

# COOMERA RIVERS

## OSHC POLICY & PROCEDURES

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# Policy Introduction

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The **Coomera Rivers OSHC** policies have been developed to—

- meet the regulatory requirements of the service,
- ensure efficient operations,
- foster high-quality practices amongst educators, and
- promote partnerships with families.

The policies are based on the relevant contextual factors, including our Service Philosophy and the perspectives of parents and stakeholders.

Policies of the service will be amended and modified from time-to-time, where relevant changes occur, stakeholders will be notified.

# Service Philosophy

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**Coomera Rivers State School Outside School Hours Care** believes that each child has the right to be an active member of the community in which they live, to express their opinions and to have their views considered in decisions that affect them.

We believe the best interests of the children and their right to play, learn and develop in a safe and nurturing environment, is the primary consideration in all decision making at the service and is visible in the actions, interactions and daily work with the children.

We believe that children are active learners from birth and through rich, engaging environments and meaningful interactions, we can build a foundation for successful lifelong learning.

We acknowledge that parents and families are the child's primary educators and that respectful, collaborative relationships strengthen the capacity and efforts of families and OSHC services to support and promote each child's health and wellbeing.

We acknowledge the important role that schools' play in children's education, learning and development and seek to develop complementary and supportive relationships based on collaborative partnerships.

We acknowledge through all aspects of service delivery, the intrinsic worth and strengths of all children and their families, and their right to equitable access and participation in the community.

The service believes that children have the right to have their individual and cultural identity recognised and respected. We value Australia's Aboriginal and Torres Strait Islander cultures as a core part of the nation's history, present and future. We seek to embed Aboriginal and Torres Strait Islander perspectives in our day-to-day practice with children and families through our commitment to reconciliation.

We value ongoing learning and reflective practice as a way to inform and enrich the decisions made that continuously promote positive wellbeing, learning and developmental outcomes for children.

# Required Policies Matrix (Regulation 168)

| Policies and procedures are required in relation to the following— |  |   |   |
|--|--|---|---|
| 1  |  | (i) nutrition, food and beverages, dietary requirements   | <a href="#">1.5 Food and Nutrition</a> & <a href="#">2.12 Safe Food Handling, Preparation and Storage (Food Safety Program)</a> |
| 2  | (a) health and safety, including matters relating to—  | (ii) sun protection   | <a href="#">2.11 Sun Safety</a>   |
| 3  |  | (iii) water safety, including safety during any water-based activities  | <a href="#">2.6 Water Safety</a>  |
| 4  |  | (iv) the administration of first aid  | <a href="#">2.5 Administration of First Aid</a>   |
| 5  |  | (v) sleep and rest for children, including the matters set out in regulation 84B  | <a href="#">1.4 Sleep and Rest</a>  |
| 6  |  | (b) incident, injury, trauma and illness procedures complying with regulation 85  | <a href="#">2.4 Incident, Illness, Injury and Trauma</a>  |
| 7  | (c) dealing with infectious diseases, including procedures complying with regulation 88  | <a href="#">2.7 Infectious Disease - Prevention and Response</a>  |   |
| 8  | (d) dealing with medical conditions in children, including the matters set out in regulation 90  | <a href="#">2.9 Children with Medical Conditions</a>  |   |
| 9  | (e) emergency and evacuation, including the matters set out in regulation 97   | <a href="#">2.13 Emergency Evacuation and Lockdowns</a>   |   |
| 10   | (f) delivery of children to, and collection of children from, education and care service premises, including procedures complying with regulation 99   | <a href="#">2.3 Safe Arrivals and Departures of Children</a>  |   |
| 11   | (g) excursions, including procedures complying with regulations 100 to 102   | <a href="#">1.3 Excursions</a>  |   |
| 12   | (ga) if the service transports or arranges transportation of children other than as part of excursions, transportation including procedures complying with Division 7 of Part 4.2 of Chapter 4                                   | N/A – the service does not provide transportation (as per <a href="#">7.4 Leading Compliance and Quality Assurance</a> ). |   |
| 13   | (gb) the safe arrival of children who travel between an education and care service and any other education or early childhood service within the meaning of regulation 102AA, including the matters set out in regulation 102AAB | <a href="#">2.3 Safe Arrivals and Departures of Children</a>  |   |
| 14   | (h) providing a child safe environment, including matters relating to—   | (i) the promotion of a culture of child safety and wellbeing within the service   | <a href="#">2.1 Providing a Safe Environment</a>  |
| 15   |  | (ii) the safe use of online environments at the service   | <a href="#">2.15 Safe Online Environments for Children</a>  |
| 16   | (i) staffing, including—   | (i) a code of conduct for staff members   | <a href="#">4.4 Code of Conduct</a>   |
| 17   |  | (ii) determining the responsible person present at the service  | <a href="#">7.2 Determining the Responsible Person</a>  |
| 18   |  | (iii) the participation of volunteers and students on practicum placements  | <a href="#">4.3 Volunteers and Studentss</a>  |
| 19   | (j) interactions with children, including the matters set out in regulations 155 and 156   | <a href="#">5.1 Interactions and Relationships with Children</a>  |   |
| 20   | (k) enrolment and orientation  | <a href="#">6.2 Enrolment and Orientation</a>   |   |

|    |  |  |
|----|--|--|
| 21 | (l) governance and management of the service, including confidentiality of records                 | <a href="#">7.5 Governance and Management</a> & <a href="#">7.6 Information Handling (Privacy and Confidentiality)</a> |
| 22 | (m) the acceptance and refusal of authorisations   | <a href="#">6.4 Acceptance and Refusal of Authorisation</a>  |
| 23 | (n) payment of fees and provision of a statement of fees charged by the education and care service | <a href="#">7.10 OSHC Fees and Family Accounts</a>   |
| 24 | (o) dealing with complaints, including matters relating to—  | (i) the provision of a complaint handling system at the service that is child focused                                  |
| 25 |  | (ii) the management of a complaint that alleges a child is exhibiting harmful sexual behaviours.                       |
|    |  | <a href="#">6.7 Feedback and Complaints</a>  |
|    |  | <a href="#">7.16 Managing Concerns of Harmful Sexual Behaviours</a>  |

# Scope of Roles and Responsibilities

This policy and procedures contained within this manual covers both the operational and governance duties for Coomera Rivers OSHC.

The Employer, Coomera Rivers P&C Association, expects all employees and volunteers will follow the instruction contained in this manual in the discharge of their duties.

The policies have been developed to address the duties associated with [Regulation 170](#), for the provider to have taken reasonable steps have been to ensure policies are followed, this includes but is not limited to—

- **Availability and accessibility** - Policies and procedures are readily available and accessible to all staff. These are available in OWNA, OSHC SharePoint and on the school website.
- **Induction and ongoing training for staff** – Our educators (and other staff) are provided with comprehensive induction and ongoing training on the service’s policies and procedures to ensure knowledge, skills and expectations remain up-to-date.
- **Quality Assurance (regularly reviewed and up-to-date)** - The content of policies and procedures are regularly reviewed and maintained for accuracy and compliance.
- **Governance (routine monitoring of compliance)** – The execution of policies, procedures and practices is supervised and regularly audited to ensure staff are following them as set out.
- **Reformative action** (non-compliance actioned) - Any policies and procedure non-compliance is quickly identified and rectified with appropriate management action.
- **Resourcing and support** - Procedures and tasks are developed to provide adequate resources and allocated time to enable staff to practically comply with the service’s expectations.

## Overarching Roles and Responsibilities

To remove any doubt, these terms have the following meanings to roles within the service:

|                                    |  |
|------------------------------------|--|
| <p><b>Approved Provider</b></p>    | <p>The Approved Provider is the term used to refer to the <b>Executive Committee of the P&amp;C Association</b> (i.e. the President, Treasurer, Secretary, and Vice President(s)). Collectively, these individuals hold the duties of management and control of the provider of the education and care service. The term has been chosen as it is consistent within the National Quality Framework, including the Education and Care Services National Law and Regulations.</p> <p>The Approved Provider is also the employer of all OSHC staff members. It is also the approved CCS Provider.</p> |
| <p><b>Nominated Supervisor</b></p> | <p>The Nominated Supervisor is the person(s) nominated by the Approved Provider to hold the role as described within the National Law and Regulations. The Nominated Supervisor will typically refer to the Nominated Supervisor position.</p> <p>Where the policy refers to the Nominated Supervisor, often in their absence the Responsible Person will assume these responsibilities, as so far it is relevant to day-to-day operations (see <a href="#">7.2 Determining the Responsible Person</a> for further clarification).</p>   |
| <p><b>Responsible Person</b></p>   | <p>The Responsible Person is the employee nominated (with consent) to be placed in day-to-day charge of the service, in the absence of a Nominated Supervisor or the Approved Provider being on the premises. Their key role is to ensure the service operates consistently with the National Regulations.</p>   |

|                           |   |
|---------------------------|---|
|                           | The role is referred to within the National Regulations as a 'person in day-to-day charge'.   |
| <b>Educational Leader</b> | The appointed Educational Leader is responsible for the development and implementation of the service's program.  |
| <b>All Staff</b>          | The expectations, duties and responsibilities for all employees, volunteers or other relevant personnel are illustrated in the points connected to the all staff heading. |

# Definitions

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- **Authorised Nominee** - means a person who has been given permission by a parent to collect the child from the education and care service.
- **Australian Children’s Education and Care Quality Authority (ACECQA)** – the national administrative body that oversees the implementation of the National Quality Framework throughout Australia
- **[Workplace] Bullying** - is repeated oppression, psychological or physical harm. It may be manifested in many ways e.g. harassment verbal, sexual or psychological, victimisation, alienation, coercion, intimidation, exclusion, ostracism or discrimination.
- **Discrimination** - is treating an individual with a particular attribute less favourably than an individual without that attribute or with a different attribute under similar circumstances. It can also be seeking to impose a condition or requirement on a person with an attribute who does not or cannot comply while people without that attribute do or can comply.
- **Disciplinary Action** - action taken by the organisation to deal with any actual, alleged or perceived breach of legislation, policies, codes or other standards of work performance and/or conduct.
- **Duty of Care** – obligation under common law and the rules of negligence for education and care services to protect children, families, staff and all visitors to the service from harm. Approved Providers, Nominated Supervisors, educators and staff need to understand their responsibilities under duty of care.
- **Education and Care Service** – the OSHC service operated by the P&C.
- **Employee Counselling** - The discussion and analysis of issues which affect an employee’s conduct and/or work performance. Counselling is used as a management action to improve an employee’s performance where their behaviour or performance doesn’t meet required expectations.
- **Emergency** - an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the education and care service (e.g. flood, fire, a situation requiring a lockdown)
- **Equal Employment Opportunity (EEO)** - is ensuring that all employees are given equal access to promotion, appointment or other employment related issues without regard to any factor not related to their competency and ability to perform their duties.
- **Excursion** – An approved activity organised by the service located outside of the premises (school site) – i.e. an outing. Children must be authorised to attend an excursion prior to leaving the premises.
- **Fit for Work** - an employee is fit for work if they have a blood alcohol level of 0.00 and test negative for drug use; and are physically able to carry out their duties, as per their job description.
- **Infectious Disease** - communicable diseases that requires a person with the disease to be excluded from the service. The service has a duty to ensure adequate mitigation efforts are implemented to protect from the diseases being spread by individual attending the service.
- **Incident** - any event resulting in or having potential for injury, illness, damage or other loss. Also see *Serious Incident*.
- **Misconduct** - When an employee breaches their obligations under their contract of employment. Examples of misconduct may include but are not limited to: breaches of policies, codes of conduct and other reasonable instructions; unauthorised absence from work.
- **My Time, Our Place: Framework for School Age Care in Australia** – The Approved Learning Framework for school age care in Australia. It outlines the principles and practices that support and promote learning outcomes for children over preschool age.

- **National Quality Framework (NQF)** – a mosaic composition of regulatory and quality mechanisms that come together to drive quality education and care for children, families and services around Australia.
- **National Quality Standard (NQS)** – sets a national benchmark for quality in education and care services, including OSHC. The NQS is comprised of 7 Quality Areas, 15 Standards, and 40 Elements. It is the basis for an Assessment and Rating.
- **On duty** - An employee is on duty at any time they are undertaking the duties and responsibilities associated with their contract of employment.
- **Parent** – a legal guardian of the child and a person who has parental responsibility for the child under a decision or order of a court.
- **Premises** – the school site Coomera Rivers OSHC operates from.
- **Program** - In the school age care setting 'all the interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children's wellbeing, development and learning.'
- **Quality Improvement Plan (QIP)** – must be developed by each service as part of a collaborative process of self-assessment of the quality of practice against the NQS and the national legislation.
- **Relevant Health or Medical Condition** - \*\*\*Add details\*\*\*
- **Regulatory Authority** – responsible for approvals, monitoring and quality assessment for education and care services in their state or territory. In Queensland, this authority is the Department of Education and Training - Early Childhood Education and Care.
- **Serious Incident** – an incident or class of incident prescribed by the National Regulations. Serious Incidents are reportable and specific management and reporting actions are required by the service.
- **Serious Misconduct** – employee behaviour and action that are wilful or deliberate and are fundamentally inconsistent with the continuation of the employment relationship. It is conduct that causes serious and imminent risk to the health and safety of a person or to the reputation, viability or profitability of the employer's business. Examples of serious misconduct include: theft, fraud, assault, intoxication at work and the refusal to carry out lawful and reasonable instructions.
- **Trauma** - an event or incident that causes physical, emotional or psychological harm.
- **Underperformance** – where the employee's performance is below the reasonable expectation set out by the employer.

## Policy Group 1

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# Program and Practice

The **educational program and practice** is the central element of operations that drives children's learning, development and wellbeing each day.

The program will be delivered to provide stimulation, engagement, and an opportunity to enhance children's wellbeing and growth. As we care for school-age children, our program nurtures the development of life skills and complements experiences, opportunities, and relationships at school, at home and in the community.

Our policies are written to ensure that educators' pedagogical practices and strategies are child-centred and maximise possibilities for advancing and extending each child's learning and development. Our practices are developed to reflect the Service's philosophy, especially around the promotion of children's learning.

# 1.1 Educational Program Development and Implementation

## Policy Statement

Coomera Rivers OSHC recognises My Time, Our Place v2 as the approved learning framework for school-age care under the National Quality Framework. With the guidance and direction from our Educational Leader, we shape our planned and unplanned activities, our environment, and our practices to foster children's wellbeing, development and learning. As a program we expect to have a positive impact to each child's learning development and wellbeing, including that each child will—

- have a strong sense of identity.
- be connected with and contribute to their world.
- have a strong sense of wellbeing.
- be a confident and involved learner.
- be an effective communicator.

We recognise the importance of a building a quality program that meets the needs and interests of each child. Coomera Rivers OSHC is committed to ensuring their program should encourage self-directed play, relationship building, collaborative decision making and respect for diversity – as reflected in our Service's philosophy.

The appointed Educational Leader, in collaboration with educators, children and families, will lead the development and implementation of the educational program and assessment and planning cycle. Which includes the systems used to communicate and share the children's learning with parents.

### Foundations of the Program

The development and delivery of the Coomera Rivers OSHC's program will be:

- formed from an ongoing cycle of planning and is based on the Principles, Practices and Learning Outcomes of My Time, Our Place.
- displayed in a prominent location, to be accessible for promotion and input of children and families.
- organised so activities and resources maximise learning through play and leisure.
- considers the current knowledge strengths, ideas, culture, abilities and interests throughout the planning cycle.

## Related Policies

- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.6 Technology and Screen-Time](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [3.1 Space and Facilities Requirements](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [6.6 Community Communication and Participation](#)
- [7.3 Educational Leader](#)

## Roles and Responsibilities

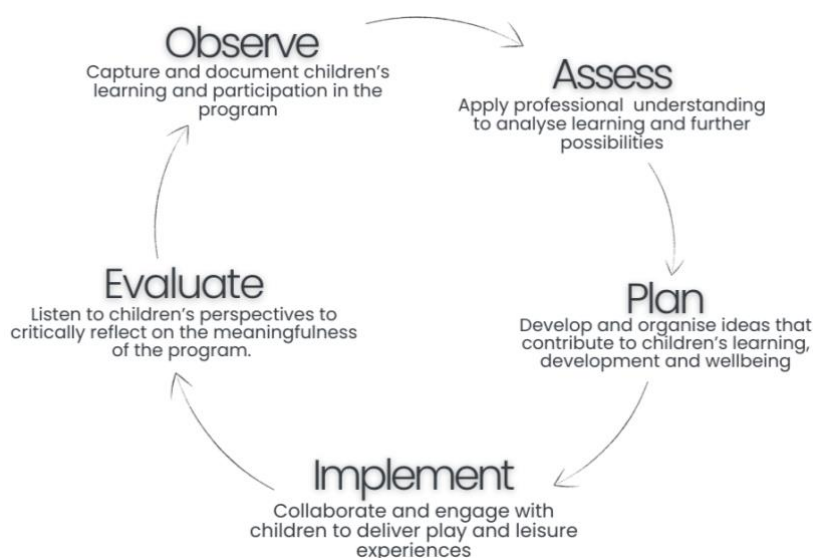
|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Must ensure that a program is delivered to all children being educated and cared for by the service that— <ul style="list-style-type: none"> <li>○ is based on an approved learning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

## Procedures

### The Planning Cycle

Coomera Rivers OSHC's **Educational Leader** is responsible for coordinating the design and implementation of the service's weekly program and ongoing development of educator practices. Their role is central to the service's planning cycle and delivery of the service's program.

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



|                              |   |
|------------------------------|---|
| <p><b>Observation</b></p>    | <ul style="list-style-type: none"> <li>• Educators record observations of the children’s experiences, learning and participation. This information is recorded in a manner that demonstrates a deeper understanding of the journey of learning and outcomes.</li> <li>• Coomera Rivers OSHC facilitates regular group discussions among staff to extend individual observations and record a deeper discussion and collective understanding.</li> <li>• Documentation reflects a holistic view of children’s learning.</li> <li>• Encourages and provides appropriate opportunities for families to participate in shared decision making and give feedback about the program and their child’s learning.</li> <li>• Documents the developing and emerging abilities and interests of all children.</li> </ul>  |
| <p><b>Analysis</b></p>       | <ul style="list-style-type: none"> <li>• Applying an understanding of research, literature and theory, with a particular focus on child development, and play-based learning to enhance the planning and practice of the program.</li> <li>• Question and evaluate what has already been learned or expressed to understand further possibilities.</li> <li>• Demonstrating a positive approach towards diversity and Australia’s Aboriginal and Torres Strait Islander heritage being integrated into the program.</li> <li>• Activities, experiences, environment and resources are a representation of the intentionality of educators and the service to provide diverse, developmentally-focused and individually-considered learning opportunities.</li> <li>• Opportunities to critically reflect are enhanced through individual and collective opportunities to understand children’s learning and development.</li> </ul>   |
| <p><b>Planning</b></p>       | <ul style="list-style-type: none"> <li>• Program plans are displayed for children and families to understand and to meaningfully contribute to.</li> <li>• Program plans are developed in collaboration with educators, children and families. The Educational Leader is responsible for coordinating these ideas and intentions.</li> <li>• The program should support allow and encourages children to complete long-term projects and build upon experiences.</li> <li>• Planning demonstrates flexibility for program delivery by incorporating where children’s ideas, culture and interests have been included.</li> <li>• Coomera Rivers OSHC identifies a variety of indoor and outdoor experiences, open-ended resources, natural elements and materials suited to the age, developmental ranges and diversity of all children attending the service.</li> <li>• Activities and experiences that present has high-risk will be risk-assessed and suitably managed to uphold the safety of children and staff.</li> </ul> |
| <p><b>Implementation</b></p> | <ul style="list-style-type: none"> <li>• Provides appropriate opportunities for children as individuals and small groups to follow and extend their interests as they choose.</li> <li>• Appropriate opportunities for children to express themselves through creative and imaginative play, including elements of music, dance, drama etc. are enhanced through educator practices.</li> <li>• Educators positively guide and support appropriate opportunities for children to develop a range of life skills such as establishing and maintaining meaningful relationships, working collaboratively with others and self-regulating their own behaviour.</li> </ul>  |

|                 |   |
|-----------------|---|
|                 | <ul style="list-style-type: none"> <li>• The safety of activities will be supported through appropriate risk-assessment planning. Educators will be responsible for following control measures as identified and responding to any hazards that present.</li> <li>• The Educational Leader is responsible, in consultation with educators, to continually recreate and adapt the indoor and outdoor environments to: <ul style="list-style-type: none"> <li>○ Meet the needs and interests of all children, including their need for rest or sleep.</li> <li>○ Facilitate the inclusion of children with additional needs.</li> <li>○ Ensure that all children in a multi-age group have positive experiences.</li> </ul> </li> </ul> |
| <b>Evaluate</b> | <ul style="list-style-type: none"> <li>• Collaborate with children and young people to evaluate their implementation of plans.</li> <li>• Consider the meaningfulness and effectiveness of the program for children and young people's learning, development and wellbeing.</li> <li>• Reflect with children on what worked well and why?</li> </ul>  |

## Leading the Planning Cycle

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

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

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

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.168 Offence relating to required programs
- Education and Care Services National Regulations:
  - R.73 Educational program
  - R.74 Documenting of child assessments or evaluations for delivery of educational program
  - R.75 Information about educational program to be kept available
  - R.76 Information about educational program to be given to parents
  - R.298A Programs for children over preschool age
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities.
- My Time, Our Place - Framework for School Age Care in Australia.

## Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Working With Children (Risk Management and Screening) Act 2000 (Qld)
- United Nations Convention on the Rights of the Child
- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)

### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# 1.2 Sharing the Program and Children’s Progress with Families

## Policy Statement

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

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

Drawing upon our philosophy, Coomera Rivers OSHC recognises the significant opportunities to provide exceptional care when we foster a strong partnership between families. It empowers all stakeholders to supports children’s transitions between settings and creates better insights into children’s needs and preferences when shaping our program.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.5 Food and Nutrition](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [6.7 Feedback and Complaints Handling](#)
- [7.15 Social Media and ITC Usage](#)

## Roles and Responsibilities

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

## Procedures

### Collaboration and Communication with Children

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

Additionally, children's comments, suggestions and feedback are collected through conversation, observations and our feedback systems. Children are welcome and encouraged to add their thoughts and comments at any time via our feedback systems.

Educators complete a feedback form, which captures the conversations and observation of children's experiences. These are collated by the Education Leader each week and are recorded and documented how they were added to the program's planning and implementation. Educators are welcome and encouraged to add their thoughts and comments at any time.

### Communicating Children's Learning and Development

The Educational Leader will prepare a weekly evaluation of the service's program, these include both the planned and spontaneous activities that children have engaged in. This evaluation will be made available to families via the weekly newsletter and displayed in the OSHC room. The communication to families contains a variety of evaluations including, critical reflection of learning/outcomes, as well as the progress of children and their experiences at Coomera Rivers OSHC.

### Information Sharing and Partnerships with Families

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

- Conversations with educators
- Email correspondence and feedback
- Surveys and feedback prompts

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations
  - R.73 Educational program
  - R.74 Documenting of child assessments or evaluations for delivery of educational program
  - R.75 Information about educational program to be kept available
  - R.76 Information about educational program to be given to parents
  - R.298A Programs for children over preschool age
- National Quality Standard—
  - QA1 – Educational program and practice
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities.
- My Time, Our Place - Framework for School Age Care in Australia

### Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
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## 1.3 Excursions

### Policy Statement

Excursions are included in the services program as a valuable part of children's learning and leisure. Excursions aim to provide children with enjoyment, stimulation, challenge, new experiences and are a meeting point between the service and the wider community. Parents and stakeholders are encouraged to contribute ideas and perspectives to the planning of excursions and the included activities. The critical aspect for all excursions is to ensure the safety and protection of children is maintained throughout.

The service management understands the inherent risk and matters of compliance associated with excursions. Therefore, the following steps will be taken by the service before any child will be permitted to leave the premises:

- Risk assessments will be completed for each excursion, identifying all relevant hazards, and ensuring these are appropriately managed/controlled,
- The Approved Provider is to confirm the approval of risk-assessments and activities with significant risk prior to the undertaking of any excursions, and
- Written authorisation from a parent (or relevant authorised nominee) will be obtained by the service management following the preparation and approval of the risk assessment.

Each excursion will be a well-planned and coordinated event. Methodical steps will be carried out and documented to ensure children are safe and enjoyment of the excursion is maximised.

### Risk-Assessment

The Nominated Supervisor will take the primary lead in developing the risk assessment document. A standardised template will be used for all excursions to ensure all required information is captured. All risk assessment processes will use documentation that satisfies all the legislated requirements for excursion risk assessments, including the specific elements regarding travel. Approved risk assessments developed for excursions will be made available to parents (or relevant authorised nominee).

### Transport

All travel for excursions will uphold high standards of safety and protection. Travel procedures contained in this policy only apply to excursion-related travel. To remove any doubt, educators will not be permitted to transport children in their own private vehicle for excursions or otherwise.

### Authorisation

Parent (or authorised nominee) authorisation will be obtained via the vacation care booking forms (or other alternative authorisation if not part of vacation care). Included in all authorisation forms are the relevant excursion details, including all matters set out in Regulation 102. All authorisations will be stored in a manner consistent with the service's record keeping policy.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.9 Children with Medical Conditions](#)

- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [3.4 Children’s Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)

## Appendices and Forms

- [Excursion Permission Form](#)
- [Excursion Risk Management Plan](#)
- [Excursion Checklist Template](#)
- [Swimming Ability Form](#)

## Roles and Responsibilities

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

## Procedures

### Planning

Children's age, interests and abilities will be taken into consideration when planning excursions. Comments, suggestions and feedback from children and families will also be taken into account. When planning excursions, venue and transport costs will be considered, to ensure that excursions are financially viable and accessible to families.

Alternative arrangements (contingency plans) will be planned in case of changed weather conditions or other unforeseen circumstances.

The Nominated Supervisor is responsible to consult, plan and investigate potential excursion activities prior to the development and approval from the Approved Provider. No excursion is permitted to be facilitated without the endorsement of the Approved Provider.

Each excursion will have a checklist completed (see [Excursion Checklist](#)) to record the steps taken to manage all the elements of planning and facilitating the excursion. Please note - aspects of the checklist template should be amended to suit the context of each excursion.

## Excursions Risk Assessments

Both the Approved Provider and Nominated Supervisor are to ensure a comprehensive risk assessment has been documented and endorsed prior to families having the opportunity to book and authorise their child/ren to attend the excursion. Likewise, the Approved Provider and Nominated Supervisor will ensure all children have written authorisation (as expressed below) before they will be permitted to leave the service's premises.

The Nominated Supervisor will be responsible for facilitating the initial risk assessment for approval. Where possible, the risk assessment may be developed in collaboration with Educators and the CRSS Health & Safety Officer to ensure all identifiable hazards are identified and adequately controlled. All risk assessments will be prepared on a standardised form to ensure all required details are addressed.

Depending on the level of risk and previous experience, it may be necessary to visit the intended excursion site when conducting the risk assessment. Permission from the Approved Provider will need to be sought before staff are permitted to travel to a possible excursion location during work time.

### Exceptions for Regular Outings

A newly developed risk assessment is not required for an excursion if—

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

## Risk Assessment Content

The risk assessment will:

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

And consider:

3. the proposed route and destination for the excursion.
4. any water hazards.
5. any risks associated with water-based activities.
6. the transport to and from the proposed destination for the excursion, including:
  - a. the means of transportation.
  - b. any requirements for seatbelts or safety restraints under Queensland law.
  - c. the process for entering and exiting
    - i. the service's premises.
    - ii. the pick location and/or destination
  - d. procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking/disembarking.
7. the number of adults and children involved in the excursion.
8. given the risks posed by the excursion, the number of educators or other responsible adults that is appropriate to provide supervision and whether any adults with specialised skills are required (e.g. lifesaving).
9. the proposed activities.
10. the proposed duration of the excursion.
11. the items that should be taken on the excursion (e.g. mobile phone, emergency contacts).

All risk assessments for excursions will be completed by using the services Excursion Risk Assessment Template.

## **Endorsement of Risk Assessments**

Risk assessments will be required to be endorsed by the Approved Provider. The Nominated Supervisor should make the risk assessment available to the Approved Provider ensuring sufficient time for consideration and approval.

## **Authorisation for Each Child's Participation**

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Written authorisation from a parent (or other persons named with authorisation on the enrolment form), will be held by the service before the child is to be taken off-site. The service's booking forms (typically the Vacation Care booking form) will be created in a manner to provide and collect all relevant details from the parent or authorised nominee.

The written authorisation for an excursion must contain:

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

## **Viability of Excursion**

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

## **Excursion Facilitation and Evaluation**

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### **Preparation**

1. The Nominated Supervisor will ensure the excursion checklist has been reviewed at least one day prior to the excursion.
2. All educators attending the excursion must read and sign off on the relevant and specific excursion risk assessment/s, prior to attending on the day.
3. The Nominated Supervisor will ensure all elements of the excursion checklist have been actioned/addressed prior to departing for the excursion.

### **During the Excursion**

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

Educator practices will reflect the actions outlined in the risk assessment, including plans to manage transportation safety.

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

- First aid kit, medications and forms, medical management plans and medical devices as required.
- Attendance record/roll and staff roster.
- Emergency contact details and numbers for children and staff.
- A telephone or access to one.
- The service mobile phone will be taken on the excursion for educators to record and document children's experiences.
- Educators are able to use personal phones while on an excursion to record experiences, take photos and for use in the event of an emergency. This media content must then be deleted from the phone by close of business on the day of the excursion.

### **Supervision**

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

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

In the event of injury occurring during an excursion, procedures as set out in the [Incident, Illness, Injury or Trauma Policy](#) will be followed.

### **Excursion Evaluation and Reflection**

Educators will inform the assessment of the evaluation of the excursion. Typical observations and documentation addressing the children's learning and wellbeing outcomes will be recorded. Additionally, at the next team meeting, the excursion and risk management plans will be evaluated collectively. Where improvements have been identified, these ideas will be recorded and implemented in future plans for excursions.

## **Transportation/Travel**

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The following transportation and travel procedures only relate to travel occurring as part of an excursion. Any other travel related matters are contained in the policy Transport for Children Other Than Excursions.

### **Selecting Transportation**

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

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

### **Seatbelts and Restraints**

In the case of children being transported in a bus (or car), the following legislative guidelines will be followed:

- Bus transport with 13 or more seats does not need to be fitted with seatbelts and child restraints are not required, however, where possible the service will select buses/coaches with seatbelts as a preference.

- Australian Standard (AS/NZS 1754) child restraints are required for four to seven-year old when traveling in a car (other than taxi) or a van/bus with 12 or less seats. In these circumstances all passengers have to wear seatbelts.
- Public transport - child restraints are not required on buses, trains, or personalised transport services such as taxi, limousine and ride-booking services.

### **Transitioning Between Transport, Premises and Destinations**

- The risk assessment prepared for the excursion will illustrate the specific steps for children:
  - Entering and exiting the service's premises, pick-up location and destination
  - Embarking and disembarking the means of transport, including how children will be accounted for
- Generally, the service will be a face count or roll to account for children periodically throughout the excursion and for critical points such as transitioning between locations. Specific steps will be developed as per the context of the excursion.
- Locations for travel embarking and disembarking will consider the relevant risks, where possible the safety location will be selected for transitioning.
- Consideration will be made to appointing a particular educator to the role of accounting for children as they transition between the means of transport and relevant locations.

### **Vehicle Breakdown/Accident**

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

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.165 Offence to inadequately supervise children
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.99 Children leaving the education and care service premises
  - R.100 Risk assessment must be conducted before excursion
  - R.101 Conduct of risk assessment for excursion
  - R.102 Authorisation for excursions
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA2 – Children's health and safety.
  - QA4 – Staffing arrangements
  - QA 5 – Relationships with children.
  - QA6 – Collaborative partnerships with families and communities.

### **Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011
- Transport Operations (Passenger Transport) Standard 2010 (Qld)

- Working with Children (Risk Management and Screening) Act 2000 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
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# 1.4 Sleep and Rest

## Policy Statement

The health, wellbeing and comfort of children attending OSHC includes access to sleep, rest and relaxation. The service will structure the environment, practices and program to ensure children needing or seeking calmer and quieter areas for play and leisure can access these when required.

The procedures for managing practices surrounding sleep and rest are developed from a robust risk assessment methodology that is monitored and reviewed as required, but at least annually.

The age, developmental stage and the individual needs of each child is a central component of the planning and structure of the program. We recognise that each child is unique and their requirements for sleep and rest will vary. The program will be developed to consider the variability and diversity of children's needs. As children attending Coomera Rivers OSHC are of school age, requirements for routine napping are not considered normal, therefore, the emphasis is on opportunities for rest and quiet time, with the ability to provide sleeping facilities on an as-needed basis.

Parents are welcome and encouraged to discuss and contribute to the planning of the program to ensure their child's individual sleep, rest and relaxation needs are met.

As request and quiet time is a more salient aspect of the program – and children's care needs- the service's physical environment will be shaped to offer inviting areas for calm and restful play. Resources and facilities where children can lay down in comfort will be available during all sessions. If needed, children will be provided with a suitable area to sleep. Where resources such as bedding and linen is used, these will be cleaned and appropriately stored after each occasion.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)

## Roles and Responsibilities

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

## Procedures

### Recognising Children's Needs

All educators will be provided with instruction around children's rights to rest, relaxation and leisure. Additionally, the wellbeing and comfort of children will be an ongoing aspect of reflection surrounding the program. The service will be responsive to the needs of children, demonstrating flexibility around how the program is facilitated. Where needed, children are welcome and encouraged to engage in sleep, quiet and/or downtime experiences.

### Shaping the Environment for Rest and Relaxation

As part of the educational program, restful activities and downtime experiences will be offered throughout the session/day. Where a child is displaying characteristics of fatigue and tiredness, educators will encourage and support the child to access the relevant quiet areas.

For every session of care, the physical environment is thoughtfully configured so children can access a range of play types, including downtime, restful and quiet experiences away from activities where robust or energetic play is occurring.

### Collaborating with Families

Like all aspects of care and programming, families are encouraged to discuss their child's needs with the OSHC leadership team so these can be included in routines and practices. Where specific and intensive sleep and rest is required, individual plans will be created.

As part of the ongoing development of the program, educators will continue to consult with children around preferences for rest and relaxation at OSHC. Where preferences are identified, these will be documented and included in critical reflection and planning.

### Protocols for Children Wanting Sleep

1. Where a child is seeking an area to sleep or rest, then a temporary resting space will be available in the OSHC room.
2. The area will be kept free of active games or loud activities to be as reasonably quiet as possible.
3. Blankets can be used to make the child comfortable.
4. An educator will position themselves to supervise the general area where a child is resting.
5. Once the child has finished sleeping or resting all bedding will be placed in the hamper for washing.
6. All blankets must be washed after a single use.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children's health and safety
  - QA3 – Physical environment
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities

**Policy Controls**

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# 1.5 Food and Nutrition

## Policy Statement

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

To be positioned to provide safe and well-prepared meals, food is prepared in the OSHC kitchen. The development of the menu draws upon children and family's suggestions and feedback.

The food and meals provided by the service will be adequate for the situation. Where desired, children will also be able to access food they may have brought to the service in their lunchbox. Drinking water will always be available and accessible to children.

### Health and Nutrition Guidelines

The services menus and food available will be based on information from recognised health authorities, such as government health department and other organisations with recognised expertise in nutrition (e.g. Nutrition Australia, Heart Foundation, Queensland Health). The primary guidelines for menu items will be based on the National Health and Medical Research Council's 'Australian Dietary Guidelines' and Queensland Education's Smart Choices strategy.

Importantly the service recognises the following key points from the Australian Dietary Guidelines:

- Children and adolescents need sufficient nutritious foods to grow and develop normally.
- In enjoying a wide variety of nutritious foods. Children adolescents should be encouraged to:
  - eat plenty of vegetables, legumes and fruits
  - eat plenty of grain (cereal) foods, (including breads, rice, pasta and noodles), preferably wholegrain
  - include lean meat, fish, poultry and/or alternatives
  - include milks, yoghurt, cheese and/or alternatives
  - Reduced fat varieties should be encouraged.
  - choose water as a drink.
- Likewise, care should be taken to:
  - limit saturated fat
  - choose foods low in salt
  - consume only moderate amounts foods containing added sugars.
- Prepare and store children's food safely.

