remain in attendance as per the requirements of the The Education and Care Services National Regulations 2011.
- Continuing to attempt to contact the parents/guardians and authorised persons.
- Notifying the regional Children's Services Adviser (CSA) at DHS after 30 minutes of the current situation and informing the CSA of the procedures being undertaken. If the CSA is not contactable, documenting the date, time, and reason for the call, and contacting the CSA as soon as is practicable.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Contacting the DHS Child Protection Crisis Line on 13 12 78 (this operates 24 hours, 7 days a week) if the parents/guardians/authorised persons are still not contactable after 60 minutes.
- The staff will follow the advice given to them by the Child Protection Crisis Line.

The parents/guardians/authorised persons/carers are responsible for:

- Ensuring the child/ren's enrolment form includes details of persons who have lawful authority to collect the child/ren (usually the parents/guardians) and any other persons authorised to collect the child/ren.
- Completing the attendance book on arrival and departure as per the requirements of this policy.
- Ensuring staff are aware that the child has arrived/or been collected from
- Accompany child(ren) into the centre and sign the book
- On collection parents/guardians must ensure their child is signed out and cannot leave the centre until this is done
- Ensure they only release their own children from the secure area

Before and after the program

- Supervising any child in their care if they are in attendance at prior to the commencement or conclusion of the program.
- Supervising any child in their care once they have been signed out of the attendance book.
- Supervising any child/ren who are not enrolled in the program operating at that time, for example siblings of the child enrolled in the program.

Late collection

- Contacting as soon as practicable if the person collecting the child will be late.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 1

Procedure to gain authorisation when a person not listed on the child's enrolment form as authorised to collect the child will be collecting the child.

If a person who is not listed as an authorised person arrives to collect a child staff will contact parent/guardian to gain authorisation.

Staff will request the parent/guardian provide one of the following:

- Fax authorisation detailing the name, address and telephone number of the person who will be collecting the child.
- Email confirmation detailing the name, address and telephone number of the person who will be collecting the child.
- Parent/guardian to include details of the person on the child's enrolment form when they are next at the Centre, or the parent/guardian will need to sign the 'authorisation form' and this will be added to the child's records.

Staff will verify the identity of the person collecting the child by checking, for example, driver's license.

If a parent telephones to notify staff that a person who is not listed as an authorised person will be collecting a child, staff will verify the identity of the parent. For example if the staff member is not familiar with the parent/guardian who has telephoned they will request their telephone number and call them back. If this telephone number does not match with the child's enrolment form, a record of the number will be documented on the child's file.

Staff will request the parent/guardian for one of the following:

- Fax authorisation detailing the name, address and telephone number of the person who will be collecting the child.
- Email confirmation detailing the name, address and telephone number of the person who will be collecting the child.
- Parent/guardian to include details of the person on the child's enrolment form when they are next at the Centre, or the parent/guardian will need to sign the authorisation form below and this will be added to the child's records.

The parent/guardian will need to inform the person collecting the child that they will need to carry some form of identification with them, for example, driver's license.

If a fax or email is not received the staff member will need to document the telephone conversation on the child's file and follow-up as per the policy procedure.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Appendix 2

### UNAUTHORISED PERSON ARRIVES TO COLLECT CHILD

Unauthorised person arrives to collect child (at Session departure time or during session/program time)

1. Person advised to wait (until all children have departed if at end of session)
2. If additional staff are available (e.g. Head of Primary) they will be requested to assist the person
3. Staff member informs other co-worker that they will need to make a phone call and attend to the situation.
4. Staff member advises person of centre procedures and then attempts to contact parents/guardian
5. Unauthorised person told Centre unable to release child to them.

In the event that Parents/guardians are not contactable

1. Contact authorised person/s as listed on child's enrolment form
2. Authorised person contactable/Authorised person not contactable
3. Explain situation and request for child to be collected (at end of session/day)
4. Continue to contact authorised person and parents/guardians until end of session/day
5. Continue to attempt to contact parents/guardians. If not contactable record times of attempted contacts on child's file.
6. Implement procedures for late collection of a child
7. Follow up. Request parents/guardians to update enrolment form if they wish to include additional authorised persons.

If parents/guardians are contactable

1. Verbal authority is received and staff member records this on child's file
2. Advise parents/guardian to update enrolment form or to provide written authorisation next time their child attends
3. Staff member to check unauthorised person's identification

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### Appendix 3

Parents/guardians or authorised person arrive to collect the child

Staff member believes that the parents/guardians or authorised person may be ill, affected by alcohol or drugs, and does not appear to be able to safely care for the child.

1. If practicable, the staff member consults another staff member or the Head of Primary.
2. If practicable, the staff member advises the person collecting the child of their concerns and suggests contacting another authorised person to collect the child.
3. If the staff member or the Head of Primary believes that the situation places in a position where they fear for the safety of the child, their own safety and that of others at the Early Learning Centre, they should immediately contact the police.
4. Record the details of the incident and place on file with the child's enrolment form.
5. As soon as practicable, inform the Head of Primary of the incident.

A young person who is authorised to collect the child, for example a sibling, arrives to collect the child and does not seem sufficiently mature to safely care for the child.

1. If practicable, the staff member consults another staff member or the Head of Primary
2. If practicable, the staff member advises the young person collecting the child of their concerns and that they will be contacting another authorised person to collect the child.
3. Follow-up with a discussion with the parents/guardians on 's concerns with regard to the young person being authorised to collect the child. Advise the parents/guardians that if the young person presents again to collect the child, centre procedure will be followed.
4. Record details of the incident and place on file with the child's enrolment form.
5. As soon as practicable, inform the Head of Primary of the incident.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Excursion Policy

### Policy statement

#### Values

Bayside Christian College recognises that incursions and excursions can provide opportunities for children to explore areas of interest as a group and extend the educational program provided at the centre. Every effort will be made to extend the educational program through incursions and on-site activities.

Where the Directress establishes the need to go off site, the ELC is committed to excursions which ensure that the health, safety and well-being needs of the children are met, and any relevant sections of the The Education and Care Services National Regulations 2011 and The Education and Care Services National Law 2011 are complied with.

#### Purpose

This policy will provide guidelines for the staff, parents/guardians, volunteers, and any other persons involved in the planning and conducting of an excursion for the Early Learning Centre.

#### Scope

This policy applies to all staff, parents/guardians, volunteers, students, and any other person who may be involved in planning and/or participating in excursions.

#### Background and legislation

- The Education and Care Services National Regulations 2011
- The Education and Care Services National Law 2011

#### Procedures

The Head of Primary is responsible for:

Approving an excursion. Items to be considered may include:

- Reviewing the Excursion Risk Management Plan
- The cost of the excursion to the centre and/or families. If other siblings are able to attend, will there be a charge for them. (Refer to Background Information regarding sibling attendance.)
- The number of children to participate in the excursion, also factoring in potential numbers of toddlers and other children.
- Deciding on the number of staff/adults required to attend. This may be influenced by such things as the need to cross a major road or to use public transport on the excursion.
- Ensuring the requirements of The Education and Care Services National Regulations 2011 (Division 6, section 99) and the The Education and Care

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Services National Law 2011 section 165 can be met for all children remaining at the centre.

- What impact the disruption to normal program times could have on the users of the centre.
- Any changes to the usual working arrangements of staff due to the excursion, in accordance with the appropriate awards or agreements.
- The provision of facilities at the proposed destination, including toileting, access to water, shade, safety considerations such as proximity to water, roads, bush or crowds.

The staff are responsible for:

Planning the excursion including:

Conducting a site visit and completing an excursion risk management plan template prior to seeking excursion approval from the Head of Primary.

The plan should include the following;

- Date, time and destination.
- How the excursion relates to the education program provided for the children.
- Objectives, proposed activities, and desired outcomes of the excursion.
- Proposed method of transport.
- Proposed staff and adult/child ratio for the excursion.
- Cost.
- Effects, if any, on the children's current attendance times.
- Arrangements required to enable any children with additional needs attending the program to participate in the excursion.
- Arrangements required for those children whose parents have declined permission for them to attend the excursion. (The centre must remain open for such children.)

Preparation for the excursion

The Director, in consultation with the ELC's qualified staff, are responsible for:

- Assessing the requirements for the excursion.
- Booking the transport and venue(s).
- Informing parents/guardians, at least three weeks prior, of the details of the planned excursion as outlined in The Education and Care Services National Regulations 102, and the cost.
- Requesting adult participation in the excursion, clearly stating if it is appropriate for siblings to attend.
- Ensuring adults/parents are informed of the requirement to remain under the immediate supervision of the qualified staff member or proprietor.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Collecting completed permission forms and excursion fee, if required, for each child participating in the excursion.
- Notifying parents/guardians immediately of any change, or delay to the proposed excursion.
- Ensuring child/staff ratios, as per the requirements of 100-102 are met for children not participating in the excursion.

Staff are responsible for:

#### Qualified

- Providing adults who have volunteered to participate in the excursion with the aims and objectives of the excursion and any other information necessary for the smooth operation of the excursion.
- Conducting a risk assessment of the proposed excursion as per regulation 101.
- Arranging for a suitably equipped first aid kit, mobile phone and sunscreen (if required) to be taken on the excursion.
- Arranging for the details of the telephone number of any person who is to be notified of any accident, injury, trauma or illness involving the children and the children's medical details to be taken on the excursion. Information is to be carried by a qualified staff member at all times.
- Ensuring that the staff and adult/child ratio approved by the College and notified to the parents/guardians is met prior to commencing the excursion.
- Cancelling the excursion if the staff and adult/child ratio is not met and notifying the Head of Primary and parents/guardians.
- Arranging for a staff member, parents/guardians or the Head of Primary to be available, if the excursion is late returning, to advise parents/guardians collecting children at the centre of the estimated time of arrival back at the centre.
- Ensuring only those children whose parents/guardians have completed and returned the permission form attend the excursion.

#### All staff

- Discussing with the children, the aims and objectives of the excursion, and items of special interest to them.
- Informing parent/guardians of any items the children require for the excursion. For example hats, coat, and snack.

#### Prior to and during the excursion

The staff responsible for the excursion will ensure that:

#### Qualified

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Parents/guardians/volunteers are provided a written outline of the excursion to be carried with them at all times. This may include a list of children in attendance, a list of the names of staff in attendance, a telephone number to be used if they become separated from the group, timetable for the excursion, and any other information identified by the centre as relevant to the excursion.
- A list of those participating in the excursion is cross-referenced against the attendance book.
- Ensuring a qualified staff member is nominated to carry the first aid kit, emergency contact details for each child, mobile phone, sunscreen (if required), medications for children (if required), and a copy of the attendance record.
- Parents/guardians/volunteers assisting with supervision on the excursion are under the immediate supervision of a qualified staff member or proprietor at all times.
- The number of children and adults participating is monitored at regular intervals, by checking children and adults against the list of those participating in the excursion.
- The staff member, parent/guardian, or the Head of Primary delegated to notify parents/guardians if the excursion has been delayed and will be late returning, is notified if this occurs.

#### All staff

- Children are provided the opportunity to use toileting facilities prior to departure.
- All children are signed out of the centre at the start of the excursion and are signed back in when they return.
- Parents/guardians/volunteers are informed prior to commencing the excursion that if a child other than their own indicates the need to use toilet facilities, they are to notify a staff member. The staff member will attend to the toileting needs.
- Ensuring parents/guardians/volunteers participating in the program are aware of persons who are staff members, for example, staff members to wear name tags.
- All children are to be clearly identifiable and supervised at all times during the excursion, for example, centre labels, red hats etc. It is not recommended that children's name be used as an identifier as it informs strangers of their name.
- Parents/guardians/volunteers with other children who are not enrolled in the centre are informed that they are responsible for supervising and caring for their other child/ren at all times

The parents/guardians/volunteers are responsible for:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Reading the excursion details provided by the centre and asking for additional information if required.
- Signing and completing the Early Learning Centre's Excursion Volunteer form (Appendix 1) prior to the excursion.
- Ensuring they remain under the immediate supervision of a qualified staff member or proprietor.
- Informing a staff member immediately if a child appears to be missing from the group.
- Informing a staff member if a child other than their own needs to use toilet facilities. The staff member will attend to the toileting.
- Supervising and caring for other children in their care who are not enrolled in the program, for example siblings.
- Complying with all centre policies whilst participating in the excursion, for example, Code of Conduct, Sun Protection Policy.

When developing/reviewing an excursion policy centres need to consider a range of issues, such as:

### **Staffing requirements**

Division 4, regulation 360 outline minimum staffing requirements and child/staff ratios. These requirements are the absolute minimum for a group of children on an excursion. In most cases, staffing levels over and above the minimum would be required on an excursion to ensure that adequate supervision is maintained at all times. Part 6, 165 of the The Education and Care Services National Law 2011 requires that children are adequately supervised at all times they are in the care of the centre.

### **Attendance of siblings**

A number of centres now include a statement in their policy that siblings are not able to attend as it may impact on the ability of the centre to meet regulatory requirements for adequate supervision.

Excursions are group oriented therefore centres need to consider the appropriate size of the 'group' for the proposed excursion. One method is to use the licensed capacity of a centre as a guide for appropriate numbers of children to attend an excursion. For example, the average licensed capacity of a stand-alone kindergarten is 30 children, with group sizes of 25 children. This allows some flexibility for a restricted number of siblings to attend if required to ensure adequate adult supervision.


### **Transport to the excursion**

It is recommended that centres do not organise excursions involving private cars as this raises issues about the centre's ability to meet a range of funding and statutory requirements and most importantly children's safety and well-being. Children,

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



volunteers and staff leaving as a group from the centre are able to clearly meet all relevant regulatory and legislative requirements. Centres will need to decide on appropriate transport.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Inclusion of Children with Additional Needs Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Recognising the uniqueness of each child in their creation by God
- Providing all children with the opportunity to access a centre regardless of their ability
- Respecting the rights of all children to participate in a quality children's program
- Providing a family centred approach which recognises that parents know their children best and want the best for their children
- Recognising that families are different and unique
- Recognising that all children learn in different ways and at different rates
- A child's right to social inclusion.

#### Purpose

To provide guidelines for the successful inclusion of children with additional needs into Bayside Christian College Early Learning Centre

#### Scope

This policy applies to:

- Children with additional needs, as defined below, who are attending or whose parents/guardians are seeking for them to attend Bayside Christian College Early Learning Centre.
- Parents/guardians of children with additional needs who are attending or seeking to attend Bayside Christian College Early Learning Centre.
- The Committee, staff, volunteers, students and any other persons involved in the care and education of children with additional needs at Bayside Christian College Early Learning Centre.

#### Background and legislation

- The Education and Care Services National Law 2011
- Children, Youth and Families Act 2005
- Child Wellbeing and Safety Act 2005
- The Education and Care Services National Regulations 2011
- Health Records Act 2001
- Intellectually Disabled Persons Act, 1986: A Victorian Act of Parliament that establishes the basis upon which services to people with intellectual disabilities or significant delay in their development are provided.
- Disability Discrimination Act 1992
- Equal Opportunity Act 1995 (Victoria)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Procedures

The College is responsible for:

- Providing clearly defined enrolment procedures in their enrolment policy, which facilitates access for all children.
- Regularly reviewing with staff, the planning and resourcing provided for children with additional needs participating in the program.
- Being available to participate in identified child support groups.
- Providing assistance as required to child support group(s) in identifying and applying for additional resources/support for children and families available through the Early Childhood Intervention Services (birth to school entry).
- Working with the staff and families to identify and apply for additional resources/support for children with additional needs (where a separate child support group is not required).
- Providing appropriate physical and staffing resources within the budget constraints of the Early Learning Centre.

In providing these resources:

- Consultation will be sought with the staff, the parents/guardians of the child, and other professionals and/or agencies working with the family to determine additional resources required to meet the functional and developmental needs of the child. (Usually the child's support group as outlined on following pages).
- Supporting staff to gain the appropriate knowledge and skills for the implementation of this policy.

Qualified staff are responsible for:

- Reviewing enrolment applications to identify children with additional needs.
- Identifying, if additional support is required, the type of support required and consulting with families and liaising with the Head of Primary in order to access this.
- Ensuring any child with medical or physical additional needs are provided with an Individual Learning Plan if necessary. (See Appendix 1)
- Establishing a support group for children with high support needs, which may include:
  - Parents or guardians
  - Carer of the child (if applicable)
  - ELC teacher
  - Specialist staff from an early childhood intervention service (if the child is receiving a service)
  - Additional staff
  - Head of Primary
  - Preschool Field Officer (if no other early intervention specialist is involved with the family)
- Organising for the child's support group to meet:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Generally this would involve a number of meetings prior to the child's commencement at the Early Learning Centre and at least one meeting per term.
- Ensuring that any support or resources available for a child are accessed in consultation with the parents/guardians, for example through the Preschool Field Officer Program and the Kindergarten Inclusion Support Service.
- Ensuring that the parents/guardians are fully informed about the program planned and provided for their child and that they have given written consent for any action, support or intervention for their child.
- To plan and implement a program which incorporates the individual goals for the child with additional needs.
- Ensuring the program provides opportunities for participation and interaction with other children.
- Responding to parents/guardians needs and providing support and guidance, where appropriate.
- Providing support and guidance to other staff.
- Encouraging a collaborative family-centred approach in implementing the program at the Early Learning Centre.
- Ensuring that, in consultation with persons involved in the care and education of the child, any specialised medical and nutritional needs of the child are catered for in the day-to-day program.
- Ensuring that the program incorporates opportunities for regular review and evaluation, in consultation with all persons involved in the child's care and education.

All staff are responsible for:

- Working collaboratively with staff/parents/guardians/other professionals to implement the program provided for the children.
- Reporting and discussing any concerns regarding a child's behaviour with other staff.
- Ensuring the Privacy Policy is complied with at all times.

The parents/guardians will:

- Share information about their child and their child's needs within the Early Learning Centre, whilst maintaining the right to decide who will receive information about their child.
- Have the right to retain information that they do not wish to divulge.
- Raise any issues/concerns they have about their child's participation in the program.
- Participate in the child support group meetings .
- Be involved in, and fully informed about, any intervention or support proposed for their child.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Be given the opportunity to consent to any assessments or reports on their child and have a right to copies of such documents.

The members of the child's support group are responsible for:

- Attending support group meetings, which will generally occur at least once a term once the child commences at the Early Learning Centre.
- Facilitating the successful inclusion of the child into the Early Learning Centre.
- Planning for the needs and requirements of the child in the Early Learning Centre.
- Deciding together whether an application for support is required.
- Seeking the Head of Primary's support for any application that would involve the College in the provision of that support, for example employing staff.
- Assisting the ELC teacher to complete the application form.
- Monitoring and evaluating the child's progress and setting appropriate planning objectives in an individual education program plan.

#### Related documents

- DHS Victorian Kindergarten policy, procedures and funding criteria 2004-2006
- Early Childhood Intervention Services  
<http://www.education.vic.gov.au/ecsmanagement/intervention/>
- Specialist Children's Services Program Standards 1998 [www.ecis.vic.gov.au](http://www.ecis.vic.gov.au)  
Through the Maze, 5th edition, February 2003 is a 30 page resource booklet with information about services for families of children with a disability in Victoria.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Occupational Health & Safety Policy

### Policy Statement

#### Purpose

This policy will provide guidelines and procedures to ensure that:

- all people who attend the premises of Bayside Christian College ELC, including employees, children, parents/guardians, students, volunteers, contractors and visitors, are provided with a safe and healthy environment
- all reasonable steps are taken by the Approved Provider, as the employer of staff, to ensure the health, safety and wellbeing of employees at the service.

#### Values

Bayside Christian College ELC has a moral and legal responsibility to provide a safe and healthy environment for employees, children, parents/guardians, students, volunteers, contractors and visitors. This policy reflects the importance Bayside Christian College ELC places on the wellbeing of employees, children, parents/guardians, students, volunteers, contractors and visitors, by endeavoring to protect their health, safety and welfare, and integrating this commitment into all of its activities.

Bayside Christian College ELC is committed to ensuring that:

- the management group, staff and volunteers are aware of their health and safety responsibilities as employers, employees and volunteers
- systematic identification, assessment and control of hazards is undertaken at the service
- effective communication and consultation form a fundamental part of the management process to encourage innovative ways of reducing risk in the service environment
- training is provided to assist staff to identify health and safety hazards which, when addressed, will lead to safer work practices at the service
- it fulfills its obligations under current and future laws (in particular, the Occupational Health and Safety Act 2004), and that all relevant codes of practice are adopted and accepted as a minimum standard.

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, children, parents/guardians, students on placement, volunteers, contractors and visitors attending the programs and activities of Bayside Christian College ELC.

#### Background and Legislation

Everyone involved in an early childhood education and care service has a role to play in ensuring the service's operations are safe and without risk to the health and safety

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

of all parties. In Victoria, health and safety in the workplace is governed by a system of laws, regulations and compliance codes that set out the responsibilities of employers and employees to ensure safety is maintained at work.

The *Occupational Health and Safety Act 2004* (OHS Act) sets out the key principles, duties and rights in relation to workplace health and safety. The Occupational Health and Safety Regulations 2007 specifies the ways duties imposed by the OHS Act must be undertaken and prescribes procedural/administrative matters to support the OHS Act, such as requiring licenses for specific activities, or the need to keep records or notify authorities on certain matters.

The legal duties of an employer under the OHS Act are:

- to provide and maintain a workplace that is safe and without risk to the health of employees. This responsibility extends to contractors for routine tasks over which the employer has management. For contractors completing non-routine tasks, the employer must ensure that the service's daily operations and layout do not pose unreasonable risks
- to ensure other individuals, such as families and visitors, are not exposed to health and safety risks arising from the organisation's activities
- to consult with employees about OHS matters that will, or will likely, affect employees directly, including identifying hazards and assessing risks, and making decisions about risk control measures.

The OHS Act places the responsibility on employees for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the employer, including following guidelines, attending OHS-related training, reporting incidents, co-operating with OHS investigations, encouraging good OHS practice with fellow employees and others at the service, and assisting the employer with conducting OHS inspections during operating hours
- not interfering with safety equipment provided at the service, such as fire extinguishers.

### Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Accident Compensation Act 1985* as amended 2007
- *AS/NZS 4804:2001 and 4801:2001 Occupational health and safety systems*
- *Education and Care Services National Law Act 2011*
- *Education and Care Services National Regulations 2011*
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
  - Standard 2.3: Each child is protected
    - Element 2.3.1: Children are adequately supervised at all times

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *National Quality Standard, Quality Area 3: Physical Environment*
  - Standard 3.1: The design and location of the premises is appropriate for the operation of a service
    - Element 3.1.1: Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose
    - Element 3.1.2: Premises, furniture and equipment are safe, clean and well maintained
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
  - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2007*

### Definitions

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

In the context of this policy, duty of care refers to the responsibility of education and care services to provide children, staff, students, volunteers, contractors and anyone visiting the service with an adequate level of care and protection against reasonable foreseeable harm and injury.

**Hazard:** An element with the potential to cause death, injury, illness or disease.

**Hazard identification:** A process that involves identifying all foreseeable hazards in the workplace and understanding the possible harm that each hazard may cause.

**Hazard management:** A structured process of hazard identification, risk assessment and control, aimed at providing safe and healthy conditions for employees, contractors and visitors while on the premises of Bayside Christian College ELC or while engaged in activities endorsed by Bayside Christian College ELC.

**Harm:** Includes death, or injury, illness (physical or psychological) or disease that may be suffered by a person as a consequence of exposure to a hazard.

**Material safety data sheet:** Provides employees and emergency personnel with safety procedures for working with toxic or dangerous materials. The data sheet includes all relevant information about the material such as physical properties (e.g. melting/boiling point, toxicity and reactivity), health effects, first aid requirements and safe handling procedures (e.g. personal protective equipment, safe storage/disposal and management of spills).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



**OHS committee:** A committee that facilitates co-operation between an employer and employees in instigating, developing and carrying out measures designed to ensure the health and safety of employees in the workplace.

**Risk:** The chance (likelihood) that a hazard will cause harm to individuals.

**Risk assessment:** A process for developing knowledge/understanding about hazards and risks so that sound decisions can be made about the control of hazards. Risk assessments assist in determining:

- what levels of harm can occur
- how harm can occur
- the likelihood that harm will occur.

**Risk control:** A measure, work process or system that eliminates an OHS hazard or risk, or if this is not possible, reduces the risk so far as is reasonably practicable.

#### Sources

- Early Childhood Management Manual, KPV
- Getting into the Act, WorkSafe Victoria
- Getting help to improve health and safety, WorkSafe Victoria
- Guide to the OHS Act 2004, WorkSafe Victoria
- Managing safety in your workplace, WorkSafe Victoria
- OHS in Early Childhood Services (KPV): [www.ohsinecservices.org.au](http://www.ohsinecservices.org.au)
- WorkSafe Victoria: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

#### Related Policies

- Child Safe Environment Policy
- Water Safety Policy
- Excursions Policy
- Bayside Christian College OH&S Policies and Procedures (see College intranet)

#### Procedures

The Approved Provider is responsible for:

- providing and maintaining a work environment that is safe and without risks to health (OHS Act: Section 21). This includes ensuring that:
  - there are safe systems of work
  - all plant and equipment provided for use by staff, including machinery, appliances and tools etc., are safe and meet relevant safety standards
  - substances, and plant and equipment, are used, handled, and stored safely
  - material safety data sheets are supplied for all chemicals kept and/or used at the service (refer to [www.ohsinecservices.org.au](http://www.ohsinecservices.org.au))

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- there are adequate welfare facilities e.g. first aid and dining facilities etc.
- there is appropriate information, instruction, training and supervision for employees

(Note: This duty of care is owed to all employees, children, parents/guardians, volunteers, students, contractors and any members of the public who are at the workplace at any time)

- ensuring there is a systematic risk management approach (refer to [www.ohsinecservices.org.au](http://www.ohsinecservices.org.au)) to the management of workplace hazards. This includes ensuring that:
  - hazards and risks to health and safety are identified, assessed and eliminated or, if it is not possible to remove the hazard/risk completely, effectively controlled
  - measures employed to eliminate/control hazards and risks to health and safety are monitored and evaluated regularly
- ensuring regular safety audits of the following:
  - indoor and outdoor environments
  - all equipment, including emergency equipment
  - playgrounds and fixed equipment in outdoor environments
  - cleaning services
  - horticultural maintenance
  - pest control
- monitoring the conditions of the workplace and the health of employees (OHS Act: Section 22)
- protecting other individuals from risks arising from the service's activities, including holding a fete or a working bee etc., or any activity that is ancillary to the operation of the service e.g. contractors cleaning the premises after hours (OHS Act: Section 23)
- providing adequate instruction to staff in safe working procedures, and informing them of known hazards to their health and wellbeing that are associated with the work that they perform at the service
- ensuring that all plant, equipment and furniture are maintained in a safe condition
- developing procedures to guide the safe use of harmful substances, such as chemicals, in the workplace
- ensuring that OHS accountability is included in all position descriptions
- allocating adequate resources to implement this policy
- displaying this policy in a prominent location at the service premises
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to Child Safe Environment Policy )
- implementing/practising emergency and evacuation procedures (refer to Emergency Management Policy )

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
- identifying and providing appropriate resources, induction and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
- ensuring the Nominated Supervisor, educators, staff, contractors, volunteers and students are kept informed of any relevant changes in legislation and practices in relation to this policy
- consulting appropriately with employees on OHS matters including:
  - identification of hazards
  - making decisions on how to manage and control health and safety risks
  - making decisions on health and safety procedures
  - the need for establishing an OHS committee and determining membership of the committee
  - proposed changes at the service that may impact on health and safety
  - establishing health and safety committees
- notifying WorkSafe Victoria about serious workplace incidents, and preserving the site of an incident (OHS Act: Sections 38–39)
- holding appropriate licenses, registrations and permits, where required by the OHS Act
- attempting to resolve OHS issues with employees or their representatives within a reasonable timeframe
- not discriminating against employees who are involved in health and safety negotiations
- allowing access to an authorised representative of a staff member who is acting within his/her powers under the OHS Act
- producing OHS documentation as required by inspectors and answering any questions that an inspector asks
- not obstructing, misleading or intimidating an inspector who is performing his/her duties.

The Nominated Supervisor is responsible for:

- ensuring that all educators/staff are aware of this policy, and are supported to implement it at the service
- organising/facilitating regular safety audits of the following:
  - indoor and outdoor environments
  - all equipment, including emergency equipment
  - playgrounds and fixed equipment in outdoor environments
  - cleaning services
  - horticultural maintenance
  - pest control

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- ensuring that all cupboards/rooms are labelled accordingly, including those that contain chemicals and first aid kits, and that child-proof locks are installed on doors and cupboards where contents may be harmful
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to Child Safe Environment Policy )
- ensuring that all equipment and materials used at the service meet relevant safety standards
- ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children
- implementing and practising emergency and evacuation procedures (refer to Emergency Management Policy )
- implementing and reviewing this policy in consultation with the Approved Provider, educators, staff, contractors and parents/guardians
- identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
- keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy.

Certified Supervisors and other educators/staff are responsible for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the Approved Provider, including:
  - following OHS rules and guidelines
  - helping to ensure housekeeping is of the standard set out in service policies
  - attending OHS training as required
  - reporting OHS incidents
  - co-operating with OHS investigations
  - encouraging good OHS practices with fellow employees and others attending the service
  - assisting the Approved Provider with tasks relating to OHS, such as conducting OHS inspections during working hours
- not interfering with safety equipment provided by the Approved Provider
- practising emergency and evacuation procedures (refer to Emergency Management Policy )
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to Child Safe Environment Policy )
- maintaining a clean environment daily, and removing tripping/slipping hazards as soon as these become apparent
- ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- implementing and reviewing this policy in consultation with the Approved Provider, Nominated Supervisor, educators, staff, contractors and parents/guardians.

Students on placements, volunteers, contractors and parents/guardians at the service are responsible for:


- being familiar with this policy
- co-operating with reasonable OHS rules implemented by the service
- not acting recklessly and/or placing the health and safety of other adults or children at the service at risk.

### Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to occupational health and safety issues
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Parents/Guardians Access and Involvement Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Promoting and providing opportunities for parents/guardians involvement in all components of program delivery.
- Recognising parents/guardians have been given the responsibility by God to be the first and continuing carers and educators of their children.
- Listening to parents/guardians knowledge of their child to ensure the program provided is responsive to the individual needs of each child.
- Fostering a spirit of cooperation between the parents/guardians of the children attending the centre and the staff.
- Compliance with all funding and legislative requirements.
- Supporting a culture which is sensitive to the cultural and social background of families attending the centre.

While the centre acknowledges parents/guardians access and involvement is an integral part of the operation of the centre, the staff's duty of care to the children is of prime consideration and it will take precedence over parents/guardians participation in the program if this is deemed to place children at risk.

#### Purpose

This policy will outline how parents/guardians access and involvement is to be provided.


#### Scope

This policy applies to parents/guardians and staff of the centre.

- The children's centre is sensitive to the cultural and social backgrounds of the families, their lifestyles and their child-rearing practices and that parents/guardians are involved in addressing issues relating to their child's care and development.
- A range of communication strategies is in place to enable and encourage parents/guardians participation in Early Learning Centre activities.
- They have in place access and equity policies that are clear, fair and comply with legislative requirements; are developed on the basis of consultation (with regard to hours of operation and models of centre delivery), and are communicated to families and the community.

#### Legislation and regulations:

The Education and Care Services National Law 2011

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

- Children's Services Parents/Guardians Access and Involvement Policy 2009 Regulation 71 requires the proprietor to ensure that any parent or guardian of a child being cared for or educated by the children's service can:
  - Enter the children's service at any time during the hours of operation; and
  - Exchange information about the child with a staff member
- Children, Youth and Families Act 2005
- Child Wellbeing and Safety Act 2005
- Family Law Act 1995
- Disability Discrimination Act 1992 (Commonwealth)
- Equal Opportunity Act 1995 (Victoria)
- Human Rights and Equal Opportunity Commission Act 1986 (Commonwealth)

## Procedures

The Head of Primary is responsible for:

- Ensuring parents/guardians are able to access the centre at any time during the hours of operation.
- Ensuring a range of communication strategies are in place to enable and encourage parents/guardians participation and involvement in all aspects of the centre. Participation will be welcome at all levels, be it active support at working bees, or involvement in the children's program.
- Ensuring opportunities are provided for communication between parents/guardians and the staff. This can be facilitated through such things as informal discussions, surveys, notice board displays, social events, newsletters.
- Reviewing the programs provided (that is, the sessions and times that children attend at the centre), taking into account feedback from parents/guardians in the development of future program models.

The staff are responsible for:

- Providing access for parents/guardians to the centre at any time their child is attending a program at the centre.
- Ensuring all communication with parents/guardians is sensitive to the cultural and social backgrounds of each individual family, their lifestyles and their child-rearing practices.
- Providing access to interpreters, translated materials and other resources as needed to implement this policy.
- Providing parents/guardians with information about how the educational program at the centre is developed and the philosophy on which it is based.
- Developing the educational program, in consultation with parents/guardians, incorporating the development of children's language, physical skills, emotional and cognitive processes and social interaction skills.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Offering a variety of opportunities for parents/guardians to participate directly in the children's program, including spending time with the children, assisting with activities, excursions and special events and volunteering special skills to share with the children. In addition, providing opportunities for them to offer feedback to the staff concerning the program.
- Encouraging parents/guardians to contribute their suggestions regarding any aspect of the program through discussions with the staff.
- Providing the parents/guardians with opportunities for communication about their child, either informally before or after the program, or by appointment during the staff member's non-contact time with the children and encouraging parents/guardians to take up these opportunities.
- Developing strategies which contribute to a partnership approach with parents/guardians to create a two-way process of knowledge and information sharing. For example individual journals (photos, daily stories) which children are able to take home and share with their family on a regular basis.
- Providing opportunities for parents/guardians to discuss the individual records the qualified staff member has recorded of their child.
- Providing information regarding the educational program through bulletin boards and regular newsletters, which will show an understanding of, and consideration for, the relevant languages and cultural diversity of the families using the centre.

The parents/guardians are responsible for:

- Reading information provided from the centre, this can include information handbooks, newsletters, policies, children's program, notice board displays etc.
- Participating in centre events, for example working bees, the children's program.
- Communicating information about their child/ren with staff, including significant events in the child's life, such as the arrival of a new baby, grandparents visiting from overseas.
- Contributing feedback and ideas for the children's program.

#### Related documents

- DHS Preschool Quality Assessment Checklist and Workbook
- DHS, Victorian Kindergarten policy, procedures and funding criteria 2007-2009
- Victorian Legal Aid and DHS, 1998, Legal Aspects of Child Care, available from Victorian Legal Aid or online at [www.office-for-children.vic.gov.au/children](http://www.office-for-children.vic.gov.au/children)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Privacy Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Responsible and transparent collection and handling of health and personal information.
- Protecting the privacy of each individual's health and personal information.
- Ensuring individuals are fully informed regarding the collection, storage, use and disposal of their personal/health information and their access to that information.

#### Purpose

This policy will provide guidelines for the collection, use, storage and disposal of personal information, including photos and videos, and health information.

#### Scope

This policy applies to staff, parents, volunteers, students and the Committee of Bayside Christian College Early Learning Centre.

#### Background and legislation

Health Records Act 2001 is State legislation that regulates the privacy of health information handled by the public and private sector bodies in Victoria.

Information Privacy Act 2000 is State legislation that protects personal information held by Victorian government agencies, statutory bodies and local councils, and some companies/organisations, such as kindergartens/childcare centres contracted to provide services to government.

Privacy Act 1988 provides for the protection of the privacy of individuals. This Commonwealth Act operates alongside State or Territory Acts which make provision for the collection, holding, use, correction, disclosure or transfer of personal information.

Organisations with a turnover of more than \$3 million must also comply with the Commonwealth Government's privacy legislation which was extended to the private sector through the Privacy Amendment (Private Sector) Act 2000.

### Background Information

Early childhood centres are obligated either by law, service agreement or licensing requirements to comply with the principles of privacy legislation when collecting personal and health information about individuals.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Centres need to ensure their processes for the collection, use, storage and disposal of health and personal information meet the requirements of the appropriate privacy legislation and Health Records Act 2001.

Examples of practices impacted by the legislation and the Act:

- Attendance records: Limit the information to what is required under regulation 15 in the The Education and Care Services National Regulations 2011. This regulation requires details of the date, child's name (first name only), times of arrival and departure, signatures of the person delivering and collecting the child. Contact details may be kept in a sealed envelope at the back of the attendance book or separate folder for evacuation/emergency purposes.
- Medication records, and accident, injury and illness records: Access to health and personal information about a child should be accessible only to parents/guardians of the child and to authorised persons who require the information in order to carry out their duties. An example of good practice is the use of a ring binder which contains a separate section for each child. A medication sheet and accident/illness and injury sheet for recording details required by the The Education and Care Services National Regulations 2011 would be included in each section. Parents/guardians would then have access only to the sheets from their child's section. Completed entries can then be removed and stored securely. Be aware that great care needs to be taken when using a ring binder to ensure that entries and information are not lost or mislaid.
- Handling and storage of information: Limited space can often be an issue in early childhood centres and both employees need to have secure storage for personal and health information. It is important that confidential information remains at Bayside Christian College Early Learning Centre at all times and open folders/files are not accessible to unauthorised staff, for example if left open on an unattended desk.
- Computerised records: It is important that computerised records containing personal or health information can only be accessed via a password. If you are password-protecting files relating to the Early Learning Centre, a procedure needs to be put in place to ensure that the password is accessible to the Head of Primary who may need to take over the role. The procedure should not rely on hand-over from teacher to teacher as they may not be available to do this, for example, if ill.
- Forms: Enrolment application forms and any forms used to collect personal or health information should have the Early Learning Centre's collection statement attached to them.
- Information collected for which you do not have an immediate use: A centre should only collect the information it needs and for which it has a specific purpose. Centres should not collect information which, although it may be useful in the future, has no immediate use.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Staff recording information on children, and families, need to be aware that the information they record or file may be requested and viewed by the child's parents/guardians on request.

## Procedures

The College is responsible for:

- Ensuring the Early Learning Centre complies with the requirements of the privacy principles as outlined in the Health Records Act 2001, the Information Privacy Act 2000, and where applicable the Privacy Act 1988 by developing, reviewing and implementing processes and practices that identify:
- What information the Early Learning Centre collects about whom and from whom, why and how the centre collects, uses and discloses information
- Risk areas in relation to collection, use, disclosure or disposal of personal and health information.
- Ensuring procedures are in place to monitor compliance with the procedures and processes set out in this policy.
- Ensuring all employees and parents/guardians have access to a copy of the policy, and are provided with a copy of the Privacy Policy Collection Statement (Appendix 3).
- Ensuring a copy of the policy is displayed on the noticeboard in the main entrance of the Early Learning Centre and is available on request.

The staff are responsible for:

- Ensuring they are aware of their responsibilities in relation to the collection, use, storage and disposal of health and personal information.
- Implementing the requirements for the handling of personal and health information as set out in this policy.
- Completion of the letter of acknowledgement and understanding (refer to Appendix 1)

The parents/guardians are responsible for:


- Providing accurate information when requested.
- Maintaining the privacy of any personal or health information provided to them about other individuals, for example, contact details.

## Related Forms

Refer to Forms Section of this Manual for:

- 'LETTER FOR STAFF RE 'ACKNOWLEDGEMENT and UNDERSTANDING of PRIVACY POLICY'
- 'ACKNOWLEDGEMENT OF READING THE PRIVACY POLICY FORM'
- 'PERMISSION FORM – PHOTOGRAPHS & VIDEOS'
- 'SPECIAL PERMISSION NOTICE FOR PUBLICATIONS/MEDIA'

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Schedule 1

### Collection processes

#### Type of personal and health information to be collected

Bayside Christian College Early Learning Centre will only collect the information needed, and for which there is a purpose that is legitimate and related to one of the Centre's functions or obligations.

The type of information collected and held includes (but is not limited to) personal information, including health information, regarding:

- Children and parents/guardians before and during the child's attendance at a centre (this information is collected in order to provide and/or administer our services to children and parents/guardians)
- Job applicants, employees, members, volunteers and contractors (this information is collected in order to manage the relationship and fulfil our legal obligations)
- Contact details of other parties with which the Early Learning Centre deals.
- Bayside Christian College Early Learning centre will collect information on the following identifiers:
- Information required to access the kindergarten fee subsidy for eligible families
- Tax file number for all employees related to the deduction and forwarding of tax to the Australian Tax Office. Failure to provide this would result in maximum tax being deducted.

#### Collection of health and personal information

Personal information about individuals either in relation to themselves or their children using the Early Learning Centre will generally be collected via forms filled out by parents/guardians. Other information may be collected from job applications, face-to-face interviews and telephone calls.

Individuals from whom we collect personal information will be provided with a copy of our collection statement (Appendix 3). If the reason for collecting the information varies from the collection statement, the statement will be amended to incorporate the area required whilst still complying with the privacy principle requirements of Health Privacy Principle 1.4 (Health Records Act 2001) and Information Privacy Principle 1.3 (Information Privacy Act 2000).

When the Early Learning Centre receives personal information from a source other than the individual or the parents/guardians, the person receiving the information will notify the individual or the parents/guardians of the child to whom the information relates, of the receipt of this information. The centre will advise that individual that they have a right to request access to the information.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Access will be granted in accordance with the relevant legislation. Please note that the legislation allows the Early Learning Centre to deny access, in accordance with the limited reasons for denial that are contained in the legislation.

### Anonymity

Wherever it is lawful and practicable, individuals will have the option of not identifying themselves when entering transactions with our centre.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Schedule 2

### Use of personal information

Bayside Christian College Early Learning Centre will use the personal information collected for the primary purpose (refer below) of the collection of such information. We may also use this information for any secondary purposes (for examples refer to Schedule 3) that are related to the primary purpose of collection and can be reasonably expected, or to which the individual concerned has consented.

The following identifies whose personal information will be collected, the primary purpose for collection and some examples of how this information will be used.

### Parents/Guardians and Children

Whose personal information will be collected;

- Parents/Guardians of children attending the centre
- Children attending the centre
- Those authorised to collect children from the centre/emergency contact persons etc.

The primary purpose for collection of information is to enable the College to provide for the education and care of children attending the Centre.

Examples of how this information will be used include:

- Day-to-day administration
- Provision of a place for their child in the centre
- Duty rosters
- Looking after children's educational, care and safety needs
- For correspondence with parents/ guardians relating to their child's attendance
- To satisfy the Early Learning Centre's legal obligations and to allow it to discharge its duty of care
- Displays in the Centre
- Newsletters
- External media including websites
- For the management of the Early Learning Centre
- For communication with the Head of Primary, employees and members of the association
- To satisfy the Early Learning Centre's legal obligations


### Job applicants, employees, contractors, volunteers and students

The primary purpose of collection of information is to assess and (if necessary) to engage the applicant, employees, contractor, volunteers or students, as the case may be.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Examples of how this information will be used include:

- To administer the employment, contract or placement.
- Administering the individual's employment, contract, or placement, as the case may be
- Health and safety
- Insurance purposes
- Satisfying the Early Learning Centre's legal obligations, for example in relation to the The Education and Care Services National Law 2011 and the The Education and Care Services National Regulations 2011
- Listing the names and qualifications of staff on material provided to prospective users.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Schedule 3

### Disclosure

Disclosure of personal information, including health information

We may disclose some personal information held about an individual to:

- Government departments or agencies as part of our legal and funding obligations
- Local government authorities in relation to enrolment details for planning purposes
- Organisations providing services related to staff entitlements and employment
- Insurance providers in relation to specific claims
- Law enforcement agencies
- Health organisations and/or family in circumstances where the person requires urgent medical assistance and is incapable of giving permission
- Anyone to whom the individual authorises Bayside Christian College Early Learning Centre to disclose information.

Disclosure of sensitive information

Sensitive information will be used and disclosed only for the purpose for which it was collected or a directly related secondary purpose, unless the individual agrees otherwise, or the use or disclosure of the sensitive information is allowed by law.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Schedule 4

### Management and security of information

#### Storage and security of personal information

In order to protect the personal information from misuse, loss, unauthorised access, modification or disclosure, the Head of Primary and staff will ensure that in relation to personal information:

- Access will be limited to staff and the Head of Primary or Principal who require this information in order to fulfill their responsibilities and duties
- It will not be left in areas that allow for unauthorised access
- The physical storage of all materials will be in a secure cabinet or area
- Computerised records containing personal or health information will require password access

There is security in transmission:

- Emails will only be sent to a person authorised to receive this material Faxes will only be sent to a secure fax, which does not allow unauthorised access
- Telephone: Only limited personal information will be provided over the telephone to persons authorised to receive that information
- Transfer of information interstate and overseas will only occur with the permission of the person concerned or their parents/guardians.

#### Data quality

The Early Learning Centre will endeavour to ensure that the personal information we hold is accurate, complete, up to date and relevant to our functions or activities.

#### Disposal of information

Personal information will not be stored any longer than necessary.

In disposing of personal information, those with authorised access to the information will ensure that it is either shredded or destroyed in such a way that no one can access the information.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Schedule 5

### Access to personal information

#### Access to information and updating personal information

Individuals have the right to ask for access to personal information we hold about them without providing a reason for requesting access.

Under the privacy legislation, an individual has the right to:

- Request access to personal information that Bayside Christian College Early Learning Centre holds about them
- To access this information
- To make corrections if they consider the data is not accurate, complete or up-to-date.

There are some exceptions set out in the Acts where access may be denied in part or in total. Examples of some of the exemptions are where:

- The request is frivolous or vexatious
- Providing access would have an unreasonable impact on the privacy of other individuals
- Providing access would pose a serious threat to the life or health of any person
- The Early Learning Centre is involved in the detection; investigation or remedying of serious improper conduct and providing access would prejudice that.

#### Process for considering access requests

A person may seek access, to view or update their personal/health information:

- If it relates to their child, by contacting the teacher/coordinator.
- For all other requests, by contacting the Head of Primary.

Personal information may be accessed in the following way:

- View and inspect information.
- Take notes.
- Obtain a copy.


Individuals requiring access to, or updating of personal information should nominate the type of access required, and specify if possible, what information is required. There is no legal requirement to provide a reason for the request. A visible form of identification must also be provided to the person receiving the request, if the person making the request is not known to them. The details of ID provided, the request and the date received will be recorded and each request will be acknowledged (by telephone) within 14 days, but preferably within two working days. Requests will be

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

complied within 30 days. However there could be a delay in responding if the timeline occurs over a period when the Early Learning Centre is closed.

Employees will provide access in line with the privacy legislation. If the requested information is not given, the reasons for denied access will be given in writing to the person requesting the information.

In accordance with the legislation Bayside Christian College Early Learning Centre reserves the right to charge for information provided, in order to cover the costs involved in providing the information.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Appendix 1

### PRIVACY POLICY COLLECTION STATEMENT

We believe your privacy is important. We have put in place a Privacy Policy which illustrates how we will collect, use, disclose, manage and transfer personal information including health information. This policy is available on the noticeboard at the entrance of the Early Learning Centre, in the Policy Folder and on the website: [www.baysidecc.vic.edu.au](http://www.baysidecc.vic.edu.au)

To ensure ongoing funding and licensing, our centre is required to comply with the requirements of either a service agreement or privacy legislation in relation to the collection and use of personal information. If we need to collect health information we are subject to the Health Records Act 2001.

#### Purpose for which information is collected and used


The reasons for which we generally collect personal information are:

- to enable the College to provide for the education and care of children attending the Centre.
- to manage the Early Learning Centre
- to assess and (if necessary) to engage job applicants, employees, contractors, volunteers or students, as the case may be.
- To administer individual employment contracts, student placements and volunteers.

Note: You should be aware that under relevant privacy legislation, other uses and disclosures of personal information are permitted, as set out in that legislation.

We may disclose some personal information, including health information, held about an individual to:

- Government departments or agencies as part of our legal and funding obligations
- Local government authorities in relation to enrolment details for planning purposes
- Organisations providing services related to employee entitlements and employment
- Anyone to whom the individual authorises us to disclose information.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Appendix 2


### LAWS THAT REQUIRE US TO COLLECT SPECIFIC INFORMATION

The Education and Care Services National Regulations 2011, The Education and Care Services National Law 2011, Associations Incorporations Act 1981 and employment related laws and agreements require us to collect specific information.

Failure to provide the required information could affect:

- A child's enrolment at Bayside Christian College Early Learning Centre
- An employee's employment
- Access to information

Individuals about whom we hold personal or health information are able to gain access to this information in accordance with applicable legislation. The procedure for doing this is set out in our Privacy Policy. The policy is available on the noticeboard at the entrance to the Early Learning Centre, in the Policy Folder and on the website [www.baysidecc.vic.edu.au](http://www.baysidecc.vic.edu.au)

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Qualified Staff Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- The employment of qualified staff with a range of relevant qualifications and experience to provide an educational program that meets the needs of all children and families using the Early Learning Centre. The employment of qualified staff, which meet the requirements of The Education and Care Services National Regulations 2011.

#### Purpose

This policy will provide guidelines for the employment of qualified staff, which meet the requirements of The Education and Care Services National Regulations 2011.

#### Scope

This policy applies to Bayside Christian College and staff.

#### Background and legislation

The Education and Care Services National Law 2011

The Education and Care Services National Regulations 2011

Regulation 126 requires centres to have a policy with respect to the employment of qualified staff.

#### Procedures

The College is responsible for:

- Ensuring all appointed early childhood teachers are registered as 'Early Childhood Teachers' through the Victorian Institute of Teaching.
- Employing staff that hold a qualification assessed as equivalent to those included in the Schedule of Early Childhood Qualifications – Victoria – The Education and Care Services National Regulations 2011. This is available at <http://www.education.vic.gov.au/careers/earlychildhood/qualifications.htm>.
- Staff will be kept accountable through an annual Appraisal process conducted by the College Leadership.
- Referring applicants with overseas and interstate qualifications not included on the schedule of recognised qualifications, for assessment by ECA for suitability.
- Ensuring that an original police records check (not more than six months old) is considered by the licensee representative, primary nominee or nominee, before staff commence work at Bayside Christian College Early Learning Centre.
- Ensure details of the police records check are recorded on the staff record.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring a relief staff member's police check is considered on an annual basis and recorded.
- Ensuring a certified copy of qualifications for each staff member is kept in the staff records.
- Ensuring staff adhere to the Bayside Christian College Code of Conduct
- Ensuring that any volunteers or practicum students are suitable to engage with the ELC program and have viewed and signed a copy of the Code of Conduct.
- Displaying in prominent position the nominee present and in charge who is responsible for the ELC at any one time.

#### Emergency relief teachers – funded kindergarten program

If a teacher with an approved early childhood teaching qualification cannot be found the Deputy Principal will:

- Cancel the session; or
- Engage a qualified person, in accordance with the Regulations; or
- Engage a person with a primary teaching qualification in accordance with the qualified staff exemption in emergency periods (DHS Children's Services Guide,
- A sign will be displayed in the main entrance informing parents/guardians that the kindergarten program will not operate but a qualified person has been employed which meets the requirements of the The Education and Care Services National Regulations 2011 and the The Education and Care Services National Law 2011 to operate a licensed children's centre.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Determining The Responsible Person

### Policy statement

#### Purpose

The purpose of this policy is to provide guidelines to assist in determining the Responsible Person at Bayside Christian College ELC.

#### Values

Bayside Christian College is committed to:

- Meeting its duty of care (refer to *Definitions*) obligations under the law
- Ensuring staffing arrangements contribute to the health, safety, wellbeing, learning and development at all children at the centre
- Meeting legislative requirements for a Responsible Person to be on the centre premises at all times

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers and parents/guardians of Bayside Christian College ELC.

#### Background and Legislation

Relevant legislation may include but is not limited to:

- Education and Care Services National Law Act 2010: Sections 5, 44, 56, 106–109, 114, 115, 118, 161, 162, 164, 172, 291(5)
- Education and Care Services National Regulations 2011: Regulations 35, 46–50, 146, 150, 168(2)(i)(ii), 173, 176(2)(c)
- National Quality Standard, Quality Area 4: Staffing Arrangements
  - Standard 4.1: Staffing arrangements enhance children's learning and development and ensure their safety and wellbeing
- National Quality Standard, Quality Area 7: Leadership and Service Management
  - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
  - Element 7.1.5: Adults working with children and those engaged in management of the service or residing on the premises are fit and proper
- Working with Children Act 2005 (Vic)
- Working with Children Regulations 2006 (Vic)

#### Definitions

**Approved Provider:** An individual or organisation that has completed an application and been approved by the Regulatory Authority as fit and proper (in accordance with Sections 12, 13 and 14 of the National Law) to operate one or more education and

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



care services. Where the applicant is an organisation, each person with management and control of that organisation must complete a separate application form. (Note: Under the Education and Care Services National Law Act 2010, Section 5, Definitions: “person with management or control, in relation to an education and care service, means – (b) if the provider of the service is an eligible association, each member of the executive committee of the association who has the responsibility, alone or with others, for managing the delivery of the education and care service”).)

**Approved service:** An education and care service for which a service approval exists. A request for service approval must be made in writing to the Regulatory Authority and include prescribed information including details of the Nominated Supervisor and their written consent to be nominated as such.

**Certified Supervisor:** An educator who has been nominated by the Approved Provider or the Nominated Supervisor of a service (in accordance with the National Regulations), and consents in writing to being placed in day-to-day charge of the education and care service. A Certified Supervisor can be any person engaged to be responsible for the day-to-day management of the service, or with supervisory and leadership responsibilities at the service. Any person placed in day-to-day charge of the service must be assessed as a fit-and-proper person (in accordance with Sections 12,13 and 14 of the National Law) and have suitable skills, qualifications and experience as determined by the service. Individual supervisor certificates are also still valid.

A Certified Supervisor placed in day-to-day charge of a service does not have the same responsibilities under the National Law as the Nominated Supervisor.

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

**Fit and proper:** In determining whether an applicant is fit and proper, the Regulatory Authority must take into account the applicant’s history of involvement in education and care services, their compliance with current and prior law, criminal history record check and any bankruptcy or insolvency issues. The Regulatory Authority may reassess fitness and propriety at any time. Applicants are required to complete the Declaration of Fitness and Propriety form on the ACECQA website and have this approved by the Regulatory Authority. This form must be completed by an individual provider applicant or in the case of an entity provider applicant, each person with management or control of a service. The form is available at:

<http://acecqa.gov.au/application-forms/provider-approvals/> (Note: Under the Education and Care Services National Law Act 2010, Section 5, Definitions: “**person with management or control**, in relation to an education and care service, means – (b) if the provider of the service is an eligible association, each member of the

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

executive committee of the association who has the responsibility, alone or with others, for managing the delivery of the education and care service”).

**Nominated Supervisor:** A person who has been nominated by the Approved Provider of the service under Part 3 of the Act and who has consented to that nomination in writing can be the Nominated Supervisor. All services must have a Nominated Supervisor with responsibility for the service in accordance with the National Regulations. The Approved Provider must take reasonable steps to ensure the Nominated Supervisor is a fit and proper person (in accordance with Sections 12, 13 and 14 of the National Law), with suitable skills, qualifications and experience. The Regulatory Authority must be notified if the Nominated Supervisor for the service changes or is no longer employed at the service.

**Supervisor Certificate:** A supervisor certificate is provided to each centre-based service by the Regulatory Authority. The Approved Provider can nominate a person or persons to be the Certified Supervisor (refer to Definitions) at the service without requiring Departmental approval or paying a fee. Individual supervisor certificates are still valid, however most individuals no longer need to apply.