### The Eating Environment

Outside of the food provided by the service, we are committed to promoting healthy eating habits and providing nutritious food and drinks that meet the needs of children. We aim to influence children and families about making informed food choices and to create a positive and enjoyable eating environment. Educators will encourage and involve children in conversations and routines that promote healthy eating and good nutrition.

### Programming

Cooking and preparing food with children also serves as a valuable program activity. Educators will ensure these activities reflect safe environment or children's participation and consumption.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [7.13 Workplace Health and Safety](#)

## Roles and Responsibilities

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

## Procedures

### Understanding Food and Nutrition Guidelines

1. The Nominated Supervisor will ensure that educators are provided with adequate training and instruction in relation to food handling and storage procedures, including induction processes to inform educator on the service's Food Safety Program.
2. The service will continually consider the additional training needs, and where relevant, educators will be encouraged to attend professional development on food and nutritional related issues.
3. Copies of relevant guidelines will be available for educators to engage with.

### Food Safety

The service has a comprehensive food safety program to ensure food prepared, stored and served is safe and healthy. See policy [2.12 Food handling, Preparation and Storage \(Food Safety Program\)](#) for details.

### Menu Development

The service provides food – typically breakfast and afternoon tea – for the relevant sessions of care. A weekly menu is prepared to ensure the food provided reflects the relevant guidelines for nutrition and healthy eating:

1. In preparing the weekly menu, the educator responsible will demonstrate a wide variety of nutritious foods, including designing items to encourage plenty of desirable foods (vegetables, fruits, grain).
2. All menus will be planned in advance (the week prior).

3. As far as practical, the menu will include plenty of fresh foods, as opposed to pre-packaged and prepared foods.
4. Special dietary needs will be provided for with relevant alternatives or where otherwise impractical, the service will make individual arrangements with families.
5. Consideration will be given to cultural diversity and preferences of children.
6. Children, families and other educators are encouraged to contribute ideas for the menu.

The weekly menu will be displayed near the entrance of the OSHC and will accurately describe the foods to be served throughout the week.

## **Drinking Water**

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1. The Nominated Supervisor will ensure that children have ready access to cool drinking water.
2. Water will be the preferred drink, however, milk and other drinks may be available on occasions.
3. Educators will encourage children to drink extra water during the summer months or after/during vigorous activities.
4. Parents will be required to provide children with a water bottle to take with them on excursions.

## **The Eating Environment**

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Mealtimes and the interactions that occur when eating contribute to the learning outcomes and experience of children. The eating environment will be shaped to be a calm and enjoyable setting.

### **Safe and Pleasant Environment**

1. Children must wash their hand prior to mealtimes following the steps contained in [2.8 Hygiene, Health and Wellbeing Practices](#)
2. Education will promote a calm and hygienic eating setting by encouraging children to sit whilst eating. To promote a suitable environment, meal and snack times will follow a daily routine
3. Educators will sit with children during meals to provide supervision, encourage healthy eating, and promote positive behaviour.
4. When children are finished eating, they will follow routines to leave the area tidy and place items in the washing up.

### **Serving of Food**

1. Independence will be fostered by encouraging children to serve themselves food, under supervision from educators, using appropriate equipment.
2. Anyone serving themselves or others food, will use tongs/utensils (or gloves if needed).
3. At meal/snack times, educators will encourage children to try a variety of foods. Children will never be forced into selecting particular foods.
4. An adequate quantity of food will be available, but children should take an appropriate initial portion and come back if more is required.

### **Diverse Cultural Experiences**

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

## Allergies and Dietary Restrictions

1. Children with allergies or other dietary restrictions will have specific plans developed as per [2.9 Children with Medical Conditions](#).
2. Consistent with regulatory requirements, educators will be informed of any allergies, intolerances, or specific dietary needs of children and the plans prepared for their management.
3. Suitable alternatives will be provided for children with special dietary needs.
4. Educator's training will capture the management process to minimise cross contamination, with alternative foods kept separate from other foods.
5. Children with relevant allergies will be monitor throughout food service and eating to ensure their wellbeing and safety.

## Food Experiences

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Food will not be used in the service as punishment or reward for children.

### Cooking, Food Preparation and Service with Children

1. Children's involvement with food preparation and serving will promoted and explored as much as possible.
2. Play and learning activities surrounding food, such as cooking will be included as part of the program.

### Safety around food activities

1. All times children are handling food, they must follow the service's hygiene practice, including handwashing.
2. Children will not be allowed in the kitchen or food preparation area unsupervised. Food activities that require heating and/or cooking will be fully risk assessed and supervised by an educator.
3. Children who are unwell will not be permitted to handle food consumed by others.
4. Risk assessments will be written to manage any significant risks associated with heat and knives.

## Partnering with Families

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### Sharing Information

1. Parents are responsible for communicating any dietary needs or restrictions. Generally, this information is captured on enrolment. Parents can update the service at any time, should a condition emerge.

### Food Provided by Parents

1. Where parents provide food for their children, the service will promote relevant nutritional information as well as suggestions for healthy food and drink choices,
2. Any issues will be addressed and planned with each individual family directly.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.77 Health, hygiene and safe food practices
  - R.78 Food and beverages
  - R.79 Service providing food and beverages
  - R.80 Weekly menu
  - R.168 Education and care service must have policies and procedures

- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA6 – Collaborative partnerships with families and communities

**Additional Regulatory Context and Guidance**

- Food Act 2006 (Qld)
- Australian dietary guidelines - National Health and Medical Research Council’s

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# 1.6 Technology and Screen-Time

## Policy Statement

The service recognises and acknowledges that technology and media viewing form part of a varied and balanced program, relevant to the needs and interests of children. Therefore, this policy aims to establish guidelines for children’s media viewing while at their OSHC service.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.10 Children’s Property and Belonging](#)
- [7.15 Social Media and ITC Usage](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish policies to reflect the standard of care expected for the service.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Ensure the program and delivery of service meets the expectation of the policy, relevant guidelines and family wishes.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Ensure any media viewed or accessed by children is consistent with the services standards for rating/classification.</li></ul>   |

## Procedures

### Service Responsibilities

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

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

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

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

### Educator Responsibilities

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

## Family Responsibilities

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

## Legal and Regulatory Foundation

### National Quality Framework

- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA6 – Collaborative partnerships with families and communities.

### Additional Regulatory Context and Guidance

- Australian 24-Hour Movement Guidelines for Children and Young People (5-17 years)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## Policy Group 2

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# Children's Health and Safety

The health and wellbeing of each OSHC child is **safeguarded and promoted**.

Children enrolled in OSHC have a right to receive high-quality education and care in a setting that **promotes their health and safety** are reinforced by the policies contained in this section. Fundamentally, the service must provide an environment that protects children and ensures learn in ways that are free from harm or injury.

To enhance the health and safety outcomes of the service, educators will also foster each child's wellbeing, healthy lifestyle choices, and the development of competence, confidence, and independence.

## 2.1 Providing a Safe Environment

### Policy Statement

#### Statement of Commitment to the Safety and Wellbeing of Children

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

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

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

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

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.6 Technology and Screen-Time](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.1 Space and Facilities Requirements](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)

- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.2 Enrolment and Orientation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.9 Childhood Immunisation](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining The Responsible Person](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.13 Workplace Health and Safety](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Establish policy and management systems to monitor and promote safety and protection of children.</li> </ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Will lead the service’s culture and delivery of safety and wellbeing of children.</li> <li>• Will ensure suitable persons are recruited, inducted and supported to care and positively guide children.</li> <li>• Will respond to incidents with timeliness and professionalism.</li> </ul> |
| All Staff            | <ul style="list-style-type: none"> <li>• Ensure conduct upholds the safety, wellbeing and best interest of children.</li> <li>• Supervise and monitor the environment and children’s interactions.</li> <li>• Identify and respond to the needs of children.</li> <li>• Follow the guidance and support of management.</li> </ul>    |

## Procedures

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

### A Safe Physical Environment

#### Risk Assessment Methodology

The service’s foundation for a safe and healthy physical environment is informed by best practice and standards set out in our policy [7.13 Workplace Health and Safety](#), which establishes —

- A risk assessment methodology to systematically identify and control for harm and hazards likely to cause injury.
- The routines and practices to monitor the physical environment to ensure it meets documented standards and expectations, such as safe, clean and good repair, to ensure safety.

## External Environments

Complementary risk assessment practices are adopted in situations where the service operates outside the premises. These procedures are set out in [1.3 Excursions](#), and where relevant, [2.6 Water Safety](#) policies and address--:

- The relevant risks in any public environment accessed by the service,
- Parent's access to information for informed consent for their children's participation.

## Reducing Exposure to Hazards

Procedures to address specific hazards are set out in the following policies—

- For emergency situations, the planning and rehearsal for steps to rapidly assemble in a safe location is set out in [2.13 Emergencies and Evacuations](#).
- To ensure children have access to facilities to treat any injuries is addressed in procedures set out in [2.4 Incidents, Illness, Injury, and Trauma](#) and [2.5 Administration of First Aid](#).
- For illness, disease and infection risks are primarily set out in [2.5 Infectious Diseases](#), which establishes protocols for limiting exposure as a primary intervention, complemented by health and hygiene practices.
- Setting up an environment to reduce exposure to UV hazards is set out in [2.3 Sun Safety](#).
- Ensuring there is a safe and suitable eating environment; steps to address associated hazards are set out in [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#).
- Monitoring the compliance of the [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#) policy to ensure the environment is free from alcohol, smoking and illicit substances and where necessary, collaborate with the school community and take appropriate action.
- Toilet facilities are suitable for children's health and safety, while supporting supervision and children's dignity and independence. Practices for the management of toileting arrangements are set out in [3.4 Children's Toileting](#).

## Practices to Promote Children's Safety and Wellbeing

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The practices of the service are the operationalised reflection of our service's commitment to a culture of child safety and wellbeing. These practices include—

### Employment and Induction

Educator selection and induction practices are developed and implemented to ensure suitable persons are employed for the interaction and care of children. The procedures are set out in [4.1 Recruitment and Employment of Educators](#), and includes-

1. Interview protocols that assess the candidate's merit for the position, including evidence they have the suitable knowledge and ability to meet the service's requirements.
2. Judgements and decision-making for selection and recruitment are transparent, free from bias and undue influence, as set out in the service's Code of Conduct.
3. All employees must comply with blue card requirements, including holding a positive notice, that is linked to the service, prior to commencement.

Once offered employment, staff members are thoroughly inducted to ensure they have a sound understanding of the key requirements to appropriately work with children and discharge their responsibilities. The induction material and processes are designed to demonstrate the staff member's understanding and ability as being suitable and appropriate to provide education and care.

### Staffing Arrangements

A roster and coordination of duties is coordinated to ensure the regulatory requirements for ratios, qualifications, leadership and supervision are met. Educators are not left alone at the service, with a requirement of at least two staff members being present at all times the service operates.

Leadership and Management forms a key element of the staffing arrangement mix. People with management and control of the service are fit and proper for the role, as set out in [7.5 Governance and Management](#). Likewise, where the Nominated Supervisor is not present at the service, a suitable Responsible Person is appointed. The assessment of the suitability of the Responsible Person is set out in [7.2 Determining the Responsible Person](#).

### **Supervision and Duty of Care**

Effective supervision practices play a pivotal role in ensuring children are safe, observed, and engaged, thus preventing incidents, injuries, and potential harm. Effective supervision is ensured by—

- Coordinating staffing arrangements to maximise resources, including the consideration of educator skill, knowledge and capacity.
- Provide clear instructions to ensure educators are vigilantly monitoring children’s activities, interactions, and environments, and are responding promptly to any potential risks or concerns.
- Protocols are established and monitored around supporting children where privacy and dignity are important considerations (i.e. toileting) and facilities support appropriate boundaries (staffing toilets) - [34 Children’s Toileting](#).
- Consider the relevant risks and hazards associated with activities, including the needs of children who are or may participate.
- The risk assessment and procedures to manage their travel, arrival and collection as set out in [2.3 Safe Arrivals and Departures of Children](#).
- Educators are aware of children’s individual medical and health needs. Planned and informed practices for their care are set out in Example 2.6 Medication Conditions in Children.
- A planned and coordinated approach for the response to incident and injuries is set out in [2.4 Incidents, Illness, Injury, and Trauma](#).

### **Professionalism and Conduct**

The service has firm procedures to ensure interactions and relationships with children are supportive, including the practices to support behaviour via positive guidance. Children are to be cared for in an environment that demonstrates respect, upholds dignity and promotes a child’s self-regard, as set out in [5.1 Interactions and Relationships with Children](#). These practices also consider the role of psychological and cultural safety to reflect our values of wellbeing and inclusion.

All persons positioned to interact and build relationship with children have clear guidelines for their behaviour ([4.1 Code of Conduct](#)), with all staff supervised to ensure their actions are consistent with the service’s Code of Conduct.

### **Collaboration and Transparency**

Parents remain well informed of potential hazards and relevant risk management plans. With informed consent required for participation in the service as set out in 6.2 Acceptance and Refusal of Authorisation.

The service also has established requirements and expectations for children and young people’s participation and attendance at the service. Should any child compromise the safety and wellbeing of others, formal mechanisms allow for review of additional support and/or enrolment as set out in [6.2 Enrolment and Orientation](#).

Likewise, formal mechanisms are established to encourage children and families to speak up about any concerns or discomforts they may have through the [6.7 Feedback and Complaints](#) and [7.8 Managing Concerns of Harmful Sexual Behaviours](#) policies, which ensure families are not exposed to retribution or victimisation as a result of having concerns raised.

## Identifying Children in Need of Protection

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Providing suitable training and instruction for staff on their duty as Mandatory Reporters to identify and respond to allegations or suspicion of harm and abuse (see [2.12 Child Protection and Mandatory Reporting](#)).

## Online Environments

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To ensure children at the service are provided with a safe environment at all times, including online environments, the service has set out relevant procedures in [2.13 Safe Online Environments for Children](#).

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.165 Offence to inadequately supervise children
  - s.166 Offence to use inappropriate discipline
  - s.167 Offence relating to protection of children from harm and hazards
  - s.170 Offence relating to unauthorised persons on education and care service premises
  - s.171 Offence relating to direction to exclude inappropriate persons from education and care service premises
  - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
  - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulations:
  - R.12 Meaning of serious incident
  - R.82 Tobacco, drug and alcohol-free environment
  - R.83 Staff members educators not to be affected by alcohol or drugs
  - R.84 Awareness of child protection law
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.88 Infectious diseases
  - R.89 First aid kits
  - R.90 Medical conditions policy
  - R.91 Medical conditions policy to be provided to parents
  - R.92 Medication record
  - R.93 Administration of medication
  - R.94 Exception to authorisation requirement—anaphylaxis or asthma
  - R.95 Procedure for administration of medication
  - R.96 Self-administration of medication
  - R.97 Emergency and evacuation procedures
  - R.98 Telephone or other communication equipment
  - R.99 Children leaving the education and care service premises
  - R.122 Educators must be working directly with children to be included in ratios
  - R.123 Educator to child ratios—centre-based services
  - R.136 First aid qualifications
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements

- QA5 – Relationships with children
- QA6 – Collaborative partnerships with families and communities
- QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- Child Protection Act 1999 (Qld)
- Department of Education and Training Child Care Provider Handbook
- United Nations Convention on the Rights of the Child

#### **Policy Controls**

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Endorsed by: Approved Provider

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Date Endorsed: 01 September 2023

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Date implemented: 14 September 2023

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Version: v.2023-1

## 2.2 Supervision and Educator Ratios

### Policy Statement

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

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)

### Roles and Responsibilities

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

### Procedures

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

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

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

### Composition of Qualified Staff

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

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

### Volunteers

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

### Excursions and Special Activities

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

Staff can access the Supervision Plans via OWNA or SharePoint.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National:
  - s.162 Offence to operate education and care service unless responsible person is present
  - s.169 Offence relating to staffing arrangements
- Education and Care Services National Regulations:
  - R.13 Meaning of working directly with children
  - R.122 Educators must be working directly with children to be included in ratios
  - R.123 Educator to child ratios—centre-based services
  - R.136 First aid qualifications
  - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.3 Safe Arrivals and Departures of Children

### Policy Statement

Coomera Rivers OSHC recognises its responsibility to provide quality care for children, and this includes practices and procedures to ensure they are attending and supervised. Children's arrival, departure and attendance are critical processes for the service. Clear communication and expectation of roles are essential elements to ensure children are cared and accounted for at all times. Where unexpected events occur, the service will have plans and procedures in place to respond in a timely and collaborative manner, upholding the paramount principle of the safety of children.

The service will ensure departure including persons collecting children from the service will be reflective of regulations and parental consent. Sound documentation and records will reflect the services practices.

### Hours of Operation

|                    |                        |                   |                        |
|--------------------|------------------------|-------------------|------------------------|
| Before School Care | <b>6:00am – 8:30am</b> | After School Care | <b>2:30pm – 6:30pm</b> |
| Vacation Care      | <b>6:00am – 6:30pm</b> | Pupil Free Days   | <b>6:00am – 6:30pm</b> |

### Requirements for children leaving the service (Regulation 99)

The child may only leave the relevant premises if the child:

- is given into the care of—
  - a parent of the child\*; or
  - an authorised nominee named in the child's enrolment record; or
  - a person authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises; or
- leaves the premises in accordance with the written authorisation of the child's parent or authorised nominee named in the child's enrolment record; or
- is taken on an (approved) excursion, as outlined by policy
- is given into the care of a person or taken outside the premises—
  - because the child requires medical, hospital or ambulance care or treatment; or
  - because of another emergency.

\*Please note: a parent does not include a parent who is **prohibited by a court order** from having contact with the child.

### Release for Extra Curricular Activities

Coomera Rivers OSHC is happy to support children and families access the range of additional activities which occur during sessions of care, this can include activities organised by third parties or school-based programs (like band and choir).

Notwithstanding Coomera Rivers support for extra circular activities, it does not have the resources to facilitate or escort children between the service and other activities. Where children are attending extra circular activities, they will have to have the capacity to independently transition or be collected and returned by the provider.

For the service to facilitate children's release and account for their return (where relevant), written permission must be provided by the parent. Where the request is incompatible with expectations for safety, the service may refuse authorisation.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

## Appendices and Forms

- [2.4.1 Arrival and Accountability Flowchart](#)

## Roles and Responsibilities

|   |  |
|---|--|
| Approved Provider                       | <ul style="list-style-type: none"> <li>• Will ensure employees are provided with procedures that will support the service to account for care and respond to children’s attendance, collection and departure.</li> <li>• Ensure relevant notifications are provided to the Regulatory Authority, as relevant.</li> </ul>   |
| Nominated Supervisor/Responsible Person | <ul style="list-style-type: none"> <li>• Will be responsible to ensure children are accounted for, collected and depart as parents have expressed in writing or in response to an emergency.</li> <li>• Ensure records are maintained that documents the details and persons dropping off and collecting children</li> <li>• Will collaborate with the school community to respond to children who are not accounted for in a timely manner.</li> <li>• Will respond and lead critical incidents, liaising with police as required.</li> </ul> |
| All Staff                               | <ul style="list-style-type: none"> <li>• Will provide quality supervision and support to children, responding to needs to ensure children feel secure to remain in attendance at the service.</li> <li>• Respond to critical incidents in a timely manner, providing clear and concise information to the Nominated Supervisor for response and management.</li> </ul>   |

## Procedures

### Administration of Attendance Records

OSHC uses it’s child care software (OWNA) and iPads to records children’s attendance ([Regulation 158](#)) and manage bookings. Parents and/or the person collecting or delivering the child to OSHC must complete the sign-in or out procedures.

### Arrival and Departure Protocols

#### Arrivals - Before School Care and Vacation Care

1. All children are to be signed in by parent, authorised nominee or other suitable person.
2. Non-attendance will be submitted in OWINA by a child’s parent, the Responsible Person or delegated Educator.

#### Collection and Sign-in - After School Care

1. An assigned educator will collect the Prep students from their respective classrooms at 2:30pm each day.
2. Prep students will be signed in by the Educator and remain in the Prep area.
3. Year 1 students make their way to the Year 1 playground where they will be signed in by an Educator.
4. Year 2-3 students will make their own way to the 2/3 playground area and be signed in by an Educator.
5. The Year 4 – 6 students will make their own way to the hall. They are signed in through the gate by an Educator.

### **Confirming Absences**

See policy [6.3 Bookings and Cancellations](#) for details surrounding notifications for absences.

1. At approx. 3:00pm it is expected all children have arrived at OSHC. Any child who has not arrived by 3:00pm will be accounted for by contacting relevant people to confirm location and/or absence.
2. The educators signing in children is responsible for confirming the whereabouts of children that have not arrived. The first step in locating a child is to call the school office to confirm children who may have been absent from school (due to illness etc.).
3. The priority is then to confirm the children who would be expected to be attending by calling parents and/or emergency contacts. Students who have been notified of their absence at school will be confirmed as non-attending by contacting a parents or person named in the enrolment form. Correspondence with families will always be respectful. The educator may provide a gentle reminder to notify OSHC when the confirmation phone call is made.
4. The Nominated Supervisor and/or Responsible Person will, if necessary, communicate persistent non-notification issues with the parent in a different forum.
5. Where a child's location cannot be confirmed, the following actions will be taken to locate the child and expected attendance by
  - a) checking immediate proximity,
  - b) communicating with the school office, and
  - c) phoning all parents/emergency contacts.
6. Where a child cannot be located after reasonable effort to identify their whereabouts and where parents/emergency contact cannot be contacted, the Police will be notified. These steps and decision-making are illustrated in [Arrival and Accountability Flowchart](#).

### **Departures - Before School Care**

1. Children who participate in sport or music programs within the school and where a parent has signed an early release permission form (recorded in the file), may be signed out early as the written parent permission indicates.
2. The responsible person will sign children out at 8:20am
3. All Prep students will be transitioned to their relevant classroom by an educator at 8:20am.

### **Departures - After School Care and Vacation Care**

1. All authorised nominees and parents sign children out via the iPad located in front of the OSHC room. All visitors and authorised nominees are requested to report directly to the OSHC room.
2. All persons signing a child out must be registered with signed authority to collect the child (except in an emergency):
  - parent (unless parent is prohibited by a court order),
  - authorised nominee (as recorded on enrolment form), or
  - where the parent has provided written authorisation and the departure is in accordance with the parent authorisation
3. Where the departure relates to an emergency a record of the departure will be recorded in an incident report or a note attached to the child's enrolment form (by the Responsible Person) outlining the details.

## Authorised Nominees

All authorised persons collecting children must be listed in the enrolment form or otherwise have written authorisation (where the collection is not related to an emergency). Evidence of the identity of the person collecting a child may be requested by the centre, where the person is not known.

1. Where staff are unsure of the authorisation, they are to contact parent/guardian to seek clarification and advice. Notwithstanding any verbal direction, unless an emergency, the parent (or authorised nominee) must provide written advice before the child can leave the service.
2. All relevant authorisations are to be kept in the enrolment record and any updates attached to this documentation (Regulations 161).

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

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

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

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

1. the child requires medical, hospital or ambulance care or treatment
2. another emergency

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

## Late Collections

Staff will contact parents if child has not been collected by 6:30pm. A late fee charged will be added to the account (see [Fees Policy](#)). In the event a child has not been collected a half-hour after closing time (7:00pm) **and** there is no response from a parent, authorised nominee or emergency contact, advice will be sought from the police and an incident report completed ([Incident, Illness, Injury or Trauma](#) & [Managing Notifications](#)).

## Extra-Curricular Permission

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Children may be released to attend external (extra-curricular) activities, subject to parent's written consent. The service will not supervise children's transition or escort children to activities. Children must have the capacity to independently transition or parents must coordinate the provider to collect children from OSHC.

To authorise a child to leave early or arrive late, the parent must complete an extra-curricular participation form, setting out-

- The dates the child will attend.
- Times of departure or expected arrival.
- Any other relevant circumstances for their release.

The parent must inform the service of an absence where the child will not attend/return to the service at the expected time. Where there is a reasonable expectation the service is to have assumed care of the child and their whereabouts is unknown, relevant unaccounted for procedures will occur.

Subject to [6.4 Acceptance and Refusal of Authorisations](#) policy, the service may refuse the authorisation to release a child where there is a reasonable belief the child's safety or wellbeing is put at risk by the request.

## **Incident Management – Children Arrivals and Departures**

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### **Children who arrive without a booking**

#### A child(ren) is known to the service

1. Where a child(ren) presents to the service without a booking and is known to the service (i.e. enrolled), the service will contact the parent/s in the first instance and inform/resolve the absence of care and supervision.
2. At no time is an OSHC employee to send a child away in instances where the whereabouts of the parent/caregiver is unknown, and a child is seeking assistance.
3. When contact is made with a parent and there has been confusion about attendance and if it is possible to include a child (being mindful of ratios and capacity) and at the parent's request, then the child may be signed in and participate in the service's program.
4. The OSHC employee will confirm with the Finance Manager, that the enrolment is not suspended due to non-payment of family account.

#### A child(ren) is not known to the service

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

#### Parents/caregivers are unable to be contacted

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

### **Child Leaving without Permission**

1. If a child leaves the centre without permission or without the authority described above (including being collected by an unauthorised person), the staff will assess the situation immediately and will call the police and a parent as soon as reasonably possible.
2. Staff will not leave the centre to follow a child if:
  - It will or may leave the other children in the centre with insufficient supervision.
  - It will or may expose that staff member to an unacceptable risk of personal harm
3. Where both possible and practice, a staff member will document relevant details such as details of any person collecting the child and/or their vehicle.
4. As soon as practical the Approved Provider will be notified of the incident.
5. A notification will be made to the Regulatory Authority of the incident.
6. Following the incident, Consultation with parents, the Approved Provider and Nominated Supervisor will direct the plan of action moving forward. Temporary suspension from the Centre may be considered where there is a risk to safety.

### **Children Unaccounted for During the Program**

1. In the event that a child is unaccounted for during the operating hours of the program, the Nominated Supervisor and Approved Provider will be notified immediately by the educator as soon as the disappearance is discovered/identified.

2. A role call will be facilitated to document the children in attendance and confirm the absence of the particular child/ren.
3. The Nominated Supervisor / Responsible Person will undertake a rapid and comprehensive search of the centre's premises to locate the child. In the event that the child is not located, the child's parent/guardian will be notified and the police will be called.
4. The Nominated Supervisor will advise the Approved Provider immediately upon calling the police and the Regulatory Authority will be notified using the appropriate forms.

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

[An incident report](#) will be completed and will include information such as:

1. Date, time and location of the child when they were last accounted for.
2. Details of the supervising educator, and the circumstances surrounding their disappearance. inc. how many educator's vs children where in the space and where the educators were located.
3. Details of actions instigated to locate the child
4. What the child was wearing and any distinguishing features.
5. Time parent/guardians and other agencies were contacted.

Report details of incident to Regulatory Authority through the procedures outlines in [7.7 Managing Notifications](#)

## Legal and Regulatory Foundation

### National Quality Framework

- **Education and Care Services National Regulations:**
  - R.12 Meaning of serious incident
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.99 Children leaving the education and care service premises
  - R.158 Children's attendance record to be kept by approved provider
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- **National Quality Standard**
  - QA2 – Children's health and safety
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities.

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Child Protection Act 1999 (Qld)
- Queensland Criminal Code 1899

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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- Department of Education and Training Child Care Provider Handbook

## 2.4 Incident, Illness, Injury or Trauma

### Policy Statement

The purpose of this policy is to ensure the health, safety, and welfare of all children, staff, and visitors at the service. The policy outlines the procedures for managing incidents, illnesses, injuries, and trauma events effectively and swiftly to ensure the wellbeing of all individuals involved. Notwithstanding the service's efforts to proactively prevent injuries or trauma occurring at the service, where it occurs, the service will take action to minimise the impact of injuries, illnesses and trauma.

The Nominated Supervisor, or in their absence, the Responsible Person, will typically lead the response to any significant events, in their absence the Responsible Person will take charge. All appropriately qualified educators will support in the initial response to any incidents occurring at the service. All other educators will provide support within their training and capacity, raising the alarm for additional help.

Drawing upon our requirements and the Coomera Rivers OSHC Philosophy, we recognise the important of communication with parents and our duty to inform them of all significant and serious matters impacting their children. Records that are created to document incidents and events will be accurate and concise. These documents and all relevant information will be provided to parents in timely manner. While additional discussions and communication may occur, the service will primarily use OWNA to communicate written details of incidents, including illness, injuries or traumatic events.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [3.5 Emergency and Safety Equipment](#)
- [5.2 Positive Behaviour Support Practices](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

### Appendices and Forms

- [Incident, Injury, Illness, or Trauma Report](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Will ensure all significant events (incident, illness, injury or trauma) occurring at the service are responded to with timeliness and responsiveness.</li><li>• Ensure all responses are compliant with relevant regulations or legislation.</li><li>• Staff are equipped with knowledge and training to fulfil their duties.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• To lead the response to any significant events occurring at the service.</li></ul>   |

|           |  |
|-----------|--|
|           | <ul style="list-style-type: none"> <li>• To provide timely notification to parents and the Approved Provider and no more than 24 hours after the events.</li> <li>• Provide instruction to staff and volunteers on incident, illness, injury and trauma management.</li> <li>• Ensure record of events are recorded as soon as practicable and at least written in less than 24 hours after the event.</li> <li>• Ensure records are maintained and stored according to service procedures.</li> </ul> |
| All Staff | <ul style="list-style-type: none"> <li>• To provide immediate care and support to any significant event.</li> <li>• Accurately record events in a timely manner and inform the Nominated Supervisor of any significant issues as soon as practicable.</li> </ul>   |

## Procedures

### Framework for the Seriousness of Incidents

The service will proactively work towards avoiding injuries or trauma occurring at the service, and to minimise the impact of injuries, illnesses and trauma by responding appropriately and as quickly as possible.

The Nominated Supervisor will typically lead the response to any significant events, in their absence the Responsible Person will take charge. All appropriately qualified educators will support in the initial response to any incidents occurring at the service. All other educators will provide support within their training and capacity, raising the alarm for additional help.

In addition to ensuring a suitable response to managing critical events, the service has a duty to notify any **Serious Incidents** to parents and the Regulatory Authority. The service will follow the procedures outlined in the policy [Managing Notifications](#) for reporting Serious Incidents.

| Definition of Serious Incident  |  |
|---|--|
| Serious Incidents (as defined in National Regulation 12), includes the follow occurrences:  |  |
| Death of a child  | while that child is being in the care of the service   |
|   | following an incident occurring while in the care of the service.  |
| Any incident involving serious injury or trauma to a child while in the care of the service | which a reasonable person would consider required urgent medical attention from a registered medical practitioner  |
|   | for which the child attended, or ought reasonably to have attended, a hospital – e.g., a broken limb.  |
| any serious illness of a child  | for which the child attended, or ought reasonably to have attended, a hospital – e.g. severe asthma attack, seizure or anaphylaxis reaction.   |
| any emergency for which emergency services  | An incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person/s at service. It does not mean an incident where emergency services attended as a precaution. |
| any circumstance where a child is in the care of the service, and -                         | appears to be missing or cannot be accounted for.  |
|   | appears to have been taken or removed from the service's premises in a manner that contravenes the Regulations.  |

is mistakenly locked in or locked out of the premises or any part of the premises.

## Managing and Responding to Critical Events

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The Nominated Supervisor (or Responsible Person) will lead the response to any critical events to ensure the safety and wellbeing of children attending the service. The management of emergency or critical situations will adopt the following principles:

- Staff providing comfort and reassurance to the child.
- Actively seeking the assistance of a first aid qualified educator.
- All first aid qualified educators administering care within the bounds of their training.
- Ensure all other children are appropriately supervised, actioning an emergency evacuation or lock-down, if required.
- Uphold the dignity and comfort of children, removing them to quiet or private areas of the service (as needed).
- Providing timely information and notification to parents/guardians as so far as practicable.
- Ensure the child(ren) is/are actively monitored and supervised with the intention to escalate the response, if needed (i.e. additional emergency support).

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

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

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

1. Staff will address any immediate dangers or hazards (to ensure no further injury/harm occurs).
2. Staff will address any life-threatening circumstances as a priority, communicating the need for support. A call to emergency services (000) should occur immediately if the situation is critical or serious.
3. Once and if in a stable condition, staff will seek to comfort and calm the child.
4. The Nominated Supervisor (or Responsible Person) will be notified as soon as practicable.
5. If possible, the parents will be contacted by the Nominated Supervisor or delegated educator to advise of events, seek any emergency authorisations and/or coordinate a plan of action.
6. Dependent on authorisations and circumstances, the following may occur:
  - Medication administered
  - Transportation to hospital
  - Parents collect the child for medical treatment
  - Relevant treatment outlined in medical action plan, or guided by training or emergency services
7. As soon as practicably possible, the parent will be contacted by an available educator to notify of the injury and action taken to manage the circumstances, where appropriate.
8. The child's condition will be continue to be monitored by an qualified educator, any changes to the health or condition of the child will be suitably escalated.
9. The child will continue to be monitored until appropriate medical care has arrived or until the parent's arrival (i.e. child's departure).

Actions for managing the response to an anaphylaxis, asthma or diabetic emergency can be found in [Children with Medical Conditions](#) Policy.

Once the circumstances have stabilised, the educator providing care will document the events.

## **Illness Response and Management**

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

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

## **Trauma Response and Management**

Signs of trauma could include but are not limited to:

- Emotional distress or disassociation
- Sudden or significant changes in behaviour
- Physical injury
- Aggression or avoidance

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

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

Once the circumstances have stabilised, the educator providing care will document events.

## **A Child Missing or Unaccounted For**

See [Arrivals and Departure of Children](#)

## **A Child Mistakenly Locked In or Out of the Service**

In an instance where a child has been mistakenly locked in or out of the service, staff should look to immediate address the situation by opening the locked area. Staff should then:

1. Support the child's immediate wellbeing to ensure they are emotionally supported by the incident.
2. As soon as practicable, the Nominated Supervisor (or Responsible Person), should notify the parent of the event.
3. An incident report will be completed by the staff member initially responding, with support of the Nominated Supervisor.
4. The details of the incident will be reported to the Approved Provider as soon as practicable.
5. The Nominated Supervisor and Approved Provider will coordinate the preparation and submission of the notification, following the steps outlined in [Managing Notifications](#)
6. Following the submission of the notification, the Approved Provider will coordinate an appropriate investigation into the circumstances of the incident, outlining steps of improvement to mitigate future occurrences.
7. The Approved Provider and Nominated Supervisor will collaborate any necessary additional response as determined by the Regulatory Authority.

### **Death of a Child**

Should the death of a child occur while being cared for or as the result of an incident while being care for, then staff members should:

1. Immediately call emergency services.
2. Evacuate children to the appropriate area (evacuation or lockdown, depending on circumstance).
3. As soon as practicable, the Nominated Supervisor (or Responsible Person), should notify the parent of the event.

Becoming aware a child has died as the result of an incident while being care for by the service:

4. An incident report will be completed by the staff member initially responding and any witnesses, with support of the Nominated Supervisor.
5. The details of the incident will be immediately reported to the Approved Provider.
6. The Approved Provider will lead the coordination of reporting, including correspondence with the Regulatory Authority, parents, and police.
7. The Nominated Supervisor and Approved Provider will coordinate the preparation and submission of the notification, following the steps outlined in [Managing Notifications](#)

### **Other Actions**

1. Where specific circumstances do not outline procedures for educators to follow, educators must look to protect the safety and wellbeing of children as a first priority. Possible actions include:
  - a. Emergency evacuation procedures
  - b. Lock-down/harassment procedures
  - c. Notifying emergency services (police etc.)
2. Where the nature of the event involves disaster response, educators should seek advice from emergency services, other professional(s) relevant to the circumstances, and/or parents; in order to manage the immediate actions/treatment.
3. Following the incident/events being controlled, educators then need to notify management
4. If not already actioned, the Nominated Supervisor (or delegate) should communicate events to parents.

### **Notification to Parents (or Authorised Nominee)**

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Any illness, injury or trauma which occurs while a child is being educated and cared for by the service. must be documented as per the [Incident, Illness, Injury or Trauma Report](#) requirements, and parents notified.

The Approved Provider/ Nominated Supervisor must ensure that a parent of a child being educated and cared for by the service is notified as soon as practicable, but not later than 24 hours after the occurrence.

Depending on the circumstances, a proportion response – i.e. an immediate phone call in a critical situation, or in-person at collection/email for minor injuries, will be used to communicate the details of these events with families.

If the Approved Provider becomes aware of an incident after the fact from a parent, they should notify the Regulatory Authority within 24 hours of being notified that the incident was serious. e.g. a child has hurt their leg, but is not in serious pain and continues to play, the next day the parent advises that the child has sustained a fracture.

## **Documenting an Incident, Illness, Injury or Trauma Event**

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An [Incident, Illness, Injury or Trauma Report](#) must be completed, as soon as reasonably possible after a child is involved in any incident, suffers an injury, illness or trauma, by the educator who administered care (or first aid etc) to the child.

The information contained in the incident, accident, injury or trauma report forms must not be used for any purpose except strictly in accordance with this policy, the [Information Handling \(Privacy and Confidentiality\) Policy](#) and any other relevant BBASC policies.

The incident, injury, trauma and illness record must include (National Regulation 87):

- details of the incident/event, including:
  - the name and age of the child.
  - the circumstances leading to the incident, injury or trauma.
  - the time and date the incident occurred, the injury was received or the child was subjected to the trauma.
- details of any illness which becomes apparent while the child is being educated and cared for including—
  - the name and age of the child.
  - the relevant circumstances surrounding the child becoming ill and any apparent symptoms.
  - the time and date of the apparent onset of the illness
- details of the action taken by the service, including—
  - any medication administered or first aid provided.
  - any medical personnel contacted.
- details of any person who witnessed the incident, injury or trauma.
- the name of any person whom the service notified (or attempted to notify), and the time and date of the notifications or attempted notifications
- the name and signature of the person writing the record, and the time and date report was created

An [Incident, Illness, Injury or Trauma Report](#) must be written as soon as practicable, but no later than 24 hours after the incident, illness, injury or trauma.

Any Serious Incidents must be reported to the Approved Provider as soon as practicable. A copy of the report will also be forward to the Approved Provider, once completed.

## **Authority to Provide Medical Attention**

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Written consent from the child's parent/authorised persons will be sought through the enrolment process for the Nominated Supervisor and/or staff member qualified in first aid, to obtain medical attention, in keeping with the policies and procedures of the service, if required. Should the child have a relevant health condition, they will be required to have a management (action) plan, risk minimisation assessment and communication plan. (see [Children with Medical Conditions Policy](#)).

Written consent will also be obtained from the parent/authorised persons for the use of all health and other personal information which the service has relating to the child, for the purpose of enabling the service to:

- Administer care and assistance to the child, including by obtaining emergency or other medical assistance or care for the child in accordance with this policy.
- Report any incident, injury, illness or trauma as required by law.

To remove any doubt, all costs incurred in obtaining medical attention for a child will be met by the parents/authorised persons (i.e. the account holder). Under the Community Ambulance Cover Act 2003, all Queensland residents are covered for ambulance transport services anytime, anywhere across Australia. Families who are not Queensland residents must seek cover at their own cost.

## Facilities and Resources

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Disposable gloves will be worn when administering first-aid, and will be disposed of immediately after use, in accordance with the [Adminstration of First Aid Policy](#).

The Nominated Supervisor will, or delegate a qualified educator to, ensure that the following are kept at the service at all times, and are accessible to the educators but not to children:

- A fully maintained and equipped first aid kit, adequate for the number of children attending the service, and that items stored in the first aid kit are within the identified use by date (where applicable)
- Service Phone.
- A recognised and current first-aid manual.
- A cold pack and/or ice ready for use in the administering of first aid.
- A store of disposable gloves.
- Current emergency contact telephone numbers.

## Quality Improvement

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Following any significant event, the Nominated Supervisor will debrief the events with educators, identifying any area of learning or improvement. The actions identified will be reported to the Approved Provider.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.12 Meaning of serious incident
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.90 Medical conditions policy
  - R.97 Emergency and evacuation procedures
  - R.99 Children leaving the education and care service premises
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
  - R.162 Health information to be kept in enrolment record
  - R.168 Education and care service must have policies and procedures

- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.174 Time to notify certain circumstances to Regulatory Authority
- R.174A Prescribed information to accompany notice
- R.177 Prescribed enrolment and other documents to be kept by approved provider
- R.181 Confidentiality of records kept by approved provider
- R.183 Storage of records and other documents
- National Quality Standard:
  - QA2 – Children’s health and safety

**Additional Regulatory Context and Guidance**

- Child Protection Act 1999 (Qld)
- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## 2.5 Administration of First Aid

### Policy Statement

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

Broadly, the service has two areas of first aid administration—

- First aid facilities
- First aid expertise - qualified staff

Fundamentally, the specifics of these requirements are created from a risk assessment (requirements assessment) procedure. In establishing the requirements of the service, the implemented procedures are followed to ensure the content, design, accessibility and visibility of equipment is managed to a compliant and quality standard.

To reflect our commitment to children’s safety and protection, the expectations for our educators to hold approved qualifications exceed the regulated minimum standard. We recognise the importance of timeliness and availability to care and treatment when first aid is required and resource our service accordingly.

For the purposes of first aid qualifications (including emergency asthma and anaphylaxis), ‘approved’ means qualifications set out in the NQF approved qualifications list (Regulation 137), completed within the relevant timeframes, with training outside of this list being seen as irrelevant. All evidence of a staff member’s first aid qualifications will be kept on file, in their employee record.

### Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Will support employees to have access to regular training to exceed qualification requirements.</li><li>• Ensure the service is stocked and has access to ample first aid supplies and equipment.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Monitor established routines to ensure first aid supplies are stocked and available.</li><li>• Coordinate training opportunities for educators.</li><li>• Monitor staff qualifications and rostering requirements.</li><li>• Support responses to injuries and incidents.</li></ul> |

All Staff

- Ensure personal first aid kits are restocked after use.
- Respond to injuries and incidents in accordance with training and qualifications.
- Report any identified issues with first aid management to the Nominated Supervisor for resolution.

## Procedures

### First Aid Kits and Supplies

The Approved Provider recognises their responsibility under Education and Care Services National Regulation 89 to ensure:

- An appropriate number of first aid kits must be kept having regard to the number of children being educated and cared for by the service.
- Suitably equipped.
- Easily recognisable and readily accessible to adults, having regard to the design of the education and care service premises.

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

Guided by the [First Aid in the Workplace Code of Practice 2021](#), the contents of our first aid kits have been developed based on a workplace first aid assessment, which has identified the relevant needs for our context. The assessment will be monitored and reviewed, should additional information prompt a change in needs, relevant policies and plans will be updated.

| # of | Item   | Use/Purpose   |
|------|--|---|
| 1    | Instructions for providing first aid – including CPR flowchart | in the event CPR is required, proper technique is applied.      |
| 5    | Adhesive strips (assorted sizes)                               | for minor wound dressing.                                       |
| 3    | Splinter probes (single use, disposable).                      | for removing foreign bodies.                                    |
| 2    | Hypo-allergenic micropore adhesive tape                        | for securing dressings and strapping.                           |
| 3    | Eye pads   | to protect eye injuries.  |
| 2    | Triangular bandage   | for slings, support and/or padding.                             |
| 6    | Crepe and conforming bandages (various sizes)                  | to hold dressings in place and provide support and compression. |
| 3    | Wound/combine dressings  | to control bleeding and for covering wounds.                    |
| 5    | Non-adherent dressings/pads                                    | for wound dressing.   |
| 5    | Safety pins  | to secure bandages and slings.                                  |
| 1    | Scissors   | for cutting dressings or clothing.                              |
| 1    | Kidney dish  | for holding dressings and instruments.                          |
| 1    | Small dressings' bowl  | for holding liquids.  |
| 5    | Gauze squares packets  | for cleaning wounds.  |

|    |  |  |
|----|--|--|
| 2  | Forceps/tweezers (one metal, one plastic)                      | for removing foreign bodies.   |
| 10 | Disposable nitrile, latex or vinyl examination gloves          | for infection control.   |
| 1  | Sharps disposal container and tongs                            | for infection control and disposal purposes.   |
| 8  | Sterile saline solution or sterile water                       | for emergency eye wash or for irrigating eye wounds. The solution must be discarded after opening. |
| 1  | Resuscitation mask   | to be used by qualified personnel for resuscitation purposes.                                      |
| 3  | Antiseptic solution  | for cleaning wounds and skin.  |
| 4  | Plastic bags   | for waste disposal.  |
| 1  | Note pad and pen/pencil  | for recording the injured or ill person's condition and treatment given.                           |
| 5  | Instant ice-pack   | for the management of strains, sprains and bruises.  |
| 2  | Emergency rescue blanket                                       | for shock or hypothermia.  |
| 1  | Digital thermometer  | to assess for illness/infection.   |
| 2  | Emergency asthma puffer  | to be given in emergency asthma situation  |
| 2  | Disposable asthma spacer                                       | to be used when administering emergency asthma medication  |
| 1  | Emergency EpiPen   | to be given in emergency anaphylaxis situation   |
| 1  | Instructions for providing first aid – including CPR flowchart | in the event CPR is required, proper technique is applied.   |

Risk assessments will be undertaken to identify the likelihood and adequate controls for relevant injuries and illnesses to the school age care context, such as burns, eye injuries and/or poisoning occurring. Where additional requirements are identified, the first aid supplied will be updated to include relevant items.

### Kit Location

Coomera Rivers OSHC will have at least one central first aid kit kept in the OSHC room. The cupboard will be appropriately marked with a highly visible first aid sign. Educators will be shown the location of the first aid kit during induction.

The service complements the central kit with more accessible portable kits that are taken by educators to other environments for the purpose of delivering the program (e.g. outdoors or shared/alternate spaces). The portable kits are designed to be identified as such and are clearly labelled).

### First Aid Information and Training

For the purposes of an educator being considered as currently first aid qualified, the educator will need to have completed an approved course of the following type, within the stated timeframes (Regulation 136)-

|  |  |         |
|--|--|---------|
| First aid qualification                              | Life support training and <b>cardiopulmonary resuscitation (CPR)</b> training that forms part of the first aid qualification | 1 year  |
|  | Any other training that forms part of the approved <b>first aid qualification</b>  | 3 years |
| Approved <b>anaphylaxis management</b> training      |  | 3 years |
| Approved <b>emergency asthma management</b> training |  | 3 years |

While the service would typically exceed first aid (and emergency asthma/anaphylaxis) qualification requirements, the Nominated Supervisor will ensure that, at least one educator with the current first aid/emergency qualification is in attendance and immediately available in an emergency, at all times children are being cared for. To ensure the service maintains compliance, any Nominated Supervisor or Responsible Person must maintain their relevant qualifications.

### **Staff Records**

The service will retain evidence of all educator's first aid and emergency management qualifications and a summary of this information will be maintained in the staff schedule.

### **Availability of Information**

First aid information will be made accessible to educators, with a variety of resources and displays positioned throughout the service. Additionally, educator induction will also include relevant information and verbal instruction. Current information about specific risks in the workplace and any changes affecting the provision and use of first aid will be provided to educators on a regular basis and documented in staff meetings.

### **Applying First Aid – Critical Incidents**

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Only suitably qualified educators are to apply first aid to children. All administration of first aid will be consistent with the level training and competency of the educator's qualification.

Any child who sustains (or suspected to have sustained) an injury will be attended to by a first-aid qualified educator, this may require an educator to seek the appropriate assistance.

When a need is identified to give first aid, the person will ensure that ill or injured persons procedures for administering first aid will be in accordance with the [Injury, Illness, Incident or Trauma Policy](#) of this service. The first aid procedures developed and implemented at the service are designed to:

- Preserve life.
- Ensure the person is stabilised and comforted until medical help intervenes.
- Monitor ill or injured persons in the recovery stage.
- Apply further first aid strategies if the condition does not improve.
- Ensure that the environment is safe and that other persons are not in danger of becoming ill or injured.

In the event a staff member is required to provide first aid, all other educators should immediately seek the support of their team members to ensure that supervision of children remains paramount. Educators should consider either an emergency evacuation or lockdown to ensure the safety of children, where circumstances are critical.

### **Emergency Services**

Any incident or injury requiring a greater care and treatment than first aid, an ambulance/emergency services (000) will be immediately called.

### **Treating Wounds – Minimise Cross Contamination**

When treating open wounds, educators will—

- Remove required items to be used to manage first aid from the first aid kit.
- Place items in/on a non-contaminated dish or surface.
- Wash hands and use gloves before treating wounds.
- When cleaning wound with a sterile swab or other disinfectant, follow the relevant training and instructions.

- The used swab or like will be placed in a first aid waste bin for isolation and disposal.
- If changing the type of first aid activity, e.g. cleaning to bandaging, gloves will be changed and placed in the first aid waste bin.

### **Treating Suspected Concussion**

Where an incident occurs and there is a suspicion of concussion, once the situation is stable, parents will be called to collect the child. The child will be closely monitored while parents arrive. Should there be an escalation of symptoms, emergency services (000) will be called.

## **Injury Reporting**

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Where first aid is applied because the child has sustained an injury, an [Incident, Illness, Injury or Trauma Report](#) must be completed. Parents must be notified of any injury as soon as practicable, but within 24 hours.

For **Serious Incidents** additional reporting is required – see [Incident, Illness, Injury or Trauma Policy](#) (National Regulation 86 & 87). For details pertaining to the timeframes associated with notification please see [Managing Notifications](#).

For information pertaining to the management of specific medical conditions, refer to the [Children with Medical Conditions Policy](#).

## **First Aid Waste Management**

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Coomera Rivers OSHC acknowledges the need to manage first aid waste effectively to prevent cross infection or contamination from waste materials. Such materials will include, but not be limited to protective adhesive strips, bandages, swabs, cotton buds/balls and ice packs.

A clearly labelled first aid waste bin will be supplied and maintained in the following way:

- Fitted with a bag that can be sealed and removed each day (if required).
- Cleaned and sanitised daily (if required).
- Located in a suitable place that is not readily accessible to children.

Educators will thoroughly wash hands using specified hand washing procedures before and after implementing first aid and they are to wear disposable gloves to manage incidents of first aid involving waste materials as identified.

When conducting first aid, educators will:

- Remove required items to be used to manage first aid from the first aid kit.
- Place items in/on a non-contaminated dish or surface.
- Clean the injured area of the person using principles of first aid as per the [First Aid Policy](#) and training e.g. wiped with sterile swab etc.
- The used swab or like will be placed in the lined first aid waste bin.
- Change gloves if changing the type of activity they are managing with first aid e.g. cleaning to bandaging. These gloves should also be placed in the first aid waste bin.

## **Injuries to Employees or Visitors**

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

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

Documentation of educator or visitor injuries will be recorded on the appropriate form. Please note: reporting to Work Health Safety Queensland (WHSQ) may be required. these details are outlined in [7.7 Managing Notifications](#).

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.89 First aid kits
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.136 First aid qualifications
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.174 Time to notify certain circumstances to Regulatory Authority
  - R.183 Storage of records and other documents
- National Quality Standard
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements

### Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)
- Work Health Safety Act (Qld)
- First Aid in the Workplace Code of Practice

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.6 Water Safety

### Policy Statement

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

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

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.9 Children with Medical Conditions](#)
- [2.11 Sun Safety](#)
- [3.5 Emergency and Safety Equipment](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

### Appendices and Forms

[Swimming Ability Form](#)

### Roles and Responsibilities

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

## Procedures

### Identifying Hazards and Assessing Risk

Generally speaking, the service's premises will be free from water hazards. The relevant procedures, including risk assessment and authorisation will be followed (see Template 1.1 Excursions).

### Additional Practices for Swimming Activities

The choice to and where swimming will occur by the assessment of the service's capacity to ensure the activity can be carried out safely. All bodies of water present a significant risk to children, therefore, the implementation of swimming activities will also ensure the following procedures are followed:

#### Risk Assessment and Supervision

A comprehensive risk assessment of the swimming venue and activity will be conducted to determine the required educator to child ratio and skills/qualifications required. A plan for supervision in and out of the water will also be developed. It is expected that during the swimming activity educators will be positioned both in and out of the water to promote a complete, coordinated and active level of supervision of children in and around the pool area.

The service will also consider the needs for first aid and CPR trained educators beyond the minimum regulation requirements.

#### Safety Equipment and Inspection of Environment

Consideration will also be given to the capacity of educators to rescue children from water and any relevant equipment required. A list required items will be created within the risk assessment. On the day of the swimming activity a suitably experienced educator will inspect all listed safety equipment and the pool area to ensure all required elements are available and in good repair.

#### Understanding Ability

Parents/guardians must complete a 'Swimming Ability Form' for each child attending a swimming activity. Information gained through this form will identify children's swimming competence and assist educators to manage their safety while in the water:

- The swimming ability form will direct the supervision, support and water depth of the children will access throughout the activity.
- Parents will be informed of any the practices to support the safety of children as a result of their ability.

To remove any doubt, the service will ensure children requiring any additional support are considered. The service will collaborate with parents to address specific support plans, where relevant. Swimming will not occur unless it can be carried out safely.

#### Sun Safety

The services' Sun Safety policy will be followed throughout. This includes the use of sunscreen and sun-safe swimwear. Educators will role-model the same expectations.

### Practices for Other Non-Swimming Water Activities

While non-swimming water activities are far less likely to contain the same level of drowning risks, consideration will be given to any relevant hazards. Should an activity present with increased risk to health and safety, a risk assessment will be created and followed.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.165 Offence to inadequately supervise children
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.89 First aid kits
  - R.90 Medical conditions policy
  - R.97 Emergency and evacuation procedures
  - R.98 Telephone or other communication equipment
  - R.99 Children leaving the education and care service premises
  - R.100 Risk assessment must be conducted before excursion
  - R.101 Conduct of risk assessment for excursion
  - R.102 Authorisation for excursions
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.172 Notification of change to policies or procedures
- National Quality Standard:
  - QA2 – Children’s health and safety

#### Policy Controls

Endorsed by: Approved Provider

Date Endorsed: 01 September 2023

Date implemented: 14 September 2023

Version: v.2023-1

## 2.7 Infectious Diseases – Prevention and Response

### Policy Statement

The service addresses risks to the health and spread of infectious disease to children and families by adopting appropriate procedures to manage exposure proactively. The service believes children and educators who are unwell should stay at home. The best place for an ill child is to rest and recover with someone who cares for them.

Accordingly, all people (including children, educators and parents) with or potentially exposed to an infectious disease will be excluded from the service as itemised in the NHMRC 'Staying Healthy in Childcare' resource and/or the Queensland Health's 'Time Out: keeping your child and other kids healthy'.

The day-to-day practices of the service will also uphold high standards of hygiene to reduce the likelihood of transmission and additional infection. Where there has been an instance of infectious disease present at the service, the Approved Provider is committed to ensuring parents (and other authorised persons where relevant) are notified of the occurrence as soon as practicable.

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.9 Children with Medical Conditions](#)

### Appendices and Forms

[Incident, Injury, Illness or Trauma Report](#)

### Roles and Responsibilities

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

## Procedures

### Infectious Disease Information and Requirements

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

The current NHMRC resource '[Staying Healthy in Childcare](https://www.nhmrc.gov.au/sites/default/files/documents/attachments/ch55-staying-healthy.pdf)' will be referred to when making decisions in regard to communicable diseases and/or exclusion periods, which can be found on the NHMRC website - <https://www.nhmrc.gov.au/sites/default/files/documents/attachments/ch55-staying-healthy.pdf>. Additional and relevant health fact sheets or resources can also be accessed through Queensland Health website - <https://www.health.qld.gov.au/public-health/schools>.

### Communicating an Occurrence of Infectious Disease

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#### Parents Informing OSHC

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

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

#### Notification to Parents

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

#### Additional Reporting

Depending on the circumstance, Coomera Rivers OSHC may be responsible for reporting to Queensland Health all notifiable diseases (and to report this to parents of others through a notice of an infectious disease being prominently displayed for families at the service).

The Nominated Supervisor will notify the Approved Provider when intending to report an infectious disease case to Queensland Health. Additionally, the Nominated Supervisor may be required to follow the [2.4 Incident, Illness, Injury or Trauma](#) policy and report a notification to the Regulatory Authority.

Records of infectious disease will be compiled and retained by the Nominated Supervisor ([2.4 Incident, Illness, Injury or Trauma](#)). These records will include:

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

This record will be stored confidentially (see Policy [7.6 Information Handling – Privacy and Confidentiality](#)).

## Minimising Spread

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### Responding to Occurrences

Where there has been a significant occurrence of an infectious disease (one which may require exclusion of those who have been in contact), the Nominated Supervisor will notify the Approved Provider (P&C President in the first instance) to inform of the occurrence. The Nominated Supervisor will also provide details of the service's response including relevant guidelines to prevent the spread of the infectious disease. The Approved Provider will express any additional action to be undertaken to ensure all reasonable steps have been followed.

### Exclusion

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

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

### Immunisation

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

Children and educators will be excluded from the service if there is an outbreak of an infectious disease against which they have not been immunised. The period of exclusion will be in accordance with the National Health and Medical Research Council's recommendations (see [6.9 Childhood Immunisation](#))

### Hygiene Practices

Coomera Rivers OSHC will ensure basic hygiene practices are routine to prevent the spread of infectious disease including routine hand washing, covering any cuts or abrasions with a waterproof dressing, and the use of gloves for touching items/area containing bodily fluid/mucus (see [2.8 Hygiene, Health and Wellbeing Practices](#))

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.77 Health, hygiene and safe food practices
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness

- R.88 Infectious diseases
- R.160 Child enrolment records to be kept by approved provider and family day care educator
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.173 Prescribed information to be displayed
- National Quality Standard:
  - QA2 – Children’s health and safety

**Additional Regulatory Context and Guidance**

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Public Health Act 2005 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.8 Hygiene, Health and Wellbeing Practices

### Policy Statement

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

There is shared recognition that the practices promoted and adopted by the service directly impacting the spread of infectious disease and other contagious conditions. The Approved Provider is committed to fulfilling its obligations to provide a safe and healthy environment for its children and educators. Additionally, children should be encouraged by educators to adopt sound hygiene practices to embed healthy behaviours.

Practices and procedures contained in this policy are not necessarily exhaustive. Where additional recommendations promote further or alternative action, then these will be adopted. The service will be guided by reputable information and guidelines.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [7.13 Workplace Health and Safety](#)

### Appendices and Forms

- [Indoor Safety Checklist](#)
- [Outdoor Safety Checklist](#)

### Roles and Responsibilities

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

### Procedures

As an enduring protective measure, and consistent with the recommendations of 'Staying Healthy in Childcare', the service will implement routine hygiene practices to prevent the spread of infectious disease. These practices include:

## Effective Hand Hygiene

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A very effective method to prevent the transmission of disease and illness is through effective hand hygiene. Washing hands with soap and water is the preferred method as it removes both dirt and germs/viruses from the hands. Where soap and water is not available, then alcohol-based hand rub (sanitiser) can be used as alternative (or in combination).

### Facilities

- The Approved Provider will ensure adequate handwashing facilities are available for children and educators to wash their hands readily.
- The Nominated Supervisor will manage supplies and resources. The service will ensure enough stock is kept on-site to replace items like soap and paper towel as needed.
- Appropriate signage will be displayed near the handwashing facilities to reinforce effective handwashing behaviours. (<https://www.nhmrc.gov.au/file/5126/download?token=tj2sehnY>)

### Hand Washing Practices and Expectations

- Educators and children will wash and dry their hands with soap, water and disposable towel when:
  - Handling, preparing and eating of food.
  - Before and after administering first aid.
  - After toileting, handling of animals or other activities which could lead to the spread of infection.
  - After coughing, sneezing or blowing their nose.
  - After contact with/cleaning of body fluids (blood, mucus, vomit, urine, faeces etc.).
- Routine hand washing will be implemented daily by all children before possible contamination activities and especially prior to consuming food (e.g. eating breakfast or afternoon tea).
- In the first instance, soap and running water is the preferred method to ensure clean hands.
- Hand washing (scrubbing hands) should last at least 20 seconds.
- Where possible, children will be supervised or otherwise monitored during handwashing to promote effective techniques and skills.

### Hand Sanitisers

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

## Personal Hygiene

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General hygiene practices that are not only courteous but are effective in limiting the spread of illness will be modelled by educators and promoted amongst children. These include the following etiquette:

- Everyone (children and educators) should cover their mouth and nose with a tissue, sleeve or a flexed elbow when coughing or sneezing.
- Children will be reminded to avoid touching their eyes, nose or mouth.
- Children who become sick will be isolated from other children, while the parent is called to collect them.

## Personal Protective Equipment (PPE)

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### Gloves

- Gloves will be used.

- When coming into contact with bodily fluids (e.g. blood, mucus, vomit, urine, faeces etc.)
- When dealing with suspected infectious diseases
- Food preparation – gloves will be used as required for the food safety practices
- Cleaning
- Used gloves are to be disposed of immediately after use (inaccessible to children) and in accordance with waste management and disposal policy and procedure.
- Educators should thoroughly wash their hands once gloves are removed.

### **Masks**

Where a relevant public health directives requires the use of masks, educators will follow these instructions. Alternatively, masks can be worn (and are made available) for children and educators who wish to wear them to prevent the spread of an infection.

## **Physical Environment**

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### **Hygiene and Health Promotion**

- Signs and posters will be strategically placed around the service to alert children to the need for and the steps to follow for effective hand hygiene.
- Educators will endeavour to observe children’s practices when washing hands and any relevant activities to support hygiene. Educators will provide verbal reminders of effective procedures to follow.

### **Service Cleanliness**

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

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards

- Education and Care Services National Regulations:
  - R.77 Health, hygiene and safe food practices
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.88 Infectious diseases
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.173 Prescribed information to be displayed
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA6 – Collaborative partnerships with families and communities.

**Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.9 Children with Medical Conditions

### Policy Statement

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

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

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

### Related Policies

[2.7 Infectious Diseases – Prevention and Response](#)

[2.8 Hygiene, Health and Wellbeing Practices](#)

[2.10 Medication Administration](#)

[2.13 Emergency Evacuation, Lockdown and Drills](#)

[6.4 Acceptance and Refusals of Authorisation](#)

[7.4 Leading Compliance and Quality Assurance](#)

[7.7 Managing Notifications](#)

### Appendices and Forms

[Medical Risk Minimisation and Communication Plan](#)

[Medication Administration and Authority Form](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure staff are equipped to respond to children medical needs through collecting relevant information, obtaining medical plans, accessing relevant training.</li><li>• Ensure parents receive relevant information and collaboration in managing children's needs.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Ensure medical needs of children are collected, planned and communicated effectively.</li><li>• Ensure parents who indicate children with medical needs are informed of the service's obligations and their duties.</li></ul>   |

|           |  |
|-----------|--|
|           | <ul style="list-style-type: none"> <li>• Respond to medical needs as required to uphold the safety of children attending the service.</li> <li>• Ensure staff are suitably trained and instructed on the management of relevant medical conditions.</li> </ul>                             |
| All Staff | <ul style="list-style-type: none"> <li>• Maintain knowledge on the relevant condition and action plans of children accessing the service.</li> <li>• Respond to the medical needs of children.</li> <li>• Communicate relevant information to parents and children as required.</li> </ul> |

## Procedures

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

- Individualised medical needs and planning—
  - Management/action plans,
  - Risk-minimisation plans, and
  - Communication plans.
- Practices for the management of specific medical conditions—
  - Emergency asthma management.
  - Emergency anaphylaxis management.
  - Diabetes emergency management.
- Self-administering of medication.

### Individualised Health and Medical Need and Planning

As set out by Regulation 90, any child enrolled in the service who has been identified with a relevant health or medical need will require the following medical plans for the service to care for the child:

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

### Requirements for Medical Plans

The service’s enrolment forms will outline a child’s health and medical needs. Where the parent indicates a child has relevant need, the Nominated Supervisor will communicate with the family to confirm the requirement for medical plans (management/action plan, risk-minimisation and communication plan). A parent may notify the service at any time to update the service of a child’s medical or health needs, which may also trigger the requirement of medical plans. Relevant health or medical needs, includes but is not limited to:

- one of the following conditions:
  - asthma,
  - diabetes,
  - diagnosed at risk of anaphylaxis.
- any allergy or health care need requiring—
  - specific action to be taken during an incident/occurrence, or
  - there are relevant risk factors which attenuate the child’s health, or
  - there are health or medical conditions relating to food safe handling, preparation, and/or consumption.

The Nominated Supervisor will liaise with parents to understand specific circumstances and navigate the service’s requirements for medical plans.

### Supply and Development of Medical Plans

Except for the management/action plan (that is supplied by the parent), all other plans are prepared by the service in collaboration with parents. Parents of children with relevant medical or health needs are encouraged to be actively involved in the development and contents of these important documents.

| Plan Type                           | Details and Requirements  |
|-------------------------------------|---|
| <b>Management (or action) plans</b> | <ul style="list-style-type: none"> <li>• The purpose of these plans is to set out the information that signals symptoms of the medical condition and health need and the actions must be followed in the event of an incident relating to the child.</li> <li>• Unless there are extenuating circumstances, the medical management plan should be developed by the child’s registered medical practitioner, ideally using specialist templates.</li> <li>• At minimum the management/action plan should include the following:               <ul style="list-style-type: none"> <li>○ A photo of the child.</li> <li>○ Details of the specific health care need, allergy or relevant medical condition including the severity of the condition.</li> <li>○ Any current medication prescribed for the child.</li> <li>○ What may trigger the allergy or medical condition (if relevant)</li> <li>○ Signs and symptoms to be aware of as well as the response required from the service in relation to the emergence of symptoms.</li> <li>○ Any treatment/medication required to be administered in an emergency.</li> <li>○ The response required if the child does not respond to initial treatment.</li> <li>○ When to call an ambulance for assistance.</li> <li>○ Contact details of the doctor who signed the plan.</li> </ul> </li> </ul> |
| <b>Medical Management Plans</b>     | <ul style="list-style-type: none"> <li>• These plans are developed by the service, in consultation with parents of the child.</li> <li>• The service will use standardised templates to ensure all information is addressed.</li> <li>• All risk-minimisation plans are to ensure:               <ul style="list-style-type: none"> <li>○ the risks relating to the child’s specific health care need, allergy or relevant medical condition are assessed and minimised.</li> <li>○ if relevant, include measures to address the safe handling, preparation, consumption, and service of food.</li> <li>○ if relevant, the parents are notified, through this documentation, of any known allergens that pose a risk to a child and strategies for minimising the risk.</li> <li>○ to ensure all staff members and volunteers can identify the child, the child’s management plan and the location of the child’s medication.</li> <li>○ if relevant, the child does not attend the service without medication prescribed by the child’s medical practitioner for the condition.</li> </ul> </li> </ul>   |
| <b>Communication Plans</b>          | <ul style="list-style-type: none"> <li>• Typically, embedded within the risk-minimisation plan, the communication plan sets out the practices for —               <ul style="list-style-type: none"> <li>○ staff and visitors will be aware of relevant risks and plans to support the child’s condition (including the location of the management/action plan).</li> <li>○ parents to update any relevant details regarding a child’s medical condition or particular of the medical plans.</li> </ul> </li> </ul>   |

## Communication and Collaboration

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### **Copy of Policy Provided** (Regulation 91)

Parents will be provided copies of the medical risk-minimisation plan and asked to confirm their approval. Attached to all each medical risk-minimisation and communication plan will be a copy of this policy ([2.9 Children with Medical Conditions](#)). These records will be stored with the child's enrolment.

### **Communication of Plans and Policies**

Medical Management Plans are located in the OSHC room. All staff are shown the specific location on induction and are provided with opportunity to read and understand the content of each plan. The specific location of plans will be made with the agreement of parents. Any location will be discreet from public view and accessible for all educators of the service.

In addition, any children enrolled with medical needs are communicated to staff in team meetings and daily communication. The Nominated Supervisor is responsible for ensuring all educators, other staff and volunteers are able to identify a child with a specific health care need, allergy or other relevant medical condition and be able to locate their information, plans and medication/s easily.

Risk-Minimisation Plans will be stored with enrolment forms. All risk-minimisation plans will be communicated with staff. Educators will be asked to read and acknowledge the risk-minimisation plan in OWNA and/or Deputy. This will document the communication and subsequent understanding of what is required.

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

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

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

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

### **Educator Training and Qualifications**

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

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

### Responding to Emergency Asthma Incidents

The procedure outlined in the child's medical management plan should be followed in the first instance. Any enrolled child diagnosed with asthma will have a **medical management/action/care plan** setting out the steps to following during an asthma flare- up (also referred to as an asthma attack).

However, if this does not alleviate the asthma symptoms, or where a child is not known to have asthma (therefore no plan has been provided), an educator will provide first aid following the steps outlined by Asthma Australia. If the treating educator is not trained in emergency asthma management, an emergency asthma qualified educator should be immediately sought by any persons identifying any relevant symptoms.

### Asthma Flare-Up Symptoms

An asthma attack can start slowly (over hours to days) or can get worse very quickly (in seconds to minutes). The most common symptoms of asthma are:

- Wheezing – a high-pitched sound coming from the chest while breathing. Not all people wheeze during an asthma attack.
- A feeling of not being able to get enough air or being short of breath.
- A feeling of tightness in the chest.
- Coughing.

### Treating an Asthma Flare-up (Asthma Attack)

- 1 Sit the child upright.
- 2 The educator will be calm and reassuring.
- 3 Give four (4) puffs of **blue reliever medication** (Ventolin) with slow and deep breathing in after each puff. If using a spacer, follow each of 4 puffs with 4 breaths in and out following each puff.
- 4 Wait four (4) minutes. If there is no improvement, give four (4) more puffs as above.
- 5 If there is still no improvement, **call emergency services** (000).
- 6 Keep giving four (4) puffs every four (4) minutes until the emergency services arrive.

#### **Authorisation for administering asthma medication is not required in an emergency.**

Once an educator has administered emergency asthma medication, they must notify the parent and emergency services as soon as practicable (Regulation 94)

### Emergency Asthma Equipment

If a child has their own asthma medication, this should be used in the first instance. For any other reason. the service's first aid kit contains Ventolin (blue puffer) and a spacer.

### Responding to Emergency Anaphylaxis Incidents

The procedure outlined in the child's medical management plan should be followed in the first instance. Any enrolled child diagnosed at risk of anaphylaxis will have a **medical management/action/care plan** setting out the steps to following during an anaphylactic reaction. A child with a known risk of anaphylaxis will always have their medication administered first.

In recognising symptoms of anaphylaxis, if the educator is not trained in emergency anaphylaxis management, an emergency anaphylaxis qualified educator should be immediately sought. They will take the lead in managing the emergency actions.

### Symptoms of Anaphylaxis

Can include any one of the following:

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

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

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

### Treating Anaphylaxis Symptoms

1. Lay the person flat – do NOT allow them to stand or walk.
2. **The educator is to administer the adrenaline autoinjector (Epipen)** - it is the first line treatment for anaphylaxis. If in doubt give adrenaline autoinjector (Epipen).
3. Phone emergency services -000 (ambulance).
4. Phone parent (if practicable).
5. Further adrenaline doses may be given if no response after 5 minutes.
6. Transported to hospital by ambulance (for observation).
7. Commence CPR at any time if person is unresponsive and not breathing normally.

**Administering an adrenaline autoinjector (Epipen or similar) does not required authorisation in an emergency.** In an emergency, educators should administer the medication, then as soon as reasonably practicable, parents and emergency services must be notified (Regulation 94).

### Emergency Medication - Epipen

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

A copy of the ASCIA First Aid Plan for Anaphylaxis will be stored with the emergency Epipen.

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

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

### Hypoglycaemia Symptoms

- Headache
- Trembling
- Looking pale
- Feeling hungry
- Sweating
- Lethargy
- Crying
- Being irritable
- Hunger
- Feeling/acting confused

Generally, specific action to manage any systems will be set out in in the children's medical management plans. However, where the plan does not specify actions the following will occur—

- Support the child to ingest some sugar.
- The child will be directed to rest (must be actively monitored).
- The service will phone parents.

**Serve hypoglycaemia** symptoms can include being—

- Extremely drowsy or disorientated and completely refusing food.
- Unconscious.
- Having a fit/convulsion.
- Unresponsive.

Any child presenting with these symptoms will requires urgent emergency medical attention. The Nominated Supervisor will call **emergency services (000)** for an **ambulance** immediately. Relevant first aid practices will be used in the absence of emergency service advice and/or treatment.

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

### Hyperglycaemia Symptoms

- Feeling excessively thirsty
- Frequently passing large volumes of urine.
- Feeling tired.
- Blurred vision.

Actions to manage this should be outlined in management plans. It is likely that the child will require medication. Educators must follow medication administration policies and authorisations in this instance.