**Responsible Person:** The Approved Provider (if that person is an individual, and in any other case the person with management or control of the service operated by the Approved Provider) or a Nominated Supervisor or Certified Supervisor who has been placed in day-to-day charge of the service in accordance with the National Regulations.

## Procedures

### The Approved Provider is responsible for:

- ensuring there is a Responsible Person (refer to Background and Definitions) on the premises at all times the service is delivering education and care programs for children
- ensuring that the service has received a supervisor certificate (refer to Definitions) from the Regulatory Authority
- nominating sufficient Certified Supervisors to meet legislative requirements for a Responsible Person at the service at all times, including during periods of leave or illness. Ensuring that a person nominated as a Responsible Person has appropriate skill level, experience, qualifications and approval to work with children, as required under the National Law and National Regulations
- ensuring that the name and position of the Responsible Person in charge of the service is displayed and easily visible from the main entrance of the service<sup>1</sup> (National Law: Section 172)
- ensuring that the service does not operate without a Nominated Supervisor, and that this person has given written consent to be in the role
- ensuring that the name of the Nominated Supervisor is displayed prominently at the service
- ensuring that

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

information about the Nominated Supervisor, including name, address, date of birth, evidence of qualifications and approved training, and a Working with Children Check (refer to Staffing Policy) is kept on the staff record (Regulation 146)

- notifying the Regulatory Authority in writing if there is a change of person in the role of Nominated Supervisor (Section 56, Regulation 35)
- ensuring that, in the absence from the service premises of a Nominated Supervisor a Certified Supervisor (refer to Definitions) is placed in day-to-day charge of the service
- ensuring that the Nominated Supervisor and Certified Supervisors have a sound understanding of the role of Responsible Person
- ensuring details of supervisor certificates are recorded on the staff record
- notifying the Regulatory Authority in writing if there any changes to: – the name of the Approved Provider – the appointment or removal of a person with management or control of the service operated by the Approved Provider – the status of the Approved Provider as fit and proper
- notifying the Regulatory Authority if a Nominated Supervisor or Certified Supervisor has their Working with Children Check card or teacher registration suspended or cancelled, or if they are subject to any disciplinary proceedings under the law. The

#### **Nominated Supervisor is responsible for:**

- providing written consent to accept the role of Nominated Supervisor
- ensuring that, in their absence from the service premises, a Certified Supervisor (refer to Definitions) is placed in day-to-day charge of the service
- ensuring they have a sound understanding of the role of Responsible Person (refer to Definitions)
- ensuring that the name and position of the Responsible Person in charge of the service is displayed and easily visible from the main entrance of the service
- developing rosters in accordance with the availability of Responsible Persons, hours of operations and the attendance patterns of children
- notifying the Approved Provider and the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status as fit and proper, such as the suspension or cancellation of a Working with Children Check card or teacher registration, or if they are subject to disciplinary proceedings.

1 The guidelines to the National Regulations state that, given the Responsible Person in charge may change throughout the day (for example, at a changeover of shifts), this requirement might be met on a whiteboard or interchangeable name plate at the entrance of the service premises.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### **Certified Supervisors are responsible for:**

- providing written consent to accept the role of Certified Supervisor
- checking that the name and position of the Responsible Person (refer to Definitions) in charge of the service is displayed and easily visible from the main entrance of the service
- informing the Approved Provider and/or Nominated Supervisor in the event of absence from the service due to leave or illness so they can be replaced by another Responsible Person
- ensuring they have a sound understanding of the role of Responsible Person
- understanding that a Certified Supervisor placed in day-to-day charge of an approved service does not have the same responsibilities under the National Law as the Nominated Supervisor
- notifying the Approved Provider and the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status as fit and proper, such as the suspension or cancellation of a Working with Children Check card or teacher registration, or if they are subject to disciplinary proceedings.

### **Educators are responsible for:**

- meeting the qualifications, experience and management requirements if they wish to be nominated as a Certified Supervisor ensuring they have a sound understanding of the role of Responsible Person (refer to Definitions)
- providing written consent if accepting the nomination to be a Certified Supervisor.

### **Parents/guardians are responsible for:**

- reading and understanding this policy
- being aware of the Responsible Person at the service on a daily basis.

**Volunteers and students, while at the service, are responsible for following this policy and its procedures.**

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Transition to School Policy

### Policy Statement

To provide a learning environment that provides all children with access to learning experiences both planned and routine. These learning experiences will assist children in acquiring skills in all areas of development to ensure a positive and successful transition to school.

### Purpose

This policy will give guidelines to Early Learning Centre teachers, Prep teachers and parents/guardians in relation to the school readiness process.

### Procedures

The Early Learning Centre will implement a School Readiness Learning Program for children entering school the following year.

The programs offered should be individualised to all children who attend the service and one that provides an emphasis on preparing children for the successful transition to school.

Parents will be given a school readiness checklist and child's developmental summary record to outline their child's developmental progress throughout the year.

Children with special needs will be assisted with the transition to school in consultation with staff, parents, medical practitioners and early intervention professionals where appropriate. The program combined with professional support, and liaising with the school the child will be attending, will assist in a positive transition into the school environment.

### Staff responsibility

- to answer any questions you may have about your child's transition to school. Please do not hesitate to talk to them.
- to prepare children for easy transition to their first year of school
- to complete the transition documentation for each child in the Four Year old group

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Safe Sleep, Rest and Relaxation Policy

### Purpose

This policy will provide clear guidelines for the implementation of safe sleep, rest and relaxation practices that meet the individual needs of children attending Bayside Christian College ELC.

### Policy statement

#### Values

Bayside Christian College ELC is committed to:

- providing a positive and nurturing environment for all children attending the centre
- recognising that children have different requirements for relaxation and sleep, and being responsive to those needs to ensure that children feel safe and secure at the centre
- consulting with parents/guardians about their child's individual relaxation and sleep requirements/practices, and ensuring practices at the centre are responsive to the values and beliefs of each child and family
- its duty of care (refer to *Definitions*) to all children at Bayside Christian College ELC and ensuring that adequate supervision (refer to *Definitions*) is maintained while children are sleeping, resting or relaxing
- complying with all legislative requirements, standards and current best practice, including recommendations by SIDS and Kids and Kidsafe (refer to *Sources*).

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC.

#### Background and Legislation

Relevant legislation may include but is not limited to:

- *Australian Consumer Law and Fair Trading Act 2012*
- *Australian Consumer Law and Fair Trading Regulations 2012*
- *Education and Care Services National Law Act 2010: Section 167*
- *Education and Care Services National Regulations 2011: Regulation 81*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*

☐ Standard 2.1: Each child's health needs are supported

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Element 2.1.2: Each child's comfort is provided for and there are appropriate opportunities to meet each child's needs for sleep, rest and relaxation
- □ *Occupational Health and Safety Act 2004*

### Definitions

**Adequate supervision:** (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

**Relaxation/rest:** A period of inactivity, solitude, calmness or tranquillity.

**SIDS (Sudden Infant Death Syndrome):** The unexpected and unexplained death of an infant, usually occurring during sleep.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



**SIDS and Kids:** The National SIDS Council of Australia, dedicated to eliminating SIDS and providing support for bereaved families. SIDS and Kids is considered to be the national authority on safe sleeping practices for infants and children. A branch of SIDS and Kids is located in each state and territory, and can provide resources and assistance (refer to *Sources*).

## Sources

- Australian/New Zealand Standards: (at the time of printing) the current relevant standards are: Services can check current standards on the SAI Global website at: [www.saiglobal.com](http://www.saiglobal.com)
  - *Belonging, Being & Becoming – The Early Years Learning Framework for Australia* (EYLF): <http://education.gov.au/early-years-learning-framework>
  - Grow and Thrive, *Sleep*, volume 2 number 1, February 2013, Centre for Community Child Health: <http://www.rch.org.au/ccch/growthrive/archives/>
  - Kidsafe Fact Sheets at: [www.kidsafevic.com.au/resources](http://www.kidsafevic.com.au/resources)
- *Safe Sleeping for Infants*
- *Ages and Stages* fact sheet series ('Sleeping' section)
- SIDS and Kids, Safe Sleeping Program: <http://www.sidsandkids.org/safe-sleeping/> SIDS and Kids also produces a range of resources including the *Infant Safe Sleeping Child Care Kit*
  - Product safety: a guide for businesses and legal practitioners: [www.consumer.vic.gov.au/businesses/fair-trading/product-safety](http://www.consumer.vic.gov.au/businesses/fair-trading/product-safety)
  - WorkSafe Victoria, *Children's services – occupational health and safety compliance kit*: <http://www.worksafe.vic.gov.au/forms-and-publications/forms-and-publications/childrens-services-occupational-health-and-safety-compliance-kit>
  - *Victorian Early Years Learning and Development Framework* (VEYLDF): <http://www.education.vic.gov.au/childhood/providers/edcare/pages/veyladf.aspx>

## Procedures

### The Approved Provider is responsible for:

- taking reasonable steps to ensure the sleep/rest needs of children at the service are met, with regard to the age of children, developmental stages and individual needs (Regulation 81(1))
- protecting children from hazards and harm (Section 167)
- consulting with staff in relation to OHS issues when purchasing new equipment for the service
- ensuring compliance with the recommendations of SIDS and Kids and Kidsafe in relation to safe sleeping practices for children (refer to *Sources*)
- ensuring adequate supervision of children at the service at all times, including

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



- during relaxation and sleep
- ensuring that there is adequate space to store bedding in a hygienic manner

#### The Nominated Supervisor is responsible for:

- ensuring parents/guardians are consulted about appropriate relaxation and sleep practices for their child through the use of the 'daily rest/sleep sheet'.
- taking reasonable steps to ensure the sleep/rest needs of children at the service are met with regard to the age of children, developmental stages and individual needs (Regulation 81(2))
- ensuring the educational program provides opportunities for each child to rest or engage in appropriate quiet play activities, as required
- protecting children from hazards and harm (Section 167)
- ensuring all staff and educators comply with the recommendations of SIDS and Kids and Kidsafe in relation to safe sleeping practices for children (refer to *Sources*)
- ensuring adequate supervision of children at the service at all times, including during relaxation and sleep
- storing items such as bedding in a hygienic manner to prevent cross-contamination
- using bed labels to ensure bedding is used by specific children and there is no danger of cross contamination
- ensuring there is an adequate supply of 'Hunter Green RTU Sanitiser' stored within the rest room to be used by staff to sanitise stretcher beds after they are stripped of bedding

#### Certified Supervisors, educators and other staff are responsible for:

- providing each child with appropriate opportunities for relaxation and rest according to their needs
- complying with the recommendations of SIDS and Kids and Kidsafe in relation to safe sleeping practices for children (refer to *Sources*)
- providing input in relation to OHS issues when new equipment is purchased for the service
- developing relaxation and rest practices that are responsive to:
  - ☐ the individual needs of children at the service
  - ☐ parenting beliefs, values, practices and requirements
  - ☐ circumstance or events occurring at a child's home
  - ☐ consistency of practice between home and the service

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- a child's general health and wellbeing
- the physical environment, including room temperature, lighting, airflow and noise levels
- minimising distress or discomfort for the children in their care
- ensuring that resting and sleeping practices are not used as a behaviour guidance strategy
- providing a range of opportunities for relaxation throughout the day
- ensuring that any hanging cords, mobiles, curtains and blinds are inaccessible to children who are resting or sleeping
- providing adequate supervision (refer to *Definitions*) of all children, including during sleep, rest and relaxation
- supervising children displaying symptoms of illness closely, especially when resting or sleeping
- completing hygiene routines, such as sanitizing stretcher beds, placing soiled bedding into ELC wash bags and storing in the central office space, safely packing away equipment in the rest room in a hygienic manner
- documenting and communicating children's rest and sleep times on the ELC rest/sleep sheet for all staff to see if there is a change-over in shift
- providing information to families about the service's relaxation and sleep practices, such as within the ELC Parent Handbook
- using the ELC res/sleep sheet to inform parents/guardians about their child's rest and sleep patterns, including times and length of sleep

#### **Parents/guardians are responsible for:**

- discussing their child's relaxation and sleep requirements and practices prior to commencing at the centre, and when these requirements change
- to mark down their child's daily requirements for rest or sleep on the ELC rest/sleep sheet
- providing information on the child's enrolment form if the child requires special items while resting or sleeping e.g. a comforter or soft toy
- providing a written medical report if their child is not to be placed on their back during sleep. Parents/guardians must communicate alternative resting practices to staff.

**Volunteers and students, while at the service, are responsible for following this policy and its procedures.**

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Water Safety Policy

### Policy Statement

#### Purpose

This policy will outline the procedures that apply to managing water safety, including safety during any water-based activities at Bayside Christian College ELC.

#### Values

Bayside Christian College ELC is committed to:

- providing opportunities for children to explore their natural environment including through water play
- ensuring that children are protected from the risks associated with drowning or non-fatal drowning experiences
- ensuring that curriculum planning incorporates water safety awareness
- providing information to educators, staff, parents/guardians, volunteers and others at the service about water safety.

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC, including during offsite excursions and activities.

#### Background

The supervision and safety of children with and around water is of paramount importance.

Learning spaces and environments should offer an array of possibilities and connect children with natural materials. Water is one experience that offers children sensory-rich, open-ended experiences that engage children's curiosity and imagination. Children may encounter these resources in the service environment and/or when on excursions. These experiences, especially those conducted with and near water, will be carefully supervised ensuring the safety of children and adults.

Water safety relates to access to water in the building, the playground or on excursions, and also to the availability of drinking water for children.

It is imperative that educators remain vigilant in their supervision of children in and around water, and are alert to potential risks in everyday practice in the learning environment.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Drowning is a leading cause of death for children in Victoria, with infants and toddlers the group most at risk. Non-fatal drowning incidents can result in permanent brain damage and disability. Knowledge of potential hazards associated with water will assist educators to provide a safe, stimulating environment for preschool children.

Drowning hazards include large bodies of water such as swimming pools, rivers, creeks, dams and ponds. Smaller bodies of water, including water containers, pet water bowls and poor drainage which allows water to collect can also present drowning hazards for young children. Children can drown in as little as a few centimetres of water. Civic Kindergarten Water Safety Policy Page 2 of 5

Keep Watch is a public education program of Royal Life Saving Society – Australia, aimed at preventing the drowning deaths of children under 5 years of age in all aquatic locations. The program has four key actions:

- **supervise** children constantly around water
- **restrict access** to water hazards by using child-proof barriers and fences
- provide **water awareness** training to children
- **resuscitation** saves lives – ensure that staff have completed current first aid training.

#### Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Child Wellbeing and Safety Act 2005* (Vic) (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2011*: Section 167
- *Education and Care Services National Regulations 2011*: Regulations 101(2), 168(2)(a)(iii)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
  - Standard 2.3: Each child is protected
    - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury

#### Definitions

**Adequate supervision:** (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate Supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

**Approved first aid qualification:** A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: [www.cecqa.gov.au](http://www.cecqa.gov.au)

**Hazard:** A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

**Notifiable incident:** An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

**Serious incident:** An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

**Water hazard:** (in relation to this policy) can lead to drowning or non-fatal drowning incidences. Drowning hazards include large bodies of water such as swimming pools, rivers, creeks, dams and ponds. Smaller bodies of water, including water containers, pet water bowls and poor drainage which allows water to collect can also present drowning hazards for young children.

### Sources

- Royal Life Saving Society – Australia: [www.royallifesaving.com.au](http://www.royallifesaving.com.au)
- Water Safety Victoria – Water Safety Guide: *Play it Safe by the Water* [www.watersafety.vic.gov.au](http://www.watersafety.vic.gov.au)
- Kidsafe – Water Safety Fact Sheet: [www.kidsafevic.com.au](http://www.kidsafevic.com.au)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

### Related Policies

- Child Safe Environment Policy
- Excursions Policy
- Occupational Health and Safety Policy

### Procedures

#### The Approved Provider is responsible for:

- ensuring that children are adequately supervised (refer to *Definitions*) at all times when near water hazards (refer to *Definitions*)
- ensuring that educator-to-child ratios are maintained at all times (*Education and Care Services National Law Act 2011*: Sections 169(1)&(3), *Education and Care Services National Regulations 2011*: Regulations 123, 355, 357, 360)
- conducting a risk assessment in relation to any water hazards on or near the premises that may be accessible to children
- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions Policy*)
- ensuring that water hazards and risks associated with water-based activities are considered in a risk assessment prior to conducting excursions and other offsite events (Regulation 101)
- ensuring increased levels of supervision for an excursion to a location where there is a water hazard
- conducting a regular safety check of the service premises (refer to *Occupational Health and Safety Policy*)
- ensuring any water hazards that are not able to be adequately supervised at all times are isolated from children by a child-resistant barrier or fence (particularly large bodies of water including swimming pools, rivers, ponds etc.)
- ensuring that an educator with a current approved first aid qualification (refer to *Definitions*) is in attendance and immediately available at all times children are being educated and cared for by the service (Regulation 136)
- ensuring that details of current approved first aid qualifications (refer to *Definitions*) are filed with each staff member's record
- reporting serious incidents (refer to *Definitions*) to DEECD
- reporting notifiable incidents (refer to *Definitions*) to WorkSafe Victoria
- ensuring that water safety awareness is embedded in the curriculum
- providing current information to parents about water safety.

#### The Nominated Supervisor is responsible for:

- assisting the Approved Provider to implement the *Water Safety Policy*
- ensuring parents/guardians are informed of the *Water Safety Policy* on enrolment

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions Policy*)
- ensuring information on water safety (refer to *Sources*) is incorporated into the educational program
- ensuring that children are adequately supervised (refer to *Definitions*) and protected from hazards and harm at all times
- ensuring that water hazards and risks associated with water-based activities are considered in a risk assessment prior to conducting excursions and other offsite events (Regulations 100, 101)
- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions Policy*)
- ensuring increased levels of supervision for an excursion to a location where there is a water hazard
- ensuring that an educator with a current approved first aid qualification (refer to *Definitions*) is in attendance and immediately available at all times children are being educated and cared for by the service
- ensuring that all educators' current approved first aid qualifications meet the requirements of the National Regulations and are approved by ACECQA (refer to *First Aid Policy*)
- informing the Approved Provider immediately if any serious or notifiable incidents (refer to *Definitions*) occur at the service.

#### **Certified Supervisors and other educators are responsible for:**

- providing adequate supervision (refer to *Definitions*) at all times
- undertaking a risk assessment prior to an excursion to a location where there is a significant water hazard (refer to *Excursions Policy*)
- adjusting supervision strategies to suit the activities being undertaken
- obtaining parental permission for an excursion to a location where there is a water hazard (refer to *Excursions Policy*)
- maintaining a current approved first aid qualification (refer to *Definitions*)
- ensuring gates and other barriers restricting access to water hazards are closed at all times and that fences are kept clear at all times
- ensuring that containers of water (including cleaning buckets) are sealed with child-proof lids
- ensuring wading/paddling pools, water play containers and portable water courses are emptied immediately after each use and stored in a manner that prevents the collection of water when not in use
- checking the outdoor learning environment at the beginning and end of each day for puddles or filled containers that could pose a potential risk to small children after heavy rain
- providing water safety education as a part of the service's program
- informing the Approved Provider immediately if any serious or notifiable incidents (refer to *Definitions*) occur at the service.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### Parents/guardians are responsible for:

- supervising children in their care, including siblings, while attending or assisting at the service
- ensuring that doors, gates and barriers, including playground gates, are closed after entry or exit to prevent access to water hazards
- informing themselves about water safety
- ensuring their children understand the risks associated with water
- recognising when resuscitation is required and obtaining assistance
- considering undertaking approved first aid qualifications, as resuscitation skills save lives.

### Volunteers and students, while at the service, are responsible for following this policy and its procedures.

#### Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:


- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



# Medical Policies

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Bayside Christian College Early Learning Centre Policies and Procedures Manual						 <p>Bayside Christian College</p> <p><small>"Only with Security in Christ"</small></p>
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Accident, Injury and Medical Emergency Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Responding to the needs of the child if the child is injured, becomes ill, or is traumatised whilst attending the centre.
- Ensuring safe and appropriate administration of medication in accordance with legislative requirements.

#### Purpose

This policy will clearly define:

- Procedures to be followed if a child has an accident, is injured or has a medical emergency.
- Responsibilities of staff, parents/guardians.

#### Scope

This policy applies to the staff, parents/guardians, children, volunteers and students involved with Bayside Christian College - Early Learning Centre.

#### Relevant legislation

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011
- Health (Infectious Diseases) Regulations 2001
- Occupational Health and Safety Act 2000.

#### Background Information

The Education and Care Services National Regulations 2011 require centres to have procedures for dealing with illness and emergency care.

It is recommended that these contact numbers are displayed at each telephone:

- Ambulance contact card
- Asthma Victoria 03 9326 7055 or toll free 1800 645 130  
advice@asthma.org.au
- Police
- Victorian Poisons Information Centre 13 11 26
- Local Fire Brigade.

#### Definitions

**Ambulance contact card:** A card that Bayside Christian College - Early Learning Centre has completed, which contains all the information that the Ambulance Service

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



will request when phoned on 000. An example of this card can be obtained from the Metropolitan Ambulance Service, and once completed by the Early Learning Centre, it should be kept by the telephone from which the 000 phone call will be made.

## Procedures

### Administrative and operational procedures

The college is responsible for:

- Providing and maintaining a suitably equipped first aid kit.
- Rostering at least one staff member with the required first aid qualification on duty whenever children are being cared for
- Ensuring completed medication, accident, injury and illness records are archived and stored securely for 25 years.

The staff are responsible for:

- Ensuring children's enrolment forms provide authorisation for Bayside Christian College - Early Learning Centre to seek emergency medical treatment by a medical practitioner, hospital or ambulance service.
- Monitoring the First Aid Kit and arranging for it to be replenished when needed.
- Ensuring an ambulance contact card is displayed on or near each telephone.
- Notifying the Head of Primary six months prior to the expiration of their first aid qualification.
- Ensuring that the step-by-step procedure for infection control relating to blood borne viruses is displayed in a prominent position within the Early Learning Centre and implemented at all times.

The parents/guardians are responsible for:

- Providing authorisation in their child's enrolment record for the Early Learning Centre to seek emergency medical treatment by a medical practitioner, hospital or ambulance service.
- All costs associated with an ambulance service called to attend their child at Bayside Christian College - Early Learning Centre.
- Notifying the Early Learning Centre of any medical conditions/or needs and any management procedure to be followed with respect to that condition or need.

### Procedures for handling minor accidents, injuries or illnesses

The staff are responsible for:

- Providing first aid and comfort for the child as required.
- Recording details of any accident, injury or illness in the record book according to regulation 87.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Notifying the parents/guardians either immediately after the accident, or when they collect their child from the Early Learning Centre, depending on the severity of the accident and the emotional state of the child.

### Procedures for handling emergency medical situations or accidents

The Head of Primary is responsible for:

- Notifying, as soon as practicable, the ISV office of the death of a child; any accident, illness or trauma that requires treatment by a registered medical practitioner or admission to a hospital; or if a child appears to be missing or has been removed from Bayside Christian College - Early Learning Centre.
- Ensuring the accident, injury and illness record is completed.
- Completing and submitting the incident report
- Reviewing the cause of the accident, injury or illness and taking appropriate action if required. For example nail protruding from climbing equipment, centre's Hygiene Policy not being followed by all persons, trip hazards.

The staff are responsible for:

- Administering first aid and providing care and comfort prior to the parents/guardians or ambulance arriving.
- Implementing the child's current medical management plan if provided as part of the child's enrolment.
- Calling an ambulance if necessary .
- Notifying parents/guardians, as soon as is practicable, of any serious medical emergency, accident or injury concerning their child, and requesting the parents/guardians make arrangements for the child to be collected from the Early Learning Centre as soon as possible or informing parents/guardians that an ambulance has been called.
- If the parents/guardians are not contactable, notifying other person(s) as authorised on the child's enrolment form.
- Ensuring ongoing supervision of all children.
- Where an ambulance is required and the parents/guardians are not present to accompany the child, the unqualified staff member and/or a nominated representative may accompany the child in the ambulance.
- Recording a report in the accident, injury and illness book.
- Notifying the Head of Primary of any accident or injury as soon as practicable.

The parents/guardians are responsible for:

- Ensuring the Early Learning Centre has a current medical management plan for their child (if applicable).
- Collecting their child as soon as possible when notified of an accident or injury.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### Related documents

- DHS Children's Services Guide and Practice Notes [www.dhs.vic.gov.au](http://www.dhs.vic.gov.au)
- DHS, Metropolitan Fire Brigade, and the Country Fire Authority (1998), Emergency Procedures, Guidelines for Kindergartens and Childcare Centres available from MFB Community Safety Department or CFA Community Safety Directorate
- NHMRC(2005), Staying Healthy in Child Care, 4th edition, available at <http://www.nhmrc.gov.au/guidelines/publications/ch43> or telephone 1300 064 672 to request a free copy.

### Emergency evacuation procedures

Please refer to the College's Emergency Management Plan and Emergency Management Policy

[http://intranet.bcc.vic.edu.au/index.php?title=Bayside\\_At\\_Work/Policies\\_%26\\_Procedures/Policies/4.\\_Student\\_Welfare/Emergency\\_Management](http://intranet.bcc.vic.edu.au/index.php?title=Bayside_At_Work/Policies_%26_Procedures/Policies/4._Student_Welfare/Emergency_Management)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Administration of Medication Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Responding to the needs of the child if the child is injured, becomes ill, or is traumatised whilst attending the Early Learning Centre.
- Ensuring safe and appropriate administration of medication in accordance with legislative requirements.

#### Purpose

This policy will clearly define:

- Procedures to be followed if a child requires medication.
- Responsibilities of staff and parents/guardians.

#### Scope

This policy applies to the staff, parents/guardians, children, volunteers and students involved with the Early Learning Centre.

#### Background and legislation

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011 - Division 4 - Administration of Medication Regulation
- Health (Infectious Diseases) Regulations 2001 • Occupational Health and Safety Act 2000

#### Definitions

DHS: Department of Human Services. Please note: Early Childhood Services provided by the Victorian Government have recently been moved from DHS to the Department of Education and Early Childhood Development (DEECD).

#### Procedures

The college is responsible for:

- Ensuring that staff have appropriate and sufficient supplies and equipment.
- Ensuring a staff member is on duty with a current first aid certificate at all times when children are in attendance.

The staff are responsible for:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring child's enrolment form provides details of the name, address and telephone number of any person who has lawful authority to request or permit the administration of medication to the child
- Ensuring the medication book is available for parents/guardians to record information in during operational hours.
- Ensuring all details have been completed by parents/guardians in accordance with The Education and Care Services National Regulations 2011 prior to administering medication.
- Providing parents/guardians with the option of completing a medication record which covers a six-month period, this record requires a current management plan to be completed, preferably by the child's medical practitioner. This procedure is applicable to medication for long-term treatment of conditions and emergency medications.
- Ensuring medication is inaccessible to children and in a child-proof container. (A child-proof container should also be provided in the refrigerator for medications requiring refrigeration.)
- Contacting the parents/guardians during a medical emergency if medication is required. Two staff members must be given the permission. Verbal permission must be followed up with written authorisation within seven days of the medication having been administered
- Documenting situations where parents/guardians have provided oral authorisation, if the parents/guardians refuse to confirm the authorisation in writing within seven days these notes are to be kept with the child's enrolment record.
- Informing parents/guardians if an incident occurs where the child is administered the incorrect medication; administered the incorrect dose as prescribed in the medication book; staff forget to administer the medication; or the medication was administered at the wrong time. Consideration should also be given to notifying the child's doctor
- Ensuring that any medication that is accidentally dropped is not administered to a child or returned to the original container.