In the event of major concerns regarding insulin levels of a child, the Nominated Supervisor (or Responsible Person or any relevant educator) will respond by calling the parent, or if needed, **emergency services (ambulance) – 000**.

A **tonic-clonic seizure** is a convulsive seizure, where the body stiffens (tonic phase) followed by general muscle jerking (clonic phase).

### Responding to a Tonic-Clonic Seizure

Where a child has a specific management plan, the details of this plan will be followed in the first instance. Otherwise, in the event a child has a seizure educators **will do** the following:

- Stay with the child.
- Time seizure.
- Keep them safe - protect from injury, especially the head.
- Roll onto side after jerking stops (immediately if food/fluid/vomit in mouth).
- Observe and monitor breathing.
- Gently reassure until recovered.

Educators **must not**:

- Put anything in the person's mouth.
  - Restrain the child.
  - Move person unless in danger.
- 

A **focal seizure** is a non-convulsive seizure with possible outward signs of confusion, inappropriate responses or behaviour. In this instance, educators will:

- Stay with the child.
  - Time the seizure.
  - Gently guide away from harm.
  - Reassure until recovered.
- 

Where a child has had a seizure and there is no medical plan to say otherwise, **emergency services (ambulance) – 000** – will be called. An ambulance will also be called where:

- A child becomes injured as a result of the seizure.
- There is food/fluid/vomit in the child's mouth.
- Seizure occurs in water.
- The child has breathing difficulties after jerking stops.
- Another seizure quickly follows.
- The seizure lasts longer than 5 minutes.
- The child is non-responsive for more than 5 minutes after the seizure ends.

## **Children’s Self-administering Medication** (Regulation 90 (2)&(3))

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

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

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

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

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

Educators will then:

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

### **Self-Administration Records** (Regulation 90 (3))

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

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

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.90 Medical conditions policy
  - R.91 Medical conditions policy to be provided to parents
  - R.92 Medication record
  - R.93 Administration of medication
  - R.94 Exception to authorisation requirement—anaphylaxis or asthma
  - R.95 Procedure for administration of medication
  - R.96 Self-administration of medication
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
  - R.162 Health information to be kept in enrolment record

- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.174 Time to notify certain circumstances to Regulatory Authority
- R.174A Prescribed information to accompany notice
- National Quality Standard:
  - QA2 – Children’s health and safety

**Additional Regulatory Context and Guidance**

- Work Health Safety Act
- Anti-Discrimination Act 1991 (Qld)
- Food Act 2006 (Qld)
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services.

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# 2.10 Medication Administration

## Policy Framework

### Purpose and Objectives

This Medication Administration Policy ensures the safe and effective management of medication handling and administration at CROSHC. The Policy establishes the integrated systems for the safe and accurate end-to-end management of medication handling and administration. It also ensures both educators and parents understand the CROSHC requirements for administering prescription and non-prescription medication for children.

We recognise that safely administering medication is a crucial aspect of caring for children and young people. To ensure CROSHC provides high-quality education and care, our service is committed to a planned and methodical approach to medication management.

Any staff, including educators, tasked with handling, administering or witnessing medication or authorisations must do so with accuracy and care. Any staff member found to be negligent or reckless around medication administration procedures will be subject to relevant disciplinary action.

To ensure health and safety, it is the firm preference that regular medication transportation between OSHC and home be minimised. The specific practices for medication transportation will be documented in the relevant Risk-Minimisation Plan (see [2.9 Children with Medical Conditions](#)). Each Risk-Minimisation Plan will consider the requirement to have medication collected from the storage location prior to evacuation. These plans will document how the service will ensure the medication is identified.

In recognising the importance of working collaboratively with parents and children to promote self-reliance and facilitate self-administration. Authorising self-administration of medication is subject to safe and appropriate practices, therefore, we will only allow self-administration of medication with written authorisation and where the service believes the self-administration procedure can be followed by a child or young person.

A medication record will be documented for each occasion medication is administered. These records will be maintained in OWNA. All medical authorisations and/or administration records will be stored securely in OWNA within the child’s enrolment record (see [7.6 Information Handling – Privacy and Confidentiality](#)).

### Procedures

To manage the end-to-end requirements of medication administration, the following procedures set out the practice to support the Medication Administration Policy:

- 2.10.1 Medication Authorisation Procedures
- 2.10.2 Medication Storage and Transport Procedures
- 2.10.3 Medication Administration Procedures

## Key Responsibilities

|                             |  |
|-----------------------------|--|
| <b>Approved Provider</b>    | <ul style="list-style-type: none"><li>• Establish practices that support the needs of children and uphold safety in the administration of medication.</li><li>• Ensure the service has suitable facilities for the storage of medication.</li></ul>                      |
| <b>Nominated Supervisor</b> | <ul style="list-style-type: none"><li>• Ensure educators are aware of their role and duties in supporting the administration of medication for children.</li><li>• Supervise the medication practices and report concerns and issues to the Approved Provider.</li></ul> |

|                            |   |
|----------------------------|---|
| <b>Responsible Persons</b> | <ul style="list-style-type: none"> <li>• Lead medical administration procedure as required, including the responsibility to accurately check authorisation and administration requirements, including relevant documentation.</li> </ul>                                    |
| <b>Coordinator</b>         | <ul style="list-style-type: none"> <li>• To collaborate with families to ensure children’s health and medical needs are supported including the establishment of practices to ensure safe transportation.</li> <li>• Maintain medication authorisations in OWNA.</li> </ul> |
| <b>Educators</b>           | <ul style="list-style-type: none"> <li>• Witness medication administration including documenting correct dosage, labelling and child’s identity.</li> <li>• Supervise and respond to hazards relating to medication</li> </ul>  |

## Performance Indicators

### Authorisation

- All children requiring non-emergency medication have complete written authorisation provided by a parent (or relevant persons named in enrolment records).
- Parents are aware of the procedures to notify the service of medication requirements.

### Storage

- All medication is stored securely in clearly labelled containers.
- Educators are aware of the location of medication and the practices to ensure security.

### Transport

- Avoidable transportation is minimised through medication being stored onsite.
- Any transportation that must occur is clearly documented and effective.

### Administration

- All medication administered to children by CROSHC is accurate and is compatible with regulatory requirements.

### Records

- Full and accurate records for surrounding medication administration maintained in OWNA in a manner that supports effective access.

## Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.90 Medical conditions policy
  - R.91 Medical conditions policy to be provided to parents
  - R.92 Medication record
  - R.93 Administration of medication
  - R.94 Exception to authorisation requirement—anaphylaxis or asthma
  - R.95 Procedure for administration of medication
  - R.96 Self-administration of medication
  - R.160 Child enrolment records to be kept by approved provider and family day care educator

- R.161 Authorisations to be kept in enrolment record
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

**Additional Regulatory Context and Guidance**

- Work Health Safety Act
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

## 2.10.1 Medication Authorisation Procedures

### Aim

Apart from emergency situations, all medication (either prescription or otherwise) can only administered with authorisation by a parent (or person named in the enrolment records). The following procedures ensure the accurate collection and retention of medication authorisation.

Urgent and emergency authorisation may be obtained verbally and documented as such – these steps are set out in 2.10.3 Medication Administration Procedure.

### Roles and Responsibilities

|                             |  |
|-----------------------------|--|
| <b>Nominated Supervisor</b> | <ul style="list-style-type: none"><li>• Ensure educators are aware of their role and duties in obtaining, retaining and checking authorisations.</li></ul>   |
| <b>Responsible Persons</b>  | <ul style="list-style-type: none"><li>• Direct parents to the Coordinator for medication authorisation clarification.</li></ul>  |
| <b>Coordinator</b>          | <ul style="list-style-type: none"><li>• Ensure instructions for medication authorisation is made available to families and be the primary point of contact for medication enquiries.</li><li>• Maintain medication authorisations in OWNA.</li></ul> |

### Procedure Implementation (Steps to be taken)

#### Information for Families

- 1) When enrolling in CROSHC, parents and families are provided with information – either via a meeting or otherwise - explaining the expectations for notifying the service of health, medical or other relevant care needs, including any medication requirements.
- 2) Information surrounding medication handling and administration is also accessible to parents via OWNA.
- 3) Parents can communicate the need for children to be administered medication at any time during the child's enrolment at the service – either for an ongoing requirement (long-term condition) or for a fixed time (such as a temporary illness).

#### Obtaining Written Authorisation

- 4) The primary method for obtaining written medication authorisation is via OWNA (Custom Forms -> Medication Authorisation).
- 5) A parent (or persons with relevant authority named in the enrolment form) will be able to complete a medication authority when medication is to be administered.
- 6) In completing the authorisation, parents (or another relevant authorised person) will be required to advise:
  - a) child's name,
  - b) name of medication,
  - c) time and date the medication was last administered,
  - d) time and date, or the circumstances under which, the medication should be next administered,
  - e) dosage to be administered,
  - f) manner to be administered,
  - g) any other relevant instructions, and
  - h) signature of the parent or person named in the enrolment record authorising.

#### Retaining Written Authorisation

- 7) The Coordinator is primarily responsible for uploading and retaining each completed authorisation with the child's enrolment record (also called profile) within OWNA and ensuring these records are accurately maintained.
- 8) Any staff member requiring confirmation of a medication authorisation can find it a copy attached within the child's OWNA profile
- 9) Expired authorisations will also be retained but clearly labelled as such. Where possible, current authorisations will be minimised to as few documents as possible.

### **Setting Alarms and Reminders**

- 10) Alarms and reminders on the RP phone to prompt medication administration are an acceptable practice. However, no alarm/reminder can be set without first obtaining and uploading the written authorisation to the child's OWNA profile.
- 11) The Coordinator is responsible for deleting any alarms that are no longer relevant or required from the appropriate device.

## 2.10.2 Medication Storage and Transport

### Aim

All medication kept by the service will be stored in a safe and appropriate location in a clearly labelled container. Likewise, while transportation of medication is minimised, where required a planned and coordinated approach to ensure safety will be established.

To ensure this, specific practices around medication storage and transport are set out in the procedures below.

### Roles and Responsibilities

|                             |  |
|-----------------------------|--|
| <b>Approved Provider</b>    | <ul style="list-style-type: none"><li>• Ensure the service has suitable facilities for the storage of medication.</li></ul>  |
| <b>Nominated Supervisor</b> | <ul style="list-style-type: none"><li>• Monitor practices to ensure they meet the established standards.</li></ul>   |
| <b>Responsible Persons</b>  | <ul style="list-style-type: none"><li>• Coordinate the daily transport of any relevant medication between the service and families.</li></ul>  |
| <b>Coordinator</b>          | <ul style="list-style-type: none"><li>• Ensure medication containers are prepared for relevant medication and contain the correct labelling.</li><li>• Maintain the Medication Register (OWNA)</li></ul> |
| <b>Educators</b>            | <ul style="list-style-type: none"><li>• Supervise and respond to hazards relating to medication</li></ul>  |

### Procedure Implementation (Steps to be taken)

#### Storage

- 1) Unless subject to self-administration procedures, all medication will be stored in the medication cupboard, or if needed, in secure medication container in the fridge.
- 2) Any medication must be stored in a clearly labelled container that includes the child's name, photo and name of the medication stored.
- 3) Where medication is for an emergency/relevant health need, a copy of the medical management/action plan will also be kept with the medication.
- 4) Unless expressly required by the medical action plan (or other instruction), no medication should be taken to play areas such as playgrounds and other outdoor areas.

#### Transporting Medication

- 5) The Coordinator will take the primary responsibility to discuss relevant plans for the safe transportation of medication with parents – either via risk-minimisation procedures or otherwise.
- 6) Ideally, all medication will be transported in the care of a responsible adult. However, other arrangements may be accepted, subject to their compatibility with the service's commitment to the safety and protection of children. To remove any doubt, CROSHC may refuse authorisation (and therefore enrolment) should medication not be safely transported to CROSHC.

#### Receipt of Medication

- 7) Apart from approved self-administration medication, all medication must be handed to the Responsible Person upon arrival.
- 8) The Responsible Person must ensure the medication is stored in the manner set out above.
- 9) All medication received must be recorded in OWINA (Children Tab -> Medication in Centre), with the Medication Register being an accurate record at all times.

### **Returning Medication to Parents**

- 10) Any medication no longer required to be administered to the child will be returned to the parent.
- 11) Where medication cannot be returned to the parent and requires disposal, the Nominated Supervisor will consult with a local pharmacy to ensure safe and lawful disposal.
- 12) Medication no longer in the service will be recorded in the Medication Register by the Coordinator (OWNA -> Children Tab -> Medication in Centre).

## 2.10.3 Medication Administration Procedures

### Aim

To ensure the safe, accurate, and effective administration and documentation of medication to children in the range of possible circumstances and in accordance with relevant requirements.

### Roles and Responsibilities

|  |  |
|--|--|
| <b>Nominated Supervisor or Responsible Persons</b> | <ul style="list-style-type: none"><li>• Ensure that proper authorisation has been obtained before administering any medication.</li><li>• Maintain accurate and complete records of medication administration.</li></ul> |
| <b>Educators</b>                                   | <ul style="list-style-type: none"><li>• Witness the correct and accurate administration of medication, including the completion of the medication record.</li></ul>  |

### Procedure Implementation (Steps to be taken)

Medication may be administered in the following circumstances with the specific steps followed-

#### Routine Administration

1. With the exception of emergency asthma and anaphylaxis medication (see below), **medication can only be given to a child when-**
  - a. In its original package/container, and
    - i. Where the medication is prescribed - with a pharmacist's label which clearly states the child's name, dosage, frequency of administration, date of dispensing and is within the expiry date period
    - ii. Where over-the-counter medication - bearing the original label and instructions and before the expiry or use by date
  - b. Has been authorised by a parent (or person named in the child's enrolment form),
  - c. In accordance with the details outlined in the Medication Authorisation (details of dosage, method time/circumstances) or in accordance with any written or verbal instructions provided by a registered medical practitioner.
2. Unless urgent or an emergency, authorisation should be provided in writing via OWNA.
3. When a child needs medication, it is to be administered either in the OSHC room or kitchen. The Responsible Person will call for the child and ask an educator to support the administration process.
4. The Responsible Person should prepare to administer medication by bring up the consent form on OWNA, wash hands thoroughly and collect the medication from the cupboard.
5. Once the Responsible Person, witnessing educator and child are ready to administer medication, the staff must jointly verify-
  - a. the child's identity,
  - b. medication authorisation and instructions,
  - c. medication name
  - d. dosage
  - e. time/circumstance to be given.
6. Once verified, the Responsible Person can administer the medication as per the documented method and ensure the child takes the full dose as prescribed.
7. All medication administration will be recorded via OWNA (Children tab -> Medication Reports -> + Add Medication Report) and will include—

- a. Name of the child
  - b. Time and date authorisation was provided
  - c. Name of medication
  - d. Time and date administered
  - e. Dosage
  - f. Method
  - g. Expiry date (of medication)
  - h. Any relevant notes or comments.
8. The medication report will also include-
    - a. the name and signature of the person who administered the medication, and
    - b. the name and signature of the educator witnessing the administration.
  9. When recorded in OWNA, the parent will be automatically notified via the OWNA app.

### **Self-Administration**

1. Where children have the proper authorisation, which has been accepted and uploaded to the child's profile (OWNA), the child may self-administer medication.
2. In these circumstances, relevant medication information will be detailed in the child's medical management and risk-minimisation plan. Plans for the management of medication must also outline how the storage of the medication will be secure, safe and accessible.
3. Despite authority to self-administer, educators should be aware of any relevant signs and symptoms or schedules relating to a child's medication administration. Where relevant, educator should prompt/remind children to administer their medication on this basis.
4. Where a child intends to self-administer, they must:
  - a. Inform the Responsible Person of their intention to take medication.
  - b. Collect the medication from where it has safely been stored.
5. Educators will then:
  - a. Supervise the child who is self-administering medication/s.
  - b. Ask the child when medication was last administered (to record this information).
  - c. Ensure each child follows all administration of medication, health and hygiene procedures.
6. Once self-administration has been complete, the medication administration details will be recorded by the Responsible Person in OWNA (Children tab -> Medication Reports -> + Add Medication Report) and will include—
  - a. Name of the child
  - b. Time and date authorisation was provided
  - c. Name of medication
  - d. Time and date administered
  - e. Dosage
  - f. Method
  - g. Expiry date (of medication)
  - h. Any relevant notes or comments.

### **Emergency Medication Administration**

1. Where the circumstance is an emergency, verbal authorisation can be sought from the parent. Details of this authorisation must be captured in the administration records.
2. All other administration procedures must be followed.

### **Emergency Asthma and Anaphylaxis**

1. No authorisation is required to administer asthma or anaphylaxis medication in an emergency. However, notification to both parents and emergency services is required.
2. Details of procedures for emergency medication is set out in the Incident, Illness, Injury and Trauma policy and medication administered under this provision will be documented in an Incident, Illness, Injury and Trauma Report.
3. As soon as practical after administering emergency asthma or anaphylaxis medication, the Responsible Person will notify both-
  - a. the parent, and
  - b. emergency services.

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.11 Sun Safety

### Policy Statement

The service's sun safety policy is to ensure that all children attending the service are protected from the harmful effects of the sun (UV radiation). We also recognise the opportunity to promote and establish excellent health and safety practices for children - the service views its sun safety practices as a chance to form good life-long habits and educate children about sun smart behaviour. Likewise, the service expects that all children, staff and visitors attending our service are protected from skin damage caused by harmful UV radiation from the sun and will follow the service's procedures.

The rationale for this policy was provided by the Queensland Cancer Council and is consistent with their Sun Smart Policy Guidelines for Education and Care Settings. Our sun safety policy ensures the approach is integrated – there is alignment between procedures, the program and the environment.

The scope of our sun-safe practices is intended to support–

- all children, educators and staff are protected from damaging to UV radiation.
- the outdoor environment provides shade for children, educators and staff.
- children are encouraged and supported to develop independent sun protection skills.
- compliance with regulatory requirements, and workplace health safety responsibilities.

Due to our location and the sustained levels of UV radiation throughout the year, our sun-safe practices are adopted all year round, regardless of season. The dominant guide for the level of sun protection is the relative UV rating. The service will ensure proportionate sun protection is utilised where the UV rating is above Level 3 or more.

Where activities are held outdoors, the service will maximise the opportunity to access shade. Where shade is unavailable (i.e. excursions), higher levels of sun protection will be adopted.

Families are required to meet their responsibilities, including their child be equipped with the appropriate sun safe items for the activities (hats, sleeved shirts etc.). These expectations may vary based on session of care (i.e. vacation care) and the nature of activity (i.e. swimming). Parents will be kept fully informed of specific requirements. At a minimum, hats must be brought to every session of care.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.9 Children with Medical Conditions](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

### Roles and Responsibilities

Approved Provider

- Establish an effective sun safety framework to address the risk of sun damage.
- Ensure plans and routines support children sun safe behaviours and education are implemented.

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

## Procedures

### Understanding Daily UV Rating

The service will monitor daily UV rating times via the Sunsmart Global UV app. For periods of the day at or above UV Level 3, sun-safe practices must be strictly followed.

#### Practices for UV Rating 1 and 2

Some form of sun protection (typically shade or hats), to promote embedded sun-safe behaviours, will be expected when UV ratings are at non-damaging levels. This expectation is balanced with the benefits of physical activity.

#### Practices for UV Rating 3 and above

The service will adopt proportionate sun-safe measures where UV ratings are at potentially damaging levels. Generally, this will mean multiple sun-safe measures appropriate to the circumstance.

The utility and school expectation of wearing a hat means that it is a requirement for outdoor play during sun protections times (UV Rating of Level 3 or more). Where UV ratings are Level 6 (high) and above, all accessible sun-safe measures will be expected to be used.

| Sun Safe Measure | Directions   |
|------------------|--|
| Hats             | <ul style="list-style-type: none"> <li>• <b>No hat – no outdoor play</b> (where there is a risk of sun damage) will be enforced. Children without a hat can play in shade where UV Rating are Level 1 or 2.</li> <li>• Children must bring their own hats to the service. However, in emergency cases only, spare hats are available. Borrowed hats must be placed in OSHC laundry basket at the end of the session.</li> <li>• Wide-brimmed or bucket hats are the preferred hat.</li> </ul>  |
| Shade            | <ul style="list-style-type: none"> <li>• Where possible, educators will operate outdoor activities, including excursions, in shaded areas.</li> <li>• The availability of shade is considered when planning all outdoor activities.</li> <li>• Children are encouraged to choose and use available areas of shade when outside.</li> <li>• Play activities will be set up in the shade and moved throughout the day to take advantage of shade patterns.</li> <li>• Children who do not have appropriate hats or outdoor clothing are asked to choose a shady play space or a suitable area protected from the sun.</li> </ul> |
| Sunscreen        | <ul style="list-style-type: none"> <li>• Children and staff will be provided with minimum SPF30 sunscreen. Parents can supply a suitably alternative (e.g. where a child is sensitive to sunscreen).</li> <li>• All sunscreen will be applied as per manufacturer's directions, including time before entering sun and re-applying.</li> </ul>   |

|                   |   |
|-------------------|---|
|                   | <ul style="list-style-type: none"> <li>• Sunscreen must be worn for outdoor activities between 10am and 3pm or where UV Levels are 6 or above.</li> <li>• Generally, children will be expected to apply their own sunscreen with the supervision of educators. Assistance from educators may be offered, where required.</li> </ul> |
| <b>Clothing</b>   | <ul style="list-style-type: none"> <li>• Children and staff must wear a top with sleeves to the service – ideally, covering as much skin as possible.</li> <li>• Singlets or sleeveless tops are not permitted. Spare shirts with sleeves are available.</li> </ul>   |
| <b>Swimwear</b>   | <ul style="list-style-type: none"> <li>• For swimming and water play activities, a sleeved swim top (i.e. a rashie) must be worn over swimwear that does not cover an equivalent area. A Lycra top is preferred option.</li> </ul>  |
| <b>Sunglasses</b> | <ul style="list-style-type: none"> <li>• The use of sunglasses is accepted (where children/parents wish these to be worn). However, the service recognises sunglasses often aren't practical for children.</li> </ul>   |

### **Supporting Sun-Safety and Policy Compliance**

The service, where possible, will attempt to have spare items available. When parents do not provide appropriate clothing and equipment for children, the first step is for the Nominated Supervision/Responsible Person to have a gentle 'prompting' conversation with the parent. Where this does not impact a change, the Nominated Supervisor will correspond formally with the parent to address the concerns. Ongoing enrolment is subject to parents complying with the service's expectations for health and safety.

### **Role-Modelling**

Educators will ensure that all themselves, children and visitors attending the service are protected from the harmful UV effects of the sun during periods of increase UV rating. This includes adopting the same practices expected of children. Educators will be supplied with hats as part of the uniform and are expected to wear them while outdoors.

### **Excursions and Swimming Activities**

Potential exposure of UV radiation will form part of the service's risk assessment. Where possible, plans for access to shade will be created. However, the service recognises that there are often limitations during these types of activities. Where shade is not readily available, the service will mitigate risks by selecting more appropriate times of the date (where possible) or using strictly using all available sun protection measures (hats, sunscreen, appropriate clothing/swimwear).

### **Promoting Learning and Skill Development**

Opportunities to incorporate sun protection into the program will be continually explored. Displays will reinforce the expectations and positive sun-safe messaging.

Children are encouraged to be involved in initiatives to promote and model sun protection measures at the service including taking leadership roles in managing sun protection e.g., accessing daily UV levels and sun protection times, hat reminders and management of sunscreen

### **Physical Environment – Quality Improvement**

The service will continue to explore opportunities to enhance the environment for additional shade. Where aspects of the environment are in the control of the service (i.e., use), the most sun-safe option to carry out activities will be selected.

Collaboration with the school to seek further development of shaded play spaces to enhance the environment will be continually explored.

## Engaging Families and the Community

Enrolment information will provide information around the service's Sun Safety Policy. Parents wishing further information can contact one of the service's leaders.

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

Where possible, alignment with school expectations will be sought, to ensure a consistent message and expectation for children.

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

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.114 Outdoor space—shade
  - R.155 Interactions with children
  - R.161 Authorisations to be kept in enrolment record
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA2 – Children's health and safety

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Cancer Council Queensland's SunSmart Policy Guidelines – Early Childhood Cancer Council Australia

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 2.12 Food Handling, Preparation and Storage (Food Safety Program)

### Policy Statement

The service recognises the need for effective food handling and storage practices to ensure that the food provided is safe for consumption. Coomera Rivers OSHC recognises its obligation to ensure foods prepared and provided must be done so in a way that is safe for children in our care. All food served is to be handled, prepared, and stored in a manner that is consistent with quality food handling and storage guidelines, including the Australian and New Zealand Food Standards Code and other relevant guidelines including Staying Healthy in Childcare. As a P&C-operated business, we recognised that we are excluded from the Food Act 2006 (Qld), however, we must still operate consistently with the Act and safe food handling practices.

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

A food safety program identifies steps to control for hazards across the following aspects of the business:

- Purchasing and receiving
- Storage
- Thawing
- Preparation
- Cooking
- Cooling
- Reheating and hot holding
- Allergens
- Cleaning program and schedule

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Safe Environment](#)
- [2.9 Children with Medical Conditions](#)
- [3.1 Space and Facilities Requirements](#)
- [4.7 Fit for Work](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish sound food handling, preparation and storage procedures.</li><li>• Ensure facilities and equipment support the safe preparation, handling and education of food.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Monitor and support safe food handling practices.</li><li>• Coordinate with the Approved Provider to ensure the practices and equipment meets the needs of the service and children.</li><li>• Ensure educators are provided with suitable training and instruction to handle food as described in the outlined procedures.</li></ul> |

- Ensure procedures are followed at all times.
- Support children in preparing and handling food to guide learning, development and safe practices.

## Procedures

### Purchasing and Receiving Food Goods

The service will purchase food products from reputable food businesses, primarily traditional supermarket businesses. The choice of supplier will be limited to those who services and products have been found to be reliable. Where alternative arrangements are needed, products will be sources from appropriately licenced food businesses.

Largely, products are delivered to the service from the supplier. When products are purchased and are delivered, the following conditions must be met-

1. Food should be covered or packaged (without damage) on arrival.
2. The staff member collecting the food or products should inspect to ensure no food or product is spoiled, has damaged packaging or past used-by date.
3. The staff member should check the temperate of the food including –
  - a. At or below 5°C for chilled food,
  - b. Frozen hard (not partly thawed) for frozen foods, or
  - c. Above 60 °c for hot foods.
4. Food not meeting these requirements should be rejected.

The food or products should be immediately placed in the appropriate storage location –

- a. Freezer for frozen foods,
- b. Fridge for chilled foods, or
- c. Pantry for shelf-stable foods.

### Food Storage

Food must be stored in an appropriate environment to protect it from contamination and to maintain the safety and stability of the food.

| Area               | Controls  | Remediated Action  |
|--------------------|---|--|
| <b>Dry Storage</b> | <ul style="list-style-type: none"> <li>• Ensure the physical environment does not contain holes, cracks or crevices where pests may enter or breed.</li> <li>• Routinely inspect for signs of pests where dry products are stored and the remises is regularly treated by a licensed pest controller.</li> <li>• Store opened packaged products in clean, sealed food grade containers (or re-seal packaging)</li> <li>• Store products as the oldest stocks is most accessible and that weekly inspections identify out-of-date stock.</li> <li>• Ensure that chemicals are stored away from food stock.</li> <li>• Do not overcrowd the storage area. Food must be stored off the floor.</li> </ul> | <ul style="list-style-type: none"> <li>• Food is discarded when –           <ul style="list-style-type: none"> <li>○ There are signs of pest infestation.</li> <li>○ Food has been contaminated or unsuitable.</li> <li>○ Identification that packaging is damaged.</li> </ul> </li> <li>• Clean the area when unclean or overcrowded</li> </ul> |

|                       |  |   |
|-----------------------|--|---|
|                       | <ul style="list-style-type: none"> <li>• Food is stored in accordance with manufacturer’s specifications.</li> <li>• Dry food storage area is cleaned in accordance with the cleaning schedule.</li> </ul>   |   |
| <b>Cold Storage</b>   | <ul style="list-style-type: none"> <li>• All food which ought to be stored in a chilled manner (raw and cooked meat, dairy products, seafood, processed fruits and vegetables, cooked rice and pasta or foods that contain these foods) should be stored in a temperate controlled area (cold room, fridge etc).</li> <li>• Food should be checked at least daily with a thermometer to ensure it is colder than 5°C. These checks must be recorded.</li> <li>• All foods need to be stored in a clean and covered food grade container or wrapped in a protective covering.</li> <li>• The fridge (or cold room) should not be overcrowded.</li> <li>• Raw foods must be separated from cooked or ready-to-eat foods. With ready-to-eat foods ideally stored above raw foods.</li> <li>• Check water and condensation from raw foods will not drip onto ready-to-eat food.</li> <li>• Identifying and date marking the food to ensure it does not stay in the fridge for a period that may render the food unsuitable.</li> <li>• Check that the inside of cold storage equipment is clean and free from mould.</li> <li>• Clean refrigerators in accordance with the cleaning schedule.</li> </ul> | <ul style="list-style-type: none"> <li>• If cold storage equipment is operating above 5°C, adjust the Temperature controls and recheck the temperature again within one hour.</li> <li>• if cold storage equipment is found to be unable to keep food at 5°C or below, have the equipment serviced/repaired.</li> <li>• Throw away potentially hazardous food that has been above 5°C for four (4) hours or more.</li> <li>• Throw away ready-to-eat food that has been ‘cross contaminated’ by raw food.</li> <li>• Throw away food that is past its ‘use by’ date or food that is damaged, deteriorated or perished.</li> <li>• Throw away contaminated food or food that has been identified as unsafe or unsuitable.</li> <li>• Service refrigerators in accordance with manufacturer’s instructions or when required.</li> </ul> |
| <b>Frozen Storage</b> | <ul style="list-style-type: none"> <li>• Frozen food needs to be stored frozen hard (not partially thawed).</li> <li>• Frozen food must be stored and covered in clean containers. It should be clearly labelled and dated to allow for stock rotation.</li> <li>• Frozen storage areas must not be overcrowded.</li> <li>• Ensure that packaging isn’t damaged.</li> <li>• Freezers must be kept clean.</li> <li>• Check the food in your freezer regularly (weekly) to see if food is contaminated, damaged, deteriorated or perished.</li> <li>• Clean freezers in accordance with the cleaning schedule.</li> </ul>  | <ul style="list-style-type: none"> <li>• Service/repair freezer if it can’t keep food frozen hard.</li> <li>• If the freezer stops working and food partly thaws, place the food in the refrigerator until it is completely thawed, then use as a refrigerated food.</li> <li>• If food is completely thawed, but is colder than 5°C, place food in the refrigerator and use as a refrigerated food, or use straight away.</li> <li>• If you’re not sure how long the freezer hasn’t been working properly, or you are unsure about the safety of any food, throw the food away.</li> <li>• Throw away contaminated, damaged, deteriorated or perished food.</li> </ul>   |

## Thawing

Thawing frozen potentially hazardous food may pose a food safety risk if the temperature of the food is between 5°C and 60°C during thawing, allowing food poisoning bacteria to grow. It is important that, if the

food is thawed at room temperature the time that the food is at temperatures between 5°C and 60°C needs to be noted to ensure that safe time limits are not exceeded.

### **Controls for thawing**

- Plan ahead - allow sufficient time to thaw potentially hazardous food in the refrigerator.
- Alternatively, thaw potentially hazardous food in the microwave.
- Thaw raw frozen food on a shelf below ready-to-eat food.
- Keep all food protected, covered, wrapped or in a food grade container while thawing.
- Do not re-freeze thawed food.
- small portions of raw frozen meat and fish may be able to be safely cooked without complete thawing, however, large portions of food should be completely thawed before cooking.

### **Remediated Actions**

- Do not use potentially hazardous food until it is completely thawed.
- Throw away thawed potentially hazardous food that has been left to stand at above 5°C for more than four (4) hours.
- Throw away food that has been contaminated during thawing.
- Throw away any food that has been frozen more than once.

## **Preparation**

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When preparing and handling food, there is risk of contamination and bacteria causing food-borne illness. There are three main hazards which are controlled during food preparation –

- Biological – bacteria growing to unsafe levels.
- Physical – things like dirt, hair, glass or other food product entering meals.
- Chemical – things like cleaning products etc. contaminating food.

### **Steps for daily food preparation**

1. Food handlers will have appropriate skills and knowledge for each food preparation task.
2. Clean and inspect food preparation surfaces, equipment and utensils before use.
3. Wash hands properly before starting food handling.
4. Ready-to-eat food is kept apart from raw ingredients during preparation.
5. Use separate utensils and cutting boards when preparing raw food and ready-to-eat food or alternatively, prepare ready-to-eat food and raw food separately, washing, sanitising and thoroughly drying cutting boards and utensils between use.

### **Additional controls for food preparation**

- Fruit and vegetables intended for immediate consumption must be washed before preparing, including those where the skin is not intended to be eaten.
- Minimise the time that potentially hazardous food is above 5°C and return food to the refrigerator during any break in preparation/
- Wiping cloths should be replaced daily and cleaned, rinsed and dried between uses.
- Throw away single use items after one use/

### **Remediated actions**

- Throw away any food contaminated by dirty equipment.
- Throw away food where there is any chance that contamination or cross contamination has occurred.
- Re-train food handlers that have been found to be mishandling food.
- Remind people preparing food of good hygiene practices and retrain where necessary.
- Throw away food that has been between 5°C and 60°C for more than four (4) hours.

## Cooking

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Hot food must be fully cooked to a sufficient temperature to achieve a safe temperature for consumption. Potentially hazardous foods, which are not fully cooked, will not be safe to eat, as bacteria will not be killed.

Where the food handler is unsure of the temperature of potentially hazardous foods, they must use a thermometer to check the internal temperature has reached **a minimum of 74°C**. If the temperature in the centre of the potentially hazardous food does not reach at least 74°C, continue cooking until the internal temperature is achieved.

### The 2-hour/4-hour guide

Maintain potentially hazardous food at a temperature of 5°C or below or 60°C and above. If food is kept between 5°C and 60°C, this temperature must be monitored and recorded.

- Potentially hazardous food that has been kept between 5°C and 60°C for **less than two hours** must be **refrigerated or used immediately**.
- Potentially hazardous food that has been kept between 5°C and 60°C for **longer than two hours but less than four hours** must be **used immediately**.
- Potentially hazardous food that has been kept between 5°C and 60°C **for longer than four hours** must be **thrown out**

## Cooling Food

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Hazardous food that is intended to be cooled and use later, needs to reach a temperature of 5°C or colder as quickly as possible. There may be food poisoning bacteria in the food even though it has been cooked. Faster cooling times limit the time when these bacteria are able to grow or form toxins.

When cooling cooked potentially hazardous food, cool the food within the following timeframes:

- from 60°C to 21°C within two hours.
- from 21°C to 5°C within a further four hours.

This means you have a maximum of six hours to cool food from 60°C to 5°C or below.

If the speed of cooling is unknown, a thermometer to measure the warmest part of the food – usually in the centre should be used. To chill food quickly, break it up into smaller portions in shallow containers. Care must be taken to not to contaminate the food as this is done.

### Remediated Actions

- Throw away food if the above cooling times and temperatures have not been reached.
- If refrigerator temperatures rise above 5°C during the cooling of food, review and modify cooling practices to ensure that temperatures remain below 5°C.
- Discard any potentially hazardous food that may have been contaminated during cooling.

## Reheating and hot holding

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Bacteria can grow in food that is reheated too slowly. Holding food at temperatures where bacteria can multiply can also cause a food-borne illness. If you reheat previously cooked and cooled potentially hazardous food, you must reheat it rapidly to 60°C or hotter.

Food must be reheated **to 60°C within a maximum of two hours**.

## Controls for reheating and hot holding

- Check that the temperature at the centre of potentially hazardous food being reheated reaches at least 60°C in two hours or less.
- Maintain reheated potentially hazardous food at 60°C or above.
- Hot holding equipment (such as a bain marie) should never be used to cook or reheat food.
- Potentially hazardous food that has been cooked and cooled should only be reheated once.
- Use a temperature setting on hot holding equipment that keeps the food at or above 60°C.
- Do not overload hot holding equipment.
- When re-stocking potentially hazardous food in hot holding equipment, never add new batches of food to old batches of food, remove the old batch and replace with new batch.

## Remediated Actions

- Discard potentially hazardous food if the temperature at the center has not reached 60°C in two hours or less.
- Use immediately any potentially hazardous food that has been held between 5°C and 60°C for more than 2 hours, but discard food that has been held between 5°C and 60°C for more than four (4) hours.
- Discard reheated food if left over.
- If hot holding equipment cannot maintain food temperatures above 60°C, check whether this is because too much food is being held in the unit.
- Repair equipment fails to work correctly.

## Allergens

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Certain foods can cause some people to have an allergic reaction which can vary in severity from mild upsets to severe anaphylactic reactions. It is important food handlers are able to identify which products contain allergens.

### Controls for allergens

- Prepare special meals separately from normal meals.
- Food handlers should be aware of sensitivities, especially children who severity is significant.
- Check packaging for –
  - damage and use only clean uncontaminated packaging materials.
  - Ingredients to identify potential allergens.

## Cleaning Program

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Anything that comes into contact with food must be cleaned and sanitised. Items which do not come into contact with food need only be cleaned.

### Steps for cleaning utensils and equipment

1. **Pre-clean:** scrape, wipe or sweep away food scraps and rinse with water.
2. **Wash and sanitise** use hot water and detergent to take off any grease and dirt. Soak if needed.
3. **Rinse:** rinse off any loose dirt or detergent foam.
4. **Dry:** allow to drip-dry if not possible, dry with a clean tea-towel.

| Items to be cleaned and sanitised  | Items to be cleaned   |
|--|---|
| Plates and bowls<br>Utensils for preparing and serving food<br>Cutting boards<br>Preparation benches<br>Storage containers | Floors<br>Walls<br>Ceilings<br>Rubbish bins<br>Windows<br>Refrigerators |

A commercial sanitiser, following the manufacturer’s instructions, is used for sanitising..

**Cleaning procedures**

- start at the back and work towards the front. Start high and work your way down.
- single-use paper towels are better than cloths. If you use cloths, they must be washed in hot water and allowed to dry after every use.
- use food-grade detergents and sanitisers, always following the manufacturers instructions.
- clean as you go.
- make sure the containers for garbage and recycled matter are large enough for the amount of waste you produce and are capable of being easily cleaned.
- ensure that all equipment used for cleaning (eg. mops, buckets, cloths, brooms etc) are also kept clean.

**Cleaning and Maintenance Schedule**

|                   |  |
|-------------------|--|
| <b>Daily</b>      | Used equipment<br>Floors<br>Rubbish bins               |
| <b>Weekly</b>     | Fridges<br>Hot hold equipment<br>Cupboards and shelves |
| <b>Monthly</b>    | Freezers<br>Dry food storage area                      |
| <b>Quarterly</b>  | Windows<br>Walls<br>Ceilings                           |
| <b>Twice term</b> | Ovens  |
| <b>Annually</b>   | Light fittings   |

**Legal and Regulatory Foundation**

**National Quality Framework**

- Education and Care Services National Law:
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.77 Health, hygiene and safe food practices
  - R.78 Food and beverages
  - R.79 Service providing food and beverages
  - R.80 Weekly menu
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements

## Additional Regulatory Context and Guidance

- Food Act 2006 (Qld)

### Policy Controls

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Endorsed by: Approved Provider

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Date Endorsed: 01 September 2023

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Date implemented: 14 September 2023

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Version: v.2023-1

## 2.13 Emergency Evacuation, Lockdown and Drills

### Policy Statement

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

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

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [3.5 Emergency and Safety Equipment](#)
- [5.2 Positive Behaviour Support Practices](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensuring policy and procedure provide all staff are instructed and trained in the emergency evacuation and lockdown plans.</li><li>• Ensure emergency evacuation action plans have been developed through risk-assessment practices that identify potential emergencies.</li><li>• Ensuring plans are displayed in a prominent location near entry and exit points.</li><li>• Ensure emergency and evacuations plans are rehearsed and documented.</li><li>• Ensure processes are developed to monitor the function and working order of fire equipment.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Support the Approved Provider in facilitating the collaborative ongoing review and development of emergency and evacuation plans.</li><li>• Instruct all new staff and/or volunteers of the emergency and evacuation plans.</li><li>• Ensure the relevant drills are undertaken in accordance with the service's procedures.</li><li>• Communicate emergency drill evaluations and any identified concerns to the Approved Provider.</li><li>• Ensure the service environment is maintained to support the safe response to emergency events (doorway are kept clear, workplace health and safety items addressed) and that plans and resources are maintained and displayed as outlined in the procedure.</li><li>• Monitor and regularly coordinate the maintenance of fire safety equipment.</li></ul> |

|                    |   |
|--------------------|---|
| Responsible Person | <ul style="list-style-type: none"> <li>• Initiate and lead the emergency evacuation or lockdown response including undertake drills as required.</li> <li>• Provide feedback and guidance to staff and children of their response to emergency and evacuation drills.</li> </ul>  |
| All Staff          | <ul style="list-style-type: none"> <li>• Respond to hazards or potential signals or an emergency event</li> <li>• Immediately alert other staff of the emergency situation.</li> <li>• Support children and other individuals onsite to follow the emergency and evacuation plans.</li> <li>• Understand your role and responsibilities in an emergency or evacuation response.</li> <li>• Participate in planning and review of emergency plans and drills.</li> </ul> |

## Procedures

### Emergency Evacuation

For emergencies where the source of the hazard is located inside or otherwise onsite (e.g. a fire, chemical spill, gas leak etc.) and children need to move away from the hazard, the **Emergency Evacuation Plan** will be initiated. To maximise the continuity of emergency plans for children, the service has an evacuation method consistent with school procedures.

#### Displaying Plans

Evacuation plans, including a floor plan, will be clearly displayed near the entrances/exits of each room used by the service.

#### Inspections of Egress and Equipment

Educators must ensure that all exits are kept clear and unlocked to enable a quick departure in the event of an emergency. The free egress of emergency exits will be included on the daily safety checklists.

Likewise routine inspection of the service's emergency equipment will be set out in the service's maintenance schedule.

#### Priority is the Safe Evacuation

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

#### Post-Evacuation Care and Supervision

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

### Lockdown

A **lockdown** emergency response is initiated where the threat or hazard is in the external environment (a harassing parent/adult, dangerous person on/near premises). Unlike the emergency evacuation plan, the lockdown plan due to the discreet intention is not displayed, therefore rehearsals (drills) are an essential activity to ensure effective preparation.

## **Daily Inspections for a Safe Egress**

Educators must ensure that all entrances for buildings used in a lockdown are kept clear to enable a quick entry in the event of an emergency. The rooms selected for lockdowns are chosen based on their capacity to safely contain children and educators. The free ingress of entrances will be included on the daily safety checklists.

## **Educator Response to Threats**

To remove any doubt, no staff member is to try to physically remove an unwanted or harassing individual.

## **Bomb Threat**

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### **Plan Kept Near Phone**

An action plan for the event of a bomb threat will be kept in an accessible location in the OHSC office.

A coordinated approach to maintain communication in order to collect helpful information, while evacuating children to a safe area will be carried out.

## **Emergency Training and Induction**

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Before an educator or volunteer commences any duties, they are to know the steps carried out in a relevant emergency situation.

Relevant written induction materials set out the plans to be followed by educators, including the location of relevant alarms and communication methods. It is the responsibility of the Nominated Supervisor (or RP in their absence) to confirm any personnel commencing with the service has had relevant instructions and can describe their duties.

## **Emergency Drills**

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Rehearsal of emergency evacuation and lockdown procedures will be carried out at least once a term (every three months), with both the emergency evacuation and lockdown drill will occur during a BSC session, ASC session, and at the beginning of each Vacation Care program. To maximise the exposure to the widest range of children, families and staff in attendance, it will be expected that the drills will occur on different days of the week.

At the conclusion of a drill, relevant feedback and guidance will be provided to the children. The service expects drills to be a positive experience for children and educators are to be encouraging in their tone when debriefing a drill.

Each practiced drill will be documented and recorded by the relevant person leading the rehearsal. Each record will include an evaluation of the drill against the service's plans and responses by staff and children. Any concerns will be reported to the Approved Provider and prompt the review of the emergency situations risk assessment and plans.

## **Quality Improvement**

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Emergency plans will continue to be monitored for effectiveness. All staff are encouraged to inform the improvement of emergency plans over time. Consultation and feedback with educators will be sourced following each drill.

The risk assessment for emergency situations will be reviewed at least annually or as soon as practicable after becoming aware of any circumstance that may affect the safe evacuation of children from the service.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.97 Emergency and evacuation procedures
  - R.98 Telephone or other communication equipment
  - R.99 Children leaving the education and care service premises
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.173 Prescribed information to be displayed
  - R.176 Time to notify certain information to Regulatory Authority
  - R.177 Prescribed enrolment and other documents to be kept by approved provider
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Fire and Emergency Service Act 1990 (Qld)
- Building Fire Safety Regulation 2008 (Qld)
- Managing the Work Environment and Facilities Code of Practice

#### Policy Controls

Endorsed by: Approved Provider

Date Endorsed: 01 September 2023

Date implemented: 14 September 2023

Version: v.2023-1

## Evacuation Plan

### Principles for Evacuation Plan Response

- R** – Remove children and others from danger
- A** – Alert, call out in a loud voice, sound alarm and call 000
- C** – Confine the fire. Close doors and windows, if safe
- E** – Evacuate to the Assembly Area

| <b>Steps to follow in the event of a fire or other relevant danger</b> |  |  |
|--|--|--|
| <b>Step</b>  | <b>Responsible Person</b>                    | <b>Instructions</b>  |
| 1  | All educators                                | Identify hazard and determine type (i.e. fire, animal etc.)  |
| 2  | All educators and children                   | <p><b>Sound alarm</b> to alert all students, teachers, educators, and school visitors</p> <p>Every educator needs to evacuate all children located in their supervised area. Direct children to gather at the nearest exit point, ready to leave.</p> <p>Once all children are gathered the group will calmly transition to the Assembly Point (as marked on the Evacuation Floor Plan), with the a relevant educator taking the lead.</p> |
| 3  | Nominated Supervisor (or Responsible Person) | Put on warden hat and high visible vest, gather emergency medication, and sign in/out record.  |
| 4  | Educator                                     | One educator will stay behind the group of children to ensure all children make their way to the Assembly point.   |
| 5  | Nominated Supervisor (or Responsible Person) | <p>Check all rooms (including toilets) to ensure no children have been left behind (or Area Leader if needed).</p> <p>If safe to do so, close doors (leave unlocked) and windows, turn off air conditioners and TV.</p> <p>Meet children and educators at assembly point.</p>  |
| 6  | Nominated Supervisor (or Responsible Person) | <p>Once at assembly point, delegate an educator to call 000.</p> <p>Roll call – go through sign in/out record to ensure all children are accounted for.</p>  |
| 7  | All educators                                | <p>Wait for emergency services to attend and follow instructions given by them.</p> <p>Assist in gather emergency medication and emergency kit as required.</p> <p>Nominate and educator to meet emergency services in a prominent location</p>  |
| 8  | Nominated Supervisor (or Responsible Person) | <p>Never re-enter a building until emergency service have attended and deemed it safe to do so. Children will be cared for, supervised and comforted at the Assembly Area until it is safe.</p> <p>Should the building be unsafe or the time to return presents as extensive, parents will be called to collect their children.</p>  |

Insert copy of evacuation floor plan

## Lockdown Plan

### Principles for Lockdown Response

**Communication** – Discretely make others aware of the threat.

**Coordination** – Respond as a team to ensure the safety of children.

**Care** – Calmly approach the assembly of children to support safety and wellbeing.

### Steps to follow in the event of outdoor or other external danger

| Step | Responsible Person              | Instructions  |
|------|---------------------------------|---|
| 1    | All educators                   | Maintain awareness of your location and scan for potential hazards.   |
| 2    | Responding Educator             | When a relevant emergency presents (external threat), <b>raise awareness to other educators</b> . If possible, record relevant information (e.g. physical descriptions, car registration).  |
| 3    | All educators and children      | On hearing the signal, each educator needs to prepare children to transition to the lockdown area. Assemble in an orderly manner and move toward lockdown area.   |
| 4    | Lead Educator                   | <b>Check</b> other rooms and toilets to ensure all children are accounted for.  |
| 5    | Responsible Person              | Walks to each entrance and once all children are inside, lock the doors. Where possible, draw curtains/blinds.  |
| 6    | Lead Educator                   | As children arrive inside, assemble in the safest area and encourage children to calm and still.  |
| 7    | Responsible Person and Educator | Once everyone is believed to have arrived, delegate an educator to call <b>000</b> (if relevant)<br><b>Account for all children and educators</b> with a roll call – reading out and visually confirming each person in present and safe. |
| 8    | All educators                   | Depending on the circumstances, wait for— <ul style="list-style-type: none"> <li>• emergency services</li> <li>• the threat to pass (storm etc).</li> </ul>   |
| 9    | Responsible Person              | No one is to leave a building until emergency services have attended and deemed it safe to do so.   |

## Bomb Threat Action Plan

### Principles for a Bomb Threat Response

**Communication** – Maintain contact to collect and record helpful information.

**Coordination** – Respond to evacuate or assemble in a safe area.

#### Steps to follow in the event of a bomb threat situation

| Step | Responsible Person                         | Instructions  |
|------|--|---|
| 1    | Staff member answering the phone           | <p>Locate the bomb threat checklist and record key information.</p> <p><b>Do not hang up the phone.</b></p> <p>Signal to an educator, without altering the caller, to commence evacuation procedures.</p>   |
| 2    | Supporting Educator                        | Raise the awareness of an evacuation.   |
| 3    | All educators and children                 | On hearing the signal for emergency evacuation, each educator needs to prepare children to evacuate- muster all children located in their supervised area, directing them to gather (in a line) at the nearest exit point, ready to leave to the <b>Assembly Area</b> . |
| 4    | Responsible Person/<br>Supporting Educator | Put on warden hat and high visible vest, <b>gather emergency medication, evacuation kit and sign in/out record.</b>   |
| 5    | Lead Educator                              | One educator from each location leads the children to the relevant <b>Assembly Area</b> .   |
| 6    | Responsible Person/<br>Supporting Educator | <b>Check all rooms</b> (including toilets) to ensure no children have been left behind. If safe to do so, close doors (leave unlocked) and windows. Meet all children and educators at <b>assembly point</b> .  |
| 7    | Responsible Person/<br>Supporting Educator | Once at assembly point, an educator to call 000.<br><b>Account for all children and educators</b> with a roll call – reading out and visually confirming each person in present and safe.   |
| 8    | All educators                              | <b>Wait for emergency services to advise further actions.</b>   |

## 2.14 Handling Disclosures and Reporting Suspicions of Harm (Including Mandatory Reporting)

### Policy Statement

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

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

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

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.5 Interactions and Communication with Families](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)

### Appendices and Forms

- [Information Sheet for Mandatory Reporting by Education and Care Service Professionals](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure staff receive appropriate training and induction to be able to identify and respond to indicators of significant harm.</li><li>• Consult, support and plan appropriate courses of action when suspicions of abuse and harm arise.</li><li>• Seek advice, guidance and resources to support decision-making.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Respond to concerns and issues raised by staff.</li></ul>  |

|           |   |
|-----------|---|
|           | <ul style="list-style-type: none"> <li>• Direct serious concerns and possible suspicions to an appointed officer of the Approved Provider for consideration.</li> <li>• Document concerns and ensure these records are handled with privacy.</li> <li>• Where appropriate, collaborate with parents to identify preventative supports.</li> </ul> |
| All Staff | <ul style="list-style-type: none"> <li>• Be equipped to respond to indicators of harm and disclosures.</li> <li>• Listen and observe children with sensitivity and empathic understanding.</li> <li>• Share your concern with the Nominated Supervisor, or where relevant, other professionals.</li> </ul>  |

## Procedures

### Protection of Children While Being Cared For By The Service

1. The service is committed to ensuring the safety and wellbeing of children, all educators will be expected to follow the instruction and procedures to ensure the safety and protection of children being cared for by the service.
2. Where the respondent of an allegation of abuse is an educator (where an educator or staff member is suspected to have harmed a child/ren), any educator being aware or holding suspicion will immediately report to the Nominated Supervisor (or responsible person), who will notify the Operations Manager.
3. The educator (responded) will be immediately relieved of their duty and relevant workplace investigations and (if relevant) appropriate disciplinary actions will occur (4.8 Employee Underperformance, Misconduct and Disciplinary Actions), including notification to the police for criminal charges, where relevant.
4. The procedures outlined in the [Incident, Illness, Injury or Trauma](#) and this policy will be followed. Notification to the Regulatory Authority will occur as per [Managing Notifications](#) policy.

#### Child Protection Act 1999 (13E)

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

### Mandatory Reporting Requirement (Child in Need of Protection)

1. The Approved Provider will ensure the Nominated Supervisor provides instruction for each educator to understand either responsibilities of notifying of reasonable suspicion of harm and, where possible, periodic training so all educators are equipped with relevant skills and knowledge to fulfil their duty of the Child Protection Act 1999 (Regulation 84).
2. On initial employment all educators (and other relevant staff will be provided with a copy of the [information sheet on Mandatory Reporting](#) as a minimum. Additional training, support and resources will be coordinated as assessed by the Approved Provider.
3. The Nominated Supervisor will ensure that educators are aware they will be supported (and where possible guided) on how to handle situations where information is disclosed to them by a child, by a member of the child's family, or other persons.
4. At all times educators will have access to the service's policies and procedures manual to refer to in instances where they are uncertain of their responsibilities or required actions. Additionally, staff are supported to discuss child protection concerns with their management.  
All staff are to monitor children's presentation, behaviour, play, interactions and any other indication they may be exposed to harm or potential harm.

## Responding to Disclosures

5. Where a child discusses information relating to their experience of trauma and harm with an educator (a disclosure), educators are guided to:
  - a. **Listen** – try to be in a suitable environment, be calm and patient, let the child use their own words and avoid quizzing. Don't be afraid of saying the 'wrong thing'. Listening supportively is more important than the words you use.
  - b. **Reassure** – address the concern about the child's safety and reassure the child it's okay that they have told you what's been happening. Reassure the child it is not their fault for any distress.
  - c. **Respect** – the child may only reveal some details. Acknowledge bravery and strength. Explain in order to keep them safe you'll have to tell someone and avoid making promises you can't keep.

## Developing a Reasonable Suspicion

6. An educator, Nominated Supervisor, or relevant other staff member may develop concern about a child's wellbeing and safety from a variety of sources – observations, discussions, the child's presentation, behaviour, or interactions with the parents etc.
7. A reasonable suspicion might not develop from one single event but rather a number of indicators combining to result in a concern developing about a child's safety and wellbeing.

## Allegations of Staff Member Abuse

8. Where the respondent of an allegation of abuse is an educator (where an educator or staff member is suspected to have perpetrated the act of abuse), any educator being aware or holding a suspicion will immediately report to the Nominated Supervisor (or responsible person), who will notify the Approved Provider.
9. The educator (responded) will be immediately relieved of their duty and relevant workplace investigations and (if relevant) appropriate disciplinary actions will occur (4.8 Employee Underperformance, Misconduct and Disciplinary Actions).
10. The procedures outlined in the [Incident, Illness, Injury or Trauma](#) and this policy will be followed. Notification to the Regulatory Authority will occur as per [Managing Notifications](#) policy.

A **reportable suspicion** about a child is a reasonable suspicion that the child has suffered, is suffering, or is at unacceptable risk of suffering, significant harm caused by physical or sexual abuse. may not have a parent able and willing to protect the child from the harm. Mandatory reporters should also report to Child Safety a reasonable suspicion that a child is in need of protection caused by any other form of abuse or neglect.

## Consultation and Decision-Making

11. Indications of significant harm are not always clear. All staff should be prepared to discuss their suspicions openly to ensure a child is supported and reporting obligations are met.
12. Educators (or all other staff) will promptly advise the Nominated Supervisor of any concerns relating to a child's safety or wellbeing.

All staff including the Approved Provider, Nominated Supervisor and educators are free from liability or breaching Privacy Principles when sharing confidential information, if they are acting honestly and if their actions in doing so are consistent with the purpose of information sharing under the Child Protection Act 1999.

13. The Nominated Supervisor, in either being told of or themselves developing concerns relating to a child's safety or wellbeing are to advise the Approved Provider.
14. The Nominated Supervisor and Approved Provider will consult on a plan of action, which could include:
  - a. discussing concerns with parent/s
  - b. seeking further advice and support from:
    - i. Child Safety.
    - ii. Family and Child Connect.
    - iii. Child Protection Guide [online tool]  
<https://secure.communities.qld.gov.au/cpguide/engine.aspx>.
    - iv. the school Principal/relevant other professional
  - c. directly report notification to Child Safety.
15. Please note: Education and Care professionals cannot disclose personal information to Child and Family Connect without the parent's permission.

### **Documenting the Decision-Making**

16. The Nominated Supervisor is to ensure that the reports and documentation of a disclosure/suspicion is written and recorded by the staff/educator involved as soon as practical. The report should include:
  - a. any relevant background information
  - b. a factual description of the events/observation/incident
  - c. statements of the child (or others)
  - d. educator/service response to events
  - e. any parent involvement or discussion
  - f. any other matters considered relevant
17. These reports or other documentation will be stored by the Nominated Supervisor in a password-protected file on the service's computer (consistent with [7.6 Information Handling – Privacy and Confidentiality](#))

### **Non-Reportable Suspicion**

18. Where advice has been received that the suspicion does not meet a threshold for reporting to Child Safety, the relevant person should follow and document any recommendations (e.g. talking to parents about access to support services)
19. However, the following matters should also be considered and if necessary actioned:
  - a. Could the events be considered a [Regulatory Authority] reportable incident. has the allegation of harm occurred while a child has been educated and cared for ([2.4 Incident, Illness, Injury or Trauma](#))?
  - b. What action could or should be provided to support the child/ren ([5.3 Supporting Complex Behaviours](#))?
  - c. Have or how should parents be notified ([6.5 Interactions and Communication with Families](#))? Can additional support be offered to parents?

### **Reporting Reasonable Suspicions**

20. Where report to Child Safety has been decided, the most appropriate methods can be selected:
  - If the child is in immediate Danger – **QLD Police Service** – 000
  - During business hours – **Child Safety Regional Intake Service South East** - 1300 679 849
  - After Hours – **Child Safety After Hours** – 1800 177 135
  - via the Child Protection Guide <https://secure.communities.qld.gov.au/cpguide/engine.aspx>
  - OneSchool (in collaboration with the School)
21. Mandatory Reporters are required to make a written report. If the initial notification is made via phone, the corresponding report can be guided by Child Safety.

## Documentation and Records

22. Any record relating to suspicions of significant harm are to be kept separate from general incident reports. Child protection concerns will be filed within the password protected folder on the service's computer.
23. In circumstances where it is consistent with protecting a child from significant harm, relevant information can be shared with the school Principal. The preference is the Approved Provider will inform this decision-making, however, in extenuating circumstances the Nominated Supervisor will have delegation to decide.
24. All persons involved in a case of suspected child abuse will be treated with sensitivity and respect, and all information to the case will remain confidential unless required to protect a child from harm [see Policy [7.6 Information Handling – Privacy and Confidentiality](#)].
25. For matters also relating to [2.4 Incident, Illness, Injury or Trauma](#) notification will also be required to be reported to the Regulatory Authority via the procedures in [7.7 Managing Notifications](#).

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.12 Meaning of serious incident
  - R.84 Awareness of child protection law
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.174A Prescribed information to accompany notice
  - R.175 Prescribed information to be notified to Regulatory Authority
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities.

### Additional Regulatory Context and Guidance

- Child Protection Act 1999 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- Criminal Code Act 1899 (Qld)

## 2.15 Safe Online Environments for Children

### Policy Statement

This policy outlines OSHC's commitment to protect children and their welfare in online environments. As a service, we recognise the increasing use of digital platforms for learning and communication and develop practices that create security in an online environment, where children—

- Are guarded from harm and exploitation.
- Have their reputation, data and privacy protected.
- Are not exposed to inappropriate content.

Guided by the Best Practice Framework for Online Safety Education and eSafety Early Years program for educators published by the eSafety Commissioner. The service's policy aims to balance the dignity and affordance of using digital devices, and in a manner that still safeguards child's wellbeing and interests. The service's procedures will continue to be assessed and improved. We aim to continue collaboration with children (and families) to empower their participation around the design and development of our protocols for safely using devices at OSHC.

This policy applies to all children, staff, volunteers, and parents connected to OSHC and covers all online activities, digital communications, and use of online learning platforms. The nature of technology means there are many opportunities for online environments to intersect with the service cross at several junctures and stakeholders including—

- Access to technology and the internet at OSHC.
- Taking photos and videos.
- Social media use by the community, including educators.

The service's policy sets out clear and explicit expectations for the community to use and interact online in a manner that maintains the safety and wellbeing of children. Anyone acting in a manner incompatible with our commitment to the safety and wellbeing of children may be exposed to disciplinary action relevant to the circumstance.

### Key Tasks and Responsibilities

|                             |   |
|-----------------------------|---|
| <b>Approved Provider</b>    | <ul style="list-style-type: none"><li>• Responsible for ensuring the service has suitable protections established, where children may access the internet as part of the program.</li></ul>   |
| <b>Nominated Supervisor</b> | <ul style="list-style-type: none"><li>• Must ensure the relevant safeguards for online connection are working as intended.</li><li>• Monitor practices to ensure they are followed and adequate supervision is coordinated.</li></ul>   |
| <b>All Staff</b>            | <ul style="list-style-type: none"><li>• All educators, especially those tasked with leading specific activities, are responsible for supervising children using devices and accessing content.</li><li>• All educators are expected to behave in the manner set out in policy to ensure children's safety and wellbeing is not compromised. C</li><li>• Concerns are brought to the attention of the Nominated Supervisor to address.</li></ul> |

### Procedures

#### Infrastructure and Technology

##### Children

1. Any children using devices – connected to the internet or not - must be properly supervised in an open environment. Educators must be able to easily view screens at any moment.

2. Any access to the internet must be approved and is only made available when filtering and/or monitoring systems are be enabled and only for homework or research purposes.
3. In upholding our commitment to health and physical activity, access to devices (i.e. screen-time) will be limited -
  - a. BSC or ASC sessions - devices are only be used for homework or other research activities.
  - b. Vacation Care sessions - some restricted leisure time is made available (but excludes access to the internet), with times set out in the program.
4. Where devices and media are made available these are to only contain content that is appropriate for children, using government classifications (G and PG-rated) as the guiding principle.
5. Children are not to take photos or videos of other children on their personal devices.

### **Educators**

1. Sufficient and suitable equipment is available for educators to complete relevant tasks, such as programming and documentation.
2. Educators are not to use personal devices for any documents or material that may contain the personal information of children and families, this includes—
  - a. Taking pictures on phones.
  - b. Writing observation on personal devices.
  - c. Emailing/messaging parents from personal accounts.
3. To remove any doubt, personal devices may be used for work activities that do not store or save children and families personal information, for example—
  - a. Attending a webinar.
  - b. Researching programming ideas.
  - c. Communicating staffing arrangements.
4. Where an educator believes additional equipment is needed, they should communicate this to the Nominated Supervisor.

## **Communication and Information Sharing with Families**

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### **Child Care Software**

The service upholds requirements for privacy and data by using reputable child care software to collect and store the substance of family's personal and sensitive information (i.e. enrolment information). This system is password protected and allows parents to more easily access the information retained by the service.

### **Email (or other Messaging)**

At times, communication with families will occur via email. Where the service's representatives use email to communicate, must only occur on accounts owned and managed by the service.

### **Social Media**

The service avoids publishing any personal or identifiable information (including photos and video) on its social media accounts (regardless of privacy settings). Any personal information is only posted in limited exceptions, and where authorisation has been provided in writing.

Where an educator becomes aware of a child being impacted or a risk of harm from an online setting (i.e. disclosure of cyber-bullying), then the service will inform the parent of this information at the earliest convenience.

## **Employee Social Media and Online Communication**

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### **Responsibility**

All employees have a duty to uphold the reputation and interests of the service beyond the hours they are at work (see [4.1 Code of Conduct](#)). Educators have a responsibility to ensure their conduct is compatible with their employment obligations when using social media for personal use.

Communication and information sharing via social media or otherwise has the potential to harm either a child/family or the service's reputation. Any instances of a child or their family's privacy, reputation or safety being compromised will be treated very seriously. Employees engaging in this conduct will be subject to disciplinary action, up to and including termination.

### **Boundaries for Online Communication and Interactions**

- There should not be any personal interaction with children of the service via social media, including being 'friends' or following accounts etc. If a child of the service attempts to interact with an education, they should— not respond, review their privacy settings, and notify the Nominated Supervisor who will communicate the service's expectation with the family.
- The service name or identity cannot be mentioned in online posts or other online commentary, either directly or implied.
- Employees should not discuss or disclose work-related matters in any public forum.

## **Legal and Regulatory Foundation**

In preparing and implementing this policy, the Approved Provider recognises the obligations and requirements related to –

### **National Quality Framework**

- **Education and Care Services National Law:**
  - s.167 Offence relating to protection of children from harm and hazards
- **Education and Care Services National Regulations:**
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.174A Prescribed information to accompany notice
  - R.175 Prescribed information to be notified to Regulatory Authority
- **National Quality Standard:**
  - QA2 – Children's health and safety
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities.

### **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000 (Qld)
- Criminal Code Act 1899 (Qld)
- Online Safety Act 2021 (Cth)
- eSafety Commissioner - [Best Practice Framework for Online Safety Education](#)
- eSafety Commissioner - [eSafety Early Years program for educators](#)

## **Related Policies and Procedures**

[2.1 Providing a Child Safe Environment](#)

[2.9 Incidents, Illness, Injury, and Trauma](#)

[4.1 Code of Conduct](#)

[5.1 Interactions and Relationships with Children](#)

[7.1 Governance and Management](#)

[7.2 Privacy and Confidentiality of Records](#)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## Policy Group 3

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# Physical Environment

The services physical environment is **safe, suitable and provides a rich and diverse range of experiences** which promote children's learning and development.

Ensuring the physical environment suitable for play-based learning is critical to:

- contributing to children's wellbeing, creativity and developing independence
- engage children and support educators to facilitate a wide range of experiences
- keeping children safe
- creating/organising spaces to reduce the risk of injury.

The policies contained in this group set out the service's expectations for the physical environment and how educators can use practices to enhance it for children's learning and safety.

# 3.1 Space and Facilities Requirements

## Policy Statement

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

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.4 Sleep and Rest](#)
- [2.1 Providing a Safe Environment](#)
- [2.5 Administration of First Aid](#)
- [3.2 Authority to Occupy Premises](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.12 Insurance](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)

## Roles and Responsibilities

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

## Procedures

### Education and Care Facilities

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

- Reflective of the agreed indoor and outdoor spaces identified in the Service Approval.
- The spaces will be routinely monitored for comfort and safety, with educator and the Nominated Supervisor addressing any immediate issues to ensure children’s safety and wellbeing.
- Adequate toileting and handwashing facilities for children and educators are readily available.
- Available and adequate facilities to cater for soiled clothing including hygienic storage.
- Adequate, safe and accessible drinking water and/or food will be provided at all times.

- Sufficient furniture and the environment will be organised in a manner that is developmentally appropriate for all children, it will be inclusive and adaptable to ensure participation by every child in the program.
- Areas located to display children’s artwork and promote notices and communication for parents.
- Adequate space for children to engage in rest and/or quiet experiences.
- Indoor spaces are monitored for adequate ventilation, natural light and temperature that ensures the safety and wellbeing of children.

### **Fire Safety**

The service will ensure the environment supports the protection of children from fire by:

- Keep emergency exits clear and unlocked at all times while the service is operating.
- Ensure emergency evacuation signs and posters are displayed, including the emergency evacuation floor plan displayed at each exit.
- Ensure all relevant fire safety equipment is maintained regularly (see - [3.5 Emergency and Safety Equipment](#))

### **Administration Facilities**

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

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

### **Purchasing and Development**

- Educators and families will be encouraged to identify suitable opportunities to address concerns with the facilities.
- The QIP will also identify opportunities to enhance the service’s provisions and utilisation of their spaces.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Regulations:
  - R.81 Sleep and rest
  - R.103 Premises, furniture and equipment to be safe, clean and in good repair
  - R.155 Interactions with children
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 3.2 Authority to Occupy Premises

### Policy Statement

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

### Related Policies

- [3.1 Space and Facilities Requirements](#)
- [7.4 Leading Compliance and Quality Assurance](#)

### Roles and Responsibilities

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

### Procedures

The Approved Provider has the been approved with the authority to occupy the premises by the Principal of the School. The Approved Provider will maintain an occupancy agreement with the school for the continuation of service approval.

All communication regarding the authority to occupy the OSHC facilities will be managed by the Approved Provider.

### Legal and Regulatory Foundation

#### National Quality Framework

- Education and Care Services National Regulations:
  - R.32 Condition on service approval—entitlement to occupy premises
  - R.103 Premises, furniture and equipment to be safe, clean and in good repair
  - R.107 Space requirements—indoor space
  - R.108 Space requirements—outdoor space .
  - R.109 Toilet and hygiene facilities
  - R.110 Ventilation and natural light
  - R.111 Administrative space
  - R.113 Outdoor space—natural environment
  - R.114 Outdoor space—shade
  - R.115 Premises designed to facilitate supervision
- National Quality Standard:
  - QA3 – Physical environment
  - QA7 – Governance and leadership.

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment

### Policy Statement

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

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [3.1 Space and Facilities Requirements](#)
- [7.4 Leading Compliance and Quality Assurance](#)

### Roles and Responsibilities

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

### Procedures

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

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

To remove any doubt, no persons will be allowed to smoke on the school site. Likewise, all persons interacting with children will be free from the effects of any substances (illicit or otherwise). Any educator suspicious of the influence of any persons should report this information to the Nominated Supervisor immediately. Any staff member alleged to have breached this policy will follow the procedures outlined in [Fit for Work](#) and [Employee Underperformance, Misconduct and Disciplinary Actions](#).

### Legal and Regulatory Foundation

#### National Quality Framework

- Education and Care Services National Regulations
  - R.82 Tobacco, drug and alcohol-free environment
  - R.83 Staff members and educators not to be affected by alcohol or drugs
- National Quality Standard:
  - QA2 – Children's health and safety

- QA3 – Physical environment

### **Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011 (Qld)
- Tobacco and Other Smoking Products Act 1998 (Qld)

#### **Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 3.4 Children’s Toileting

### Policy Statement

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [3.1 Space and Facilities Requirements](#)

### Roles and Responsibilities

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

### Procedures

#### Toilet Facilities

##### Daily Inspections for Health and Hygiene

Educators will check the toilet facilities for safety and hygiene prior to the commencement of each session including before school, after school and vacation care. Education will ensure the facilities are hygienic, functional and free from any identifiable hazards ([Outdoor Safety Checklist](#)).

##### Access to Facilities

Coomera Rivers OSHC has two toilets in the OSHC building and separate staff (which also combines as a disability-accessible toilet when required) available. Additionally, there are school toilets in the undercover café area.

Educators (and any other relevant adult) are not permitted to use the children’s toilet facilities during operating hours. Likewise, children are not permitted access to the staff toilets (unless disability access is required).

## General Supervision and Transitioning to Toilets

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- The design of the school site and OSHC building allows reasonable visual supervision of the toilet areas.
- Educators will endeavour to increase supervision by escorting children to the toilet area, where possible.
- When needing to transition from a play area, children will go to the toilet in pairs.
- Educators will monitor and communicate the transition of children to and from the toilet block.

## Supporting Children's Toileting and Personal Hygiene

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

### Additional Support Needs

Educators should understand their role and have suitable skills to support children and uphold their safety and dignity. Staff will be provided with training in the support of children with toileting issues, particularly in the case of children with high support needs. Training and instruction can be delivered through written communications, direct training and/or meetings. Educators should discuss any concerns or requests for additional training with the Nominated Supervisor.

## Toilets During Excursions

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

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.109 Toilet and hygiene facilities
  - R.115 Premises designed to facilitate supervision
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA6 – Collaborative partnerships with families and communities

### Additional Regulatory Context and Guidance

- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 3.5 Emergency and Safety Equipment

### Policy Statement

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

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [7.4 Leading Compliance and Quality Assurance](#)

### Roles and Responsibilities

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

### Procedures

#### Emergency Equipment

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

- The emergency equipment is maintained and annually inspected by the premises' owner.
- Emergency equipment resources will only be used to respond to an emergency situation.
- Replacement or repair of any faulty equipment will be a priority. The Nominated Supervisor is responsible for coordinating this task. Any ongoing issues or alternative equipment should be communicated to the Approved Provider for approval or support.