The parents/guardians are responsible for:

- Ensuring any medication to be administered is recorded in the medication book provided at the Early Learning Centre. Where a child requires long-term treatment of a condition that requires medication or a child requires emergency medication, parents/guardians may authorise the administration of the medication for a defined period (up to six months), providing a current medical management plan that defines the conditions for administration is provided.
- Ensuring medications to be administered at the Early Learning Centre are provided in their original container, bearing the original label, instructions and the expiry date.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Physically handing the medication to a staff member and informing them of the appropriate storage for the medication provided.
- Labeling non-prescription medications and over-the-counter products clearly with the child's name. The instructions and use-by-dates should be visible.
- Ensuring that no medication or over-the-counter products such as sunscreen are left in a child's bag or locker.
- Sunscreen must be applied prior to attendance at the Early Learning Centre. Staff are not responsible for the application of sunscreen.
- Ensuring their child's enrolment details are up-to-date and provide current details of persons who have lawful authority to request or permit the administration of medication

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Dealing With Medical Conditions In Children Policy

### Policy statement

#### Purpose

This policy will provide guidelines for Bayside Christian College ELC to ensure that:

- ☐ clear procedures exist to support the health, wellbeing and inclusion of all children enrolled at the service.
- ☐ service practices support the enrolment of children and families with specific health care requirements.

#### Values

Bayside Christian College ELC is committed to recognising the importance of providing a safe environment for children with specific medical and health care requirements through implementing and maintaining effective hygiene practices. This will be achieved through:

- Fulfilling the service's duty of care requirement under the Occupational Health and Safety Act 2004, the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations 2011 to ensure that those involved in the programs and activities of Bayside Christian College ELC are protected from harm.
- Informing staff, volunteers, children and families on the importance of adhering to the Dealing with Medical Conditions in Children Policy to maintain a safe environment for all users, and communicating the shared responsibility between all involved in the operation of the service.
- Ensuring that staff have the skills and expertise necessary to support the inclusion of children with additional health needs.

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC, including during offsite excursions and activities. This policy should be read in conjunction with:

- Anaphylaxis Policy
- Asthma Policy
- Diabetes Policy
- Epilepsy Policy

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### Background and Legislation

An approved service must have a policy for managing medical conditions that includes the practices to be followed:

- In the management of medical conditions
- When parents are required to provide a medical management plan if an enrolled child has a specific health care need, allergy or relevant medical condition
- When developing a risk minimisation plan in consultation with the child's parents/guardians
- When developing a communication plan for staff members and parents/guardians.

Staff members and volunteers must be informed about the practices to be followed. If a child enrolled at the service has a specific health care need, allergy or other relevant medical condition, parents/guardians must be provided with a copy of this and other relevant policies.

Medication and medical procedures can only be administered to a child:

- With written authorisation from the parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication (Regulation 92(3)(b))
- With two adults in attendance, one of whom must be an permanent staff member. One adult will be responsible for the administration and the other adult will witness the procedure
- If the medication is in its original container bearing the child's name, dose and frequency of administration. Refer to the Administration of Medication Policy for more information.

Staff may need additional information from a medical practitioner where the child requires:

- Multiple medications simultaneously
- A specific medical procedure to be followed. If a child with a chronic illness or medical condition that requires invasive clinical procedures or support is enrolled, it is vital that prior arrangements are negotiated with the parent/guardian, authorised nominees or appropriate health care workers to prepare for the event that the child will require a procedure while in attendance at the service. Parents/guardians and the service should liaise with either the child's medical practitioner or other appropriate service providers to establish such an arrangement. Arrangements must be formalised following enrolment and prior to the child commencing at the service

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2010: Section 173
- Education and Care Services National Regulations 2011: Regulations 90, 91, 96
- Health Records Act 2001
- National Quality Standard, Quality Area 2: Children's Health and Safety – Standard 2.1: Each child's health and physical activity is supported and promoted – Element

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

2.1.1: Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation

- National Quality Standard, Quality Area 7: Governance and Leadership – Standard

7.1: Governance supports the operation of a quality service – Element 7.1.2:

Systems are in place to manage risk and enable the effective management and operation of a quality service.

- Occupational Health and Safety Act 2004 (Vic)

- Public Health and Wellbeing Act 2008 (Vic) • Public Health and Wellbeing Regulations 2009 (Vic)

### Definitions

The terms defined in this section relate specifically to this policy

**AV How to Call Card:** A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from: <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

**Communication plan:** A plan that forms part of the policy and outlines how the service will communicate with parents/guardians and staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.

**Hygiene:** The principle of maintaining health and the practices put in place to achieve this.

**Medical condition:** In accordance with the Education and Care Services National Regulations 2011, the term medical condition includes asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis, and the management of such conditions.

**Medical management plan:** A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCI) Action Plan.

**Risk minimisation:** The implementation of a range of strategies to reduce the risk of an adverse affect from the mismanagement of a specific medical condition at the service.

**Risk minimisation plan:** A service-specific plan that details each child's medical condition, and identifies the risks of the medical condition and practical strategies to

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

minimise those risks, and who is responsible for implementing the strategies. The risk minimisation plan should be developed by families of children with specific medical conditions that require medical management plans, in consultation with staff at the service upon enrolment or diagnosis of the condition.

## Procedures

### The Approved Provider is responsible for:

- Ensuring that all staff and volunteers are familiar with this policy and have a clear understanding of the procedures and practices outlined within.
- Ensuring staff receive regular training in managing the specific health care needs of children at the service including asthma, anaphylaxis, diabetes, epilepsy and other medical conditions. This includes training in the management of specific procedures that are required to be carried out for the child's wellbeing.
- Ensuring at least one staff member who has current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times that children are being educated and cared for by the service.
- Establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy.
- Ensuring families and staff understand and acknowledge each other's responsibilities under these guidelines.
- Ensuring families provide information on their child's health, medications, allergies, their medical practitioner's name, address and phone number, emergency contact names and phone numbers, and a medical management plan (signed by their medical practitioner where prescribed medications are to be administered), following enrolment and prior to the child commencing at the service
- Ensuring that a communication and risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually.
- Following appropriate reporting procedures set out in the Incident, Injury, Trauma and Illness Policy in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

### Nominated Supervisor is responsible for:

- Implementing this policy at the service and ensuring that all staff follow the policy and procedures set out within.
- Informing the Approved Provider of any issues that impact on the implementation of this policy.
- Ensuring that the AV How to Call Card (refer to Definitions) is displayed near all telephones.
- Identifying specific training needs of staff who work with children diagnosed with a medical condition, and ensuring, in consultation with the Approved Provider, that staff access appropriate training.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- Ensuring children do not swap or share food, food utensils or food containers.
- Ensuring families provide information on their child's health, medications, allergies, their medical practitioner's name, address and phone number, emergency contact names and phone numbers, and a medical management plan (signed by their medical practitioner where prescribed medications are to be administered), following enrolment and prior to the child commencing at the service.
- Ensuring a copy of the child's medical management plan is visible and known to staff in the service. Prior to displaying the medical management plan, the Nominated Supervisor must explain to parents/guardians the need to display the plan for the purpose of the child's safety and obtain their consent.
- Ensuring that a communication and risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually.
- Ensuring that a risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually.
- Developing and implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of the child's specific health care need, allergy or other relevant medical condition, this policy and its implementation.
- Maintaining ongoing communication between staff and parents/guardians in accordance with the strategies identified in the communication plan, to ensure current information is shared about specific medical conditions within the service.
- Ensuring staff follow each child's risk minimisation plan and medical management plan
- Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan.
- Providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service.
- Administering medications as required, in accordance with the procedures outlined in the Administration of Medication Policy.
- Following appropriate reporting procedures set out in the Incident, Injury, Trauma and Illness Policy in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

#### **Staff and Certified Supervisors are responsible for:**

- Ensuring that children do not swap or share food, food utensils or food containers if specified in risk minimisation plan.
- Communicating any relevant information provided by parents/guardians regarding their child's medical condition to the Nominated Supervisor to ensure all information held by the service is current.
- Being aware of individual requirements of children with specific medical conditions.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Undertaking relevant training to assist with the management of specific medical conditions of children at the service.
- Monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated Supervisor or the Responsible Person In Charge.
- Adequately supervising all children, including those with specific medical conditions.
- Informing the Nominated Supervisor of any issues that impact on the implementation of this policy.

#### **Parents/guardians are responsible for:**

- Informing the service of their child's medical conditions, if any, and informing the service of any specific requirements that their child may have in relation to their medical condition.
- Developing a risk minimisation plan with their child's teacher and/or other relevant staff members at the service.
- Providing a medical management plan (signed by a medical practitioner where prescribed medications are to be administered), either on enrolment or immediately upon diagnosis of an ongoing medical condition. This medical management plan must include a current photo of the child and must clearly outline procedures to be followed by staff in the event of an incident relating to the child's specific health care needs.
- Notifying the Nominated Supervisor of any changes to the status of their child's medical condition and providing a new medical management plan in accordance with these changes.
- Informing the Nominated Supervisor of any issues that impact on the implementation of this policy by the service.

#### **Volunteers and students, while at the service, are responsible for following this policy and its procedures.**

#### **Evaluation**

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- Regularly seek feedback from staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness.
- Monitor the implementation, compliance, complaints and incidents in relation to this policy.
- Ensure that all information on display and supplied to parents/guardians regarding the management of medical conditions is current.
- Keep the policy up to date with current legislation, research, policy and best practice.
- Revise the policy and procedures as part of the service's policy review cycle, or as required.
- Notify parents/guardians at least 14 days before making any change to this policy or

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Anaphylaxis Policy

### Policy statement

#### Values

Bayside Christian College believes that the safety and wellbeing of children who are at risk of anaphylaxis is a whole-of-community responsibility. The Early Learning Centre is committed to:

- Providing, as far as practicable, a safe and healthy environment in which children at risk of anaphylaxis can participate equally in all aspects of the preschool program and experiences.
- Raising awareness about allergies and anaphylaxis amongst the community and children in attendance.
- Actively involving the parents/guardians of each child at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for their child.
- Ensuring each staff member and other relevant adults has adequate knowledge of allergies, anaphylaxis and emergency procedures.
- Facilitating communication to ensure the safety and wellbeing of children at risk of anaphylaxis.

#### Purpose

The aim of this policy is to:

- Minimise the risk of an anaphylactic reaction occurring while the child is in the care of the Early Learning Centre
- Ensure that staff members respond appropriately to an anaphylactic reaction by initiating appropriate treatment, including competently administering an EpiPen® or Anapen.
- To raise the awareness of the community about anaphylaxis and its management through education and policy implementation.

#### Scope

This policy applies when a child diagnosed as being at risk of anaphylaxis is enrolled at Bayside Christian College - Early Learning Centre. It applies to children enrolled at the centre, their parents/guardians and staff. It also applies to other relevant members of the community, such as volunteers and visiting specialists.

#### Background and legislation

Anaphylaxis is a severe, life-threatening allergic reaction. Up to two per cent of the general population and up to five per cent of children are at risk. The most common

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



causes in young children are eggs, peanuts, tree nuts, cow milk, bee or other insect stings, and some medications.

Young children may not be able to express the symptoms of anaphylaxis.

A reaction can develop within minutes of exposure to the allergen, but with planning and training, a reaction can be treated effectively by using an adrenaline auto-injector called an Anapen or EpiPen®.

The college recognises the importance of staff responsible for the child/ren at risk of anaphylaxis undertaking training that includes preventative measures to minimise the risk of an anaphylactic reaction, recognition of the signs and symptoms of anaphylaxis and emergency treatment, including administration of an Anapen or EpiPen®.

Staff and parents/guardians need to be made aware that it is not possible to achieve a completely allergen-free environment in any centre that is open to the general community. Staff should not have a false sense of security that an allergen has been eliminated from the environment.

### Procedures

The College is responsible for:

- Conducting an assessment of the potential for accidental exposure to allergens while child/ren at risk of anaphylaxis are in the care of the centre and develop a risk minimisation plan for the Early Learning Centre in consultation with staff and the families of the child/ren.
- Ensuring staff responsible for the child/ren at risk of anaphylaxis attend anaphylaxis management training, which is reinforced at yearly intervals.
- Ensuring that all relieving staff are aware of the child at risk of anaphylaxis, the child's allergies, anaphylaxis action plan and Anapen or EpiPen® kit. If the relieving staff member is not trained in anaphylaxis management, the college shall ensure at least one staff member trained in anaphylaxis management is present at Bayside Christian College and that staff member is aware that they are responsible for the administration of an Anapen or EpiPen® in an emergency. If this is not possible parents/guardians must be informed of this situation.
- Ensuring that no child who has been prescribed an Anapen or EpiPen® is permitted to attend the Early Learning Centre or its programs without that Anapen or EpiPen®.
- Making parents/guardians aware of this policy, and provide access to it on request.
- Encourage ongoing communication between parents/guardians and staff regarding the current status of the child's allergies, this policy and its implementation.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Displaying an ASCIA generic poster called Action plan for Anaphylaxis in a key location at the Early Learning Centre, for example, in the children's room, the staff room or near the medication cabinet.
- Displaying an ambulance contact card by telephones.

Staff responsible for the child at risk of anaphylaxis are responsible for:

- Ensuring a copy of the child's anaphylaxis action plan is visible to all staff.
- Following the child's anaphylaxis action plan in the event of an allergic reaction, which may progress to anaphylaxis.
- Where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:
  - Calling an ambulance immediately by dialling 000
  - Commencing first aid measures
  - Contacting the parents/guardians
  - Contacting the person to be notified in the event of illness if the parents/guardians cannot be contacted.
- Practising Anapen or EpiPen® administration procedures using Anapen or EpiPen® trainer and "anaphylaxis scenarios" on a regular basis, preferably quarterly.
- Asking all parents/guardians as part of the enrolment procedure, prior to their child's attendance at the Early Learning Centre, whether the child has allergies and document this information on the child's enrolment record. If the child has allergies, ask the parents/guardians to provide a medical management plan.
- Ensuring that parents/guardians provide an anaphylaxis action plan signed by the child's doctor and a complete Anapen or EpiPen® kit while the child is present at the centre.
- Ensuring that the Anapen or EpiPen® kit is stored in a location that is known to all staff, including relief staff; easily accessible to adults (not locked away); inaccessible to children; and away from direct sources of heat.
- Ensuring that the Anapen or EpiPen® kit for each child at risk of anaphylaxis is carried by a trained adult on excursions that this child attends.
- Regularly checking the Anapen or EpiPen® expiry date, thereby ensuring that the EpiPen® has not expired.
- Providing information to the community about resources and support for managing allergies and anaphylaxis.

Parents/guardians of a child at risk of anaphylaxis are responsible for:

- Informing staff, either on enrolment or on diagnosis, of their child's allergies.
- Providing staff with an anaphylaxis action plan and written consent to use the Anapen or EpiPen® in line with this action plan.
- Providing staff with a complete Anapen or EpiPen® kit.
- Regularly checking the EpiPen® expiry date.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Assisting staff by offering information and answering any questions regarding their child's allergies.
- Notifying the staff of any changes to their child's allergy status and provide a new anaphylaxis action plan in accordance with these changes.
- Communicating all relevant information and concerns to staff, for example, any matter relating to the health of the child.
- Complying with Bayside Christian College's policy that no child who has been prescribed an EpiPen® is permitted to attend the centre or its programs without that Anapen or EpiPen®.

The following procedures should be implemented to help protect the child at risk of anaphylaxis from accidental exposure to food allergens:

In relation to the child at risk:

- This child should only eat food that has been specifically prepared for him/her.
- Where Bayside Christian College - Early Learning Centre is preparing food for the child, ensure that it has been prepared according to the parents/guardians instructions.
- Some parents/guardians will choose to provide all food for their child.
- All food for the child at risk of anaphylaxis should be in accordance with the risk minimisation plan.
- Bottles, other drinks and lunch boxes, including any treats, provided by the parents/guardians for this child should be clearly labelled with the child's name.
- There should be no trading or sharing of food, food utensils and containers with this child. In some circumstances it may be appropriate that a highly allergic child does not sit at the same table when others consume food or drink containing or potentially containing the allergen. However, children with allergies should not be separated from all children and should be socially included in all activities.
- Parents/guardians should provide a safe treat box for this child.
- Ensure appropriate supervision of this child on special occasions such as excursions, incursions or family days.

In relation to other practices at the Early Learning Centre:

- Ensure tables and bench tops are washed down after eating.
- Ensure hand washing for all children upon arrival at the centre, before and after eating.
- Restrict use of food and food containers, boxes and packaging in crafts, cooking and science experiments, depending on the allergies of particular children. The use of foods in such activities should be consistent with the risk minimisation plan.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- All children need to be closely supervised at meal and snack times and consume food in specified areas. To minimise risk children should not 'wander around' the centre with food.
- Staff should use non-food rewards, for example stickers, for all children.
- The risk minimisation plan will inform The Early Learning Centre's food purchases and menu planning.
- Food preparation personnel (staff and volunteers) should be instructed about measures necessary to prevent cross contamination between foods during the handling, preparation and serving of food – such as careful cleaning of food preparation areas and utensils.
- Where food is brought from home to the centre all parents/guardians will be asked not to send food containing specified allergens or ingredients as determined in the risk minimisation plan.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Asthma Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Raising awareness about asthma among the staff, parents/guardians of children attending the Early Learning Centre, and any other person(s) dealing with children at the centre
- Providing a safe and healthy environment for all children enrolled at the centre
- Providing an environment in which all children with asthma can participate in order to realise their full potential
- Providing a clear set of guidelines and expectations to be followed with regard to the management of asthma.

#### Purpose

The aim of this policy is:

- For all children with asthma enrolled at Bayside Christian College - Early Learning Centre to receive appropriate attention as required.
- To respond to the needs of children who have not been diagnosed with asthma and who have an asthma attack at the centre.

#### Scope

This policy applies to children enrolled at the Early Learning Centre, their parents/guardians and the staff.

#### Background and legislation

Asthma is a chronic health condition affecting approximately 15% of children. It is one of the most common reasons for childhood admission to hospital. While an average of two people die in Victoria each week from asthma, many of these deaths are thought to be preventable. Community education and correct management will assist in minimising the impact of asthma.

It is generally accepted that children under the age of six do not have the skills and ability to recognise and manage their own asthma effectively. With this in mind, Bayside Christian College Early Learning Centre recognises the need to educate the staff and parents/guardians about asthma and to promote responsible asthma management strategies.

#### Procedures

The Head of Primary is responsible for:

- Where appropriate, organising EAM training for staff.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Where appropriate, organising asthma management information sessions for parents/guardians of children enrolled at the Early Learning Centre
- Encouraging open communication between parents/guardians and staff regarding the status and impact of a child's asthma.
- Providing funding for the staff to purchase asthma reliever medication and a spacer device for the First Aid Kit, as required

The staff are responsible for:

- Implementing this policy on a daily basis and undertaking EAM training if required.
- Asking all parents/guardians as part of the enrolment procedure, prior to their child's attendance at , whether the child has diagnosed asthma and document this information on the child's enrolment record.
- Providing families whose child has asthma with an asthma action plan to complete in consultation with their doctor. On completion, this will be attached to the child's enrolment record.
- Compiling a list of children with asthma and placing it in a secure but readily accessible location, which is known to all staff. Relievers will be informed of the list and the location of the asthma action plans.
- Displaying the Asthma Foundation of Victoria's Asthma First Aid posters in key locations at the centre, for example, in the children's room, bathroom and kitchen.
- Regularly maintaining all asthma components of the First Aid Kit, to ensure all medications are current (within date) and any asthma devices are clean and ready for use.
- Ensuring that asthma components included in the First Aid Kit are taken on any activities outside the centre.
- Consulting with the parents/guardians of children with asthma, in relation to the health and safety of their child and the supervised management of the child's asthma.
- Identifying, and where possible, minimising asthma triggers as defined in the definition section of the policy or in children's asthma action plans.
- Promptly communicating any concerns to parents/guardians if it is considered that a child's asthma is limiting his/her ability to participate fully in all activities.
- Modifying activities, where necessary, for the child with asthma in accordance with their current needs and abilities.
- Administering all regular prescribed asthma medication in accordance with the medication book.
- Discussing with the parents/guardians the requirements of the medication book and what is needed for their child.

The parents/guardians are responsible for:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Informing staff, either on enrolment or on initial diagnosis, that their child has a history of asthma.
- Providing all relevant information regarding the child's asthma via the asthma action plan.
- Notifying the staff, in writing, of any changes to the information they entered on the asthma action plan during the year, if this occurs.
- Providing an adequate supply of appropriate asthma medication and equipment for their child at all times, for example, blue reliever medication and spacer.
- Entering the required information in the Early Learning Centre Medication Book at the beginning of each term or when necessary.
- Communicating all relevant information and concerns to staff as the need arises, for example, if asthma symptoms were present the previous night.
- Consulting with the staff, in relation to the health and safety of their child and the supervised management of the child's asthma.

### Plan of action for a child with diagnosed asthma

The staff, together with the parents/guardians of a child with asthma, will discuss and agree on a plan of action for the emergency management of an asthma attack based on the 4 Step Asthma First Aid Plan. This plan will be included as part of, or attached to, the child's asthma action plan and enrolment record.

This plan should include action to be taken where the parents/guardians have provided asthma medication, and in situations where this medication may not be available.

### Action to be taken if a child suddenly collapses or has difficulty breathing with a possible asthma attack.

*Children with a known asthma condition:*

Staff will follow the agreed plan of action for the child for the emergency treatment of an asthma attack as detailed in the asthma action plan. If the child's asthma action plan is NOT available, staff should immediately commence the standard asthma emergency protocol detailed below:

Step 1: Sit the child upright and remain calm to reassure them

Step 2: Without delay shake a blue reliever puffer (inhaler) and give four separate puffs through a spacer. Use one puff at a time and ask the child to take four breaths from the spacer after each puff

Step 3: Wait four minutes. If there is no improvement repeat Step 2

Step 4: If still no improvement after a further four minutes - call an ambulance immediately (dial 000) and state clearly that the child is "having an asthma attack"

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

Continuously repeat Steps 2 and 3 whilst waiting for the ambulance.

NOTE: In an emergency the blue reliever puffer used may be the child's own, from the First Aid Kit or borrowed from another child. Only staff who have completed a course in EAM may access the blue reliever puffer for first aid purposes from the First Aid Kit.

*Children who staff are not aware have pre existing asthma*

In this situation, staff will:

**Step 1:** Call an ambulance immediately (dial 000) and state that the child is having breathing difficulty

**Step 2:** Administer four separate puffs of a blue reliever puffer via a spacer. Use one puff at a time and ask the child to take four breaths from the spacer after each puff

**Step 3:** Keep giving four separate puffs of a blue reliever puffer every four minutes until the ambulance arrives.

This treatment could be life saving for a child whose asthma has not been previously recognised and it will not be harmful if the collapse or breathing difficulty was not due to asthma. Reliever medication is extremely safe, even if the child does not have asthma.

### Cleaning of devices

Devices (puffers and spacers) from the First Aid Kit must be thoroughly cleaned after each use to prevent cross infection. In most cases a child will use his/her own puffer and spacer. Devices can be easily cleaned by following these steps:

**Step 1:** Ensure the canister is removed from the puffer container (the canister must not be submerged) and the spacer is separated into two parts

**Step 2:** Wash devices thoroughly in hot water and kitchen detergent

**Step 3:** Do not rinse

**Step 4:** Allow devices to 'air dry'. Do not rub dry

**Step 5:** When dry, wipe with a 70% alcohol swab (for example, medi-swab available from pharmacies), paying particular attention to the inside and outside of the mouthpiece of the devices

**Step 6:** When completely dry, ensure the canister is replaced into the puffer container and check the device is working correctly by firing one or two 'puffs' into the air. A mist should be visible upon firing. If any device is contaminated by blood, dispose of it safely and replace the device.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



## Diabetes Policy

### Policy Statement

#### Values

Bayside Christian College ELC believes in ensuring the safety and well-being of children who are diagnosed with diabetes and is committed to:

- providing a safe and healthy environment in which children can participate fully in all aspects of the program
- actively involving the parents/guardians of each child diagnosed with diabetes in assessing risks, and developing risk minimization and risk management strategies for their child
- ensuring that all staff members and other adults at the service have adequate knowledge of diabetes and procedures to be followed in the event of a diabetes-related emergency
- facilitating communication to ensure the safety and wellbeing of children diagnosed with diabetes

#### Purpose

To ensure that enrolled children with type 1 diabetes and their families are supported, while children are being educated and cared for by the ELC

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC.

#### Background and Legislation

Services that are subject to the National Quality Framework must have a policy for managing medical *conditions in accordance with the Education and Care Services National Law Act 2011* and the *Education and Care Services National Regulations 2011*. This policy must define practices in relation to:

- the management of medical conditions
- procedures requiring parents/guardians to provide a medical management plan if an enrolled child has a relevant medical condition (including diabetes)
- development of a risk minimization plan in consultation with a child's parents/guardians
- development of a communication plan for staff members and parents/guardians

Staff members and volunteers must be informed about the practices to be followed in the management of specific medical conditions at the service. Parent/guardians of an

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



enrolled child with a specific health care need, allergy or other relevant medical condition must be provided with a copy of all relevant ELC policies.

Services must ensure that each child with diabetes has a current diabetes management plan prepared specifically for that child by their diabetes medical specialist team, at or prior to enrolment, and must implement strategies to assist children with type 1 diabetes. A child's diabetes management plan provides staff members with all required information about that child's diabetes care needs.

The following lists key points to assist service staff to support children with type 1 diabetes.

- Follow the services policies and procedures for medical emergencies involving children with type 1 diabetes
- Parents/guardians should notify the service immediately about any changes to the child's individual diabetes management plan
- The child's diabetes medical specialist team may include an endocrinologist, diabetes nurse educator and other allied health professionals. This team will provide parents/guardians with a diabetes management plan to supply to the service
- Contact Diabetes Australia - Victoria for further information.

Most children with type 1 diabetes can enjoy and participate in service programs and activities to their full potential, but are likely to require additional support from service staff to manage their diabetes. While attendance at the service should not be an issue for children with type 1 diabetes, they may require time away to attend medical appointments.

### Legislation and standards

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2011: Sections 167, 169
- Education and Care Services National Regulations 2011: Regulations 90–96, 102, 136, 137, 146, 147, 160–162, 168(2)(d), 173, 177, 181, 183, 184, 246
- Health Records Act 2001 (Vic), as amended 2011
- Information Privacy Act 2000 (Vic)
- National Quality Standard, Quality Area 2: Children's Health and Safety
  - Standard 2.1: Each child's health is promoted
    - Element 2.1.1: Each child's health needs are supported
    - Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
  - Standard 2.3: Each child is protected
    - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- Occupational Health and Safety Act 2004 (Vic), as amended 2007
- Privacy Act 1988 (Cth)
- Public Health and Wellbeing Act 2008

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Public Health and Wellbeing Regulations 2009 (Vic)

### Definitions

**Type 1 diabetes:** An autoimmune condition that occurs when the immune system damages the insulin producing cells in the pancreas. Type 1 diabetes is treated with insulin replacement via injections or a continuous infusion of insulin via a pump. Without insulin treatment, type 1 diabetes is life threatening.

**Type 2 diabetes:** Occurs when either insulin is not working effectively (insulin resistance) or the pancreas does not produce sufficient insulin (or a combination of both). Type 2 diabetes accounts for 85 to 90 per cent of all cases of diabetes and usually develops in adults over the age of 45 years, but is increasingly occurring in individuals at a younger age. Type 2 diabetes is unlikely to be seen in children under the age of 4 years.

**Hypoglycaemia or hypo (low blood glucose):** Hypoglycaemia refers to having a blood glucose level that is lower than normal i.e. below 4 mmol/L, even if there are no symptoms. Neurological symptoms can occur at blood glucose levels below 4 mmol/L and can include sweating, tremors, headache, pallor, poor co-ordination and mood changes. Hypoglycaemia can also impair concentration, behaviour and attention, and symptoms can include a vague manner and slurred speech. Hypoglycaemia is often referred to as a 'hypo'. Common causes include but are not limited to:

- taking too much insulin
- delaying a meal
- consuming an insufficient quantity of food
- undertaking unplanned or unusual exercise.