#### Fire Safety Equipment

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

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

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations
  - R.89 First aid kits
  - R.97 Emergency and evacuation procedures
  - R.103 Premises, furniture and equipment to be safe, clean and in good repair
  - R.104 Furniture, materials and equipment
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld) 2011
- Building Fire Safety Regulation 2008
- Managing the Work Environment and Facilities Code of Practice
- First Aid in the Workplace Code of Practice
- Fire and Emergency Service Act 1990 (Qld)
- Building Fire Safety Regulation 2008 (Qld)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## Policy Group 4

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# Staffing Arrangements and Employment

Staffing arrangements foster **friendly, courteous interactions** and give children access to **a secure and predictable setting**.

Children are encouraged to actively participate in the learning programme by qualified and experienced educators. An atmosphere where children feel emotionally safe, secure, and happy is influenced by the connections among all staff members.

The emphasis of Quality Area 4 is on providing educators with the knowledge and training necessary to build trusting, respectful relationships with children, establish predictable learning environments, and motivate children to actively participate in the program. An excellent service thrives on a cooperative, ethical culture where professional norms govern all elements of operations.

Adjacent to arranging staff are the matters that govern the employment relationship. This policy group combines both Quality Area 4 requirement and employment expectations.

# 4.1 Recruitment and Employment of Educators

## Policy Statement

Coomera Rivers OSHC educators are central to the quality of education and care provided to children to attend the service and therefore, recruitment and selection practices should uphold the importance of this critical process. Coomera Rivers OSHC is committed to being an equal opportunity employer, ensuring fair and equitable employment practices are undertaken to recruit and select its employees. Recruitment decisions will be lawful, transparent and non-discriminatory. Selections will be based on merit with candidates' suitability demonstrated through identifying their level of knowledge, skills and ability against pre-determined selection criteria.

## Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Appoint suitable persons for employment at the service.</li><li>• Ensure processes for selection are fair and meritorious.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Work collaboratively with the Approved Provider to ensure suitable candidates are recommended and selected for appointment.</li><li>• Lead the orientation and induction of educators/employees.</li><li>• Maintain records and documentation related to recruitment and employment.</li></ul> |

## Procedures

### Job Analysis

1. Position descriptions will be developed for all employment position.
2. Position descriptions will outline the key functions of the roles and identify essential and desirable selection criteria.
3. The composition, quantity and engagement of the service's staffing arrangements will be decided by the Approved Provider.
4. Where possible recruitment activities will be as a result of workforce planning, identifying the upcoming needs of the service.
5. All employment and recruitment activities will be instigated with the Approved Providers expressed approval.

### Recruitment Activities

6. The Approved Provider will ensure a fair and lawful (non-discriminatory) recruitment procedure is undertaken for all employment.
7. Promotion and advertisement of available position can include:
  - Local newspapers,
  - Job seeking website,
  - Job boards on university or QCAN website, or
  - In the school newsletter.
8. Advertisements will include a description of the position, and an outline of the selection criteria. Candidates will be asked to write a cover letter addressing the selection criteria and provide a copy of their resume.
9. The service will acknowledge receipt of all applications and communicate an expected timeline on when a short-list will be made.

### **Short-listing Candidates**

10. Unless otherwise stipulated, the Approved Provider will be responsible for coordinating the short-listing of candidates with support from key service leaders.
11. Candidates failing to be shortlisted will be provided communication on this at the earliest possible convenience.
12. Applicants will be given a fair and equitable chance to compete for an appointment based on their merit. The selection of candidates will be lawful at all times, ensuring protected attributes are never the basis for decision-making (i.e. discrimination), this includes the following characteristics:
  - sex, age, race, gender identity or sexuality
  - relationship status
  - pregnancy, breastfeeding, family responsibilities or parental status
  - impairment
  - religious belief or activity
  - political belief or activity
  - trade union activity
  - status as a legal sex worker.
  - It is also illegal to discriminate against someone on the basis of an association with a person identified by one of these characteristics.

### **Interviewing**

13. Short-listed candidates will be notified to their progression and be invited to interview for the position.
14. Interview will be conducted by the Approved Provider or a relevant delegate.
15. Interview questions based on the selection criteria for the position will be developed and reviewed prior to the interview date and agree to by the selection panel and/or Approved Provider.
16. Interviews will be held in a manner to be fair and equitable.

### **Selection**

17. Unless directly appointed by the Approved Provider, the delegates conducting interviews will make a recommendation to the Approved Provider outlining their reason for selection.
18. Before offering the position to the preferred candidate, if not already completed, a delegated person will confirm the suitability of the candidate via at least one, preferably two, referee checks.

### **Appointment**

19. Once endorsed by the Approved Provider, the selected candidate will be offered the position and negotiate starting dates.
20. The newly appointed employee will be sent:
  - a letter of offer (employment agreement),
  - code of conduct,
  - a request for copies of relevant qualifications, and

- relevant blue card forms (application or link form), including a request for copies.
21. Unsuccessful interviewees will be notified as soon as possible by a nominated person from the selection panel.

### **Orientation and Induction**

22. All new employees will be given (at least) a 2 hour induction to ensure they are equipped and supported to understand and fulfil their role.
23. Induction will cover, but is not limited to:
- Receiving the Coomera Rivers OSHC Employee Welcome Information Pack, containing:
    - Employee Handbook.
    - Employee Record Form.
    - Position Description.
    - Details and location of the Award.
    - National Employment Standards Information Statement
    - Union Information.
    - Confidentiality/Privacy Agreement.
    - Child Protection Information Sheet.
  - Location and orientation of:
    - The service's policies and procedures.
    - National Quality Standard for Education and Care Services.
    - My Time, Our Place Framework for School Age Care in Australia.
  - A walk-through of the service, outlining the key facilities and emergency plans.
  - A discussion with the Nominated Supervisor (or delegate) to outline and introduce:
    - The other educators in the service and their roles.
    - Duty of care responsibilities and supervision practices.
    - Rostering and communication procedures.
    - Programming and documentation procedures.
    - Work Health and Safety procedures and responsibilities.
  - Each educator's first shift will be paired with a suitably experienced educator to 'shadow' them through the role and expectation. The Nominated Supervisor or Responsible Person will meet with the new educator at the end of the shift to debrief.

### **Conflicts of Interest and Recruitment**

The service may at times employ family members or personal friends of employees. The following procedures will apply in addition to the above employment procedures:

1. There will be no preferential treatment for family members/personal friends in the employment relationship. such conduct will be taken seriously, and disciplinary action will be followed if a conflict of interest has not been managed transparently or according to procedure.
2. No appointment of a family member or personal friend will be made without following the agreed recruitment process.
3. All candidates will be asked to disclose any actual or perceived conflicts of interest as part of routine interviewing questions.
4. Persons with responsibility in decision-making are additionally responsible for disclosing any actual or perceived conflicts of interest prior to undertaking interviews of the candidate. These disclosures are to be made to the Approved Provider. The Approved Provider will appoint a suitable alternative delegate where they see relevant.
5. Any subsequent appointment processes will not involve the relevant employee and all reference checks will be made by a nominated person who is independent of the relationship.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.169 Offence relating to staffing arrangements
  - s.170 Offence relating to unauthorised persons on education and care service premises
- Education and Care Services National Regulations:
  - R.145 Staff record
  - R.147 Staff members
  - R.149 Volunteers and students
  - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Industrial Relations Act 2016 (Qld)
- Child Employment Regulation 2016 (Qld)
- Parents and Citizens Associations Award – State 2016

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 4.2 Working with Children Check (Blue Card) Management

### Policy Statement

The service must ensure individuals associated with the operations and working directly with children hold a positive notice (or exemption) Blue Card (Working with Children Check). The service will maintain records to ensure the probity of all relevant persons and compliance with statutory obligations.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure a blue card register is maintained at the service.</li><li>• Report relevant notification to Blue Card Services.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Maintain the service's blue card register</li><li>• Support personnel with lodging relevant forms and notifications, including warning persons that it is an offence to apply for a blue card if they are a disqualified person.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Must report changes of police information to the service</li></ul>   |

### Procedures

#### Positive Notice Requirements for Employees, Volunteers and Governance

All employees, volunteers and executive members (Approved Provider members) of management must hold a current and valid Positive Notice for Child Related Employment Blue Card before starting any engagement.

All prospective paid employees will not be engaged to work at the service without being in receipt of a current blue card. Evidence of a valid 'paid' blue card / or a valid volunteer blue card with receipt that a form has been submitted to transfer from Volunteer to Paid, must be submitted to the service before being engaged in any employment.

#### Linking Blue Cards to the Organisation

All individuals requiring a Blue Card will be linked to the organisation. Once set-up with an Organisation Portal, the Approved Provider or Nominated Supervisor will be able to link an employee to the organisation.

**This must be done prior to starting at the service.**

The Approved Provider will be responsible for allowing and managing Organisation Portal access.

### **Blue Card Register**

A blue card register will be maintained at the service containing the copies of blue cards of all employees, volunteers and executive members of management. The register will be referred to by the Nominated Supervisor/Administrator on a regular basis to track expiry dates.

### **Renewal Monitoring**

The Nominated Supervisor will confirm the upcoming Blue Card expiries on the first day of each month. By using either the Organisation Portal or phoning Blue Card Services (1800 113 611) all Blue Card with expiries within the next 8 weeks will have the renewal status confirmed. As long as an individual submits their renewal application before their current card expires, they will be able to continue in their relevant role.

### **Police History Changes**

It is no requirement for organisations to notify Blue Card Services of employee police history changes, Blue Card Services will notify Employers when appropriate.

### **Exiting Employees and Volunteers**

The Nominated Supervisor (or where relevant, the Approved Provider) will notify Blue Card Services when a person leaves their engagement with the service via the Organisational Portal (or other appropriate means in the absence of portal access)

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.169 Offence relating to staffing arrangements
  - s.170 Offence relating to unauthorised persons on education and care service premises
- Education and Care Services National Regulations:
  - R.145 Staff record
  - R.147 Staff members
  - R.149 Volunteers and students
  - R.151 Record of educators working directly with children
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000
- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook

**Policy Controls**

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|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 4.3 Volunteers and Students

### Policy Statement

Volunteers, includes students who are in an unpaid role and volunteering for skill development (i.e. on practicum placement) can be a highly valued resource. These individuals can add a positive contribution to the care and education provided by the service. The Approved Provider is committed to providing quality management all people in a child related to roles, including those in a volunteer capacity. The service also recognises the importance and duty to ensure all individuals engaged in child related work should be a suitable persons to do so.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure procedures are created to monitor and maintain suitable management on volunteers to uphold the safety and wellbeing of children.</li><li>• Ensure records are maintained to demonstrate compliance.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Ensure compliance with organisational and legislative standards.</li><li>• Lead a suitable suitability assessment and induction to support a volunteer's engagement, learning and development.</li><li>• Complete documentation and maintain relevant records.</li></ul>        |
| Responsible Person   | <ul style="list-style-type: none"><li>• Monitor the conduct of volunteers and interaction with children.</li><li>• Support learning and development.</li></ul>  |
| All Staff            | <ul style="list-style-type: none"><li>• To support interactions with children and guide learning and development.</li><li>• Ensure the safety and wellbeing of children through supporting volunteer's understanding of procedures, expectations and interactions.</li><li>• Report any concerns immediately.</li></ul> |

### Procedures

#### Blue Card (Working With Children Check)

Volunteers must hold a blue card before they begin at the service in any capacity. An application to 'Link a cardholder to the organisation' will be lodged to Blue Card Services upon commencement. Copies of the volunteers Suitability Card (Positive Notice) will be kept on file.

## **Suitability and Induction**

The Nominated Supervisor will meet with any persons interested in volunteering before agreeing to their engagement. The Nominated Supervisor will be satisfied the volunteer is suitable (demonstrates expected knowledge, skill and abilities) to care for children attending the service.

An induction process will be undertaken prior to participating in the service and interaction with children. The topics covered in the induction include (but are not limited to):

- The service's Philosophy including its commitment to an environment which is safe and friendly to children.
- The location of the service's Policy and Procedure Manual, including an outline of key procedures.
- Procedures to follow when harm is disclosed or identified.
- Feedback and Complaints procedures.
- Emergency and Evacuation Plans
- Work Health Safety Manual

## **Conduct and Engagement**

1. All Volunteers will be asked to acknowledge their understanding and commitment to the Code of Conduct. Volunteers will be held to the same standard of behaviour as all employees.
2. Volunteers will be supported and guided by other Educators while participating in the service, especially during the initial orientation shifts. Where possible the service will pair the volunteer with an Educator to mentor and model the role and expectations.
3. If assessed as being both suitable and competent, volunteer workers may be counted towards the Educator-to-child ratios for the service, provided they meet the qualification requirements.
4. Volunteers under the age of 18 must be fully supervised at all times.

## **Record of Volunteer Details**

The Nominated Supervisor is to record the personal details of all volunteers including – full name, address, and date of birth.

The Nominated Supervisor is to request and keep a volunteers timesheet of attendance (recording the details of the date and time each day the volunteer or student participated).

# **Legal and Regulatory Foundation**

## **National Quality Framework**

- Education and Care Services National Law:
  - s.169 Offence relating to staffing arrangements
  - s.170 Offence relating to unauthorised persons on education and care service premises
- Education and Care Services National Regulations:
  - R.145 Staff record
  - R.149 Volunteers and students
  - R.151 Record of educators working directly with children
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA4 – Staffing arrangements

## **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000
- Work Health Safety Act 2011 (Qld) 2011

**Policy Controls**

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|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 4.4 Code of Conduct

### Policy Statement

The Approved Provider expects that all people connected to the service, in particular employees and individuals interacting with children to conduct themselves in a manner that is consistent with a high standard of professionalism and ethical practice.

Employees and those in manager/advisory roles are expected to demonstrate a behaviour that reflects a positive and professional attitude of their work, act collegially, and support the needs and safety of the children and families accessing the service. The code of conduct provides an illustrated expectation of the standard of behaviour expected of all people with responsibility for providing a quality service.

Additionally, the protection of children and the contribution to their wellbeing is a fundamental principle of the service. The nature of being a stakeholder to an education and care service means the fostering of positive relationships between adults, children and their families. It is critically important that in forming and maintaining these relationships and interactions we do not compromise children and young people's welfare. Therefore, the service has developed a clear outline of expected behaviour to support positive interaction and safety.

The Approved Provider also recognises their duty to comply with Education and Care Services National Regulations 2011 (168 (2)(i)) and the service's Child and Youth Risk Management Strategy.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• To establish a Code of Conduct of the service's employees and relevant people that will have the opportunity to interact with children and young people.</li><li>• Ensure all employees are communicated and supported to meet the expectations of the Code of Conduct.</li><li>• Investigate instances where the Code of Conduct has not been upheld by employees.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Orientate staff to the service's Code of Conduct when beginning employment.</li><li>• Monitor Educator and staff behaviour, guide reflection of the service's expectation for employees and respond in instances where there are concerns about employee conduct.</li><li>• Model appropriate standards of behaviour.</li><li>• Advise the Approved Provider of concern or allegations of employees not meeting the Code of Conduct.</li></ul> |

|                    |   |
|--------------------|---|
| Responsible Person | <ul style="list-style-type: none"> <li>• Monitor Educator and staff behaviour and respond to instances of concern about employee conduct, following reporting guidelines.</li> <li>• Model appropriate standards of behaviour.</li> <li>• Advise the Approved Provider of concern or allegations of employees not meeting the Code of Conduct.</li> </ul> |
| All Staff          | <ul style="list-style-type: none"> <li>• Monitor the behaviour of peers, report any concerns identified.</li> <li>• Ensure behaviour is consistent with the expectations of the Code of Conduct.</li> </ul>   |

## Procedures

### Administration of the Code of Conduct

1. Employees will be provided with a copy of Coomera Rivers OSHC Code of Conduct prior to commencing employment.
2. Employees will read, acknowledge, and commitment to the Codes of Conduct.
3. Employees will be expected to consistently uphold the agreement during their employment with the service.
4. The Nominated Supervisor will be responsible for monitoring and immediately addressing the concern of educator and volunteer conduct.
5. Issues relating to educator conduct will be notified to the Approved Provider.
6. Staff with concern about a manager's (Nominated Supervisor) conduct are encouraged to communicate directly with the Approved Provider.
7. Breaches to a Code of Conduct will be taken seriously. Allegations of breaches of the Code of Conduct by employees will be managed through underperformance and misconduct proceedings, which may result in action taken by the Approved Provider up to and including termination.

### Professional Conduct for All Persons Interacting with Children

- The service expects all persons interacting with children connected to the service will display the highest level of professionalism, respect and safety.
- The service has outlined expectations for any individual with an opportunity to interact or form relationships with children who access the service.
- Details of this code of conduct will be made available to employees, management, families, volunteers and visitors.
- Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or disciplined (as appropriate) up unto and including suspension or exclusion from the service.

### Compliance Breaches

The service expects all persons must comply with the conduct outlined in this policy. Likewise, any persons suspecting breaches of this code are to report details to the Nominated Supervisor or Approved Provider for a response.

Any persons failing to meet the standard of conduct expected and described in this code will be counselled, and/or be suitably sanctioned or disciplined (as appropriate) up unto and including suspension or exclusion from the service, as relevant to their role.

# Coomera Rivers OSHC Code of Conduct

## 1. General Principle

Coomera Rivers P&C expects that all persons engaged with any of the operations, support or management of the P&C organisation will display the highest standards of professional and personal conduct in the discharge of their duties. The expected behaviour expressed in this policy is consistent with our commitment to our Child and Youth Risk Management Strategy.

## 2. Coverage

The Coomera Rivers Code of Conduct applies to all personnel, meaning:

- Each member of the Executive Committee.
- All employees.
- Any volunteer.

## 3. Obligations

Coomera Rivers P&C's personnel are expected to uphold the P&C commitment to safety and professionalism. In doing so, all relevant persons should:

- Comply with the organisation's policies and procedures and legislative requirements and obligations.
- Perform duties in a responsible and professional manner.
- Promote the organisation's reputation and the value to the broader community.

## 3. Relationships and Interpersonal Behaviour

Coomera Rivers P&C's personnel are expected to foster sound working relationship, as they will:

- Treat everyone with courtesy, respect, consideration throughout their interactions and communication with others.
- Be sensitive and responsive to the dignity and rights of others, refraining from interacting in a manner that impacts on the rights of others, including not engaging in any form of:
  - Harassment.
  - Discrimination (e.g. based gender, age, race, impairment, disability, religious beliefs, political beliefs, sexual orientation or identity).
  - Bullying.
  - Victimisation.
- Act in good faith and honesty with the responsibility and delegation placed within your position.

## 4. Teamwork

Coomera Rivers P&C's personnel are expected to build cooperation and partnership, and should:

- Foster teamwork and collegiality among all internal stakeholders, expressing gratitude to the effort and contribution others bring.
- Consider the impact on your decision and behaviour on the wellbeing of others – refrain from acting in a manner that would reasonably distress, intimidate, undermine, or threaten a colleague or stakeholder.
- Display a constructive attitude when navigating conflict and grievances with others.
- Refrain from acting in any way that would unfairly harm the reputation or position colleagues.

## 5. Privacy and Confidentiality

Coomera Rivers P&C's personnel are expected to maintain the organisation's commitment to privacy and confidentiality, particularly around the organisation's sensitive and personal information, and should:

- Not share or disclose information that is not consistent with a fair, just or reasonable purpose.
- Ensure that information collected by the organisation is only used for the purpose intended.
- Ensure the security of information is maintained.

## **6. Stewardship**

Coomera Rivers P&C's personnel are expected protect the resources and finances of the organisation, and should:

- Use the organisation's resources properly and responsibly for legitimate purposes only.
- Strive to obtain value for the organisation's purchases and spending.
- Avoid waste and secure organisation's belongings against theft or fraud.

## **7. Professionalism**

Coomera Rivers P&C's personnel are expected to be professional and should:

- Perform duties diligently, conscientiously and with integrity to the best of your ability.
- Maintain knowledge of professional and ethical standards relevant to your area of expertise — engaging learning and development opportunities to enhance your capacity to perform, as required.

## **8. Conflicts of Interest**

Coomera Rivers P&C's personnel are expected to act ethically for the best interest of the organisation and should:

- Not take improper advantage of any official information gained in the course of our employment.
- Ensure that financial or non-financial interest does not conflict, or appear to conflict, with or compromise the obligations and requirements of your duties and performance.
- Avoid actual or perceived conflicts of interest through transparency in decision-making and declaring potential conflicts of interest for impartial management.

## **9. Safety and Health**

Coomera Rivers P&C's personnel are expected to uphold a safe and healthy environment and should:

- Uphold a duty of care, especially where services care for the needs of children.
- Take responsibility for the health and safety of yourself and others when carrying out your duties.
- Present to your role with adequate fitness, alertness and hygiene to perform the duties.

## **10. Fairness and Resolution**

Coomera Rivers P&C's personnel are expected to deliver a fair and reasonable response to concerns of others and should:

- Facilitate a fair process for responding to compliance, grievances and disputes.
- Uphold ethical decision-making to promote fairness, justice and collaborative partnerships for stakeholders.

## **11. Interactions and Relationships with Children**

Coomera Rivers P&C's personnel are expected to act in a manner that upholds the safety, protection, and respect of children, including:

- Maintaining children's dignity and rights.
- Guiding and supporting children toward acceptable behaviour and choices.
- Not compromising professionalism and boundaries of children and their families.
- Never expose children to
  - Inappropriate, harsh or sexualised language, or
  - physical punishment.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - Quality 2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000 (Qld)
- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 4.5 Employee Performance Review and Support

### Policy Statement

Coomera Rivers OSHC is committed to delivering quality education and care through providing supportive management to continually develop the performance and practice of its educators. Ongoing and collaborative evaluation of employee's performance will support planning that is focused on building upon the strengths and individual contributions of each employee. Employee performance will be formally and regularly reviewed and evaluated. These formal procedures will be enhanced through informal support and feedback throughout the employee's engagement.

The service also recognises its role in developing employees as part of the National Quality Standards, Quality Area 7 – Governance and Leadership. Individual plans will be created and implemented to support effectively direct every employee's learning and development opportunities.

### Policy Premise

The procedures outlined in this policy apply to further developing the performance and practice of educators (and other relevant employees). Instances of misconduct and underperformance are managed through the steps outlined in the policy and procedure, but rather – **4.8 Employee Counselling and Disciplinary Actions**.

### Related Policies

- [4.4 Code of Conduct](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.17 Self-Assessment and Quality Improvement](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Lead the performance review and professional support of the Nominated Supervisor.</li><li>• Establish procedures to ensure all Coomera Rivers OSHC have plans to enhance their knowledge, skills and ability relevant to their individual performance.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Coordinate and undertake regular and ongoing supervision and developing planning of employees.</li><li>• Collect and collate relevant observations and examples to provide relevant feedback to the performance of staff.</li><li>• Ensure supportive and collaborative plans are implemented as agreed.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Complete self-evaluation of performance and collaborate with service leaders in the planning and implementation of professional development activities.</li></ul>  |

## Procedures

### Preface

- The Nominated Supervisors will be responsible for coordinating performance supervision meetings (review and planning meetings) to ensure all educators (or other relevant OSHC staff) receive an opportunity to understand and contribute to their performance. It may be appropriate that other service leaders are delegated the task of facilitating performance supervision meetings.
- Employees will receive information on the service's performance supervision and management practices in their employee handbook.
- The procedures to develop and support performance should empower employees to identify their unique contributions to the service and highlight methods their practices can be enhanced. Coomera Rivers OSHC will actively seek to undertake a process that builds and empowers employees, rather than delivering a remedial or corrective approach to developing performance and skills.
- Employee performance and their practices will be framed by their position description, the OSHC Professional Standards and any other relevant document or framework.

### Initial Performance Review and Planning

1. The Nominated Supervisor will inform the employee of a time to meet to discuss their employment, their performance and development opportunities. Communication will be positive and time set aside should be adequate for feedback, collaboration and a discussion in identifying development opportunities.
2. The initial performance review and planning meeting will occur between 2 to 3 months after initial employment - once induction learning material has been completed and as a function of finalising an employee's initial probation. Where there are concerns around an employee's performance and their suitability to be engaged beyond the probation period – policy [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#) will be followed.
3. In preparation of the performance supervision meeting, each employee will be provided with a template to assist with self-reflection. Once complete, they will forward to the Nominated Supervisor (or delegate) prior to the meeting.
4. A performance meeting will be coordinated to discuss the employee's performance and induction.
5. The Nominate Supervisor (or delegate) is responsible for documenting the main points of the meeting and the agreed actions into a plan.
6. Action items should be specific and should outline who is responsible for coordinating specific steps. Approval for paid professional development session will need to be approved by the Approved Provider.
7. Each plan will state a date of review. Typically this will be six months. However, this may be negotiated to an alternative timeline where needed.
8. The educator will have an opportunity to review the draft and add any comments before being signed and agreed.

### Interim Review

1. The interim review will be planned to occur around the midpoint of the plan's implementation.
2. The plan will outline an interim review date, where the educator and a service leader will have the opportunity to amend any action items if there has been significant change or actions are not meeting their intended aim.

### Ongoing Performance Reviews and Planning

1. Employee performance will be monitored through implementing an ongoing review process to reflect and support performance.
2. Each ongoing review will provide an opportunity to reflect and evaluate the previous learning and development opportunities, as well as current performance.
3. The ongoing supervision meetings will include:

- Self-assessment prior to a supervision meeting
- Feedback and work examples
- Supervision meeting identifying of strengths, aspirations and areas for improvement.
- A written learning and development plan

### **Nominated Supervisor Review and Planning**

1. The Approved Provider will appoint an appropriate delegate to lead the review and planning of the Nominated Supervisor.
2. The Nominated Supervisor's performance review will follow a similar procedure as all other employees.

### **Privacy and Confidentiality**

- All plans will be stored securely in the respective employee file (see [7.6 Information Handling – Privacy and Confidentiality](#)).
- Employees will be provided with a copy of each of their plans, once signed and finalised.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

#### Policy Controls

Endorsed by: Approved Provider

Date Endorsed: 01 September 2023

Date implemented: 14 September 2023

Version: v.2023-1

## 4.6 Employee Qualifications – Monitoring Progress

### Policy Statement

The service seeks to ensure that all employees enrolled and studying towards relevant qualifications are monitored and supported as they progress through their studies. This ensures that the service strives towards providing a suitably qualified level of educators and maintain compliance with Education and Care Service National Regulations (10 & 299A) for rostering of staff working directly with children.

### Related Policies

- [2.2 Supervision and Educator Ratios](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.17 Self-Assessment and Quality Improvement](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish processes to monitor and record the progress of employees' qualifications.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Coordinate the recording of progress of employees and maintenance of documented evidence.</li><li>• Liaise with employees and the Approved Provider where issues relating to the progress of employees arises.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Submit relevant evidence of qualification progress to the Nominated Supervisor.</li></ul>  |

### Procedures

#### Employee Qualification and Study

- Employee records gathered during recruitment and induction will document the employee's current qualification enrolment.
- An employee's suitability and employability may be dependent on their continual progress (actively working) towards completing their relevant qualification.
- Employees are to notify the Nominated Supervisor when there has been a change in their study/qualification commitment or status. The Nominate Supervisor will notify the Approved Provider of any significant issues or relevant changes.
- Failure to reasonable notify the Nominated Supervisor will be treated seriously, and disciplinary action may be taken (see [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)).

#### Evidencing Progress

- All employees will be required to evidence the progression of their study and work towards their qualification.
- Typically, this will be through providing a copy of the transcript at the conclusion of each semester (every six months).
- Where this is not suitable, alternative agreements will be arranged with the Nominated Supervisor before the anticipated date that qualification progress would be supplied.

### Addressing Changes in Qualification Progress

- Employees who are unable to fulfil their role due to change in their qualification status through no longer being classed as 'actively working towards' (E&CS National Regulation 10), may be subject to a review of their engagement with the service (see [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)).

### Records

- All records and evidence supplied to the service will be stored and maintained securely in the respective employee file (see [7.6 Information Handling – Privacy and Confidentiality](#)).

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.10 Meaning of actively working towards a qualification
  - R.147 Staff members
  - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Parents and Citizens Associations Award – State 2016

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 4.7 Fit for Work

### Policy Statement

The service seeks to uphold the safety of all children, community members and employees. To ensure the health, safety and compliance, the service will require all employees are fit and competent to fulfil their duties. The Approved Provider recognises there are common elements that can impact and employee's capacity to safely attend work, including being affected by:

- fatigue
- alcohol and/or other substance(drug) use
- medical fitness (if required for a specific role)
- mental health and wellbeing

All employees are required to report to their relevant manager if they are not in a state (sufficient level of fitness) to attend work. Any employees who present as unfit for work will be stood down with management action to identify the concerns.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure established expectations and processes are in place to ensure employees are fit for duty.</li><li>• Manage and oversee concern about employee presentation and suspension from work.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Be responsible for fairly monitoring and assessing the fitness for work of employees</li><li>• Immediately stand down any employee suspected to be under the influence of alcohol, other drugs, or where it is not safe for them to continue their role.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Ensuring they do not present for work in an unfit capacity including under the effects of alcohol, other drugs, or fatigue.</li><li>• Immediately notifying the Nominated Supervisors of concerns of their fitness for work</li></ul>                              |

- Notifying the Nominated Supervisors, or Responsible Person of suspicions colleagues or other individuals are believed to be unfit for work

## Procedures

### Fatigue

The Nominated Supervisors is responsible for ensuring roster cycles are monitored and reviewed to address the potential for fatigue, especially among employees engaged in split shifts and/or potentially hazardous activities.

Where an employee is not fit to present to work due to fatigue, they are required to notify the Nominated Supervisor or Responsible Person immediately for the management of the roster. Employees should not present to work where they believe they do not have the capacity to fulfil their duties.

### Alcohol and Substances

An employee must not be under the influence of alcohol or any other substance while engaged in their duty. The Approved Provider expects that all employees will not present themselves for work after consuming alcohol or other influencing substance (illicit or not).

Where the employee cannot fulfil their role because they have consumed alcohol, they are to immediately notify the Nominated Supervisor, Responsible Person, or the Approved Provider. The relevant manager will follow the roster contingency to find a replacement staff member. Under no circumstances is an employee who has consumed alcohol or influencing substances present for work.

### Suspicion of Employee Being Under the Influence

Any employee being suspicious of a colleague (or relevant personnel) being under the influence of alcohol or other substance should report this concern to the Nominated Supervisor or Responsible Person immediately.

Indications of a person being under the influence include:

- Slurred or impaired speech.
- Being aggressive in manner.
- Staggered, jerky movements, could seem uncoordinated.
- Heavy eyes and/or flushed face.
- A dull, tired appearance.

The Nominated Supervisor or Responsible Person will assess the presentation of the employee (or relevant person). Where the Nominated Supervisor or Responsible Person holds a reasonable suspicion, an employee is under the influence they are to immediately stand down the employee and notify the Approved Provider

The Approved Provider determine if the employee should be directed to take an oral or urine test for alcohol or substance at a medical centre. Costs of this test will belong to the Approved Provider.

Where an employee refuses to complete the drug or alcohol test, the Approved Provider will view this as a failure to follow a reasonable and lawful instruction, which may result in disciplinary action up to and including termination.

### Prescription Medication

Any drugs prescribed by a medical practitioner must be used in accordance with medical advice. Any non-prescription drugs must be used in accordance with manufacturers' recommendations. If an employee is taking prescription or non-prescription drugs, which could cause drowsiness or otherwise affect their fitness for work, they must advise the Nominated Supervisors so that their ability to work safely can be monitored. If necessary, medical opinion may be obtained.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.82 Tobacco, drug and alcohol-free environment
  - R.83 Staff members educators not to be affected by alcohol or drugs
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- National Principles for Child Safe Organisations

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 4.8 Employee Underperformance, Misconduct and Disciplinary Actions

### Policy Statement

The service acknowledges the need to adequately manage employees to ensure quality care and high standards of safety for children. When responding to instances of employee underperformance or misconduct, the Approved Provider and respective service leaders will respond to performance issues promptly, and in a manner that supports the principles of fairness, natural justice and is compliant with legislative and relevant industrial instruments. The service recognises performance management and/or disciplinary action may be undertaken by the Approved Provider to address underperformance and misconduct issues.

Reasons for underperformance can include, but not limited to:

- Unclear expectations or behavioural standards.
- Interpersonal differences and conflict.
- A mismatch between the capability of the employee and the job they are required to undertake.
- Poor motivation or low morale in the workplace.
- Personal issues, including stress, physical or mental health problems.
- Cultural misunderstanding.
- Workplace bullying.

Not every underperformance issue requires a structured process. Continuous feedback and guidance can promptly address issues relating to the performance of employees. The Approved Provider and relevant service leaders should, where possible, encourage feedback and an open discussion in an understanding and supportive environment.

The service recognises there can be a need for formal mechanisms to manage and understand performance and misconduct issues, including workplace investigations and disciplinary actions. In all instances, a fair and just process will be provided to employees to manage a resolution.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

#### Approved Provider

- Establish fair and reasonable procedures for managing underperformance and misconduct.
- Undertake fair and lawful actions in response to employee performance and conduct.

|                               |   |
|-------------------------------|---|
|                               | <ul style="list-style-type: none"> <li>• Ensure adequately skilled and capable persons are delegated to handle and investigate instances of underperformance and misconduct.</li> <li>• Ensure disciplinary actions are fair and reasonable.</li> </ul> |
| Nominated Supervisor /Manager | <ul style="list-style-type: none"> <li>• Respond to underperformance or behaviour concerns of employees in a timely and professional manner.</li> <li>• Report significant concerns to the Approved Provider for management and response.</li> </ul>    |

## Procedures

### Employee Underperformance

Underperformance (or inappropriate conduct) can be exhibited in the following ways:

- unsatisfactory work performance - a failure to perform the duties of the position or to perform them to the standard required
- non-compliance with workplace policies, rules or procedures
- unacceptable behaviour in the workplace
- disruptive or negative behaviour that impacts on co-workers.

**Underperformance** and **misconduct** are separate and distinct management concepts. Misconduct is a very serious behaviour (including behaviours such as theft or assault), which may warrant summary dismissal or disciplinary action. Whereas underperformance is less serious and requires counselling and potentially performance management planning to support improvement.

The service's counselling and performance procedures will have three distinct (but not necessarily sequential) components:

- Casual conversation (informal counselling and feedback)
- Formal counselling.
- Performance agreement (or direction).

### Responding to Underperformance

#### Casual Conversation

1. Understanding the reasons for underperformance through a casual conversation (informal counselling and feedback) will be the typical first step. Where an employee can be gently guided to correct any performance issues it is the preferred option.
2. The Nominated Supervisor (or appropriate alternative manager) should invite the employee for a discussion to provide feedback on the issues related to the employee's performance/conduct. Before meeting the manager should prepare to develop an understanding of the seriousness of the problem, length the problem has existed and the gap between expectation and what is being delivered.
3. Typically, the casual conversation with the employee should:
  - a. establish the service's expectations.
  - b. identify any reasons for the underperformance.
  - c. potentially, identify any relevant supports required to improve performance
4. The conversation will be documented by the Nominated Supervisor (or relevant manager). These records should be stored confidentially in the employee's employment file (see [7.6 Information Handling – Privacy and Confidentiality](#))
5. On occasions where a casual conversation has not suitably impacted the employee's performance, the employee will be invited to attend formal counselling. The Approved Provider will be notified of any intention to proceed with formal counselling.