It is important to treat hypoglycaemia promptly and appropriately to prevent the blood glucose level from falling even lower, as very low levels can lead to loss of consciousness and convulsions.

The child's diabetes management plan will provide specific guidance for services in preventing and treating a hypo.

**Hyperglycaemia (high blood glucose):** Hyperglycaemia occurs when the blood glucose level rises above 15 mmol/L. Hyperglycaemia symptoms can include increased thirst, tiredness, irritability and urinating more frequently. High blood glucose levels can also affect thinking, concentration, memory, problem-solving and reasoning. Common causes include but are not limited to:

- taking insufficient insulin
- consuming too much food
- common illnesses such as a cold
- stress.

**Insulin:** Medication prescribed and administered by injection or continuously by a pump device to lower the blood glucose level. In the body, insulin allows glucose from food (carbohydrates) to be used as energy, and is essential for life.

**Blood glucose meter:** A compact device used to check a small blood drop sample to determine the blood glucose level.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

**Insulin pump:** A small, computerised device to deliver insulin constantly, connected to an individual via an infusion line inserted under the skin.

**Ketones:** Occur when there is insufficient insulin in the body. High levels of ketones can make children very sick. Extra insulin is required (given to children by parents/guardians) when ketone levels are  $>0.6$  mmol/L if insulin is delivered via a pump, or  $>1.0$  mmol/L if on injected insulin.

## Procedures

The Approved Provider is responsible for:

- Ensuring that a diabetes policy is developed and implemented at the service
- Ensuring that the Nominated Supervisor, educators, staff, students and volunteers at the service are provided with a copy of the Diabetes Policy, including the section on management strategies (refer to Appendix 1 - Strategies for the management of diabetes in children at the service), and the related ELC policies and procedures
- Ensuring that the programs delivered at the service are inclusive of children diagnosed with diabetes (refer to Inclusion and Equity Policy), and that children with diabetes can participate in all activities safely and to their full potential
- Ensuring that the parents/guardians of an enrolled child who is diagnosed with diabetes are provided with a copy of the Diabetes Policy (including procedures) and the Dealing with Medical Conditions Policy (Regulation 91)
- Ensuring that the Nominated Supervisor, staff and volunteers at the service are aware of the strategies to be implemented for the management of diabetes at the service (refer to Appendix 1 - Strategies for the management of diabetes in children at the service)
- Ensuring that each enrolled child who is diagnosed with diabetes has a current diabetes management plan prepared specifically for that child by their diabetes medical specialist team, at or prior to enrolment
- Ensuring that the Nominated Supervisor, educators, staff, students, volunteers and others at the service follow the child's diabetes management plan in the event of an incident at the service relating to their diabetes
- Ensuring that a risk minimisation plan is developed for each enrolled child diagnosed with diabetes in consultation with the child's parents/guardians, in accordance with Regulation 90(iii)
- Ensuring that a communication plan is developed for staff and parents/guardians in accordance with Regulation 90(iv), and encouraging ongoing communication between parents/guardians and staff regarding the management of the child's medical condition
- Ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

The Nominated Supervisor is responsible for:

- Ensuring that the Diabetes Policy is implemented at the service
- Compiling a list of children with diabetes and placing it in a secure but readily accessible location known to all staff. This should include the diabetes

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

management plan for each child following the strategies developed for the management of diabetes at the service (refer to Appendix 1 - Strategies for the management of diabetes in children at the service)

- Ensuring that all staff, including casual and relief staff, are aware of children diagnosed with diabetes, symptoms of low blood sugar levels, and the location of medication and diabetes management plans
- Following the child's diabetes management plan in the event of an incident at the service relating to their diabetes
- Following the risk minimisation plan for each enrolled child diagnosed with diabetes
- Communicating with parents/guardians regarding the management of their child's medical condition
- Ensuring that programmed activities and experiences take into consideration the individual needs of all children, including children diagnosed with diabetes
- Communicating with parents/guardians regarding the management of their child's diabetes
- Ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

Certified Supervisors and other educators/staff are responsible for:

- Reading and complying with this Diabetes Policy and the Dealing with Medical Conditions Policy
- Following the strategies developed for the management of diabetes at the service (refer to Appendix 1 - Strategies for the management of diabetes in children at the service)
- Following the risk minimisation plan for each enrolled child diagnosed with diabetes
- Knowing which children are diagnosed with diabetes, and the location of their medication and diabetes management plans
- Following the child's diabetes management plan in the event of an incident at the service relating to their diabetes
- Communicating with parents/guardians regarding the management of their child's medical condition
- Ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

All parents/guardians are responsible for:

- Reading and complying with this Diabetes Policy, diabetes management strategies (refer to Appendix 1 – Strategies for the management of diabetes in children at the service)

Parents/guardians of children diagnosed with type 1 diabetes are responsible for:

- Providing the service with a current diabetes management plan prepared specifically for their child by their diabetes medical specialist team
- Working with the Approved Provider/Nominated Supervisor to develop a risk minimisation plan for their child
- Working with the Approved Provider/Nominated Supervisor to develop a communication plan

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring that they provide the service with any equipment, medication or treatment, as specified in the child's individual diabetes management plan.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

#### Sources

- Caring for Diabetes in Children and Adolescents, Royal Children's Hospital Melbourne: [www.rch.org.au/diabetesmanual/index.cfm?doc\\_id=2352](http://www.rch.org.au/diabetesmanual/index.cfm?doc_id=2352)
- Diabetes Australia – Vic:
  - Information about professional learning for teachers (i.e. Diabetes in Schools one day seminars for teachers and early childhood staff), sample management plans and online resources. Refer to [www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents](http://www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents)
- Diabetes Basics for teachers (a DVD that provides real life stories from students and teachers at primary and secondary schools. It includes a CD-ROM with downloadable sample diabetes management plans). Refer to [www.diabetesvic.org.au/order-publications?view=publicationsshop](http://www.diabetesvic.org.au/order-publications?view=publicationsshop)
- Diabetes management plan samples for children with/without insulin pumps (including The Royal Children's Hospital Melbourne diabetes management plan sample and Monash Children's – Southern Health diabetes management plan sample). Refer to [www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents](http://www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents)

#### Related Policies


- Accident, Injury and Medical Emergency Policy
- Administration of Medication Policy
- First Aid Policy

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 1

### Strategies for the management of diabetes in children at the service

Strategy	Action
Monitoring of blood glucose (BG) levels	<ul style="list-style-type: none"> <li>• Checking of blood glucose (BG) levels is performed using a blood glucose meter (refer to Definitions) and a finger pricking device. The child's diabetes management plan should state the times that BG levels should be checked, the method of relaying information to parents/guardians about BG levels and any intervention required if the BG level is found to be below or above certain thresholds. A communication book can be used to provide information about the child's BG levels between parents/guardians and the service at the end of each session.</li> <li>• Checking of BG occurs at least four times every day to evaluate the insulin dose. Some of these checks may need to be done while a child is at the service – at least once, but often twice. Routine times for testing include before meals, before bed and regularly overnight.</li> <li>• Additional checking times will be specified in the child's diabetes management plan. These could include such times as when a 'hypo' is suspected.</li> <li>• Children are likely to need assistance with performing BG checks.</li> <li>• Parents/guardians should be asked to teach service staff about BG testing.</li> <li>• Parents/guardians are responsible for supplying a blood glucose meter, in-date test strips and a finger pricking device for use by their child while at the service.</li> </ul>
Managing hypoglycaemia (hypos)	<ul style="list-style-type: none"> <li>• Hypos or suspected hypos should be recognised and treated promptly, according to the instructions provided in the child's diabetes management plan.</li> <li>• Parents/guardians are responsible for providing the service with oral hypoglycaemia treatment (hypo food) for their child in an appropriately labelled container.</li> <li>• This hypo container must be securely stored and readily accessible to all staff.</li> </ul>
Administering insulin	<ul style="list-style-type: none"> <li>• Administration of insulin during service hours is unlikely to be required; this will be specified in the child's diabetes management plan.</li> <li>• As a guide, insulin for service-aged children is commonly administered: <ul style="list-style-type: none"> <li>○ twice a day: before breakfast and dinner at home</li> <li>○ by a small insulin pump worn by the child.</li> </ul> </li> </ul>
Managing ketones	<ul style="list-style-type: none"> <li>• Children on an insulin pump will require ketone testing when their BG level is &gt;15.0 mmol/L.</li> <li>• Staff must notify parents if the ketone level is &gt;0.6 mmol/L</li> </ul>

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	



	(refer to the child's diabetes management plan).
Off-site excursions and activities	<ul style="list-style-type: none"> <li>With good planning, children should be able to participate fully in all service activities, including attending excursions.</li> <li>The child's diabetes management plan should be reviewed prior to an excursion, with additional advice provided by the child's diabetes medical specialist team and/or parents/guardians, as required.</li> </ul>
Infection control	<ul style="list-style-type: none"> <li>Infection control procedures must be developed and followed. Infection control measures include being informed about ways to prevent infection and cross-infection when checking BG levels, handwashing, having one device per child and not sharing devices between individuals, using disposable lancets and safely disposing of all medical waste.</li> </ul>
Timing meals	<ul style="list-style-type: none"> <li>Most meal requirements will fit into regular service routines.</li> <li>Children with diabetes require extra supervision at meal and snack times to ensure that they eat all their carbohydrates. If an activity is running overtime, children with diabetes <b>cannot have delayed meal times. Missed or delayed carbohydrate is likely to induce hypoglycaemia (hypo).</b></li> </ul>
Physical activity	<ul style="list-style-type: none"> <li>Exercise should be preceded by a serve of carbohydrates.</li> <li>Exercise is not recommended for children whose BG levels are high, as it may cause BG levels to become more elevated.</li> <li>Refer to the child's diabetes management plan for specific requirements in relation to physical activity.</li> </ul>
Participation in special events	<ul style="list-style-type: none"> <li>Special events, such as class parties, can include children with type 1 diabetes in consultation with their parents/guardians.</li> <li>Services should provide food and drink alternatives when catering for special events, such as low sugar or sugar-free drinks and/or sweets. This should be planned in consultation with parents/guardians.</li> <li></li> </ul>
Communicating with parents	<ul style="list-style-type: none"> <li>Services should communicate directly and regularly with parents/guardians to ensure that their child's individual diabetes management plan is current.</li> <li>Services should establish a mutually agreeable home-to-service means of communication to relay health information and any health changes or concerns.</li> <li>Setting up a communication book is recommended and, where appropriate, make use of emails and/or text messaging.</li> </ul>

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

## Epilepsy Policy

### Policy Statement

#### Purpose

This policy will outline the procedures to:

- Ensure that educators, staff and parents/guardians are aware of their obligations and required strategies in supporting children with epilepsy to safely and fully participate in the program and activities of Bayside Christian College ELC
- Ensure that all necessary information for the effective management of children with epilepsy enrolled at Bayside Christian College ELC is collected and recorded so that these children receive appropriate attention when required.

#### Values

Bayside Christian College ELC is committed to:

- Providing a safe and healthy environment for all children enrolled at the service
- Providing an environment in which all children with epilepsy can participate to their full potential
- Providing a clear set of guidelines and procedures to be followed with regard to supporting children with epilepsy and the management of seizures
- Educating and raising awareness about epilepsy, its effects and strategies for appropriate management, among educators, staff, parents/guardians and others involved in the education and care of children enrolled at the service.

#### Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bayside Christian College ELC.

#### Background and Legislation

Epilepsy is a common, serious neurological condition characterised by recurrent seizures due to abnormal electrical activity in the brain. While about 1 in 200 children live with epilepsy, the impact is variable – some children are greatly affected while others are not.

“Epilepsy is unique: There are virtually no generalisations that can be made about how epilepsy may affect a child. There is often no way to accurately predict how a child’s abilities, learning and skills will be affected by seizures. Because the child’s brain is still developing, the child, their family and doctor will be discovering more about the condition as they develop. The most important thing to do when working with a child with epilepsy is to get to know the individual child and their condition. All children with epilepsy should have an Epilepsy Management Plan” (refer to Children with epilepsy: A Teacher’s Guide , Epilepsy Foundation of Victoria).

Most people living with epilepsy have good control of their seizures through medication, however it is important that all those working with children living with

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



epilepsy have a good understanding of the effects of seizures, required medication and appropriate first aid for seizures.

The Epilepsy Foundation of Victoria has a range of resources and can assist with the development of an Epilepsy Management Plan. The foundation also provides training and support to families and educators in the management of epilepsy, and in the emergency administration of midazolam or rectal Valium.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. Regulation 136 of the Education and Care Services National Regulations 2011 requires the Approved Provider to ensure that there is at least one educator on duty at all times who has a current approved first aid qualification. As a demonstration of duty of care and best practice, KPV recommends all educators have current approved first aid qualifications.

### Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2011* : Sections 167, 169, 174
- *Education and Care Services National Regulations 2011* : Regulations 79, 85, 86, 87, 90, 91, 92, 93, 95, 98, 101, 136, 137
- *Health Records Act 2001* (Vic)
- *Information Privacy Act 2000* (Vic)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
  - Standard 2.1: Each child's health is promoted
    - Element 2.1.1: Each child's health needs are supported
  - Standard 2.3: Each child is protected
    - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Privacy Act 1988* (Cth)
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)

### Definitions

**Absence seizure:** Occurring mostly in children, this consists of brief periods of loss of awareness, most often for less than 10 seconds. Some children can experience these types of seizures multiple times during the day which may compromise learning. Absence seizures can be mistaken for day-dreaming. They are no longer called 'petit mals'.

**AEDs:** Antiepileptic drugs used for the treatment of many epilepsy syndromes. AEDs do not cure epilepsy but most seizures can be prevented by taking medication regularly one or more times a day. For many people, medication makes it possible to live a normal, active life, free of seizures. Others may continue to have seizures, but less frequently.

**Approved First Aid Qualifications:** First aid qualifications that meet the requirements of Regulation 136(1) and have been approved by the National Authority.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

**Emergency epilepsy medication:** Medication that has been prescribed for the treatment of prolonged seizures or a cluster of seizures. The most common type of emergency medication prescribed is buccal or nasal midazolam. Rectal Valium has been used in the past, but is not often prescribed for use as an emergency epilepsy medication. Medication information is included in a child's Emergency Medication Management Plan, and this must be kept up to date. Only staff who have received child-specific training in the emergency administration of midazolam can administer this medication.

**Emergency Medication Management Plan (EMMP):** Completed by the prescribing doctor in consultation with the individual and/or their family/carer. This medication plan must be attached to the individual's Epilepsy Management Plan which has been signed by the child's treating doctor. The preferred template to be used by the prescribing doctor can be found at [www.epinet.org.au](http://www.epinet.org.au)

**Epilepsy:** Recurrent seizures (abnormal burst of electrical activity in the brain that scrambles messages) that are unprovoked.

**Epilepsy Management Plan (EMP):** Designed to help people recognise when seizures are occurring, and gives clear directions about appropriate first aid. The plan is developed by the person who has the most knowledge and experience of the individual's epilepsy and seizures, and should be less than 12 months old. The management of epilepsy requires a team approach and the plan should be reviewed and signed by the individual's treating doctor. An Epilepsy Management Plan and Support Package has been designed by The Epilepsy Foundation of Victoria: [www.epinet.org.au](http://www.epinet.org.au)

**Focal (previously called simple or complex partial) seizures:** Focal seizures (previously called partial seizures) start in one part of the brain and affect the area of the body controlled by that part of the brain. The symptoms experienced will depend on the function that the focal point controls (or is associated with). Focal seizures may or may not cause an alteration of awareness. Symptoms are highly variable and may include lip smacking, wandering behaviour, fiddling with clothes and feeling sick, 'edgy' or strange.


Focal seizures where a person has full awareness were previously called simple partial seizures.

Focal seizures where a person has an altered sense of awareness were previously called complex partial seizures. Focal seizures can progress into a generalised seizure.

**Generalised seizure:** Both sides of the brain are involved and the person will lose consciousness. A Tonic Clonic seizure is one type of generalised seizure.

**Ketogenic diet:** A high fat, low carbohydrate, restricted-calorie diet that may be prescribed as additional therapy. This is an effective therapy for some children, although its mechanisms are not well understood. When introducing this diet, a child

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



is usually hospitalised, as such radical dietary changes have the potential to cause serious problems for the child. Once the child is stabilised on a ketogenic diet, they can return home, with the diet managed by the parents/guardians or carers.

**Medication record:** Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

**Midazolam:** Also known as Hypnovel, midazolam belongs to a group of pharmaceuticals called benzodiazepines. Its main purpose is as a sedative or hypnotic, and it is used for medical and surgical procedures. In epilepsy, midazolam is used for emergency management of seizures, as it has the ability to stop the seizures quickly. Once absorbed into the blood, midazolam travels to the brain, attaching to brain receptors that control electrical impulses that are firing at an unusually rapid rate. Midazolam also works by relaxing muscles, which is particularly beneficial in many types of seizures. The effect of midazolam should occur rapidly.

Not all individuals living with epilepsy require emergency medication, but for a small group of people whose seizures are difficult to control, or for people who are isolated from emergency care, midazolam is an excellent medication. It is most commonly administered buccally or nasally.

Midazolam is fast-acting and can be easily administered by family and carers in a variety of settings. Only staff specifically trained to the requirements of a child's Emergency Medication Management Plan can administer midazolam.

**Midazolam kit:** An insulated container with an unused, in-date midazolam ampoule/s, a copy of the child's Emergency Medication Management Plan and Epilepsy Management Plan (which includes a picture of the child), and telephone contact details for the child's parents/guardians, doctor/medical personnel and the person to be notified in the event of a seizure requiring administration of midazolam if parents/guardians cannot be contacted. Midazolam must be stored away from light (cover with aluminium foil) and in temperatures of less than 25°C. EFV Administration flyer – e.g. buccal, gloves, tissues, pen and paper, +/- stopwatch.

**Seizure record:** An accurate record of seizure activity, which is important for identifying any seizure patterns and changes in response to treatment.

**Seizure triggers:** Seizures may occur for no apparent reason, but common triggers include: forgetting to take medication, lack of sleep, other illness, heat, stress/boredom, missing meals and dehydration.

Flashing or flickering lights can trigger seizures in about 5% of people living with epilepsy.

**Staff record:** Must be kept by the service and include details of the Nominated Supervisor, the Educational Leader, other staff members, volunteers and the Responsible Person. The record must include information about qualifications, training and details of the Working with Children Check (Regulations 146–149). A

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

sample staff record is available on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Tonic Clonic seizure:** A convulsive seizure with loss of consciousness, muscle stiffening, falling, followed by jerking movements. These types of seizures are no longer called 'grand mals'.

### Sources

- The Epilepsy Foundation of Victoria: [www.epinet.org.au](http://www.epinet.org.au) or phone (03) 9805 9111 or 1300 852 853
- Australian Children's Education and Care Quality Authority (ACECQA): [www.acecqa.gov.au](http://www.acecqa.gov.au)
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011 , ACECQA

### Procedures

The Approved Provider is responsible for:

- Providing all staff with a copy of the service's Epilepsy Policy and ensuring that they are aware of all enrolled children living with epilepsy
- Ensuring that all staff have current CPR training and are aware of seizure first aid procedures (refer to Appendix 1) when a child with epilepsy is enrolled at the service
- Ensuring that when a child with epilepsy is enrolled at the service, all staff that come into contact with that child, attend training conducted by The Epilepsy Foundation of Victoria on the management of epilepsy and, where appropriate, emergency management of seizures using emergency epileptic medication,
- Providing parents/guardians of children with epilepsy with a copy of the service's Epilepsy Policy (Regulation 91) and Administration of Medication Policy , upon enrolment/diagnosis of their child
- Ensuring that all children with epilepsy have an Epilepsy Management Plan, seizure record and, where relevant, an Emergency Medical Management Plan, filed with their enrolment record. Records must be no more than 12 months old
- Ensuring a medication record is kept for each child to who medication is to be administered by the service (Regulation 92)
- Facilitating communication between management, educators, staff and parents/guardians regarding the service's Epilepsy Policy
- Ensuring that children with epilepsy are not discriminated against in any way
- Ensuring that children living with epilepsy can participate in all activities safely and to their full potential
- Immediately communicating any concerns with parents/guardians regarding the management of children with epilepsy at the service
- Ensuring that medication is administered in accordance with the Administration of Medication Policy.

The Nominated Supervisor is responsible for:

- Ensuring that all educators' first aid qualifications, including CPR training, are current, meet the requirements of the National Law (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- Ensuring that only staff who have received child-specific training in the administration of emergency medications are permitted to administer that medication
- Ensuring that medication is administered in accordance with the Administration of Medication Policy
- Developing a risk minimisation plan for every child with epilepsy, in consultation with Parents/guardians/The Epilepsy Foundation of Victoria
- Compiling a list of children with epilepsy and placing it in a secure, but readily accessible, location known to all staff. This should include the Epilepsy Management Plan, seizure record and Emergency Medical Management Plan for each child with epilepsy
- Assisting parents/guardians with completing the enrolment form and medication record for their child
- Consulting with the parents/guardians of children with epilepsy in relation to the health and safety of their child, and the supervised management of the child's epilepsy
- Communicating any concerns to parents/guardians if a child's epilepsy is limiting his/her ability to participate fully in all activities
- Ensuring that children with epilepsy are not discriminated against in any way
- Ensuring that induction procedures for casual and relief staff include information about children attending the service who have been diagnosed with epilepsy, and the location of their medication and management plans
- Ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with epilepsy.

Certified Supervisor/s and other educators are responsible for:

- Ensuring that they are aware of the service's Epilepsy Policy and seizure first aid procedures (refer to Appendix1)
- Ensuring that they can identify children displaying the symptoms of a seizure, and locate their personal medication and Epilepsy Management Plan
- Maintaining current approved first aid qualifications (refer to Definitions )
- Identifying and, where possible, minimising possible seizure triggers (refer to Definitions ) as outlined in the child's Epilepsy Management Plan
- Taking all personal Epilepsy Management Plans, seizure records, medication records, Emergency Medication Plans and any prescribed medication on excursions and other offsite events
- Administering prescribed medication in accordance with the service's Administration of Medication Policy
- Ensuring that emergency medication is stored correctly and that it remains within its expiration date
- Being aware of, and sensitive to, possible side effects and behavioural changes following a seizure or changes to the child's medication regime
- Ensuring that children with epilepsy can participate in all activities safely and to their full potential.

Parents/guardians are responsible for:

- Reading the service's Epilepsy Policy
- Informing staff, either on enrolment or on initial diagnosis, that their child has epilepsy
- Providing a copy of their child's Epilepsy Management Plan (including an

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Emergency Medication Management Plan where relevant) to the service. This plan should be reviewed and updated at least annually

- Ensuring the medication record (refer to Definitions) is completed in accordance with the Administration of Medication Policy of the service
- Working with staff to develop a risk minimisation plan for their child
- Where emergency medication has been prescribed, providing an adequate supply of emergency
- Medication within expiry date, for their child at all times
- Notifying staff, in writing, of any changes to the information on the Epilepsy Management Plan, enrolment form or medication record
- Communicating regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's epilepsy
- Encouraging their child to learn about their epilepsy, and to communicate with service staff if they are unwell or experiencing symptoms of a potential seizure.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

### Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Appendix 1

### Seizure first aid

#### Tonic Clonic seizure

A convulsive seizure with loss of consciousness, muscle stiffening, falling, followed by jerking movements.

- Note the time the seizure started and time until it ends.
- Protect the head – use a pillow or cushion, if available.
- Remove any hard objects that could cause injury.
- Do not attempt to restrain the person, stop the jerking or put anything in their mouth.
- As soon as possible, roll the person onto their side – you may need to wait until the seizure movements have ceased.
- Talk to the person to make sure they have regained full consciousness.
- Stay with and reassure the person until they have recovered.

#### Absence seizure

Occurring mostly in children, this consists of brief periods of loss of awareness. Can be mistaken for day-dreaming.

- Timing can be difficult – count how many happen daily.
- Reassure the person and repeat any information that may have been missed during the seizure.

#### Focal seizure

A non-convulsive seizure with outward signs of confusion, unresponsiveness or inappropriate behaviour. Can be mistaken for alcohol or drug intoxication.

Note the time the seizure started and time until it ends.

Avoid restraining the person and guide safely around objects.

Talk to the person to make sure they have regained full consciousness.

Stay with and reassure the person until they have recovered.

#### Call an ambulance

Call an ambulance:

- for any seizure if you don't know the person or if there is no Epilepsy Management Plan
- if the seizure continues for more than five minutes
- if the seizure stops but the person does not regain consciousness within five minutes, or another seizure begins
- when a serious injury has occurred, if a seizure occurs in water, or if you believe a woman who is having a seizure is pregnant.

**Emergency services: 000**


**Epilepsy Help Line: 1300 852 853**

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

## Appendix 2

### Enrolment checklist for children prescribed midazolam

A risk minimisation plan is completed in consultation with parents/guardians prior to the attendance of the child at the service, and is implemented, including following procedures to address the particular needs of each child prescribed midazolam.	<input type="checkbox"/>
Parents/guardians of a child prescribed midazolam have been provided with a copy of the service's Epilepsy Policy and other relevant Medical policies	<input type="checkbox"/>
The Emergency Medication Management Plan (EMMP) and Epilepsy Management Plan (EMP) of the child is completed and signed by the child's registered medical practitioner and is accessible to all staff (sample documents can be accessed at <a href="http://www.epinet.org.au">www.epinet.org.au</a> ).	<input type="checkbox"/>
A copy of the child's EMMP is included in the child's midazolam kit (refer to Definitions).	<input type="checkbox"/>
The midazolam kit (within a visible expiry date) is available for use at all times the child is being educated and cared for by the service, and includes a picture of the child.	<input type="checkbox"/>
Midazolam is stored in an insulated container (midazolam kit), in a location easily accessible to adults but inaccessible to children, and away from light (cover with aluminium foil) and direct sources of heat.	<input type="checkbox"/>
All staff who are trained in the administration of midazolam for a particular child, are aware of the location of each midazolam kit and the location of each child's EMMP.	<input type="checkbox"/>
All staff who are trained in the administration of midazolam for a particular child, are aware of the location of each midazolam kit and the location of each child's EMMP.	<input type="checkbox"/>
Staff have undertaken The Epilepsy Foundation of Victoria's training, which includes strategies for epilepsy management, risk minimisation, recognition of seizures and emergency first aid treatment. Details regarding attendance at this training are to be recorded on the staff record (refer to Definitions).	<input type="checkbox"/>
Staff have undertaken practise with a mock midazolam ampoule at some time in the last 12 months. Details regarding participation in practice sessions are to be recorded on the staff record (refer to Definitions).	<input type="checkbox"/>
A procedure for first aid treatment for seizures is in place and all staff understand requirements (refer to Appendix 1).	<input type="checkbox"/>
Contact details of all parents/guardians and authorised nominees are current and accessible.	<input type="checkbox"/>

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	



### Appendix 3

#### Sample risk minimisation plan for children prescribed midazolam

The following information is not a comprehensive list, but contains some suggestions to consider when developing/reviewing your service's risk minimisation plan template in consultation with parents/guardians.