## Formal Counselling

6. Proceeding with formal counselling should occur where a casual conversation has not satisfactorily improved performance or where the significance of the underperformance or conduct is serious enough to require a formal response.
7. The employee will be notified in writing of the intention to meet for formal counselling. Written communication with the employee should also include:
  - a. Time, date and location of counselling discussion.
  - b. The matter/s that will be discussed (i.e. specific details of the alleged underperformance/ conduct).
  - c. Notification that the meeting will be their opportunity to respond.
  - d. Notification of who will be in attendance.
  - e. The opportunity for the employee to invite a support person.
8. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.
9. At the meeting, the relevant manager/employer (as agreed by the Approved Provider) and the employee will review and discuss the matter/s that prompted formal counselling, and the employee will be provided an opportunity to respond. The meeting should be an open discussion, and the employee should have an opportunity to have their point of view heard and duly considered. The employer should listen to the explanation of why the problem has occurred or to any other comments the employee makes.
10. The employer (manager) should discuss the outcomes they wish to achieve from the meeting and, where possible, a joint solution should be devised. Emphasis should be placed on common ground with a focus on positive possibilities.
11. Assistance and support, such as further training, mentoring or redefining roles and expectations may be highly effective in employer promoting adequate performance and appropriate conduct.
12. A clear plan of action should be developed with the employee to implement a solution. This can be in the form of a performance agreement or improvement/action plan. This plan should be agreed to by the employer and employee. The document will be stored confidentially (see [7.6 Information Handling – Privacy and Confidentiality](#)).
13. Where there are strong disputes over the matters being raised, it may be appropriate to escalate to a workplace investigation (see below) to the established facts.
14. All persons involved with the counselling proceeding must maintain the confidentiality of the matters.

## Employee Misconduct

It is generally held that the definition of 'misconduct' involves something more than inappropriate conduct, negligence or error of judgement/an innocent mistake. Misconduct would typically imply an act done wilfully with a wrong intention. Example of misconduct could include:

- Using abusive, harassing or insulting language
- Wilfully contravening workplace policies
- Excessive and ongoing lateness
- Knowingly disclosing confidential information
- Misuse of workplace-owned equipment or resources.

**Serious misconduct** is more clearly defined. It is conduct that is wilful and deliberate, and that is inconsistent with the continuation of the employment relationship. It is also conduct that causes serious and imminent risk to the health and safety of a person or to the reputation, viability or profitability of the employer's business. Serious misconduct includes:

- theft or fraud,
- assault
- intoxication at work.

- the refusal to carry out lawful and reasonable instruction consistent with the employment contract.

## Responding to Misconduct Allegations

1. All allegations of misconduct will be reported to the Approved Provider. The Approved Provider will delegate a relevant person to handle the matters, including the appointment of an investigator. The Approved Provider reserves the right to appoint an external party to undertake support and complete the investigation.
2. The Approved Provider (or delegate) will take steps to understand the allegations, where these are unclear, including through contacting potential witnesses to the alleged events.
3. The Approved Provider (or delegate) will notify the employee of the allegations in writing. The Approved Provider will request the employee to attend an investigation meeting to provide a response to the allegation/s. The written communication with the employee should also include:
  - a. Time, date and location of misconduct meeting.
  - b. The matter/s that will be discussed (i.e. specific details of the alleged misconduct).
  - c. Notification that the meeting will be their opportunity to respond.
  - d. Notification of who will be in attendance.
  - e. The opportunity for the employee to invite a support person.
4. The employee should be given sufficient time to prepare for the meeting (at least 24 hours' notice). The amount of notice given to employees to prepare will depend on the severity of the allegations. However, time frames should not exceed more than seven days unless there are extenuating circumstances and where parties agree.

The purpose of a **workplace investigation** is to establish the facts and obtain accurate information in relation to a complaint of misconduct and then form a judgement to what happened. The investigation should determine if allegations actually occurred and identify any mitigating circumstances of the alleged incident/s.

## Workplace Investigation

1. The Approved Provider must ensure the person conducting the investigation is not associated or involved in the allegations. An additional person to support the interview through note-taking may also be requested. This person should also not have had any involvement or association.
2. The interview should prepare by gathering all available evidence of the allegations being presented. Additionally, copies of relevant documents (policies, position descriptions, employment contract, and supporting evidence) should be collated.
3. A record of the interview will be maintained by the appointed investigator or note-taker.
4. The meeting will begin by confirming the roles of participants (in particular, the duties and scope of the support person) and the agenda.
5. The employee will be provided with an opportunity to respond to the allegations presented to them. The employee should be provided with sufficient details of the allegations to adequately and fairly respond. The investigator may ask questions to clarify and draw out relevant information.
6. The employee may identify if relevant, additional witnesses that can be interviewed to provide additional information or evidence.
7. Once the employee has provided their response to allegations, the meeting will conclude.
8. Where additional information is required/available or specific witnesses have been identified, the investigator should coordinate the collection of this evidence (please note: specialist advice should be sought when deciding not to interview named witness).
9. Witness statement/s should be collected by the investigator in a formal manner. Witness requested to give a statement may invite a support person to the interview. Once the witness has provided a statement, the witness will be asked to sign a copy of the statement. All parties must maintain confidentiality in the investigation. All witness statements will be handled and stored confidentially ([7.6 Information Handling – Privacy and Confidentiality](#)).

10. Where new and relevant information has been obtained, the employee must be provided with an additional opportunity to respond (following items 1-5 above).
11. It is critical the employee has had their responses to all allegations against them considered before a decision is made to the findings.
12. Once all relevant information has been collected, the investigator must consider it is more probable than not the allegations being investigated have occurred (known as the Briginshaw principle). Therefore each allegation must conclude one of the following:
  - a. **Substantiated** (behaviour/allegations found to have occurred)
  - b. **Unsubstantiated** (there is not sufficient evidence to conclude the behaviour/allegation had occurred)
  - c. **Rejected** (there is clear evidence the behaviour/allegations did not occur).
13. The investigator will outline the investigation and their findings in a report that will be submitted to the Approved Provider. The report will remain confidential ([7.6 Information Handling – Privacy and Confidentiality](#)).
14. The findings of the investigation will be presented to the employee in an outcome meeting. The employee will be offered an opportunity for a support person at this meeting. The notification of this meeting will be made in writing.
15. Where the investigation has substantiated allegations of misconduct (or serious underperformance), the employer (Approved Provider) will consider the appropriate outcome, and if relevant, disciplinary action/s.

### Performance Improvement Plans

1. Where it has been determined the employee has engaged in misconduct (or ongoing underperformance), the Approved Provider will establish as performance improvement plan (PIP) to support the employee to address the issues that have been identified. The PIP will include:
  - a. The desired **outcomes** for the employee's behaviour.
  - b. The **strategies** the employee can use to reach the desired outcome.
  - c. The **support** that can be accessed to assist.
  - d. An outline of **responsibilities** for the employee and employer.
2. The PIP will outline timeframes for the improvement in behaviour to occur. All PIPs will be supported by ongoing counselling by the employer to provide relevant feedback and support.

### Disciplinary Actions

The term 'disciplinary action' means the actions taken by an employer in response to misconduct (or ongoing underperformance) in order to correct the employee's behaviour. The purpose of disciplinary action is to turn performance and/or conduct problems around by addressing problems, causes, and solutions.

Before disciplinary actions are taken, the Approved Provider should consider mitigating circumstances and if appropriate opportunity to improve performance has been taken. The Approved Provider should ensure their actions are fair and reasonable in the circumstances. Potential disciplinary action that can be undertaken includes but is not limited to:

- Warning/s
- Change in duties
- Termination

Any disciplinary action undertaken by the Approved Provider will be communicated in writing. The employee will be provided with relevant information to the decision of the employer (Approved Provider).

## Termination

Where the Approved Provider seeks to terminate an employee's employment, the employee will be requested to attend a **Show Cause Meeting**. The purpose of this meeting is to ask the employee to provide a rationale (i.e. mitigating factors) as to why their employment should not be terminated.

Summary dismissal (instance dismissal) is the most severe form of termination of employment. Summary dismissal is implemented without any notice or payment in lieu of a period of notice (immediate effect). Summary dismissal can only be undertaken when **serious misconduct** by the employee has been substantiated.

### Show Cause Meeting

1. Any termination should be considered as a final resort. The Approved Provider should ensure the action is fair and reasonable in the circumstances.
2. Notification for an employee to attend a show cause meeting will be made in writing, outlining:
  - a. Time, date and location of misconduct meeting.
  - b. The matter/s that will be discussed (i.e. outlining the intention to terminate their employment).
  - c. Notification that the meeting will be their opportunity to respond.
  - d. Notification of who will be in attendance.
  - e. The opportunity for the employee to invite a support person.
3. At the meeting, the employee will be provided with an opportunity to respond to the intention to terminate their employment.
4. Once the employee has stated their case, the meeting will adjourn. The Approved Provider will consider the response of the employee and make a decision.
5. On recommencement of the meeting, the Approved Provider will outline the decision to the employee and steps moving forward.

In considering termination, the Approved Provider needs to ensure the employee is:

- Not being unfairly dismissed.
- Is given the right notice of termination.
- Is given the right final pay.

### Termination Entitlements

Except in the case of summary dismissal, employees terminated as a result of misconduct or enduring underperformance will be given notice as outlined in the Award (or relevant agreement) and will receive any outstanding leave and/or entitlements (where applicable).

A statement of service can be provided, but only on the request of the terminated employee.

## Legal and Regulatory Foundation

### National Quality Framework

- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- Industrial Relations Act 2016 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# 4.9 Workplace Bullying, Discrimination and Sexual Harassment

## Policy Statement

All employees have the right to work in a place free from harassment and bullying. Coomera Rivers OSHC is committed to establishing a culture where all employees are valued, respected and appreciated by their colleagues, supervisors and employers. Workplace bullying, discrimination and sexual harassment can have a significant detrimental impact to the ongoing health and wellbeing employees. Workplace bullying is a psychological hazard that has the potential to harm a person, and it also creates a psychological risk as there is a possibility that a person may be harmed if exposed to it. The following guidelines will be implemented by Coomera Rivers OSHC to ensure effective reporting and management of allegations of bullying and harassment in the workplace place, therefore reducing the risk of it becoming an acceptable workplace behaviour.

Coomera Rivers OSHC is an equal opportunity employer. At all stages of the employment relationship (recruitment and selection, terms and conditions of work, training and professional development opportunities, promotion and transfer, retirement, retrenchment and termination) staff will be treated on their merits and valued according to how well they perform their duties.

Coomera Rivers OSHC believes that all staff should be able to work in an environment free from bullying, discrimination, victimisation, sexual harassment, and vilification. We consider these behaviours unacceptable and they will not be tolerated.

## Related Policies

- [2.1 Providing a Safe Environment](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.13 Workplace Health and Safety](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure employees are instructed on suitable conduct for interactions with colleagues or relevant others.</li><li>• Monitor and respond to instances of inappropriate conduct.</li><li>• Oversee investigation and response to allegations of harassment, discrimination or bullying.</li></ul>               |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Collaborate with the Approved Provider in responding to allegations of harassment, discrimination or bullying.</li><li>• Support employees to access mechanism to report concerning conduct.</li><li>• Provide instruction to employees about appropriate interactions with colleagues and others.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Ensure interactions with colleagues and others is respectful and free from harassment, victimisation, discrimination or bullying.</li><li>• Report any instances of concerning conduct to Nominated Supervisor (or relevant other persons with management responsibilities).</li></ul>                       |

## Procedures

**Workplace bullying** is repeated and unreasonable behaviour directed towards a worker or a group of workers that creates a risk to health and safety.

### Unreasonable (Bullying) Behaviour

- Means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening
- Examples of behaviour, whether intentional or unintentional, that may be workplace bullying if they are repeated, unreasonable and create a risk to health and safety include but are not limited to:
  - abusive, insulting or offensive language or comments.
  - aggressive and intimidating conduct.
  - belittling or humiliating comments.
  - victimisation (treated unfavourably because they have made or supported a complaint).
  - practical jokes or initiation.
  - unjustified criticism or complaints.
  - deliberately excluding someone from work-related activities.
  - withholding information that is vital for effective work performance.
  - setting unreasonable timelines or constantly changing deadlines.
  - setting tasks that are unreasonably below or beyond a person's skill level.
  - denying access to information, supervision, consultation or resources to the detriment of the worker.
  - spreading misinformation, malicious rumours or submitting vexatious complaints/allegations.
  - changing work arrangements such as rosters and leave to deliberately inconvenience a particular worker or workers.
- If the behaviour involves violence, for example, physical assault or the threat of physical assault, **it should be reported to the police.**
- Unreasonable behaviour may involve unlawful discrimination or sexual harassment which, by itself, is not bullying. This behaviour (discrimination and sexual harassment) does not need to be repeated to be unlawful.

### Reasonable Management Action

- An employer may take reasonable management action to effectively direct and control the way work is carried out. It is reasonable for managers and supervisors to allocate work and give feedback on a worker's performance. These actions are not workplace bullying if they are carried out in a lawful and reasonable way, taking the particular circumstances into account
- A manager exercising their legitimate authority at work may result in some discomfort for a worker. The reasonableness of the behaviour is viewed through the actual management action rather than a worker's perception of it. It can also include the degree to which there has been a significant departure from established policies or procedures, and whether the departure was reasonable in the circumstances.
- Examples of reasonable management action taken in a reasonable way include:
  - setting realistic and achievable performance goals, standards and deadlines.
  - fair and appropriate rostering and allocation of working hours.
  - transferring a worker to another area or role for operational reasons.
  - deciding not to select a worker for a promotion where a fair and transparent process is followed.
  - informing a worker about unsatisfactory work performance in an honest, fair and constructive way.
  - informing a worker about unreasonable behaviour in an objective and confidential way.
  - implementing organisational changes or restructuring.

- taking disciplinary action, including suspension or terminating employment where appropriate or justified in the circumstances.

### Unlawful Discrimination

- Discrimination on the basis of a protected trait in employment is unlawful (also see [4.1 Recruitment and Employment of Educators](#)).
- Unlawful discrimination can include where a person or group of people are treated unfairly or less favourably than others because they have a particular characteristic or belong to a particular group of people.
- Protected traits include:
  - sex, age, race, gender identity or sexuality.
  - relationship status.
  - pregnancy, breastfeeding, family responsibilities or parental status.
  - impairment.
  - religious belief or activity.
  - political belief or activity.
  - trade union activity.
  - status as a legal sex worker.
  - It is also illegal to discriminate against someone on the basis of an association with a person identified by one of these characteristics.

### Sexual Harassment

- Sexual harassment includes unwelcome sexual advances, requests for sexual favours or other unwelcome conduct of a sexual nature that could be expected to make a person feel offended, humiliated or intimidated.
- Sexual harassment in the workplace can take many different forms and can include:
  - Staring, leering or unwelcome touching.
  - Suggestive comments or jokes.
  - Unwanted invitations or requests for sex.
  - Intrusive questions about a person's private life or body.
  - Insults or taunts based on sex.
  - Sexually offensive communications (phone, email, SMS or other social media).
- Sexual harassment doesn't have to be repeated or continuous to be against the law.

Coomera Rivers OSHC treats all instances of **unreasonable behaviour, bullying, discrimination and sexual harassment** very seriously. Employees found to be engaging in this type of conduct (breaching this policy) will undergo disciplinary action, which can include action up to and including termination of employment.

### Reporting Bullying, Discrimination and Sexual Harassment

- Incidents of unreasonable behaviour, discrimination, or sexual harassment are to be treated seriously, and immediate action must be taken to report allegations.
- If an employee feels they are a victim of this type of behaviour they should tell the other person directly that their behaviour is harassing and unacceptable. Any person told their behaviour is harassing or unacceptable should immediately stop this behaviour.
- Employees may inform either the Approved Provider, Nominated Supervisor or relevant other person with management responsibilities in person or writing using either the [6.7 Feedback and Complaint procedure](#) (where relevant) of the alleged conduct.
- Staff who make a complaint of bullying, discrimination or sexual harassment will not suffer any victimisation for making the complaint (where the complaint/allegation is made in good faith, i.e. not vexatious). This also applies to staff who agree to be a witness in a complaint/investigation or have a complaint made against them.

## Respectful Conduct and Relationships

- Coomera Rivers OSHC [Code of Conduct](#) guides employee's expected standard of behaviour in the workplace and with colleagues.
- The service's culture and outcomes for children are improved through building respectful relationships with each other. Additionally, it reduces the risk of employees finding unreasonable behaviour acceptable.
- Examples of respectful and behaviour that should be promoted includes:
  - Being polite and courteous to others.
  - Being inclusive of individuals and the diversity they bring to the workgroup.
  - Raising issues of conflict before escalation, and pursuing these conversations constructively.
  - Maintain an individual's privacy and confidentiality.
  - Support fair and transparent decision-making.

## Legal and Regulatory Foundation

### National Quality Framework

- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Industrial Relations Act 2016 (Qld)
- Work Health Safety Act 2011 (Qld)
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Racial Discrimination Act 1975 (Cth)
- Sex Discrimination Act 1984 (Cth)
- Human Rights Act 2019 (Qld)
- Guide for Preventing and Responding to Workplace Bullying (Worksafe Australia)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## Policy Group 5

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# Relationships with Children

OSHC is a social environment. The practices of educators to shape the **respectful and reciprocal relationships** between them and children is central to children learning and belonging. Likewise, OSHC is a place for children to develop connections with one another. Play invites children to collaborate and learn from each other. It gives opportunity to develop life-long social skills.

The Coomera Rivers OSHC Philosophy sets out the shared belief that children have a right to be an active member of their community, with their opinions and views considered in decisions that affect them. Our practices to build relationships with children is the mechanism by which we understand their perspectives and interests.

Relationships are built from upholding the dignity and rights of every child. As children learn and play, they rely on various support for educators, including positive behaviour guidance. Educators are expected to engage in best practice to meet the needs of children. Where there are additional or complex needs, the service will explore what are the appropriate supports to address these.

The embedded practices that build our relationships are shaped by our collaboration with families and the school community. Our Philosophy promotes the important role of both parents and the broader school play in shaping the learning and lives of children. Coming together to build practices that support our families is at the heart of this policy group.

# 5.1 Interactions and Relationships with Children

## Policy Statement

Coomera Rivers OSHC will ensure all educators build positive, supportive relationships with children that make them feel safe, secure and included in the service's community. The service encourages interactions with children to be authentic and responsive and be based on fairness, equity, acceptance, empathy and respect for the child's culture, rights and community. These values are reflected across the culture of the school and within the Service Philosophy.

Children's wellbeing and safety are paramount for the service. We recognise the connection between the interactions with educators and the service's objectives for safety and wellbeing. The purpose of this policy is to establish clear guidelines and expectations for interactions and relationships between educators, volunteers, and children in our service.

Our educators will shape their practices for interacting and building relationships with children on the deep appreciation of children's rights and dignity. Educators will be positioned – through policy, training and supervision - to foster an environment where children can express themselves to build self-esteem and agency. The service values each child as a unique individual with their own needs, interests, and development. We believe that a strong relational framework enables children to feel secure and empowered, enhancing their ability to explore, learn, and engage with the world around them.

Practices to support behaviour will be consistent with positive guidance; recognising the goal of self-regulation and pro-social behaviours are enhanced through learning, a supportive environment, secure relationships and positive self-regard. To maximise the effectiveness for supporting children's behaviour, Coomera Rivers has developed integrated practices with the school, with the protocols and procedures for this area of pedagogy and support set out in adjacent policy.

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

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [2.1 Providing a Child-Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.2 Enrolment and Orientation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [7.4 Leading Compliance and Quality Assurance](#)

## Roles and Responsibilities

|                             |  |
|-----------------------------|--|
| <b>Approved Provider</b>    | <ul style="list-style-type: none"> <li>• Ensure the philosophy of the service establishes a framework to support the collective practices of educators.</li> <li>• Ensure staff are equipped and suitable to positively guide and support children who attend the service.</li> <li>• Establish policy and guidance to support decision-making and educator conduct.</li> </ul>  |
| <b>Nominated Supervisor</b> | <ul style="list-style-type: none"> <li>• Model and encourage positive interactions which lead to reciprocal, secure, and respectful relationships.</li> <li>• Ensure educators and volunteers receive sound instruction and training on their requirement for interactions with children.</li> <li>• Ensure children’s views are actively sought and discussed with their responses and perspectives planned into the program with respect and authenticity.</li> <li>• Address conduct and behaviours that are not consistent with policy and procedures.</li> <li>• Ensure parents and relevant others receive communication of the service’s policy and procedures to support relationships.</li> </ul> |
| <b>Educational Leader</b>   | <ul style="list-style-type: none"> <li>• Guide educator’s professional development and practice to promote interactions with children that are positive and respectful.</li> <li>• Ensure children are provided with opportunities to participate in decision-making processes.</li> <li>• Facilitate feedback systems such as forms, tickled pink, green for growth etc.</li> <li>• Oversee Program Leaders to ensure feedback is implemented and integrated into the program.</li> </ul>   |
| <b>All Staff</b>            | <ul style="list-style-type: none"> <li>• Ensure child-initiated, shared-decision making happens across all aspects of the service.</li> <li>• Empower children to access and learn from their own life experiences as well as those of their peers and adults around them.</li> <li>• Be active listeners, observers, scribes and advocates for children.</li> <li>• Respond to behaviour with positive guidance, re-direction and encouragement.</li> <li>• Seek additional support from the Nominated Supervisor where children’s behaviour continues to pose a risk of harm to safety or wellbeing.</li> </ul>  |

## Procedures

### Setting an Environment for Relational Pedagogy

The service’s management systems and expectations are designed to shape a positive atmosphere and culture across the service’s operations. We recognise and have built procedures on the basis that learning is a social context where children’s development and growth occurs through thousands of small daily interactions between children, adults, materials and environments.

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

### Creating a Program to Value Children’s Individuality

Central to the interaction and engagement between children and educators is the delivery of the service’s program. The service’s program will reflect ([1.1 Educational Program Development and Implementation](#)):

- Opportunities for children to engage in diverse experiences.

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

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

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

Resources and activities will be sourced as to encourage:

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

## **Positive Interactions Between Educators and Children**

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Educators will receive suitable instruction, support and training to respond to various developmental stages of the differing ages of the children who attend the service. With an understand on the needs of children, educators are better positioned to play a pivotal role in meeting the emotional needs of children. The ability to meet the needs of children lays the foundation for healthy attachment and trust.

To foster these crucial elements, our educators work together to create a safe, consistent, and nurturing environment where each child feels seen, heard, and valued. Consistency in routines and responses can offer a sense of stability, building a stronger sense of security. Educators will use a variety of techniques to support children’s emotional wellbeing, including—

- Active listening – empathy and age-appropriate communication, helps children feel understood and supported,
- Responsiveness - through promptly attending to a child's needs, whether emotional or physical—reinforces the child's perception of the educator as a reliable source of comfort and safety.
- Agency – children are supported to make choices, accept challenges, manage change, and sometimes cope with frustration.

## **Positive Interactions Between Children**

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Educators will encourage children to promote their social skills and relationships with others, including supporting children to develop self-regulation skills.

The program will be designed to promote positive exchanges amongst children, with educators providing ongoing supervision, support and feedback to highlight the benefits of teamwork and social interaction. Educators will arrange the physical environment in a way that encourages organic interactions and shared engagement, elements like tables for group activities, communal play areas, and materials that are easily shared can all facilitate social interaction and teamwork.

Where conflict and disagreements arise, children will be re-directed to consider the feelings and viewpoints of others and the service's expectations of respect and cooperation.

## Cultural Responsiveness

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The service and its educators value the rich diversity of culture and linguistics of our local community. The culture and heritage of families attending the service will be respected at all times. The Nominated Supervisor will follow up on any request for considerations and ensure these matters are actioned appropriately.

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

In particular, the service recognises the unique contribution of Australia's First Nations – the Aboriginal and Torres Strait Islander people - make to our Australian communities. The service is committed to acknowledging and respecting the rich history of First Nations communities. In doing so, the service looks to provide opportunities for children to experience and develop their understanding of Aboriginal and Torres Strait Islander perspectives.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
- My Time, Our Place - Framework for School Age Care in Australia.

### Additional Regulatory Context and Guidance

- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## 5.2 Positive Behaviour Support Framework and Practices

### Policy Statement

The purpose of our Positive Behaviour Support Policy is to provide a clear and consistent framework for supporting children's behaviour using positive guidance practice. This policy sets out the principles, strategies, and responsibilities for fostering respectful and inclusive environment, where each child has the opportunity to engage in safe and meaningful learning experiences.

Coomera Rivers OSHC is committed to guiding children's behaviour through effective and evidenced-based practices that are integrated with Coomera Rivers State School's robust and embedded initiatives. We share a strong belief amongst the school community that better outcomes are achieved for children and families through our partnership, collaboration, and continuity across the school environment. In designing our policy for behaviour support, our expectations and practices for behaviour at OSHC are mirrored from those carried out during school hours. Likewise, information is routinely shared with both school and OSHC is to be better informed about individual children's needs and opportunities for learning.

One key way we promote a sense of belonging and a continuity of learning is our shared implementation of a Positive Behaviour for Learning (PBL) approach to the teaching and management of children's behaviour and developing social and personal capabilities. This whole-school approach, is used through the school and OSHC including in all classrooms, during sporting activities, excursions and other off-site events.

Our holistic, integrated and evidence-based approach for behaviour support is used to—

- Track data to identify areas for intervention and monitor progress.
- Analyse and improve student behaviour and learning outcomes.
- Explicitly teach school wide behaviour expectations and rules in specific settings.
- Identify opportunities to develop social emotional learning, personal and social capabilities.
- Encourage appropriate behaviour through a positive incentive program.
- Support all staff members to maintain consistent school and OSHC behaviour management practices.

As stated in our Philosophy, we acknowledge the importance of parents and families as a child's primary educator. Parents are well-informed of the framework to support children's behaviour across the school community and are informed of all significant events and incidents occurring in the OSHC setting. Parents are encouraged to help the service shape the individual plans and strategies for their children.

### Educator Practice

The management of the service strives to ensure each educator is equipped with practices and skills to positively guide and encourage children towards acceptable behaviours. The services policy sets out specific practices that align with the principles of behaviour guidance.

The service recognises social and emotional skills, like self-regulation, are learned. Learning these skills is most effective in an environment where –

- Children have warm, secure relationships with adults who care for them.
- Children understand which behaviours are acceptable.
- When feedback and positive reinforcement for acceptable behaviour is consistent.
- Children are immersed in stimulating and engaging learning activities.

Our framework seeks not only to manage challenging behaviours but to understand them, considering the individual needs, developmental stages, and family context of each child to provide the most effective support.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children’s Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child-Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.2 Enrolment and Orientation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)
- [7.4 Leading Compliance and Quality Assurance](#)

## Roles and Responsibilities

|  |   |
|--|---|
| <b>Approved Provider</b>                   | <ul style="list-style-type: none"> <li>• Ensure that the principles and expectations for responding to and supporting children’s behaviour are established and communicated effectively.</li> <li>• Ensure the established practices are consistent with legislation and regulations.</li> <li>• Provide opportunities to support the practices and capacity of educators to respond to children’s behaviours.</li> </ul>   |
| <b>Nominated Supervisor</b>                | <ul style="list-style-type: none"> <li>• Provide supervision and direct support to educators.</li> <li>• Liaise with families to address concerns and relay incidents.</li> <li>• Ensure relevant incidents are documented and appropriately communicated.</li> <li>• Role-model and guide effective positive behaviour support practices.</li> <li>• Ensure the program is achieving the identified aims and effective in supporting the behaviour of children.</li> </ul> |
| <b>Coomera Rivers State School Leaders</b> | <ul style="list-style-type: none"> <li>• Collaborate with OSHC representatives to capture data</li> <li>• Offer additional expertise through consultation and education to develop additional strategies for children’s learning and development.</li> <li>• Share and contribute to the further communication and liaison with parents.</li> </ul>   |
| <b>Educational Leader</b>                  | <ul style="list-style-type: none"> <li>• Monitor children’s engagement and participation in the service’s program and assess the effectiveness in meeting all children’s needs.</li> <li>• Lead quality improvement and planning initiatives to further develop and enrich the program.</li> </ul>  |

## All Staff

- Ensure their practices are consistent with the principles of the service’s policies and code of conduct in responding to children’s behaviour.
- Participate in learning and developmental opportunities to enhance the care and support provided to children.
- Communicate with the Nominated Supervisor or Approved Provider where additional support for children is emerging as a need.
- Collaborate in delivering and developing the service’s program to meet the needs of children.

## Procedures

### Expectations for Children’s Behaviour

The Coomera Rivers State School Student Code of Conduct is the foundation of our behavioural expectations of children at OSHC. At its core are three rules to teach and promote responsible behaviour—

| Rule          | What it looks like at OSHC:  |
|---------------|--|
| Be safe       | <ul style="list-style-type: none"><li>• Making choices that keeps everyone safe.</li><li>• Using toys and materials properly.</li><li>• Keeping hands and feet to yourself.</li><li>• Stay where you are meant to be.</li></ul>  |
| Be respectful | <ul style="list-style-type: none"><li>• Treating others with kindness and consideration.</li><li>• Using polite words and actions.</li><li>• Listening when others are speaking.</li><li>• Cleaning up after yourself.</li></ul> |
| Be a learner  | <ul style="list-style-type: none"><li>• Participating in activities and routines.</li><li>• Sharing and taking turns with others.</li><li>• Sharing your feelings</li><li>• Asking for help when needed.</li></ul>               |

### Program – Critical Reflection and Quality Improvement

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

The service’s program will support children behaviour through:

- Promoting routines that are relaxed and comfortable, children should not be rushed to transition abruptly or wait for unreasonable timeframes.
- Designing for flexibility in routines to maximise choices and child-initiated experiences.
- Being engaging, diverse, challenging and stimulating to cater for the wide developmental needs of children, including:
  - social (group) and independent (solitary) play, and
  - robust and quiet play.

## Educator Actions for Guiding Behaviour

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The basis of educator practice is founded in the quality of relationships build with children. Educators use their own behaviour to promote and motivate children to display the expected responsible behaviours.

Educators are required to:

- **Promote and model appropriate behaviour**, including—
  - Recognising and reinforcing good behaviour.
  - Using of positive language, and tone.
  - Showing kindness and consideration for others.
- **Understand individual needs**, including—
  - Appreciating behaviour is a form of communication and understanding the underlying needs or feeling driving certain behaviour.
  - Pre-empting potential conflicts or challenging situations and directing children to consider alternative behaviours.
- **Respecting children’s rights**, including –
  - Support children to make choices, accept challenges, manage change, and cope with frustration.
  - Ensure all children are treated with dignity and respect, and that their emotional well-being is prioritised.
- **Communicate**, including—
  - Collaborate with families to understand the child’s unique needs and notify of challenges.
  - Document and communicate incidents and observations with stakeholders.
  - Liaise with the service’s leadership team to collaborate with the school and parents to develop consistent strategies for behaviour guidance.

## Co-Regulation Practices

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Educators will use a range of techniques and strategies to support children’s behaviour. Often it is when children are dysregulated (unable to control emotional responses) that behaviours will be most challenging. In these circumstances, educators are to respond in a manner than supports co-regulation (supporting children to regulate), which increases the likelihood of children making choices that reflect responsible/acceptable behaviours.

While practices would include a range of skills, it is expected that educators will use the following—

### Caring gesture/ hurdle help

- Encouragement, support, and/or assistance offered by an educator to prevent a child from becoming frustrated or disengaged with a task or activity. The help can take many forms such as– asking for other children to support, supplying additional materials or information, providing alternative equipment, or assisting with completing some of the initial tasks.
- A caring gesture could also include warm attention to help coping with a stressful or difficult situation. Strategic use can help a child whose own self-control is deteriorating to support in gaining composure.
- A caring gesture may include using humour to reduce immediate tension and allow a child to avoid a power struggle.

|   |   |
|---|---|
| <p><b>Changing the environment and proximity</b></p>                    | <ul style="list-style-type: none"> <li>• Educators should identify the impact on the environmental factors on children’s behaviours (space, noise, routines, level of engagement, social influence).</li> <li>• Identify the factors and issues that could prevent, reduce or modify the situation, to help reduce problematic behaviour.</li> <li>• Likewise, the physical distance between an educator and children can impact on behaviour. Controlling the distance between educators and children can provide be an inconspicuous influence. An educator might approach a child when they are using inappropriate behaviour with the aim of prompting a child to use more appropriate behaviour.</li> </ul>  |
| <p><b>Prompting</b></p>   | <ul style="list-style-type: none"> <li>• Reminding a child of the service’s expectations or encouraging the child to use a skill or certain behaviour.</li> <li>• Prompting is effective when a child is having difficulty with responding to an instruction or cue.</li> <li>• Prompts can be verbal (directions or suggestions), visual (pictures or photos), a gesture (pointing to objects or a direction), modelling (teaching the skill).</li> </ul>  |
| <p><b>Emotional validation</b></p>                                      | <ul style="list-style-type: none"> <li>• Engaging the child in conversation to support them to understanding of their behaviour and communication.</li> <li>• The educator should be present and engaged with the child. Central to emotional validation is an accurate reflection, e.g.: <ul style="list-style-type: none"> <li>○ “...it looks[or seems] like you are (insert emotion) because I can see (trigger/rationale/observation)”.</li> <li>○ “I hear what you are saying, you seem angry because... let’s see what we can do to help.”</li> </ul> </li> <li>• Recognising the child’s emotions are normal in the circumstances - that they are understood, can drain off emotions to allow constructive dialogue to be facilitated.</li> <li>• The conversation may explore the trigger, problem or concern for the child identifying the motivation and drive (interpret events).</li> </ul> |
| <p><b>Redirection</b></p>   | <ul style="list-style-type: none"> <li>• Redirection can involve distracting a child when a trigger or behaviour occurs. Its intention is to guide a child’s behaviour from inappropriate to appropriate.</li> <li>• An easy way to alleviate a child’s inappropriate behaviour is to provide something else to engage them with. The substitution could be anything from a learning resource, a toy, a pen and paper for drawing, or it could be an educator’s attention until the child is ready to transition to something independently.</li> </ul>   |
| <p><b>Behaviour specific praise (reinforcing desired behaviour)</b></p> | <ul style="list-style-type: none"> <li>• Appealing to cognitive behaviour influences to space thoughts, feeling and behaviours.</li> <li>• Social reinforcement (authentic praise) is a powerful reward. Aligning this feedback to include the specific positive aspects of the behaviour increases the effectiveness e.g. <ul style="list-style-type: none"> <li>○ “(child’s name), I really like the way you are sitting quieting and waiting.”</li> <li>○ “That was great you helped pack up without being asked, (child’s name)”</li> </ul> </li> <li>• Identify those behaviours you wish to promote, prepare children with information about this, identify children displaying the behaviour, describe behaviour in the form of praise</li> </ul>  |

## Inappropriate Discipline

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Educators are not permitted at any time to use corporal punishment or any unreasonable punishment or practices that might demean, humiliate, frighten, or threaten a child. Additional inappropriate discipline includes but is not limited to—

- yelling at or belittling a child
- physically dragging a child
- locking or isolating a child away
- consistently moving children to the office or other space away from the play areas
- negative labelling of child or family
- making fun of or laughing at or about a child
- using sarcastic or cruel humour with or to a child
- excessive use of negative language to a child, such as, “no” “stop that!” “don’t...” “you never...”

These actions are not tolerated by the service and if found to be substantiated, it will result in termination of employment.

## Documenting Behaviour Incidents and Observations

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Where a significant behaviour incident occurs, which could include but is not limited to—

- Fighting/striking other people.
- Verbal abuse/aggression.
- Property damage.
- Wilfully be outside of boundaries or absconding.

An incident report will be documented by the most appropriate educator, using the Incident, Illness, Injury and Trauma report via OWNA. The report, when finalised, will be automatically notified to the parent. The Responsible Person on any particular shift is also expected to speak with the parent within 24 hours via phone or at collection, whichever is practicable.

Behaviour incident reports are also shared with the Coomera Rivers State School leadership team. Depending on the circumstances, the data from reports is assessed and additional support and learning opportunities may be actioned by the school.

Ongoing and highly serious behaviours are dealt with via the service’s [5.3 Supporting Complex Behaviour](#) policy.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities

### **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000
- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations
- Coomera Rivers State School Student Code of Conduct
- Positive Behaviour for Learning

#### **Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 5.3 Supporting Complex Behaviours

### Policy Statement

Coomera Rivers OSHC is committed to ensuring children receive positive behaviour support as they learn and develop. We believe the best outcomes are achieved through partnership and collaboration with both parents and the leaders of Coomera Rivers State School. Building upon our Positive Behaviour Support Framework and Practices Policy, the purpose of this policy is to set out the steps for ongoing and significant behaviour incompatible with behaviour expectations.

Our integrated partnership with the School, means behaviour information that is shared and tracked provides access with school supports for children's re-teaching via SWAG (Student Wellbeing and Growth) and Conflict Resolution. These opportunities for focused teaching involve revisiting key behavioural concepts and/or skills and using explicit and structured teaching strategies in particular aspects of a behaviour skill. Focused teaching provides students with more opportunities to practise skills and multiple opportunities to achieve the intended learning and expected behaviour.