<b>How well has the service planned for meeting the needs of children with epilepsy, and those children who are prescribed emergency midazolam?</b>		
Who are the children?	<input type="checkbox"/>	List the name and room location of each child diagnosed with epilepsy and ensure appropriate privacy is maintained in identifying these names to non-staff.
What are their seizure triggers?	<input type="checkbox"/> <input type="checkbox"/>	What are the seizure triggers for the children?  List strategies that will minimise these triggers occurring (e.g. flickering lights, blowing into wind chimes (hyperventilating), sudden noise, becoming over-excited etc.).
Do staff know what the child's seizures look like and how to support the child?	<input type="checkbox"/> <input type="checkbox"/>	List the strategies for ensuring that all staff, including casual and relief staff, recognise what the child's seizures look like and what support the child may need.  If the child is prescribed midazolam for emergency use, ensure that trained staff know where the midazolam kit is located.
Do staff know what constitutes an emergency and do they know what to do?	<input type="checkbox"/>	All staff have read and understood the child's Epilepsy Management Plan (EMP), and know: <ul style="list-style-type: none"> <li>what constitutes an emergency and when to call an ambulance</li> <li>how to provide support to the child during and after a seizure.</li> </ul>
If midazolam is prescribed, how does the service ensure its safe administration and storage?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Record the date on which each family of a child with epilepsy (and who is prescribed midazolam) is provided a copy of the service's Epilepsy Policy .  Record the date that parents/guardians provide an unused, in-date and complete midazolam kit.  Record the date and name of staff who have attended child-specific training in the administration of midazolam.  Test that all trained staff know the location of the midazolam kit and Emergency Medication

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020


	<input type="checkbox"/> Management Plan (EMMP) for each child.  <input type="checkbox"/> Ensure that there is a procedure in place to regularly check the expiry date of each midazolam ampoule.  <input type="checkbox"/> Ensure the midazolam kit is maintained according to the instructions in this Epilepsy Policy (refer to Definitions: Midazolam kit).  <input type="checkbox"/> Display the Epilepsy First Aid poster in staff areas.  <input type="checkbox"/> The midazolam kit, including a copy of the EMMP, is carried by an educator/staff member when a child prescribed midazolam is taken outside the service premises e.g. for excursions.
<b>Do trained people know when and how to administer midazolam to a child who is prescribed it?</b>	
<input type="checkbox"/>	Know the contents of each child's EMMP and EMP, and implement the procedures.
<input type="checkbox"/>	Know: <ul style="list-style-type: none"> <li>• who will administer the midazolam and stay with the child</li> <li>• who will telephone the ambulance and the parents/guardians of the child</li> <li>• who will ensure the supervision of other children at the service</li> <li>• who will let the ambulance officers into the service and take them to the child.</li> </ul>
<input type="checkbox"/>	Ensure that all staff have undertaken training by The Epilepsy Foundation of Victoria.

#### Potential scenarios and strategies

<b>How effective is the service's risk minimisation plan?</b>		
<input type="checkbox"/>	Review the risk minimisation plan of each child living with epilepsy with parents/guardians at least annually, but always on enrolment and after any seizures occur.	
<b>A child with epilepsy should not be overprotected – many of the risk strategies apply universally to ensure the health, safety and wellbeing of all children in early childhood environments.</b>		
<b>Scenario</b>	<b>Strategy</b>	<b>Who is responsible?</b>
Scooters and tricycles are provided by the service for outside play	If the child has Tonic Clonic (convulsive) seizures, bicycle safety is particularly important.	Staff

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

	As part of a whole-of-service safe bicycle education program, helmets (with children wearing their own sunhats underneath) are used by all children at the service. Alternatively, parents/guardians may provide a specific helmet for their child.	
Water activities (e.g. play troughs, excursions)	Ensure the child with epilepsy is never left unattended near water.	Staff
	On excursions, ensure that there is no opportunity for a child with epilepsy to approach a body of water unsupervised.	Staff
	All sink plugs are placed at a height that is inaccessible to children.	Staff
Individual seizure triggers	For example, if a child's seizures are triggered by heat, outdoor activities are undertaken in the cooler part of day, in accordance with parents/guardians consultation on temperature monitoring.  An air conditioner is thermostated to maintain constant room temperature.	Staff/parents/guardians

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director	
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020	

## Emergency Management Policy

### Policy statement

#### Values

Bayside Christian College is committed to

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Responding to the needs of the child if the child is injured, becomes ill, or is traumatised whilst attending the Early Learning Centre.
- Having appropriate procedures in place to effectively manage emergency incidents at the Early learning Centre.

#### Purpose

This policy sets the framework for the development of specific emergency management procedures, practices and guidelines.

#### Scope

This policy applies to the staff, parents/guardians, children, volunteers and students attending Bayside Christian College Early learning Centre.

#### Background and legislation

Fire is a very real threat to the safety of all people attending the children's centre, however there are also many other emergency situations which may occur at any time including:

- Flood
- Severe storm
- Bomb threat
- Intruder
- Toxic leak
- Loss of water or power.

It is vital that strategies for dealing with emergency situations are planned ahead of time to ensure the safety of all involved in such an incident.

### Procedures

The College is responsible for:

- Developing, in collaboration with staff, appropriate procedures to be followed in the event of an emergency at the Early Learning Centre.
- Ensuring emergency procedures are prominently displayed and practised at least once per term.
- Ensuring all necessary emergency equipment is available and maintained, for example, fire extinguishers.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring staff are provided with necessary information and training, for example, handling of fire extinguishers.
- Regularly reviewing and updating procedures as required or following an emergency incident.

The staff are responsible for:

- Providing input into the development of procedures to be followed in the event of an emergency situation.
- Being familiar with procedures and responsibilities.
- Implementing the procedures as outlined.
- Ensuring the safety of the children in their care.
- Contributing to the review of the procedures following an emergency incident.
- Ensuring the emergency evacuation procedure is displayed in a prominent position/s.
- Ensuring the arrival and departure book is completed as per the requirements of Bayside Christian College's Delivery and Collection of Children Policy.
- Practicing the emergency evacuation procedures with the children once a term and recording the dates of practices.

The parents/guardians are responsible for:


- Being familiar with the Early Learning Centre's emergency procedures.
- Ensuring children are signed in as per the requirements of the Early Learning Centre's Delivery and Collection of Children Policy.
- Following the directions of staff during an emergency incident.
- Participating and assisting in practice emergency evacuations if in attendance at the Early Learning Centre at the time of the practice.

### General guidelines

The College and staff will collaborate in the development of procedures for dealing with emergency situations. Procedures will identify:

- The types of emergencies that may occur
- Who determines that it is an emergency situation and how do they communicate this to other staff/adults and children.
- Allocation of responsibilities to deal with these events.
- Who needs to be contacted, for example, fire, police, local council, parents/guardians.
- Developing an emergency evacuation pack, containing, for example, family contact details, basic first aid kit, torch with working batteries, keys for gates etc., spare mobile phone with charged battery .
- How often emergency procedures will be practised.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



### Related Documents

Please refer to the College's Emergency Management Plan and Emergency Management Policy

[http://intranet.bcc.vic.edu.au/index.php?title=Bayside\\_At\\_Work/Policies\\_%26\\_Procedures/Policies/4. Student Welfare/Emergency Management](http://intranet.bcc.vic.edu.au/index.php?title=Bayside_At_Work/Policies_%26_Procedures/Policies/4. Student Welfare/Emergency Management)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## First Aid Policy

### School commitment

Bayside Christian College is committed to the provision of an effective first aid service to protect the health and safety of all staff, students and others who may be affected by accidents, incidents or injuries arising from school activities, whether on or off school premises.

### Management priorities

This Early Learning Centre will ensure that:

- legislative requirements for the first aid service are complied with
- particular hazards within the centre are taken into account when equipping and staffing the first aid service
- adequate equipment, facilities and supplies are provided as required for the first aid service
- suitable personnel are appointed to staff the first aid service
- the teacher and assistant receive suitable training
- the need for first aid services will be assessed for Early Learning Centre activities conducted off centre premises, and supplied where necessary
- appropriate recording systems are established to record treatment provided
- these records will be used to guide the development of strategies to prevent injury and illness at the school
- appropriate arrangements will be made for the transportation of injured people
- appropriate arrangements will be made for sick or injured students to be collected by a parent or guardian
- training will be provided in skills to maintain basic life support in the case of critical injury.

### Principal and Head of Primary commitment

Are responsible, within the scope of their authority, for ensuring that:

- the objectives of this policy are integrated into work practices
- effective action is taken to ensure the Early Learning Centre's first aid service is appropriate for the centre's needs.

### Staff commitment

All staff are responsible for cooperating with the giving and receiving of first aid, as needed.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Head Lice Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Providing up-to-date information for parents/guardians and staff regarding the protection of all children from head lice infection.
- Complying with the exclusion requirements for infectious diseases set out in the Communicable Diseases Exclusion Table (refer to Infectious Diseases Policy, Appendix 2).

#### Purpose

Whilst parents/guardians have primary responsibility for the detection and treatment of head lice, the Early Learning Centre also has a role in the management of head lice infections and in providing support for the parents and guardians.

#### Scope

This policy applies to the staff, parents/guardians, children, volunteers and students involved with the centre.

#### Background and legislation

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011
- Health (Infectious Diseases) Regulations 2001.
- Occupational Health and Safety Act 2000.

#### Definitions

Exclusion: Unable to attend or participate in the program.

#### Procedures

The Head of Primary is responsible for:

- Approving any changes to this policy
- Responding to any questions/concerns that arise in relation to any aspect of the policy.

The staff are responsible for:

- Distributing up to date information on the detection, treatment and control of head lice at the beginning of every year and more frequently if required.
- Provision of comprehensive advice about the use of safe treatment practices which do not place children's health at risk.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Providing clear protocols for any inspection programs, including obtaining written parental permission for all inspections including those by local government personnel.
- Organising inspection programs as required
- Distributing letters to parents/guardians of those children found to have head lice. Letters may include a detachable slip, asking parents to return that indicates the treatment used and when it commenced.
- Reducing the stigma and maintain confidentiality.
- Distributing letters to all children, not just those found to be infected.
- Include staff in the inspections.
- Undertake classroom activities to give students an understanding of the habits and life cycles of head lice
- Ensure they undertake sufficient training in the detection and management of head lice.

The Early Learning Centre recommends that parents/guardians:

- Do not allow their child to attend the centre with untreated head lice (in accordance with the Health Infectious Disease Regulations 2001)
- Check children's hair on a weekly basis at home using the recommended conditioner combing method
- Regularly inspect all household members and treat them if necessary
- Upon detection of head lice, notify the centre and advise when treatment commenced,
- advise the parents or carers of your child's friends to enable early detection and treatment
- Maintain a sympathetic attitude and avoid stigmatising/blaming families who are experiencing difficulties with control measures
- Agree for their child to participate in inspections undertaken at the centre.
- Ensure that children with long hair wear it tied back while attending the centre.

**Related documents / websites**

[www.health.vic.gov.au/headlice/](http://www.health.vic.gov.au/headlice/)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## HIV/AIDS and Hepatitis Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Ensuring no employee, prospective employee, employer, parent/guardian or child is discriminated against or harassed on the grounds of having, or being assumed to have, an HIV/ AIDS or hepatitis infection.
- Ensuring no child, parent/guardian, staff member, employer, or any other person participating in the program is excluded on the basis of their HIV/AIDS, hepatitis B or C infection.
- Ensuring no child, staff member, parent/guardian, or other person present at the Early Learning Centre, will be denied first aid at any time.
- Endorsing a caring and supportive approach to this issue.
- Helping to inform parents/guardians and staff about the facts of HIV/AIDS and hepatitis.
- Assuring users of the Early Learning Centre, that the centre is aware of its responsibilities for providing a safe environment for staff, children and parents/guardians.
- Assuring the community that Bayside Christian College is carrying out its responsibilities in relation to government legislation concerning HIV/AIDS, the Occupational Health and Safety Act 2004 and the Health Act 1958.
- Ensuring confidentiality for staff and users in relation to the HIV/AIDS and hepatitis status of persons concerned.
- Fulfilling obligations under all relevant State and Commonwealth legislation.

#### Purpose

This policy will provide clear guidelines for parents/guardians and staff in relation to their responsibilities relating to HIV/AIDS and hepatitis within Bayside Christian College Early Learning Centre.

#### Scope

This policy applies to the staff, families who use the centre, volunteers, students and other persons involved with the Early Learning Centre.

#### Background and legislation

Viruses such as HIV/AIDS and hepatitis are health issues which concern everyone. HIV/AIDS has aroused community anxiety, often because of misinformation and ignorance. There is no obligation, legal or otherwise, for anyone to inform an employer, centre provider, or centre of their own or their child's HIV/AIDS, hepatitis B, C or other blood borne virus status, consequently:

- Such information must not be disclosed without informed consent of the individual [or guardian for a person under the age of 18 years].

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- The only reason the parents/guardians would inform the teacher of the child's blood borne disease status would be for the benefit of the child.
- Any information received must be kept securely [under lock and key] within Bayside Christian College Early Learning Centre; access to this information must only be by the person who has been informed.
- Information relating to the blood borne status will be destroyed once the person leaves the employment of, or ceases to attend the Early Learning Centre.
- No routine or mandatory blood borne disease testing may be carried out on centre users or staff.
- No testing may be carried out without the informed consent of the individual and provision of pre and post-test counseling, by an accredited counsellor or qualified medical practitioner.

### Background Information

#### Reviewing/changing the policy

Any review of this policy needs to ensure compliance with legislation. Where the College is considering changing this policy, it is recommended legal advice be sought, to ensure compliance with all relevant legislation. The relevant sections of the Government Acts pertaining to HIV/AIDS and discrimination are listed in the policy.

The College has responsibilities as an employer, under the Equal Opportunity Act 2011, the Health Legislation Amendment Act 2012 and the Occupational, Health and Safety Act 2004.

#### Vicarious liability

Centres should be aware that they would generally be liable for any contravention of the equal opportunity and discrimination legislation by employees. If there is a contravention of the legislation, it would assist centres trying to avoid liability if they can prove that they took reasonable precautions to prevent the contravention of the legislation, such as the provision of staff education and training.

Hepatitis A (HAV) is primarily transmitted through faeces, when faeces get onto the hands of people and then moves from hand to mouth. It can also be spread through contaminated water or food (when faeces gets into the water supply or food) NHMRC. The NHMRC recommends HAV vaccination for staff working with children, particularly those who work with children who are not toilet trained. The NHMRC recommends vaccination for child day-care and preschool personnel.

“Occupationally acquired HAV is not uncommon occurrence among child day-care and preschool personnel. Vaccination is strongly recommended for these staff, and must be considered as a standard workplace health and safety practice”.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

Hepatitis B (HBV) transmission is through direct contact with blood and blood products and through saliva, semen and vaginal fluids. It is not spread through food or water or through normal social contact. Exclusion is not necessary.

## Training

Training in infection control can be provided on the job, by other staff or by an external source.

## Procedures

The Head of Primary is responsible for providing access to information for all staff and users of the Early Learning Centre about:

- The basic facts on preventative measures for HIV/AIDS and hepatitis Where they may access further information Support services as required.
- Ensuring that employees understand the concepts of discrimination and harassment, and implementing comprehensive grievance procedures that provide effective processes for resolving grievances, at all levels of the organisation.
- Ensuring staff and users have access to materials as required that will enable them to implement infection control procedures. [This will include bleach, disposable gloves, paper towels and sealable bags].
- Providing, as far as practicable, a healthy and safe environment.
- Displaying and complying with the Step-by-Step Procedure on Infection Control relating to Blood Borne Viruses (Appendix 1). Both existing staff and new staff as part of their induction will be made aware of this procedure.
- Providing a booklet/publication on infection control to be kept at the Early Learning Centre. (Information on publications on infection control is contained in Appendix 2 of this policy).
- Reviewing staff training needs in relation to infection control on an annual basis (refer to Appendix 2 for training providers).
- Keeping confidential any verbal or written information relating to the HIV/AIDS or blood borne disease status and condition of any child, staff member or other person involved in the Early Learning Centre.

The staff are responsible for:

- Implementing infection control procedures for all body fluid spills and abrasions (refer to Appendix 1).
- Taking reasonable care to protect their own health and safety and that of others in the workplace at all times.
- Recording any exposure to a body fluid spill or abrasion in the accident, injury and illness book for children and the incident/injury register for staff, students and volunteers.
- Notifying the Head of Primary if they believe they have been exposed to HIV/AIDS or hepatitis at the Early Learning Centre as soon as is practicable.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Seeking the advice of a qualified medical practitioner as soon as practicable following any incident, which they believe, may have resulted in exposure to HIV/AIDS or hepatitis.
- Keeping confidential any verbal or written information relating to the HIV/AIDS or blood borne disease status and condition of any child, staff member or other person involved in the centre.
- Exclusion of children/staff with hepatitis
- (Refer to centre's Infectious Diseases Policy, Appendix 2) lists exclusion periods for children with Hepatitis A. This exclusion period will also apply to infected staff members. Parents/guardians are requested to inform the staff if their child has contracted either of these diseases. Staff are also required to inform the Head of Primary.

The parents/guardians are responsible for:

- Refer to Infectious Diseases Policy for guidelines to follow when notified of a case of Hepatitis A.
- Informing the Early Learning Centre as soon as possible if their child has Hepatitis A.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 1

### STEP-BY-STEP PROCEDURE FOR INFECTION CONTROL RELATING TO BLOOD BORNE VIRUSES

#### Blood spills

Anyone working with children, who may need to respond to an incident involving blood, needs to cover cuts, sores or abrasions they may have on their hands and arms with waterproof dressings, while at Bayside Christian College Early Learning Centre.

Equipment and procedures for managing blood spills and providing first aid for patients who are bleeding are detailed below:

#### Cleaning and removal of blood spills

##### Equipment

- Disposable gloves
- Disposable plastic bags
- Warm water and detergent
- Disposable towels

##### Procedure

1. Put on disposable gloves
2. Cover the spill with paper towel
3. Carefully remove the paper towel and contents
4. Place towel and gloves in disposable plastic bag and seal bag and place it in rubbish bin inaccessible to children
5. Put on new gloves and clean the area with warm water and detergent and allow to dry
6. Place gloves into disposable plastic bag, seal bag and place it in rubbish bin inaccessible to children
7. Wash hands in warm soapy water Providing first aid for children who are bleeding

#### Providing first aid for patients who are bleeding

##### Equipment

- Antiseptic?
- Disposable plastic bags
- Disposable gloves
- Waterproof dressings
- Disposable towels
- Warm water and detergent

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

### Procedure

1. Adult treating child to cover any uncovered cuts, sores or abrasions on arms and hands with waterproof dressings.
2. If time, put on disposable gloves. (If gloves are not available, get someone who is wearing gloves to take over from you as soon as possible. Then wash and dry your hands).
3. When cleaning or treating a child's face which has blood on it, ensure you are not at eye level with the child as there is a chance, through their crying or coughing, for their blood to enter your eyes or mouth. If blood does enter the eye, rinse the eyes, while they are open, gently but thoroughly for at least 30 seconds. If blood does enter the mouth, spit it out and then rinse the mouth several times with water.
4. Raise the injured part above the level of the heart, unless you suspect a broken bone.
5. Clean the affected area and cover the wound with waterproof dressing.
6. Remove gloves and place in disposable plastic bag, seal the bag and dispose of in a rubbish bin inaccessible to children.
7. Wash hands in warm soapy water
8. Contaminated clothing or sick room linen should be removed and stored in leak-proof disposable plastic bags until they can be washed as follows using gloves:
  - Rinse in cold water
  - Soak in 1:10 bleach solution (1 part bleach 10 parts water) for 30 minutes, then rinse off bleach
  - After soaking, wash clothes and sick room linen separately from other laundry, at a high temperature on a long cycle
  - Dry on a hot cycle or in the sun. Note: If your centre does not have facilities for washing linen the soiled clothing will be given to the parents/guardians for cleaning.

### Safe disposal of discarded needles/syringes

Equipment and procedures for the safe disposal of discarded needles and syringes are detailed below:

#### Equipment

- Disposable gloves
- Long handled tongs
- Disposable plastic bags
- 'Sharps' syringe disposal container or rigid-walled, puncture resistant, sealable container.

#### Procedure

NOTE: Under no circumstances should work experience students or children be asked or encouraged to pick up needles/syringes.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



1. Put on disposable gloves
2. Do not try to recap the needle
3. Place the disposal container on the ground next to the syringe
4. Pick up the syringe from the middle, keeping the sharp end away from you at all times
5. Place the syringe, needle point down, in the disposal container and securely place lid on container
6. Repeat this procedure to pick up all syringes and/or unattached needles
7. Remove gloves and place in disposable plastic bag, seal and dispose of in a rubbish bin inaccessible to children
8. Wash hands in warm, soapy water and dry.
9. Syringe disposal containers or syringes must not be put in normal waste disposal bins.
10. Syringe disposal containers may be disposed of by:
  - Telephoning the Disposal Help Line on 1800 552355 for the location of the nearest needle exchange outlet or public disposal bin
  - Contacting the local hospital
  - Contacting the Risk Reduction Unit at the Department of Human Services on 03 9637 4000
  - Contacting the environmental officer (health surveyor) at the local municipal/council offices; also for any further concerns about syringe disposal.

### Needle stick injuries


The Department of Human Services has indicated that the risk of infection from needle stick injury is low and should not cause alarm.

The following procedures should be observed in case of needle stick injury:

1. Stay calm and encourage the wound to bleed (gently squeeze)
2. Wash the affected area with cold running water and soap
3. Dry area, apply antiseptic to the wound and cover with a waterproof dressing if necessary
4. If a staff member, report the injury to the Committee as soon as practicable
5. If a child, contact the parents/guardians as soon as practicable
6. See a doctor as soon as possible and report the circumstances of the injury.

This procedure is based on advice provided by the Department of Education, Employment and Training, the Department of Human Services and the NHMRC

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



## Appendix 2

### RELEVANT PUBLICATIONS AND TRAINING PROVIDERS

#### Organisation

Department of Human Services Health Protection Section GPO Box 1670N  
Melbourne 3000

(03) 9637 4099

#### Publications/Services

- DHS Children's Services Guide [www.publications.gov.au](http://www.publications.gov.au)
- Equal Opportunity Commission Victoria (EOCV) Level 3/380 Lonsdale Street  
Melbourne (03) 9281 7111 1800 134 142 Email [eoc@vicnet.net.au](mailto:eoc@vicnet.net.au) or  
[www.equalopportunitycommission.vic.gov.au](http://www.equalopportunitycommission.vic.gov.au)
- HIV, AIDS & Hepatitis C - Know your rights brochure
- [www.hepcvic.org.au](http://www.hepcvic.org.au)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Hygiene Policy

### Policy statement

#### Values

Bayside Christian College is committed to the provision of:

- A clean and hygienic environment.
- An environment which provides infection control methods to minimise the spread and risks of infectious diseases and illnesses in children, staff, and any other persons in attendance at the centre.

#### Purpose

This policy will set out the practices and procedures to be followed in order to ensure up-to-date infection control procedures and the provision of an environment which is clean and hygienic.

#### Scope

This policy applies to all staff, parents/guardians, volunteers, students and any other person involved in the centre.

#### Background and legislation

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011
- Regulation 103 requires that premises, furniture and equipment to be safe, clean and in good repair.
- Regulation 106 requires that there are adequate arrangements for dealing with soiled clothing and linen.

#### Definitions

**DHS:** Department of Human Services

**Hygiene:** Principles of maintaining health and the practices put in place to achieve this

**Neutral detergent:** Available commercially and labelled as “neutral” or “neutral pH”

**NHMRC:** National Health and Medical Research Council

#### Procedures

The Head of Primary is responsible for:

- Ensuring new staff are provided a copy of this policy
- Arranging for the centre to be cleaned regularly including floors and other surfaces

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Contacting the local council environmental health officer for information about obtaining a disposal unit and instructions for its use, if syringes are found at the centre
- Ensuring the sand, tanbark, paths and grassed areas, are monitored regularly to ensure these are maintained in a safe manner.

The staff are responsible for:

#### General

- Using colour coded sponges/cloths in each area, for example blue in the bathroom and yellow in the kitchen. Ensuring sponges are stored separately.
- Informing the committee/board of any issues which impact on the implementation of this policy.
- Encouraging parents/guardians to keep children who are unwell at home to prevent the spread of infection to other children.
- Contacting the parents/guardians of a child, to collect their child if he/she becomes ill at the centre. (Regulation 86).
- Notifying parents/guardians, as soon as practicable, of the occurrence of an infectious disease at the centre through a notice on the board at the centre, or the internal communication system. (Regulation 88).

#### Toileting of children:

- Ensuring soap and drying facilities are available at all times when children are in attendance. This includes ensuring paper towels are available if hand-dryers are not working
- Ensuring children do not make common use of items related to personal care, for example, hand towels for drying hands, toothbrushes, hairbrushes. (Regulation 109)
- Encouraging children to flush the toilet after use
- Encouraging and assisting (where required) children to wash their hands according to hand
- Washing Guidelines (Appendix 1) after toileting
- Encouraging children to tell a staff member if they have had a toileting accident
- Ensuring toileting facilities are maintained in a safe, clean and hygienic manner whilst children are in attendance. This requires periodic checking of the bathroom area
- Respecting diverse styles of toileting children due to cultural or religious practice
- Respecting the possible need to maintain privacy of toileting and dressing
- Encouraging children not to touch the tap after they have washed and dried their hands

#### Cleaning toys, clothing and the Centre:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Preferably purchasing toys which are easy to maintain and clean
- Removing toys which a child has sneezed or coughed on (place in a toys to be cleaned box)
- Wearing gloves when cleaning. (General purpose gloves are sufficient, wash and hang outside to dry when finished)
- Wiping over books with a moist cloth with detergent on it
- Where applicable, washing mattress covers and linen.

Children's contact with one another:

- Educating and encouraging children in good personal hygiene practices such as:
- Washing their hands after blowing and wiping their nose
- Not touching each other where they are cut or bleeding
- Disposing of used tissues promptly and appropriately, and not lending them to other children
- Using their own equipment for personal care, for example, toothbrushes, hats, brushes, combs.

Indoor and outdoor environment:

- Keeping the indoor and outdoor environments as clean and hygienic as possible at all times.
- Promptly removing blood, urine and faeces, either indoors or outdoors, using the appropriate cleaning procedures.
- Covering the sandpit when not in use, to prevent contamination by animals.
- Removing any animal faeces promptly and disposing of in an appropriate manner.
- Disposing of any dead creatures found on the premises in an appropriate manner.
- Dealing with spills of blood and other body fluids/safe disposal of discarded needles/syringes - Refer to centre's HIV/Aids and Hepatitis policy

The parents/guardians are responsible for:

- Ensuring immunisation details on their child/ren are up-to-date on their child/ren's enrolment form.
- Keeping their child/ren home if they are unwell or have an excludable infectious disease.
- Informing the centre if their child has an infectious disease.
- Participating in the maintenance program of the centre (where applicable).

Immunisation

Refer to centre's Illness Policy

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

### Related documents

- DHS Children's Services Guide.  
<http://www.education.vic.gov.au/ecsmanagement/careandkinder/csg/default.htm>
- DHS, Food Safety Unit, [www.health.vic.gov.au/foodsafety/index.htm](http://www.health.vic.gov.au/foodsafety/index.htm), telephone toll free 1300 364 352, email [foodsafety@dhs.vic.gov.au](mailto:foodsafety@dhs.vic.gov.au)
- NHMRC (2005), Staying Healthy in Child Care, 4th edition available at <http://www.nhmrc.gov.au/guidelines> or email [nhmrc.publications@nhmrc.gov.au](mailto:nhmrc.publications@nhmrc.gov.au)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 1

### Hand washing guidelines

1. Use liquid soap (preferable) and running water
2. Wash hands vigorously and count to 10
3. Rinse hands well and count to 10
4. Turn off the tap with a piece of paper towel
5. Dry hands well with new paper towel (preferable), a dryer or your own cloth.

### When to wash hands (Staff/Volunteers)

- When you arrive at the centre
- Before handling food,
- Before eating
- After removing gloves
- After going to the toilet
- After cleaning up blood, faeces or vomit
- After wiping a nose, a child's or your own
- Before giving medication
- After handling garbage
- After coming in from outside play
- Before going home.

### When to wash the children's hands:

- On arrival at the centre (parents can help with this)
- Before eating and handling food
- After going to the toilet
- After touching nose secretions
- After coming in contact with blood, faeces or vomit

Suggested practice is to provide this information at each hand washing area

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

## Illness Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Responding to the needs of the child if the child becomes ill, or is traumatised whilst attending the Early Learning Centre.
- Ensuring safe and appropriate administration of medication in accordance with legislative requirements.
- Providing up-to-date information for parents/guardians and staff regarding immunisation and the protection of all children from infectious diseases.
- Complying with the exclusion requirements for infectious diseases set out in the Communicable Diseases Exclusion Table (refer to Infectious Diseases Policy, Appendix 2).

#### Purpose

This policy will clearly define:

- Procedures to be followed if a child becomes sick
- Responsibilities of staff and parents/guardians.

#### Scope

This policy applies to the staff, parents/guardians, children, volunteers and students involved with the Early Learning Centre.

#### Background and Legislation

- The Education and Care Services National Law 2011
- The Education and Care Services National Regulations 2011
- Health (Infectious Diseases) Regulations 2001
- Occupational Health and Safety Act 2004.

#### Definition

**Immunisation status:** The extent to which a child has been immunised in relation to the recommended immunisation schedule.

**Infectious disease:** A disease that could be spread by air, water, interpersonal contact etc.

**Injury:** Any harm or damage to a person.

**Medication:** Any substance that is administered for the treatment of an illness or condition.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020



The College is responsible for:

- Providing and maintaining a suitably equipped First Aid Kit.
- Rostering at least one staff member with the required first aid qualification on duty whenever children are being cared for or educated by the Early Learning Centre.
- Ensuring completed medication, accident, injury and illness records are archived and stored securely for 25 years.

The staff are responsible for:

- Maintaining children's enrolment records regarding their current immunisation status.
- Ensuring children's enrolment forms provide authorisation for the Early Learning Centre to seek emergency medical treatment by a medical practitioner, hospital or ambulance service.
- Ensuring that the Step-by-Step Procedure for Infection Control Relating to Blood Borne Viruses is displayed in a prominent position within the Early Learning Centre and implemented at all times.

The parents/guardians are responsible for:

- Providing authorisation in their child's enrolment record for the Early Learning Centre to seek emergency medical treatment by a medical practitioner, hospital or ambulance centre.
- All costs associated with an ambulance service called to attend their child at the Early Learning Centre.
- Notifying the Early Learning Centre of any other medical conditions/or needs and any management procedure to be followed with respect to that condition or need.
- Implementing the Early Learning Centre's Step-by-Step Infection Control Procedures for Blood Borne Viruses when assisting at the centre.
- Procedures when ill children are sent to the centre or become ill at the centre.

The College is responsible for:

- Notifying, as soon as practicable, the ISV of any illness requiring treatment by a registered medical practitioner or admission to a hospital and forwarding a copy of the accident, injury and illness record.
- Investigating possible causes of the illness or sources of infection and taking appropriate action if required. Refer to Infectious Diseases Policy if required.

The staff are responsible for:

- Notifying parents/guardians on arrival, or as soon as symptoms present, if they believe the child has:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Gastroenteritis
- Respiratory infection (more than just the common cold)
- Hand, foot and mouth disease (when weeping blisters are present)
- Other symptoms as listed in Appendix 1 of this policy
- Any of the infectious diseases listed in the DHS Communicable Diseases Exclusion Table (refer to Infectious Diseases Policy, Appendix 2).
- Parents/guardians will be advised that the child is not able to attend the program until better, or if an infectious disease, according to the DHS Communicable Diseases Exclusion Table.
- Taking the child's temperature and recording this in the accident, injury and illness book.
- Washing hands after wiping a child's nose or attending to a child who might be sick.
- Keeping an ill child comfortable, away from other children and under observation until the parents/guardians or person authorised to collect the child from the Early Learning Centre arrives.
- Recording details of the illness/symptoms shown by the child in the accident, injury and illness book.
- Notifying the Head of Primary of any illness that requires treatment by a medical practitioner or an admission to hospital.

The parents/guardians are responsible for:

- Collecting their child from the Early Learning Centre as soon as possible after being notified their child is unwell.
- Keeping their child at home until well or until the specified exclusion time has elapsed.


#### Related documents

- DHS Children's Services Guide, <http://www.education.vic.gov.au/ecsmangement/careankinder/csg/default.htm>
- DHS Communicable Diseases Exclusion Table, available from [www.health.vic.gov.au/ideas](http://www.health.vic.gov.au/ideas). Go to guidelines and scroll to table in list. Further information is obtainable from the DHS Communicable Diseases Unit on 1300 651 160
- DHS, Community Service Organisations Insurance Manual 2005-2006 available on the Funded Agency Channel or [www.vmia.vic.gov.au](http://www.vmia.vic.gov.au)
- NHMRC(2005), Staying Healthy in Child Care, 4th edition, available at <http://www.nhmrc.gov.au/guidelines> or email [nhmrc.publications@nhmrc.gov.au](mailto:nhmrc.publications@nhmrc.gov.au) or telephone 1800 020 103 to request a free copy.


#### Related ELC policies

- Accident, Injury and Medical Emergency

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Administration of Medication
- Refer to Communicable Diseases Exclusion Table under our Infectious Diseases policy.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director	
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020	

## Appendix 1

### CHECKING FOR SYMPTOMS OF ILLNESS

Be aware of symptoms of illness throughout the day. The publication Staying Healthy in Child Care recommends the following things to look for:

- Severe, persistent or prolonged coughing (child goes red or blue in the face, and makes a high- pitched croupy or whooping sound after coughing)
- Breathing trouble
- Yellowish skin or eyes
- Unusual spots or rashes
- Patch of infected skin (crusty skin or discharging yellow area of skin)
- Feverish appearance
- Unusual behaviour (child is cranky or less active than usual, cries more than usual, seems uncomfortable or just seems unwell)
- Frequent scratching of the scalp or skin
- Sore throat or difficulty in swallowing
- Loss of appetite

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Infectious Diseases Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- As far as practicable, providing a safe and healthy environment for all children, staff, and any other persons participating in the program.
- Responding to the needs of the child if the child is injured, becomes ill, or is traumatised whilst attending the Early Learning Centre.
- Providing up-to-date information for families and staff regarding immunisation and the protection of all children from infectious diseases

#### Purpose

This policy will clearly define:

- Procedures to be followed if a child is ill or has an infectious disease.
- Responsibilities of staff, parents/guardians and Committee.

#### Scope

This policy applies to the Bayside Christian College, staff, parents/guardians, children, volunteers and students involved with the Early Learning Centre.

#### Background Information

Public Health and Wellbeing Act 2008 (amendment, No Jab, No Play, 2015). The Education and Care Services National Regulations 2011 (regulation 168(2)(b)) require centres to have procedures for dealing with illness and emergency care.

It is recommended to display these contact numbers at each telephone:

- Ambulance contact card
- DHS regional office
- Asthma Victoria 03 9326 7055 or toll free 1800 645 130  
advice@asthma.org.au
- Police
- Victorian Poisons Information Centre 13 11 26
- Local Fire Brigade

### Handling infectious diseases

Additional information may be found in the HIV/AIDS and Hepatitis Policy.

The blue book: guidelines for the control of infectious diseases (2005) is published by the Communicable Diseases Section, Public Health Group, Victorian Department of Human Services. The book can be accessed at:  
<http://ideas.health.vic.gov.au/bluebook.asp>

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Procedures

The Head of Primary is responsible for:

- Ensuring the Communicable Diseases Exclusion Table (Appendix 1) is displayed in a prominent position within the Early Learning Centre.
- Displaying the current Local Government immunisation dates, times and locations at the Early Learning Centre.
- Ensuring a child's enrolment into the Early Learning Centre is not finalised until parents/guardians provide the centre with an immunisation status certificate that shows their child:
  - is up to date with vaccinations for their age OR
  - is on a vaccine catch-up schedule OR
  - has a medical condition preventing them from being fully vaccinated.
- Ensuring parents/guardians provide the centre with an updated immunisation history statement for their child at the time of receiving any new immunisations.

Staff are responsible for:

- Contacting the DHS Communicable Diseases section on 1300 651 160 to notify if a child is suffering from a vaccine preventable disease.
- Contacting the DHS Communicable Diseases section on 1300 651 160 to notify if a child has a communicable disease as listed in the Communicable Diseases Exclusion Table (Appendix 1) and to seek advice on exclusion of cases and contacts.
- Ensuring the exclusion requirements for infectious diseases is adhered to.
- Notifying the Head of Primary and parents/guardians of any outbreak of an infectious disease within the Early Learning Centre.
- Information is to be displayed in a prominent position.
- Requesting parents/guardians to notify the Early Learning Centre if their child has an infectious disease.

The parents/guardians are responsible for:

- Notifying the Early Learning Centre if their child has an infectious disease.
- Providing accurate and current information regarding the immunisation status of their child/children when they enroll and any subsequent changes to this whilst they are attending Bayside Christian College Early Learning Centre.
- Complying with the Communicable Diseases Exclusion Table

## Procedure relating to children who are not immunised

The Head of Primary is responsible for:

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring parents/guardians comply with the Communicable Diseases Exclusion Table (Appendix 1).

Staff are responsible for:

- Advising the parents/guardians on enrolment that the Communicable Diseases Exclusion Table (Appendix 1) will be followed in regard to the outbreak of any infectious diseases.

The parents/guardians are responsible for:

- Complying with the Communicable Diseases Exclusion Table (Appendix 1).


## Appendix 1

Condition	Exclusion of Cases	Exclusion of Contacts
<b>Amoebiasis (Entamoeba histolytica)</b>	Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.
<b>Campylobacter</b>	Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.
<b>Chickenpox</b>	Exclude until all blisters have dried. This is usually at least 5 days after the rash appears in unimmunised children, but may be less in previously immunised children.	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise not excluded.
<b>Conjunctivitis</b>	Exclude until discharge from eyes has ceased.	Not excluded.
<b>Diarrhoea</b>	Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.
<b>Diphtheria</b>	Exclude until medical certificate of recovery is received following at least two negative throat swabs, the first not less than 24 hours after finishing a course of antibiotics and the other 48 hours later.	Exclude family/household contacts until cleared to return by the Director.
<b>Hand, Foot and Mouth disease</b>	Exclude until all blisters have dried.	Not excluded.
<b>Haemophilus influenzae type b (Hib)</b>	Exclude until at least 4 days of appropriate antibiotic treatment has been completed.	Not excluded.
<b>Hepatitis A</b>	Exclude until a medical certificate of recovery is	Not excluded.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

	received, but not before 7 days after the onset of jaundice or illness.	
<b>Hepatitis B</b>	Exclusion is not necessary.	Not excluded.
<b>Hepatitis C</b>	Exclusion is not necessary.	Not excluded.
<b>Herpes ("cold sores")</b>	Young children unable to comply with good hygiene practices should be excluded while the lesion is weeping. Lesions to be covered by dressing, where possible.	Not excluded.

<b>Condition</b>	<b>Exclusion of Cases</b>	<b>Exclusion of Contacts</b>
<b>Human immuno-deficiency virus infection (HIV/AIDS)</b>	Exclusion is not necessary.	Not excluded.
<b>Impetigo</b>	Exclude until appropriate treatment has commenced. Sores on exposed surfaces must be covered with a watertight dressing.	Not excluded.
<b>Influenza and influenza like illnesses</b>	Exclude until well.	Not excluded unless considered necessary by the Secretary.
<b>Leprosy</b>	Exclude until approval to return has been given by the Secretary.	Not excluded.
<b>Measles*</b>	Exclude for at least 4 days after onset of rash.	Immunised contacts not excluded. Unimmunised contacts should be excluded until 14 days after the first day of appearance of rash in the last case. If unimmunised contacts are vaccinated within 72 hours of their first contact with the first case, or received NHIG within 144 hours of exposure, they may return to the facility.
<b>Meningitis (bacteria - other than meningococcal meningitis)</b>	Exclude until well.	Not excluded.
<b>Meningococcal</b>	Exclude until adequate	Not excluded if receiving


Bayside Christian College Early Learning Centre Policies and Procedures Manual						
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director	
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020	



<b>infection*</b>	carrier eradication therapy has been completed.	carrier eradication therapy.
<b>Mumps*</b>	Exclude for 9 days or until swelling goes down (whichever is sooner).	Not excluded.
<b>Pertussis*(whooping cough)</b>	Exclude the child for 21 days after the onset of cough or until they have completed 5 days of a course of antibiotic treatment.	Contacts aged less than 7 years in the same room as the case who have not received three effective doses of pertussis vaccine should be excluded for 14 days after the last exposure to the infectious case, or until they have taken 5 days of a course of effective antibiotic treatment.
<b>Poliomyelitis*</b>	Exclude for at least 14 days from onset. Re-admit after receiving medical certificate of recovery.	Not excluded.
<b>Ringworm, scabies, pediculosis (head lice)</b>	Exclude until the day after appropriate treatment has commenced.	Not excluded.
<b>Rubella (german measles)</b>	Exclude until fully recovered or for at least four days after the onset of rash.	Not excluded.
<b>Salmonella, Shigella</b>	Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.
<b>Severe Acute Respiratory Syndrome (SARS)</b>	Exclude until medical certificate of recovery is produced.	Not excluded unless considered necessary by the Secretary.
<b>Streptococcal infection (including scarlet fever)</b>	Exclude until the child has received antibiotic treatment for at least 24 hours and the child feels well.	Not excluded.
<b>Tuberculosis</b>	Exclude until receipt of a medical certificate from the treating physician stating that the child is not considered to be infectious.	Not excluded.
<b>Typhoid fever (including paratyphoid fever)</b>	Exclude until approval to return has been given by the Secretary.	Not excluded unless considered necessary by the Secretary.
<b>Verotoxin producing Escherichia coli(VTEC)</b>	Exclude if required by the Secretary and only for the period specified by the	Not excluded.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

<b>Worms (Intestinal)</b>	Secretary. Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Nutrition and Food Safety Policy (Including Hot Drinks guidelines)

### Policy statement

#### Values

Bayside Christian College is committed to:

- Educating children and their parents/guardians about healthy food and healthy eating habits.
- Providing a pleasant and attractive place for meals and snack times and provide an environment for social learning and positive interaction.
- Ensuring the nutritional needs and/or dietary requirements of children are appropriately catered for, whilst they are attending the Early Learning Centre (refer to Appendix 1).
- Providing a flexible approach to serving and consuming food for children attending the Early Learning Centre.
- Complying with all legislative requirements.
- The safety and well being of all children enrolled at or visiting the centre.
- Taking all reasonable precautions to reduce potential hazards to children on the premises.
- The education of staff, parents/guardians, other users of the Early Learning Centre, and the community, in the prevention of scalds and burns from hot drinks.

#### Purpose

This policy will provide guidelines for the provision of safe, varied and inviting food that is of nutritional benefit to the children, and caters for the individual needs of the children attending the Early Learning Centre.

#### Scope

This policy applies to parents/guardians, staff and volunteers involved in the preparation and provision of food that will be consumed by children at the Early Learning Centre.

#### Procedures

Food and drink to be provided by the Early Learning Centre

- Water will be available for the children to consume at all times during indoor and outdoor activities.
- On an occasional basis, the centre will provide food that has been produced through food related activities involving the children.

The Head of Primary is responsible for:

- Providing up-to-date information to parents/guardians on the safe provision of food for their children.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Ensuring staff are informed of current information relating to nutrition and food safety.
- Monitoring staff compliance with food safety practices.
- The implementation of a cleaning schedule for the kitchen area. (Refer to Background information for ideas on a cleaning schedule.)
- Ensuring hot drinks provided at the Early Learning Centre comply with the guidelines outlined in Appendix 2.
- The provision of a calibrated thermometer, suitable for food preparation areas, to monitor temperature of fridge/freezer. (Glass thermometers with mercury in or near food preparation areas are not recommended).
- Checking if the thermometer is working at the start of each term.
- Ensuring food provided for sale at a fete, food stall, or any other event complies with the requirements of the food safety program. (Refer to Background information).
- Reviewing annually, in consultation with the staff, parents/guardians, the procedures for celebrations. The guidelines need to reflect the needs of families and children in relation to nutrition, cultural diversity, religion, and age appropriateness.

The staff are responsible for:

- Before handling food, washing hands according to the guidelines as provided in background information. If interrupted, to wash hands again before continuing.
- Ensuring that hand basins are only used for washing hands, faces, or cleaning teeth.
- Providing posters above washbasins with information on correct hand washing procedures.
- Ensuring the provision of soap and hand towels (if used) on a daily basis.
- Ensuring the provision of paper towels in the kitchen area.
- Keeping the kitchen clean and tidy at all times and complying with the cleaning schedule displayed in the kitchen. (Refer to Background information for ideas on cleaning schedules).
- Disposing of any eating or drinking utensils that are chipped, broken or cracked and informing the Head of Primary of any items that need replacement.
- Restricting the food preparation areas for that purpose only.
- Cleaning all food contact surfaces, appliances and equipment after use.
- Including discussions on nutrition and food safety in the children's program to increase awareness and understanding of the reasons for good practice.
- Role modelling acceptable social behaviour at snack and meal times.
- Ensuring children have access to water whenever it is needed/requested.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Removing hazardous food and offering child/ren an alternative snack. Refer to the Kidsafe information sheet for information on potential choking hazards.<http://www.gtp.com.au/kidsafeqld/inewsfiles/inews.97362.1.pdf>
- Informing the Head of Primary six months prior to the expiration of first aid qualifications.
- Covering all wounds or cuts on hands or arms with brightly coloured wound strips or bandage. If the wound is on the hand, disposable gloves are to be worn over the top of the wound strip if involved in food handling.
- To notify the Head of Primary of inability to work if affected with vomiting or diarrhoea within the last 48 hours.
- Ensuring persons suffering from diseases which are likely to be transmitted through food that they are not involved in food handling. Refer to background information for exclusion table.
- Providing guidelines to parents/guardians, regarding appropriate food for their child to bring to the Early Learning Centre. These will be developed in consultation with the Head of Primary. (Refer to Appendix 1).
- Complying with the hot drinks guidelines (Appendix 2).

### Children and eating

- Encouraging and directing children to wash their hands before they eat or drink.
- Teaching children to turn away and cover their mouth when they cough or sneeze and then to wash their hands.
- Ensuring tables are wiped with appropriate cleaning materials prior to children using them for food consumption.
- Making sure children are sitting when they eat and drink.
- Washing and sanitising all dropped utensils prior to re-using.
- Discouraging children from sharing utensils and sharing food they have begun to eat.
- Promptly cleaning up any food or drink that is dropped indoors or outdoors.

### Preparing food

- Using separate utensils, chopping boards and other equipment for raw and for ready-to-eat foods to avoid cross-contamination. If this is not possible, thoroughly wash and sanitise equipment between uses.
- Removing food items in damaged packaging such as dented cans, leaking packages, or cracked eggs.

### Handling food

- Using utensils such as tongs, spoons, and spatulas for cooked or ready-to-eat foods. Raw food which will be cooked can be safely handled with bare clean hands.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Washing hands before putting on gloves and putting on new gloves when changing from raw food to ready-to-eat food.
- Where required maintaining hot food at over 60o and cold food at below 5o
- Checking the operating temperature of refrigerators and freezers. Reporting malfunctioning equipment to the Head of Primary.
- Ensuring any items placed in the fridge/freezer are covered with a lid, foil or plastic film.
- Using paper towels to clean up spills.

### Involving children in cooking

- Complying with the Dietary Guidelines for Children and Adolescents April 2003 (Appendix 1).
- Ensuring adequate supervision is available for the planned experience.
- Ensuring long hair is tied up.
- Choosing age-appropriate cooking experiences with regard to size and texture of food.
- Providing children with clean protective aprons or smocks.
- Respecting cultural and/or personal food differences.
- Ensuring children wash their hands before participating in the cooking experience.
- Only preparing foods that will be cooked before eating, for example biscuits, pizza, soup.
- Immediately cleaning up any food dropped on the floor.
- Catering for children who have special dietary requirements (including allergies) for health, medical or cultural reasons.

### Food brought from home for special occasions

- Ensuring food provided for celebrations is kept in a container or covered with foil or plastic wrap.
- Keeping food in the refrigerator until it is to be served.
- Providing details to families on safe food handling practices when providing food for special occasions.

The parents/guardians are responsible for:

- Providing details of specific nutritional requirements (including allergies) on their child's enrolment form and to discuss these with the qualified staff member prior to the child commencing at the Early Learning Centre and whenever these requirements change.
- Providing nutritional food and drinks for snacks, lunch, and celebrations consistent with the Early Learning Centre policy.
- Clearly labeling bottles, other drinks and lunch boxes with the child's name,.
- Washing hands if participating in food preparation.
- Complying with the hot drinks guidelines (Appendix 2).

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

The parents/guardians are advised to:

- Avoid peanuts, other nuts and nut products, as well as products such as muesli bars that are produced on the same equipment as products containing nuts. Please read the product packaging carefully.
- Put a frozen container, such as a frozen drink, in the lunch box with food that is normally refrigerated. Alternatively, use an insulated lunch box or a cooler.
- Avoid including food that is normally kept in the refrigerator, especially during the summer months.
- Not to include perishable foods which have just been cooked or warmed, such as hamburgers or boiled eggs. Such food should be cooled in the refrigerator before being packed for lunches.

### Background Information

Food poisoning and infectious disease can be a serious health problem for children. If food is not safely stored or properly handled, bacteria can multiply to dangerous levels and cause illness. The use of safe and hygienic food storage and handling practices can prevent food contamination and the transmission of bacteria and infectious disease amongst children and adults. The staff, parents/guardians and any other person involved in handling food has an important responsibility to maintain safe and hygienic food practices.

Food poisoning is caused by the growth of bacteria in food. This occurs when high risk foods such as meat, poultry, eggs, seafood, and dairy products are left to sit in the “temperature danger zone” (between 5 and 60 Celsius). Centres need to ensure that any food in this temperature zone stays there for as little times as possible.

### Guidelines for hand washing

- Use liquid soap (preferable) and running water.
- Wash hands vigorously and count to ten.
- Rinse hands well and count to ten.
- Dry hands well with a dryer or hand towel. Suggested practice is to provide this information at each hand washing area.

### Ideas for cleaning schedules

A cleaning schedule ensures that cleaning is conducted in a structured and routine manner. The Health and Safety in Children’s Centres, Model Policies and Practices (2003), recommends the use of a neutral detergent and water for general cleaning and a chemical sanitiser for food contact surfaces and utensils. A good cleaning schedule will include such items as:

*The cleaning tasks.*

- The frequency of cleaning – daily, weekly, monthly, quarterly items to be listed.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

- The method of cleaning, including chemicals to be used (if not provided by the cleaner).
- The person(s) responsible for each task.

An example of items to include in a cleaning schedule:

- Use designated cleaning cloths and mops for designated areas. These cloths should be stored separately.
- Clean areas with warm soapy water as soon as practicable after the preparation of food and drinks.
- Wash all utensils, crockery, plastic wear and glasses in warm soapy water and rinse in hot water. Leave dishes to air dry, do not place a tea towel over them.
- Discard any plastic plates, bowls, cups or chopping boards with deep scratches.
- The kitchen floor is swept, mopped and the rubbish bin emptied daily (specify who is responsible).
- All kitchen cupboards and drawers are to be cleaned internally and externally with warm soapy water. (Specify monthly, quarterly and who is responsible).
- Appliances are cleaned with warm soapy water [e.g. monthly]. It is suggested to itemise appliances such as fridges and microwaves as these need regular cleaning.
- The rubbish bin is washed with warm soapy water and sanitised each week and wiped over daily as required.

### Working bees

If working bees are organised each term a schedule of kitchen cleaning to be written for participants to tick off. For example:

- Remove items from cupboards and wipe all surfaces with warm soapy water and surface spray.

### Using gloves

Gloves are not a substitute for hand washing. If gloves are used, care should be taken to ensure hygienic practice when handling food.

### Food brought from outside

Safe storage of food is a key issue for parents/guardians providing food for their children to consume at the Early Learning Centre. The information could be provided to parents/guardians by including an article in the newsletter at the start of the year and again prior to summer. In addition brochures can be provided on safe food handling from Food Safety Victoria.

*Parents/guardians should be advised to:*

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



- Put a frozen container, such as a frozen drink, in the lunch box with food that is normally refrigerated. Alternatively, they can use an insulated lunch box or a cooler.
- Avoid including food that is normally kept in the refrigerator, especially during the summer months.
- Not to include perishable foods which have just been cooked or warmed, such as hamburgers or boiled eggs. Such food should be cooled in the refrigerator before being packed for lunches.

### Food stalls

- In May 2001 the Food Act 1990 was amended to include the requirement for a Food Safety Program before being issued a permit. A permit needs to be obtained from your Local Council's Health Services Unit.
- A Food Safety Program template has been developed by the Department of Human Services to assist centres to comply with this requirement. This can be accessed from: [www.health.vic.gov.au/foodsafety](http://www.health.vic.gov.au/foodsafety)

### Resources

- Kids 'Go for your life' is an initiative managed by Diabetes Australia (Vic) and the Cancer Council of Victoria and supported by the Victorian Government. For information contact: 1300 73 98 99 or visit [www.goforyourlife.vic.gov.au](http://www.goforyourlife.vic.gov.au)
- Food Safety Victoria GPO Box 1670N MELBOURNE VIC 3000 Phone: 03 9637 4085 Fax: 03 9637 5320 Toll free: 1300 364 352 Email: [foodsafety@dhs.vic.gov.au](mailto:foodsafety@dhs.vic.gov.au)
- Food Standards Australia New Zealand PO Box 7186 CANBERRA ACT 2610 Ph: 02 6271 2222
- Fax: 02 6271 2278 Email: [info@foodstandards.gov.au](mailto:info@foodstandards.gov.au) Website: [www.foodstandards.gov.au](http://www.foodstandards.gov.au)
- The Melbourne Market Authority has produced a range of resources to support parents/guardians and professionals with recipes, preparation tips and seasonal information.
- Telephone 03 9258 6100 Email [info@melbournemarktets.com.au](mailto:info@melbournemarktets.com.au) Website: [www.melbournemarkets.com.au](http://www.melbournemarkets.com.au)

### References

- School of Public Health and Community Medicine, Second edition revised, 2003, Health and safety in Children's Centres, Model policies and practices. [http://www.sphcm.med.unsw.edu.au/SPHCMWeb.nsf/resources/CCModelPolicies.pdf/\\$file/CCModelPolicies.pdf](http://www.sphcm.med.unsw.edu.au/SPHCMWeb.nsf/resources/CCModelPolicies.pdf/$file/CCModelPolicies.pdf)

## Appendix 1


### DIETARY GUIDELINES FOR CHILDREN AND ADOLESCENTS IN AUSTRALIA (2003)

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
Version	1.5	Author	ELC Director	Owner	ELC Director
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020

The nutritional needs of children and adolescents are different from those of adults because children are growing and developing. The Dietary Guidelines for Children and Adolescents were developed by the National Health and Medical Research Council (NH&MRC) in 1995 and subsequently reviewed in 2003. These guidelines apply to the general population of healthy children from birth to 18 years.

1. Encourage and support breastfeeding
2. Children and adolescents need sufficient nutritious foods to grow and develop normally
  - Growth should be checked regularly for young children
3. Physical activity is important for all children and adolescents
4. Enjoy a wide variety of nutritious foods
5. Children and adolescents should be encouraged to:
  - Eat plenty of vegetables, legumes and fruits
  - Eat plenty of cereals (including breads, rice, pasta and noodles), preferably wholegrain
  - Include lean meat, fish, poultry and/or alternatives
  - Include milks, yoghurts, cheese and/or alternatives
  - Reduced fat milks are not suitable for young children under two years, because of their high energy needs, but reduced fat varieties should be encouraged for older children and adolescents
  - Choose water as a drink
  - Alcohol is not recommended for children.
6. Care should be taken to:
  - Limit saturated fat and moderate total fat intake
  - Low-fat diets are not suitable for infants
  - Choose foods low in salt
  - Consume only moderate amounts of sugars and foods containing added sugars.
7. Care for your child's food: prepare and store it safely.

***Please note these guidelines are not listed in order of importance.***

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Appendix 2

### Hot drinks guidelines

#### Purpose

The guidelines outline the provision of a safe environment for the children attending Bayside Christian College Early Learning Centre and procedures to minimise the risk of scalds or burns from hot drinks whilst complying with all relevant legislative requirements.

The guidelines promote the practice of excluding hot drinks from all areas accessed by children. Lukewarm drinks in mugs/cups/lidded mugs are not acceptable practice in areas accessed by children as they present the impression of being hot and do not support the implementation of safe practices through appropriate role modelling.

#### Background

“Burns and scalds are among the most distressing injuries that a child can receive. Although rarely fatal in children they may cause considerable pain, often need prolonged treatment and can result in lifelong disfigurement through scarring” (The Monash University Accident Research Centre (2004 p.11 Hazard 57)).

Each year in Victoria at least 350 children aged 0-4 years present to hospital emergency departments with hot drink scalds, most commonly from tea, coffee and boiled water. About 150 of these children require hospital admission. The most common scenario for scalds is a child pulling a cup of tea, coffee or hot water from its resting place (bench, table etc.) with the hot drink spilling over their head and face, upper arm and chest.

The Early Learning Centre recognises the role of educators and centre providers in educating parents/guardians and the community in burn and scald prevention through the provision of information, role-modeling and safe practices.

#### Procedures

##### General guidelines for the preparation of hot drinks

- Hot drinks are to be prepared in kitchen area.
- Hot drinks may be consumed in kitchen and office area according to criteria outlined in these guidelines.
- Hot drinks are not to be taken into children’s rooms, outdoor areas or any other area accessible to children whilst children are in attendance.

The staff are responsible for:

- The implementation of these guidelines.
- Ensuring parents/guardians on duty, visitors to the Early Learning Centre, students and volunteers are informed of the centre’s hot drink guidelines and the reasons for it.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Educating users of the centre in prevention of burns and scalds by providing information on safe practices to prevent burns and scalds in the home, including appropriate first aid for scalds. This can be provided in newsletters, noticeboard displays, informal discussions and by role modeling.
- Ensuring children do not have access to the kitchen or office area, the exception to this is toddlers/other children in attendance with parents/guardians on duty. These children need to be actively supervised by parents/guardians.
- Ensuring no hot drinks are consumed in the office area when children are present.
- Ensuring hot drinks being moved from the kitchen to office area is undertaken when the children are outdoors.
- Ensuring hot drinks are never left unattended.
- Ensuring alternative drink/s are offered at social events when it is decided hot drinks will not be provided. For example, juice, water, iced coffee.
- Ensuring that a staff member is present with a current First Aid qualification.
- Where staff believe the provision of hot drinks is necessary for a social event they must submit a written request to the Head of Primary for approval. As part of the request they must outline details of the social event including:
  - Anticipated numbers of children and adults present. This should include the estimated number of over three-year-old and under three-year-old children attending the social event.
  - Reasons for the request and if there is a variation to the social events procedure (refer to social event guidelines below) to outline the proposed procedure for the provision of hot drinks.

The Head of Primary is responsible for:

- Ensuring that a person is in attendance with a current first aid qualification for events outside operational hours when hot drinks are consumed.
- For reviewing and approving requests from staff to provide hot drinks at social events during operational hours.
- Dealing with any questions/concerns that arise in relation to any aspect of these guidelines.
- Providing a copy of the guidelines to other groups who may utilise the building, such as playgroups, birthday party groups.
- Reviewing and approving any changes to the guidelines.


## Social events

This includes events during operational hours and outside operational hours. For example, mother's day morning tea, grandparents day, working bee, family barbeque, and any other social event which is provided where children will be present at the Early Learning Centre.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

If hot drinks are to be provided the following conditions will apply:

- If using an urn it needs to be placed out of reach of all children.
- Children are not permitted in the kitchen area.
- Specific parents are nominated to serve hot drinks.
- A designated area is set aside for the consumption of hot drinks.
- Informing parents/guardians and other persons observed not complying with the guidelines of the guidelines and reasons for it.
- In circumstances where Bayside Christian College Early Learning Centre is utilised by community groups, these guidelines will apply to all users of the Centre. For example playgroups, birthday parties and other functions.
- Ensuring a person is in attendance with a current first aid qualification.

Bayside Christian College Early Learning Centre Policies and Procedures Manual						
Version	1.5	Author	ELC Director	Owner	ELC Director	
Approval Date	01/12/2011	Last Review	29/1/19	Next Review	29/1/2020	

## Sun Protection Policy

### Policy statement

#### Values

Bayside Christian College is committed to:

- Providing all Early Learning Centre children with protection from the harmful effects caused by too much exposure to the sun's ultraviolet radiation, during all aspects of the program.
- Educating children, parents/guardians and other participants at the Early Learning Centre on the harmful effects of too much exposure to the sun's ultraviolet radiation.

#### Purpose

This policy will provide:

- Guidelines for the protection of children, staff and other participants at Early Learning Centre from the harmful effects of too much exposure to ultraviolet radiation from the sun.
- Educative information for parents/guardians, staff, participants, and children attending the Early Learning Centre regarding the harmful effects of too much exposure to ultraviolet radiation from the sun.

#### Scope

This policy applies to staff children attending the Early Learning Centre, parents/guardians on duty and attending siblings, visiting children, students, volunteers and any other person participating in the program provided at the centre.

This policy will apply from the beginning of September until the end of April. Particular care will be taken during the middle of the day between 10 am and 2 pm (11 am and 3 pm daylight saving time) when UV Index levels reach their peak.

#### Background and legislation

Australia has the highest rate of skin cancer in the world. Too much exposure to ultraviolet (UV) radiation from the sun causes sunburn, skin damage and increases the risk of skin cancer. Sun exposure in the first 15 years of life contributes significantly to the lifetime risk of skin cancer.

#### Legislation

- The Education and Care Services National Regulations 2011
- The Education and Care Services National Law 2011
- The Occupational Health & Safety Act 2004
- The Health Act 1958

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Procedures

The Head of Primary is responsible for:

- Membership with the SunSmart early childhood program.
- Requesting children to bring an appropriate sun protective hat when attending the Early Learning Centre
- Requesting children wear appropriate sun protective clothing when attending the Early Learning Centre.
- Requesting staff to act as role models by wearing sun protective hats, clothing and sunglasses when outside, applying sunscreen and seeking shade whenever possible.
- Providing appropriate spare hats for the children and adults that will be laundered after each use.
- Ensuring there are Early Learning Centre hats available for purchase at the centre.
- Providing a supply of sunscreen for use on all persons to whom this policy applies.
- Reinforcing this policy through providing information to new users of the Early Learning Centre, and through newsletters, notice board displays and meetings.
- Ensuring there is a sufficient number of shelters and trees providing shade in the Early Learning Centre grounds.
- Considering the availability of shade when planning excursions and other outdoor events.
- Ensuring the policy is up to date with current SunSmart recommendations.

The staff are responsible for:

- Collecting from the parent/guardian of each child, the authority to apply sunscreen, prior to the child commencing at the Early Learning Centre. (Appendix 1).
- Ensuring a combination of sun protection measures are applied during outdoor time with particular care taken between 10 am and 2 pm (11 am and 3 pm daylight saving time) when UV levels reach their peak.
- Applying sunscreen to all children's exposed skin at least 20 minutes before going outdoors (subject to appropriate permissions being gained from parents – See forms). Children will be encouraged to apply the sunscreen with the assistance of a staff member. Sunscreen is to be reapplied every 2 –2 1/2 hours (ie. at least once per session).
- Encouraging other adult participants in the program to apply sunscreen and to wear a sun protective hat.
- Ensuring each child and any other participant at the Early Learning Centre, wears a centre sun hat or an appropriate sun hat for all outdoor activities during their attendance at the centre from the start of September to the end of April.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

- Checking that all hats brought to the centre are named and meet the SunSmart recommendation for adequate protection.
- If the child does not bring their sun hat and there are insufficient spare hats available, or they are not wearing appropriate sun protective clothing, children will be asked to play in the shade or indoors.
- Ensuring that the children's sun hats are stored in their bags, individual pegs, or in individual lockers.
- Encouraging children to seek shade when playing outside.
- Including education in the children's program on the sun, skin and ways to protect our skin using SunSmart's recommended "Outside 5".
- Encouraging children to wear their hats when traveling to and leaving the Early Learning Centre from the start of September to the end of April.
- Ensuring the spare hats are laundered after each use.

The parents/guardians are responsible for:

- Applying SPF 30+, broad spectrum, water resistant sunscreen to their child before attendance at the centre, from the beginning of September until the end of April and whenever the UV Index level reaches 3 and above.
- Providing an authority for the staff to apply sunscreen to their child. (Appendix 1).
- Providing a named ELC sun hat that provides adequate sun protection for their child to use at the Learning Centre.
- Ensuring that their child wears appropriate sun protective clothing. Tops with elbow length sleeves, and if possible, collars and knee length or longer style shorts and skirts are best. (Please note: singlet tops do not offer enough protection and are therefore not recommended.)
- If their child has a particular sensitivity to the sunscreen provided by the Early Learning Centre, to provide, at their own expense, an alternative sunscreen, to be left at the centre for application under staff supervision.
- Acting as role models when on duty or participating in the program by wearing a sun protective hat, clothing and sunglasses (if possible) when outside; applying sunscreen and seeking shade whenever possible.

#### Related documents

- The Cancer Council Victoria's SunSmart Early Childhood Program.
- The Cancer Council Victoria's SunSmart Early Childhood frequently asked questions. Centre policies

#### Related Forms

- Authority for Staff to Administer Sunscreen Provided by the Centre

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020



### The role of early childhood centres

There is enormous potential for early childhood centres to prevent skin cancer in future generations. Early childhood centres are central to protecting children's skin. This is because:

Children attend centres at times when ultraviolet (UV) radiation levels are high. Most damage due to sun exposure occurs during the early years. Centres can play a significant role in changing behaviours through role modelling and education.

Protecting children from foreseeable harm is part of a centre's duty of care to children. As part of an employer's general duty of care under the Occupational Health and Safety Act 2004, staff working all or part of their day outside should be protected from the sun's UV radiation.

### Background Information

It is good to teach children to apply SPF 30+ broad spectrum, water-resistant sunscreen 20 minutes before going outside and to reapply it every 2 - 2 1/2 hours. Sunscreen screens out UV radiation but does not completely block it out so some UV radiation still reaches our skin. It is recommended that you inform families of the brand/type. Some children may be sensitive to some sunscreens, so families may wish to supply an alternative for

their child. However, even if all families are asked to provide SPF 30+ broad-spectrum, water-resistant sunscreen, the Early Learning Centre should still have a supply available.

### Role models

Children often copy those around them and learn by imitation. If you adopt sun protection behaviours the children in your care are more likely to do the same.

Sun exposure for staff is also an Occupational Health & Safety issue. For information on sun protection in the workplace contact SunSmart on 9635 5148.

### Family information

It is helpful if families understand the Early Learning Centre's sun protection policy and are aware of how they can assist by providing appropriate clothing, hats, and possibly sunglasses, and being good role models themselves. Newsletters and noticeboards are an ideal way of keeping families informed. The above information could be displayed on the noticeboard or provided in a newsletter.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## Appendix 1

SunSmart recommend using a combination of these five important sun protection measures:

### 1. Shade

Try to use shade whenever possible. Even while in the shade, UV radiation can reflect from surfaces such as water, sand and concrete so it is important that children continue to wear a hat, appropriate clothing and sunscreen.

### 2. Sun-protective clothing

As well as hats, SunSmart recommends loose fitting, close weave clothing that covers as much skin as possible during outside activities. Tops with elbow length sleeves, and if possible, collars and knee length or longer style shorts and skirts are best.

Garments especially designed for sun protection will carry a UPF (ultraviolet protection factor) level on their tags. The higher the number, the greater the protection from UV radiation. Fabric rated above UPF 30 provides very good protection.

### 3. Hats

To protect the neck, ears, temples, face and nose, encourage children to wear a broad brimmed, legionnaire or bucket hat.

Bucket hats should have a deep crown and a brim of at least 5 cm for young children.

### 4. Sunglasses

Eyes, like skin, can be damaged by exposure to UV radiation. SunSmart suggests, where practical, wearing close fitting, wrap around sunglasses that cover as much of the eye area as possible. The sunglasses should meet Australian Standard 1067 (sunglasses: category 2, 3 or 4) and preferably be marked EPF 10 (eye protection factor).

### 5. Sunscreen

If your centre prefers not to introduce the wearing of sunglasses, or a child is reluctant to wear them, you can still protect the eyes by avoiding peak UV times, wearing a hat and staying in the shade.

Bayside Christian College Early Learning Centre Policies and Procedures Manual					
<b>Version</b>	1.5	<b>Author</b>	ELC Director	<b>Owner</b>	ELC Director
<b>Approval Date</b>	01/12/2011	<b>Last Review</b>	29/1/19	<b>Next Review</b>	29/1/2020

## FORMS and TEMPLATES



## CODE OF CONDUCT: Acknowledgement Of Receipt

I hereby acknowledge that on ...../...../20..... [date] I received a copy of the Code of Conduct Policy (Parents/Guardians and Volunteers) for Bayside Christian College Early Learning Centre.

I have read this policy, I understand its contents and I agree to abide by the principles, and practices and consequences set out within.

I understand that the Head of Primary will deal with any breach of this policy and any serious breach could lead to the withdrawal of my child(ren)'s place at the centre or withdrawal of my volunteer time at the centre. I understand that a signed copy of this statement of commitment will be kept on file whilst my child(ren) remain at; or whilst I am involved with the Early Learning Centre, and will be disposed of at the end of this time.

Signature: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Date: \_\_\_\_\_

Witness signature: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Date: \_\_\_\_\_



## **AUTHORISATION FORM: Delivery And Collection Of Children**

I, \_\_\_\_\_ authorised by telephone/email  
for my child/ren \_\_\_\_\_  
to be collected from Bayside Christian College Early Learning Centre  
\_\_\_\_\_ (date) by  
\_\_\_\_\_ (name of person). This was a one-  
off occasion and this person is not to be included on my child's enrolment form as an  
authorised person to collect my child.

\_\_\_\_\_ Signature (Parent/Guardian)

\_\_\_\_\_ Date

Note: Add to the child's file to ensure that the staff members in attendance on that day have a record of the authorisation.



## PERMISSION FORM FOR EXCURSIONS WITHIN THE BAYSIDE CHRISTIAN COLLEGE CAMPUS

I/we the parents/guardians of \_\_\_\_\_ (the child) do hereby, knowing that the supervising staff will exercise all due care and responsibility, give permission for my child to attend all excursions and incursions within the Bayside Christian College Campus (e.g. to the ELC multi-purpose room, the library, the Primary School, the gym), traveling by foot.

I/we authorise the Early Learning Centre or supervising staff that in the case of the student suffering any injury or illness, to obtain any medical or surgical treatment such as may be deemed necessary. I/we agree to pay any such expenses so incurred.

I/we acknowledge that the planned activities that the student may undertake during the excursion are of a suitable and safe nature and will be appropriately supervised.

I acknowledge that this authorisation covers the duration of the year:

20

\_\_\_\_\_ [Name of child]

\_\_\_\_\_ Signature [parent/guardian]

\_\_\_\_\_ Date

## EXCURSION FORM: Volunteers



Dear Parent/Volunteer,

Thank you for offering to help with the excursion on \_\_\_\_\_

During the excursion you will:

1. Remain under the supervision of a qualified staff member or proprietor at all times. If a child other than your own indicates the need to use toilet facilities, please notify a staff member. The staff member will attend to the toileting needs.
2. Be provided with information prior to the event about the educational objectives and your responsibilities in regard to the children participating in the excursion. You will be provided with written details of information relevant for the excursion (eg: phone number if you become removed from the group, names of staff members, timetable of events).
3. Are expected to comply with the requirements of centre policies such as Sun Protection and Code of Conduct (includes no smoking) during the excursion. If you have not seen these policies they can be viewed in the policy folder.
4. Be asked to provide emergency details for yourself prior to the excursion and permission for the staff in charge to seek emergency medical treatment and or an ambulance service on your behalf if required.

I, \_\_\_\_\_ understand and accept the responsibilities and conditions as noted above, and agree to volunteer for the above event/excursion.

I understand that I will be under the immediate supervision of staff members in charge of the excursion and authorise the staff member in charge to seek emergency medical treatment or ambulance transport on my behalf if required.

My contact person to be notified in case of any emergency is:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Contact phone number on this day: \_\_\_\_\_

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_



**LETTER FOR STAFF: Re 'acknowledgement and understanding of privacy policy'**

Dear [insert name],

Re: Privacy Policy

Please find attached Bayside Christian College Early Learning Centre's Privacy Policy, which outlines how the Early Learning Centre will meet the requirements of the Victorian Health Records Act 2001 and the Victorian Privacy Act 2000 (or where applicable Privacy Act 1988) in relation to both personal and health information.

Employees have an important role in assisting the Early Learning Centre to comply with the requirements of the privacy legislation, by ensuring they understand and implement the policy. Therefore all employees are required to read the attached policy and complete the attached Acknowledgement of Reading the Privacy Policy Form.

Please return the completed form to me by [insert date].

Yours sincerely,

---

Head of Primary

Please note: the form will be kept with your individual staff record.





### ACKNOWLEDGEMENT FORM: Reading the Privacy Policy

I .....[insert name] have received and read Bayside Christian College Early Learning Centre's Privacy Policy.

\_\_\_\_\_ Signature

\_\_\_\_\_ Date



### **AUTHORITY FORM: For staff to administer sunscreen provided by the Centre**

I.....[name of parent/guardian] give permission for the staff at Bayside Christian College Early Learning Centre to apply as appropriate to all exposed parts of my child/ren's body, SPF 30+ broad spectrum, water resistant sunscreen. I understand that it is recommended I apply sunscreen to my child/ren prior to their attendance at the centre. I also understand that they must play in the shade if they do not bring an appropriate hat or do not wear appropriate clothing between the beginning of September until the end of April and whenever the UV Index level reaches 3 and above.

[Name of child/ren].....

Signature (Parent/guardian).....

Date .....

### **AUTHORITY FOR STAFF TO ADMINISTER SUNSCREEN PROVIDED BY THE PARENT/GUARDIAN**

I.....[name of parent/guardian] give permission for the staff at the Early Learning Centre to apply as appropriate to all exposed parts of my child's body the sunscreen I have supplied and labelled with my child/ren's name. This sunscreen is an SPF 30+ broad spectrum, water resistant sunscreen. I understand that this sunscreen will be kept at the centre during school terms. It is my responsibility to ensure there is always an adequate supply of this sunscreen at the centre. I understand that it is recommended I apply sunscreen to my child/ren prior to their attendance at the centre. I also understand that my child/ren must play in the shade if they do not bring an appropriate hat or do not wear appropriate clothing between the beginning of September until the end of April and whenever the UV Index level reaches 3 and above.

[Name of child/ren].....

Signature [Parent/guardian].....

Date.....



## **PERMISSION FORM: Photographs and Videos**

Photographs and videos are now classified as “Personal information” under the *Information Privacy Act 2000* (Vic).

The purpose of this permission form is to:

- Comply with the privacy legislation in relation to photographs/videos taken at the Early Learning Centre
- Enable staff at the Early Learning Centre to take photographs/videos of children as part of the program
- Enable parents/carers and staff to take group photographs/videos at special events such as birthdays, celebrations or excursions
- Enable parents/carers to take photographs/videos of their children, which may include other children in the group
- Notify parents/carers as to who will be permitted to take photographs/videos and, where these are taken by the Early Learning Centre, how they will be used.

### **Photographs/videos taken by Centre staff**

Staff at the Centre will take photographs/videos of children as part of the program which will include displaying these at the Early Learning Centre or placing them in a book that may be borrowed from the Centre by the children attending.

When the photographs/videos are no longer being used as part of the program, displayed at the Centre or placed in a book for circulation, they will either:

- Be given to the family of the child if the photograph/video is of their child and no other children
- Stored securely at the Early Learning Centre and displayed, for example, on anniversaries of Bayside Christian College Early Learning Centre
- Destroyed.

### **Photographs/videos taken by agents of the Centre**

From time-to-time, the Centre will engage professional photographers or videographers to take photographs/videos of children participating in the Centre program or activities. Parents/carers will be notified prior to such visits.

### **Group photographs taken by parents/carers or staff**

Parents/carers, as well as staff, may take group photographs at special events such as birthdays, group celebrations (e.g. Christmas concerts) or excursions while attending the Early Learning Centre program or activities. Photographs taken by the staff can be made available to parents/carers.

Whilst the Centre can nominate the use and disposal of photographs they organise,



there is no control over those taken by parents/carers of children attending.

### **Photographs/videos taken by parents/carers**

Parents/carers may take photographs and/or videos of their own child, only on special events such as birthdays, celebration events or excursions, which may also include other children in the group.

### **Photographs/videos for use in newspapers and other external publications**

The permission of parents/carers will, on each occasion, be obtained prior to a child's photograph/video appearing in any newspaper/media or external publication.

### **Access to photographs/videos**

Access to any photographs or videos, like other personal information, is set out in Bayside Christian College's Privacy Policy which is displayed at the Early Learning Centre and available on request.

### **Confirmation of consent**

Do you permit Bayside Christian College Early Learning Centre, or its appointed agents (e.g. school photographers), to take photographs/videos of your child participating in the Centre program or activities for use in/on the:

- College website
- Online newsletter
- College yearbook
- Digital signage displays (TVs in reception areas)
- Printed College publications including annual reports and handbooks
- Video recordings
- ELC individual learning observations
- ELC whole group learning journals
- Displays within the ELC

Note: the College will not use photographs or video recordings of your child/ren for any other purpose (e.g. promotions) without first obtaining your written permission.

I understand that the Early Learning Centre staff have no control over the use of the photographs/videos taken by parents/carers.

I consent to the arrangements for the use of photographs and/or videos as stated in this permission form.

\_\_\_\_\_ Parent/carer's name

\_\_\_\_\_ Signature [parent or carer]

\_\_\_\_\_ Child's name

\_\_\_\_\_ Date



**TEMPLATE: Individual Learning Plan**

**Child's name:**.....

**Date of Birth:**.....

**Contact details:**.....

**Educator's name:**.....

**Family sharing about the child's strengths and interests:**

**The child:**

**All about me. What I like at home and at kinder.**

**Goals based on the Outcomes of the Victorian Early Years Learning & Development Framework**

**Children have a strong sense of identity:**

**Children are connected with and contribute to their world:**

**Children have a strong sense of wellbeing:**

**Children are confident and involved learners:**

**Children are effective communicators:**

**Assessment strategies that will be used to collect evidence of learning:**

**Ongoing planning that informs teaching, learning and family participation:**

**Family feedback relating to the child's wellbeing and involvement at the centre:**

**Progress and Development to be reviewed on a monthly basis.**

**Date:**

**Family Signature:**

## TEMPLATE: Incident, injury, trauma and illness record

### Child details

Surname: ..... Given names: .....

Date of birth:..... / ..... / ..... Age:.....Room/group:.....

### Incident/injury/trauma/illness details

Incident/injury/trauma (Circle relevant)

Circumstances leading to the incident/injury/trauma:

.....

.....

.....

Products or structures involved:

.....

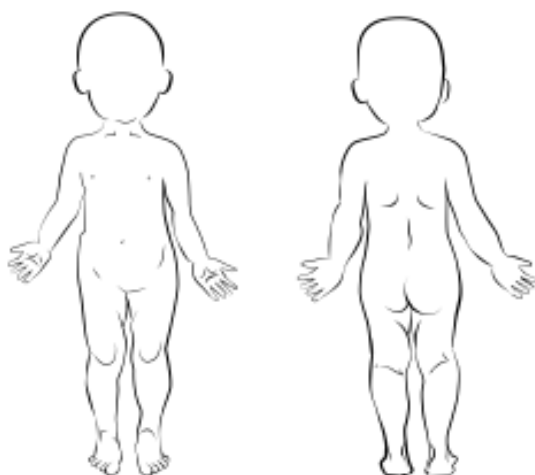
.....

Location: .....Time:.....am/pmDate:...../...../.....

Name of witness: .....

Signature:..... Date: ...../...../.....

### Illness



### Nature of injury sustained:

- |   |   |
|---|---|
| <input type="checkbox"/> Abrasion, scrape       | <input type="checkbox"/> Cut                    |
| <input type="checkbox"/> Bite                   | <input type="checkbox"/> Rash                   |
| <input type="checkbox"/> Broken bone / fracture | <input type="checkbox"/> Sprain                 |
| <input type="checkbox"/> Bruise                 | <input type="checkbox"/> Swelling               |
| <input type="checkbox"/> Burn                   | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Concussion             | .....   |





Circumstances surrounding child becoming ill, including apparent symptoms:

.....

.....

.....

.....

.....

Time of illness:..... am/pm Date of illness:...../..... / .....

**Action taken**

Details of action taken, including first aid and administration of medication:

.....

.....

.....

Medical personnel contacted: Yes / No

If yes, provide details:

.....

.....

.....

**Details of person completing this record**

Name: .....Signature: .....

Time record was made: ..... am/pm Date record was made: ...../...../.....



**Notifications (including attempted notifications)**

Parent/guardian: ..... Time:.....am/pm Date:...../...../.....

Director/teacher: ..... Time:.....am/pm Date:...../...../.....

Head of Primary: ..... Time:.....am/pm Date:...../...../.....

Other: (if applicable): ..... Time:.....am/pm Date:...../...../.....

**Parental acknowledgment:**

I.....  
(name of parent/guardian)

have been notified of my child's incident/injury/trauma/illness. (Please circle)

Signature:..... Date: ...../...../.....

**Additional notes / follow-up:**

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



### TEMPLATE: Excursion Risk Management Plan

1. Enter Event onto Edumate
2. Complete this form
3. Submit to Deputy Principal for Approval

---

#### Excursion Details

Date(s) of Excursion:

Excursion destination:

Departure and arrival times:

Proposed Activities:

Water Hazards? Yes ☐ No ☐

If yes, details in risk assessment

Method of Transport, including proposed route:

Name of excursion co-ordinator:

Contact number of excursion (BH)

Mobile:

coordinator:

Number of children attending excursion:

Educator to child ratio, including whether this excursion warrants a higher ratio. Please provide details:

---

Instructions: Using the 'Risk Management Plan – Instructions', follow the **College's Risk Management Process** and refer to the **College Register of Potential Hazards and Control Measures** to complete this template.

Step 1	Step 2		Step 3	Step 4	Step 5
Hazard Identification	Assess the Risk		Risk rating*** LxC	Control Measures	Who?
	Likelihood* (L)	Consequence** (C)			

**\*Likelihood**

5	Almost Certain
4	Likely
3	Possible
2	Unlikely
1	Rare

**\*\*Description of Consequences**

1	Insignificant	No treatment required
2	Minor	Minor injury requiring First Aid treatment (e.g. minor cuts, bruises, bumps)
3	Moderate	Injury requiring medical treatment or lost time of four or fewer days
4	Major	Serious injury (injuries) requiring specialist medical treatment of hospitalisation, or greater than four days lost time
5	Critical	Loss of life, permanent disability or multiple serious injuries

**\*\*\*Risk Rating**

1-4 = Low	5-9 = Medium	10-16 = High	17-25 = Extreme
Little chance of incident or injury	Some chance of an incident and injury requiring first aid	Likely chance of a serious incident and injury requiring medical treatment	High chance of a serious incident resulting in highly debilitating injury