We believe the initial interventions and behaviour support of educators during a behaviour incident (redirection, prompting etc) can be complemented by the school's expertise – which is significant - and promote additional learning opportunities for our children.

Notwithstanding additional re-teaching opportunities via SWAG, Coomera Rivers OSHC recognises there are potential for children to display behaviours of serious concern, namely those that risk the safety or wellbeing of the child or others. On these occasions, the service is committed to plan, support and reflect on opportunities for individual consideration for the best outcomes for children and families.

In responding to behaviours that the service recognises as complex-

- a significant incident, or
- an ongoing pattern of behaviour where a child does not respond to the service's positive behaviour support practices.

Parents will be invited to collaborate with to identify strategies to ensure the safety and wellbeing of everyone. Planning will focus on actions to support the child to learn new behaviours (e.g. appropriate communication, social skills and emotional regulation) and reduce the risk of further incidents.

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child-Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.5 Interactions and Communication with Families](#)

- [7.4 Leading Compliance and Quality Assurance](#)

## Appendices and Forms

- [Positive Behaviour Support Plan](#)

## Roles and Responsibilities

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

## Procedures

### Initial Responses to Support Complex Behaviour

In the first instance, educators should respond in attempting to deescalating behaviours using the skills and approaches set out in the [5.2 Positive Behaviour Support Framework and Practices](#) policy. Depending on the level of risk, the Nominated Supervisor or Responsible Person may suspend a child attendance until a positive behaviour support plan is developed. This may include calling a parent to collect their child from OSHC immediately.

Where a behaviour incident occurs, educators should follow the steps set out in [2.9 Incident, Illness, Injury and Trauma](#), including documenting the incident and notifying parents.

Behaviour incident reports are also communicated to relevant representatives of Coomera Rivers State School. The [5.2 Positive Behaviour Support Framework and Practices](#) policy sets out the collection and tracking of children’s behaviour to trigger additional opportunities for re-teaching.

The School may use information shared by OSHC to direct children to engage with SWAG (Student Wellbeing and Growth) and Conflict Resolution.

## **Individualised Behaviour Support**

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### **Initial Intensive Behaviour Support**

Where more moderate levels of support may be effective, the Nominated Supervisor may choose to coordinate some initial intentional support strategies to effectively support a child before escalating a fully developed positive behaviour support plan.

At this stage, the service will drive initially planning and continue to monitor the effectiveness of support provided. Where behaviour is still of a concern, collaboration with parents/caregivers will occur (formal Positive Behaviour Support Planning).

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

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

The Nominated Supervisor will communicate the intentions and actions with parents to ensure open communication in supporting children to meet the service's expectation. Any plans developed to support a child will be an extension of the service's positive behaviour support practices and reflect the principles of this policy.

### **Positive Behaviour Support Planning**

The integrated nature of our framework to support children's behaviour means the pathway to the development of an individualised plan may be driven by the School (as a key stakeholder). The service will reciprocate plans developed in the classroom setting and communicate as required.

Where OSHC drives the development of a behaviour support plan, unless relevant expertise guides otherwise, the plan will address three main components: understanding the child/behaviour, a blueprint of strategies to support the child, and any identified steps to assist with implementation (additional training or resources).

#### Understanding the child/behaviour

1. The Nominated Supervisor will invite the parent(s) to meet to discuss the child's behaviour and strategies to support the child. A relevant school representative, as a stakeholder is likely to be present.
2. The intention of the support plan is to focus on developing the child's skills and learning. Identifying the child's strengths and interests will frame how the service can best support the child's development.
3. Any relevant information about diagnoses, history, health or environmental impacts should be identified.
4. The key to developing strategies to respond to behaviour is understanding the drive and function of any behaviours of concern. The Nominated Supervisor, educators, stakeholders and parents should add their perceptions to what might trigger, contribute to or escalate the behaviours.

#### Support strategies

5. The service's planned actions are developed to promote and encourage acceptable behaviours.
6. Strategies should include the actions that proactively set the environment up for success.
7. Additionally, response strategies are those actions educators will use to de-escalate a child's behaviour in a crisis/incident. These practices will emphasise early de-escalation.

## Implementation

8. Any additional resources, support or training that may be contingent on the plans success will be identified and assigned responsibility.
9. Parents are encouraged to collaborate throughout the planning and implementation of positive behaviour support plans. They will be monitored for effectiveness and any identified concerns will prompt a re-evaluation of the content and additional supports.

## **Exclusion and Suspension**

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While the service is committed to avoiding significant action such as suspension and exclusion, where a child's behaviour impacts the safety and wellbeing of themselves or others, the service will consider strong management action to ensure they discharge their duties for the safety and protection of children.

1. Where the Nominated Supervisor or Approved Provider reasonably believes the risk to safety or the impact on the wellbeing of a child(ren) exceeds the capacity (or potential capacity) of the service, either temporary or permanent exclusion can be considered in consultation with the parents.
2. Factors influencing a decision can include but are not limited to—
  - i) the significance of the behaviour,
  - ii) the frequency and likelihood of reoccurrence, and
  - iii) what support has been reasonably explored.
3. The Approved Provider and Nominated Supervisor will review relevant information and consider any response from the parent.
4. In the first instance, the service will look to suspend only (temporary unenrolment) and provide conditions for potential re-enrolment.
5. Any decision to either exclude (permanent unenrolment) or suspend a child will be communicated to the parent/s in writing.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children's health and safety
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities

### **Additional Regulatory Context and Guidance**

- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)
- Coomera Rivers State School Student Code of Conduct
- Positive Behaviour for Learning

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
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| Date Endorsed:    | 01 September 2023 |
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# 5.4 Supporting Additional Needs with Inclusive Practices

## Policy Statement

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

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

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children’s Progress with Families](#)
- [1.3 Excursions](#)
- [2.1 Providing a Child-Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.1 Access](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)

## Roles and Responsibilities

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

## Procedures

### Enrolment

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

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

### **Inclusion Support Practices**

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

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

Inclusive practices:

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

### **Inclusion Agency Engagement**

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

Inclusion Support QLD (KU Children's Services) Contact Details  
1800 811 039  
inclusionsupportqld@ku.com.au  
www.inclusionsupportqld.org.au

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children's health and safety; and 5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities

### **Additional Regulatory Context and Guidance**

- United Nations Convention on the Rights of the Child

- National Principles for Child Safe Organisations
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)

**Policy Controls**

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|-------------------|-------------------|
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## 5.5 Promoting Protective Behaviours

### Policy Statement

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [2.1 Providing a Child-Safe Environment](#)
- [5.1 Interactions and Relationships with Children](#)
- [6.5 Interactions and Communication with Families](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish effective policies and framework to promote the protective behaviours of children.</li></ul>                                  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Provide clear communication to families on opportunities to engage with culturally competent protective behaviour strategies.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Follow the service's policies to promote children's development of protective behaviours.</li></ul>                                     |

### Procedures

#### Foundations of Protective Behaviours

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

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

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

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

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

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

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.166 Offence to use inappropriate discipline
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety; and 5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities

### Additional Regulatory Context and Guidance

- United Nations Convention on the Rights of the Child
- National Principles for Child Safe Organisations
- Anti-Discrimination Act 1991 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Inclusion Support Programme Guidelines (2016-2017 to 2018-2019)

#### Policy Controls

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|-------------------|-------------------|
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## Policy Group 6

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# Collaborative Partnerships with Families and Communities

Quality Area 6 focuses on **supportive, respectful relationships with families** which are fundamental to achieving quality outcomes for children. Community partnerships that are based on active communication, consultation and collaboration also contribute to children's inclusion, learning and wellbeing.

When our service engages well with the community we build trust – which is a fundamental element for partnerships. A collaborative relationship between parents and the service enhances children's learning and play.

As a service we seek to showcase our value of diversity and inclusion. When services are connected with families and communities from a range of cultural backgrounds, they can better understand and respect the diversity of the children in their care.

Children thrive when they belong to a community, connections with families creates a sense of community within the education and care service. When families and communities are involved, they can create a supportive environment for the children, staff, and families, which can contribute to the overall well-being of everyone involved.

# 6.1 Access

## Policy Statement

Coomera Rivers OSHC will support families exploring education and care service for their children through providing fair access and relevant information to parents and caregiver. Coomera Rivers OSHC is available to all eligible school age children, with a primary focus to meet the needs of parents who work or study and for children who attend Coomera Rivers OSHC. The service is non-discriminatory and provides education and care to children and families irrespective of background, culture, religion, gender, sexuality, disability, marital status or income.

All members of the community will receive respectful interactions with Coomera Rivers OSHC employees and the Approved Provider. Coomera Rivers OSHC will work collaboratively with potential families to understand and cooperate in planning to meet the needs of children intending to enrol in the service.

Coomera Rivers OSHC will prioritise children and families who are at risk of serious abuse or neglect or where working (or study) needs of families require the provision of care.

### Limiting Access

The safe and effective operation of the service requires parents and users to meet the expectation of the Approved Provider. Should a parent (or other family member) act in a manner contrary to the expectations of the service. The Approved Provider may consider limiting the access of these individuals.

## Related Policies

- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.9 Childhood Immunisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish equitable procedures to support fair access for families to utilise the service.</li><li>• Discharge responsibilities for limiting access to the service on fair and reasonable grounds.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Liaise with parents to collate enrolment and waitlist information.</li><li>• Manage any potential waiting list, including communication with families and prioritising access.</li></ul>                     |

## Procedures

### Priority of Access for Enrolment and Waitlist

A priority of access is developed where demand for places provided Coomera Rivers OSHC exceeds those available. In this instance a waiting list will be created and managed by the Nominated Supervisor (or relevant delegate). The priority of access will be given based on:

- The vulnerability of families (risk of serious abuse or neglect).

- The working (or study) needs of families - a child/ren of a sole parent who satisfies, or parents who both satisfy, the activity test through paid employment.
- Students at Coomera Rivers State School will be given priority over children who attend other schools.

The Nominated Supervisor (or relevant delegate) will provide information to families about the position on any waiting list when requested.

## Session of Care Waitlist

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The same framework for prioritising access will also apply to sessions of care. Where a particular session of care is at capacity, a waitlist will be created.

Preference will be given to permanent bookings. Limitations on families making causal bookings will occur when the service reaches its capacity.

## Condition of Enrolment

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Family's ability to use the service is conditional on a number of factors not limited to—

- Parents and children displaying behaviour that maintains the safety and wellbeing of others, including ensuring their interactions with representatives of the service are respectful and courteous.
- Supply and continuation of relevant parent authorisations, as set out in [6.4 Acceptance and Refusals of Authorisation](#).
- Compliance with the fee policy, including payment of fees.

The service will refuse service to families where parents conducting themselves contrary to our expectations. The Approved Provider reserves the right to refuse, suspend or cancel a family's enrolment and ability to use the service on reasonable grounds. Any decision to limit a family's access to the service will be supplied in writing and set out the reasons for refusal.

## Legal and Regulatory Foundation

### National Quality Framework

- National Quality Standard:
  - QA6 – Collaborative partnerships with families and communities

### Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) (Administration) Act 1999
- Australian Government Child Care Provider Handbook

#### Policy Controls

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|-------------------|-------------------|
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## 6.2 Enrolment and Orientation

### Policy Statement

Enrolment at Coomera Rivers OSHC is an official and critical process for a family to attend OSHC. Each child must submit an enrolment record, which contains relevant care information and creates an account for parents to make bookings and payments. Only children with an approved enrolment can use the OSHC service.

The service has a strict duty to ensure accurate and relevant information is retained for each child. This information relates to the specific needs of each child. It is a requirement of parents to submit all the required information and authorisations in full. An enrolment can only be accepted with a complete enrolment record.

While usually submitted as one comprehensive application, the booking process for the service is a distinct and secondary step. First the service must accept an enrolment before confirming booking arrangements.

### Orientation and Information

In addition to collecting enrolment information, the entry of a family into the service is supported by a welcoming orientation process. The service recognises that this is a critical step in forming a collaborative partnership with parents, children and families. The service is committed to ensuring families are provided with relevant information and knowledge to the service's program, routines, policies and practices. A family handbook provides a guide to all the key information for parents to understand.

### Related Policies

- [6.1 Access](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure enrolment records are kept for each child and contain the information set out in the Regulations</li><li>• Ensure enrolment and orientation procedures are inviting and provide key information to new families.</li><li>• Assess feedback and complaints in reviewing enrolment and orientation procedures.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• To liaise and coordinate enquiries for new enrolments, providing relevant information to parents and caregivers exploring OSHC services.</li><li>• Undertake a re-enrolment process each year, where existing families update enrolment and booking information.</li><li>• Collaborate with the Approved Provider to develop orientation practices, including communicating any feedback or complaints raised.</li></ul> |
| Responsible Person   | <ul style="list-style-type: none"><li>• Understand the enrolment form contains key information to the care and wellbeing of children accessing the service.</li></ul>  |

|           |  |
|-----------|--|
|           | <ul style="list-style-type: none"> <li>• Ensure privacy and confidentiality of enrolment information.</li> <li>• Support children’s orientation of the service prior to or on their first arrival.</li> </ul>  |
| All Staff | <ul style="list-style-type: none"> <li>• Access enrolment information as required for the provision of care and education of children accessing the service.</li> <li>• Support the orientation of families through active interaction and communication.</li> </ul> |

## Procedures

### Contact and Communication

The Nominated Supervisor is the key contact for parents and caregivers interested in accessing and enrolling into the service. All new parents and families will be able to meet with the Nominated Supervisor (or other delegate) if requested, to discuss the service’s operations and program before commencing with the service.

#### Family Handbook

The service has prepared a summary of the service’s information for families using the service. It outlines the service’s key policies and expectations. A copy of the Family Handbook can be provided to prospective and new parents.

### Submitting and Enrolment

The enrolment process will commence when a new family completes an enrolment form through our online portal ‘OWNA’. A link to the enrolment form is found on the Coomera Rivers State School website.

The enrolment form **must be completed in full** and contain the following for **each** child requesting the service provide education and care for.

#### Details to be completed are:

|  |  |
|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Full name, date of birth and address of the child.</li> <li><input type="checkbox"/> Gender of the child</li> </ul>  | <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>each</b> known parent of the child</li> <li><input type="checkbox"/> any person who is to be notified of an <b>emergency</b> (if any parent cannot be immediately contacted)</li> <li><input type="checkbox"/> any person who is an <b>authorised nominee</b><sup>1</sup></li> <li><input type="checkbox"/> any person who is authorised to consent to <b>medical treatment</b> or <b>medication</b></li> </ul> |
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Name, address and contact details of:</li> </ul>   |  |
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Details of any court orders, parenting orders<sup>2</sup> or parenting plans<sup>3</sup> provided to the approved provider relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child.</li> <li><input type="checkbox"/> Details of any other court orders provided to the approved provider relating to the child’s residence or the child’s contact with a parent or other person.</li> </ul> |  |
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Language used in the child’s home.</li> <li><input type="checkbox"/> Cultural background of the child and, if applicable, the child’s parents</li> </ul>   |  |

- Any special considerations for the child, for example any cultural, religious or dietary requirements or additional needs
- Details of any dietary restrictions for the child

Authorisations for (regulation 161):

- medical and hospital treatment
- transportation by ambulance service
- any regular outings

- Any relevant health and medical information, including (regulation 162):
  - The name, address and telephone number of the child’s registered medical practitioner or medical service.
- if available, the child’s Medicare number.

- Any **medical management plan** to be followed with respect to a specific healthcare need, medical condition or allergy referred to above
  - specific healthcare needs of the child, including any medical condition.
  - allergies, including whether the child has been diagnosed as at risk of anaphylaxis

- The immunisation status of the child
- If a staff member has sighted a child health record for the child, a notation to that effect

The terms of use will also include authorisation for the staff to:

- Obtain medical treatment from a medical practitioner, hospital or ambulance.
- Transport a child by an ambulance.
- Share information with Coomera Rivers State School.

<sup>1</sup>**Authorised nominee** - means a person who has been given permission by a parent or family member to collect the child from the education and care service

<sup>2</sup>**Parenting Order** - means a parenting order within the meaning of section 64B(1) of the Family Law Act 1975

<sup>3</sup>**Parenting Plan** - means a parenting plan within the meaning of section 63C(1) of the Family Law Act 1975, and includes a registered parenting plan within the meaning of section 63C(6) of that Act.

## Acceptance of Enrolment

A child’s enrolment **cannot be accepted** if all relevant information (as outlined above) is not completed by parents/caregivers.

Once the enrolment form is submitted by a parent, an automatic email is sent to the Director for approval. The Director will consider relevant information prior to accepting an enrolment and includes-

- Considerations set out in policy [6.1 Access](#).
- The capacity and resources available to provide for the safety and wellbeing of the child(ren).
- The information relevant to the service’s Immunisation policy

### Additional Health Or Medical Needs

The Director is to contact the parents of children indicating an additional care need for further clarification, follow-up and planning. The Nominated Supervisor is to ensure [2.9 Children with Medical Conditions](#) is followed for children with additional medical needs (risk assessment, minimisation and communication plan development).

Once the Director is satisfied all enrolment information is submitted and the service can safely and adequately educate and care for the child(ren), parents will be informed of the accepted enrolment via OWNA. Typically, confirmation of bookings is acknowledged concurrent with enrolment.

## Enrolment Records

All enrolment records will be stored securely as outlined in the 7.6 Information Handling (Privacy and Confidentiality) policy. All information is only to be used for the purpose of which it is obtained. Parents may access their enrolment information at any time.

## Orientation

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Understanding of the service's environment, routines, care, and education practices are important for new families to develop. The Nominated Supervisor on accepting a new enrolment will extend an invitation to parents and families to visit the service for a guided orientation. The Nominated Supervisor will outline key elements (including but not limited to):

- explain the routine and program.
- indicate key facilities like toilets, bag racks, hand washing basins etc.
- explain the roles and responsibilities communicating with the service and collecting children.
- discuss and medical or additional needs, and/or individual considerations to support the child.
- answer any questions or concerns.

During a child's first attendance at the service the Nominated Supervisor/Responsible Person will sensitively support and welcome the child and take time to demonstrate the service's expectations, routines, and facilities (including access to toilets, personal items, food, water etc.) in a manner that reflects the child's needs. This may be completed in large groups, such as at the start of the year with a new cohort of younger children.

Children will be shown who they can approach and talk to if they have a concern. All staff will be encouraged to ensure all children are supported as they build their engagement and orientation into the service.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
  - R.167 Record of service's compliance
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA6 – Collaborative partnerships with families and communities

### Additional Regulatory Context and Guidance

- Department of Education and Training Child Care Provider Handbook

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 6.3 Bookings and Cancellations

### Policy Statement

Coomera Rivers OSHC is committed to delivering an efficient and effective service for children and families. The management of bookings and cancellation is critical in providing a quality and efficient service for the community. Parents and families have a role in communicating bookings and cancellations with the service to ensure effective business practices are supported. The service will ensure the booking administration meets the needs of families through effective communication of clear process and expectations, including a software platform that streamlines administrative functions.

The booking process is critical for—

- The safety and wellbeing of children.
- The practicalities of parents and coordinating care.
- To ensure efficient business operations and regulatory compliance.

When a parent submits a booking request, they are doing so with the understanding there is commitment between the service and the family to provide education and care for their child. As a result, there are strict timelines around waiving fees for cancelling or otherwise changing booking arrangements.

### Accessing Child Care Subsidy (CCS)

A request to booking sessions of care forms an important element of the CCS system. The request for a session will for the agreement between the service and the family referred to as the Complying Written Arrangement (CWA) and references the fees/charging practices of the service. All Coomera Rivers OSHC CWA are managed via OWNA.

To access CCS payments, a parent must have a CWA with a service. It is a helpful an important administrative step as it—

- Documents the agreement between the service provider and the family - providing a framework for accountability and quality assurance.
- Ensure the service complies with provider obligations and standards.
- Creates a clear record that can be referenced in the case of disputes or misunderstandings - safeguarding the interests of both the service and the family involved.

### Related Policies

- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

### Roles and Responsibilities

Approved Provider

- Ensure administration practices support the provision of quality care, including compliance with law, regulations, and CCS obligations.

|                      |  |
|----------------------|--|
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Provide effective communication to families to ensure their responsibilities and obligation in notifying the service of obligations.</li> <li>• Monitor and support the application of the service's fees and booking management procedures.</li> </ul> |
| All Staff            | <ul style="list-style-type: none"> <li>• Support the administration of bookings and cancellation, including documenting notification as required.</li> </ul>   |

## Procedures

### Requirements For Accepting Bookings

A child must be fully and actively enrolled at Coomera Rivers OSHC before any requests for booking can be processed or accepted (see [6.2 Enrolment and Orientation](#)). This includes:

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

Where the service has reached or exceeded requests for bookings beyond the maximum number of children stipulated in the service approval the procedures outlined in [6.1 Access](#) for Families (management of waiting lists) will be followed.

#### Authority to Book Care

Bookings can be made by the account holders (typically the child's parents) or, where consent has previously been obtained, an authorised nominee. The service cannot accept the request for a booking to an account where proper authority has not been provided.

Families with shared care arrangements (separated parents), will each need to submit an enrolment to have separate accounts to manage relevant payments, including CCS entitlements.

### Requesting and Confirming Bookings

Coomera Rivers OSHC has only one booking arrangement for vacation care/pupil-free day sessions. However, there are two booking types for before and after school care sessions-

|                    |   |
|--------------------|---|
| Permanent bookings | Subject to allowances for shift workers (set out below), permanent bookings are for a session of care on consistent weekly basis.   |
| Casual bookings    | <p>Casual bookings are requested for a particular session of care (although parents can request multiple casual bookings). This booking type attracts a higher fee.</p> <p>Casual bookings will only be available where Coomera Rivers OSHC has approved places available. Permanent bookings will take a priority over casual vacancies.</p> |

#### Care Needs for Parents/Caregivers That Work a Rotating Roster.

Parents with shift-working employment can have their needs addressed on a case-by-case basis. Parents with these circumstances will need to liaise the Nominated Supervisor to negotiate this arrangement. Evidence (e.g. a copy of working roster) will be required when requested by the service. Bookings of this nature are considered a permanent booking. Therefore, these arrangements have the same conditions as permanent bookings.

### **Submitting a Booking Request**

Parents make requests for both permanent and casual bookings **via OWNA**. Any agreements or requests communicated outside of the OWNA process will not be acknowledged or processed.

### **Accepting Permanent Bookings**

The Director is responsible for the management of waiting and booking arrangements. When a booking request has been considered and accepted, the Director will confirm the booking via OWNA, with the parent receiving a notification to confirm their booking.

If placement is not available at the time the request is made, the request will be placed on a waiting list in OWNA. An offer of placement in OWNA may be made if a position becomes available closer to the requested date.

### **Vacation Care - Program and Forms**

The vacation care program and relevant information will be available in OWNA, including details such as fees, timelines for booking, and session capacities. Unless stated otherwise, pupil-free days will have the same booking and cancellation conditions as vacation care.

Both vacation care and pupil-free day bookings are requested **using the casual booking function in OWNA**.

### **Vacation Care - Confirmation**

All vacation care bookings will be confirmed via email from Week 8 of the school term. In the event that a requested day is not available, the family will be notified and given the option of going on a waiting list for that session. An offer of placement may be made if a position becomes available closer to the requested date.

All vacation care bookings close two weeks prior to the date of the scheduled holiday program. No bookings will be accepted after that time.

## **Absences**

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

It is the responsibility of parents (account holders) to advise the service of absences for any reason. The notice of an absence must be entered into OWNA before 12noon for ASC.

## **Cancelling and Changing Bookings**

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Cancellations are to be notified by completing a Cessation of Care form in OWNA. Parents (or authorised nominees) should notify the service before the sessions of any planned absences.

### **Changes to Permanent Bookings**

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

## Vacation Care Cancellation and Changes to Bookings

Cancellation and changes to bookings for Vacation Care must be made **via OWNA** at least **2 weeks** (14 days) before the closing date for a specific holiday program. No changes to vacation care bookings are permitted within two weeks of the scheduled holiday program.

## Child Care Subsidy

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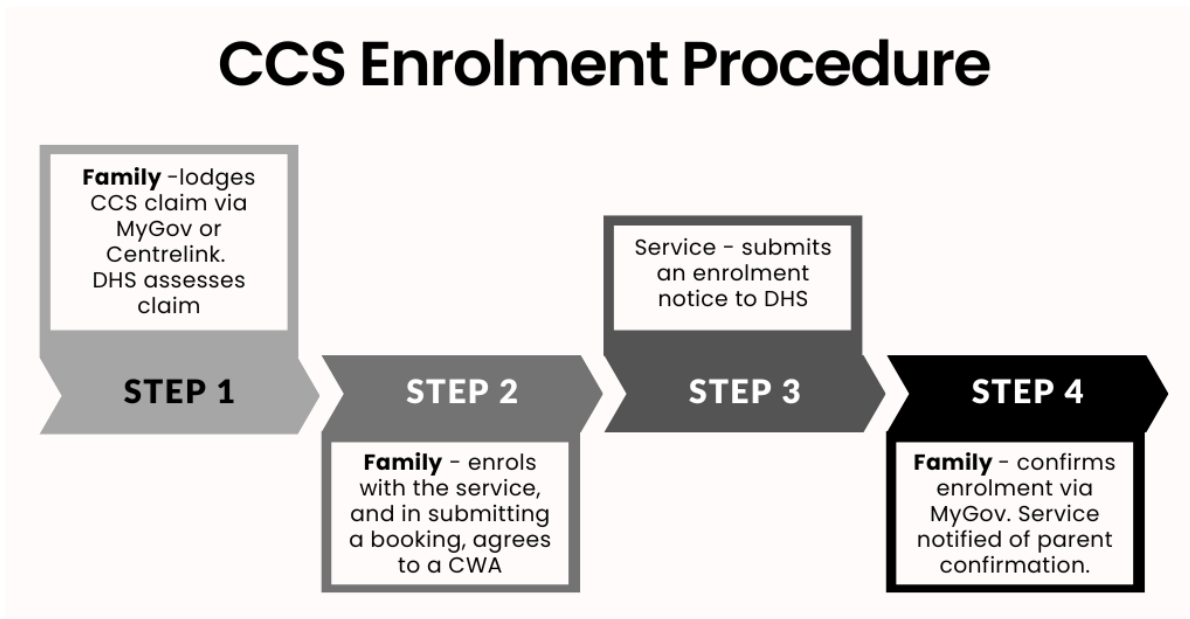
### Accessing CCS

It is the responsibility of the parents/caregivers to communicate with Centrelink/Department of Human Services about their child/ren attending a care service to access CCS entitlements.

To initiate CCS payments for care at Coomera Rivers, parents will need to make a claim via MyGov or Centrelink. When a family's CCS eligibility is confirmed, submitting a request for care via OWNA will create the CWA between the parents and the service.

Once the CWA is established, Coomera Rivers OSHC can enrol the child into the CCS system. The parents will need to confirm this enrolment before funds are passed on, reducing the out-of-pocket expenses for families.

## CCS Enrolment Procedure



### Allowable Absences

CCS is payable for up to 42 absence days for a child in a financial year for sessions of care a child is enrolled in and did not attend and where there is still a liability to pay a fee for the session. Families do not need a reason to access allowable absences (sickness, holidays etc).

### Additional Absences

Once 42 absence days have occurred in a financial year, CCS can only be paid for any additional absences. A family can refer to information set out on [Services Australia](#) website to assess their eligibility for additional absences. Where Coomera Rivers OSHC is applying for an additional absence for a family, evidence must be submitted to the service. There is no limit on the number of additional absence days a recipient may claim, providing the absence days are taken for specified reasons and supporting documentation is provided.

Parents/account holders without an entitlement to CCS will be liable for the full fees for any sessions of care booked.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.99 Children leaving the education and care service premises
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) (Administration) Act 1999
- Australian Government Child Care Provider Handbook
- Competition and Consumer Act 2010 (Cth)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 6.4 Acceptance and Refusals of Authorisation

### Policy Statement

Parent authorisation are a critical aspect of the service's operations. The purpose of this policy is to set out the compressive process for collecting and managing authorisation, especially those that are sensitive to the needs of children and their families. Coomera Rivers OSHC aims to fully inform parents of the relevant matters to make informed choices for authorisations.

#### Required Authorisations

The service will only accept an enrolment for a child where the parent has authorised the service to seek medical treatment for children and transportation by an ambulance service (Regulation 161). A parent failing to submit this authorisation will not have their enrolment progress. Likewise, an enrolment will be cancelled, where the authorisation is retracted.

There is also a responsibility to obtain authorisations from parents, or potentially, an authorised nominee for:

- administering medication to children (Regulation 92 and 96).
- children leaving the premises in the care of the parent or the authorised nominee (Regulation 99).
- excursions (Regulation 102).
- transport provided or arranged by the service (Regulation 102D).
- sharing information or records with others (Regulation 181).

Where an authorisation is a required for a specific action/procedure to occur, the authorisation must be provided in writing before the service can carry out the task, except for emergency medication administration, where verbal consent can be provided (Regulation 93(5)).

#### Sharing of Information – Collaboration with Coomera Rivers State School

Due to our holistic approach to supporting children's learning, development, and wellbeing, we make it a condition of enrolment to share relevant information regarding children's participation and behaviour at OSHC with Coomera State School representatives. The purpose of this information sharing is set out in the relevant behaviour support policies.

#### Refusal of Authorisation

While parents can decide to not provide an authorisation, depending on the nature of the refusal, it may implicate the ability of the service to educate and care for a child. Where a parent refuses authorisation, the service reserves a right to also refuse care.

The service will also maintain their duty for the safety and wellbeing of children. Notwithstanding a parent's authorisation, if the service believes the action would jeopardise a child's safety and protection, where it is lawful, they may reserve the ability to refuse the parent's authorisation (e.g. leaving the service in a dangerous manner).

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)

- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.2 Enrolment and Orientation](#)
- [6.9 Childhood Immunisation](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

## Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Will ensure parents have the opportunity to authorise or decline relevant elements of the service’s programs</li> <li>• Ensure these requests are followed by the service</li> </ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Lead the service authorisation and record keeping practices to ensure information is received and collate information in a manner that ensures authorisations are followed as parents have requested.</li> <li>• Communicate with parents and support flexibility of amending authorisations.</li> </ul> |

## Procedures

### Authorisations for Enrolment

A family’s enrolment at Coomera Rivers OSHC is subject to the authorisation for the consent of medical treatment, including transportation via ambulance. No enrolment will be accepted without the signed agreement of a parent in the enrolment form.

Additionally, upon enrolment, the parent will have the opportunity to provide authorisation for:

- other persons to collect their child(ren) (authorised nominee),
- emergency contact persons, and/or
- regular outings (if applicable).

### Terms and Conditions of Enrolment

Upon completing the enrolment form (via OWNA), the parent will be promoted to agree to the service’s terms and conditions of enrolment, which include-

- Sharing relevant information with school representatives around the care of their child (e.g. information around health, wellbeing, or behaviour).
- Acknowledging the service may take and use photos of their child to document learning outcomes and significant events as part of the program. These may be displayed within the service and OWNA as part of the evidence and communication of children’s learning.

### Authorisation Surrounding Care and Participation

In caring for children and participating in the program, there may be circumstances where additional authorisation are required. This includes—

## Medication

Where medication is required, it can only be administered with the written authorisation from a parent - unless an asthma or anaphylaxis emergency or another emergency where authority to provide verbal consent can be given. Parents will need to complete a medication administration form setting out the medication(s) to be administered (Regulation 92).

Where medication is required to be administered in an emergency and prior written consent has not been provided, verbal authorisation can be provided by-

- A parent.
- A person named in the enrolment to provide authorisation for medication administration.
- Or where a parent or other person named in the enrolment records cannot be reasonably contacted in the circumstances, a registered medical practitioner or emergency service.

Details of verbal authorisation will be documented in the Incident, Illness, Injury and Trauma Record.

## Excursions and Transport

Authorisation must be provided by a parent for a child to participate in an excursion or any other regular outing. The authorisation for an excursion will set out all the required information to satisfy Regulation 102. The service will provide parents with relevant information to be fully informed of excursion details and risks- see [1.3 Excursions](#).

While the service does not provide transport other than excursions, should this change, authorisation must be obtained prior to a child being transported.

## Refusing Authorisations

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### Parent Refusal of Authorisations

A parent may refuse to provide authorisation for the child; however, this may impact the service's ability to provide education and care for the child, this includes-

| Refusal (or no authorisation)  | Outcome  |
|--|--|
| Refusal or withdrawal of authorisation for medical treatment, including transportation via ambulance | Education and care cannot be provided to the child by the service.   |
| Refusal for authorisation around the sharing of information  | For better outcomes for students and to meet our commitment for holistic care environment, enrolment at OSHC is subject to our ability to share information with school representatives. |
| Refusal for authorisation for excursion  | Where the excursion is the only activity for a vacation care day, care cannot be offered for that day.   |

### Service Refusal of Authorisations

The service retains the ability to refuse a parent's authorisation where the authorisation would conflict with another duty, principally, the safety and wellbeing of children. This may include but is not limited to the circumstances where a child is allowed to leave the service.

Where the Approved Provider, Nominated Supervisor, or Responsible Person believe the authorisation from the parent would jeopardise the safety and wellbeing of a child, then will be informed for the service's decision to refuse the authorisation.

## Updating and Amending Authorisations

---

Parents are responsible for and have the right at any time to change authorisations given to the service in relation to their child and their child's participation in the program. This may be done through completion of an updated enrolment form or other written authorisation. However, a child's enrolment and participation in the service will remain subject to relevant authorisations being maintained.

## Record Keeping

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All authorisations will be retained with the child's enrolment records and will be handled as per [7.6 Information Handling \(Privacy and Confidentiality\)](#).

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
  - R.93 Administration of medication
  - R.94 Exception to authorisation requirement—anaphylaxis or asthma
  - R.99 Children leaving the education and care service premises
  - R.102 Authorisation for excursions
  - R.102D Authorisation for service to transport children
  - R.158 Children's attendance record to be kept by approved provider
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
- R.162 Health information to be kept in enrolment record
- National Quality Standard:
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 6.5 Interactions and Communication with Families

### Policy Statement

The service acknowledges the importance of effective communication with families and strives to encourage their participation and involvement to enhance the service provided.

Families are welcome to attend the service and talk to educators during its operations. The Approved Provider encourages families to voice their views in a way that will assist the service to be inclusive and responsive to individual's needs and wishes.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establishes a culture of openness, transparency, and respectfulness.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Be approachable and responsive to families, including making time for discussion.</li><li>• Ensure relevant communication methods are established with families to support meaningful information sharing.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Are to be inviting, courteous and respectful in all interactions with families.</li></ul>  |

### Procedures

Parents will be able to access their child anytime they are in attendance at OSHC. Parents and caregivers will have access to meet with the Nominated Supervisor throughout daily sessions and/or by pre-arranged appointment to discuss any issues or concerns with respect to their child and/or the service.

On enrolment, a Family Handbook will be provided as part of the service enrolment package. The information contained in the handbook is to guide parents on the expectations for themselves and their child(ren) while they access the service. It will also summarise important aspects of the operations and highlight key policies.

Information for parents will primarily be communicated through:

1. Posts and notifications sent through OWNA (our child care software).
2. Meetings/conversations/phone calls between service representatives and parents.
3. Emails.
4. Office signage.

### Legal and Regulatory Foundation

#### National Quality Framework

- National Quality Standard:
  - QA6 – Collaborative partnerships with families and communities

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 6.6 Community Communication and Participation

### Policy Statement

The service acknowledges the importance of its local community and seeks to act both in the interests of its community and in enhancing the experience of children as members of the community. The service is committed to practice that reflects Quality Area Six of the National Quality Standards, in particular, building and engaging strong relationships with the community.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Will ensure the service's practices reflect the National Quality Framework, including the Service Philosophy reflects the views and wishes of the community.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Establish local connection with individuals and groups and seek out engagement opportunities.</li><li>• Collect and maintain relevant community resources to assist in facilitating and extending connection between families and their community.</li><li>• Respond to community members with professionalism and in a manner that upholds the service's reputation and philosophy.</li></ul> |
| Educational Leader   | <ul style="list-style-type: none"><li>• Develop a program that is shaped by meaningful engagement with families and the community.</li></ul>   |
| All Staff            | <ul style="list-style-type: none"><li>• Display conduct that is inclusive, respectful, and inviting to the community.</li><li>• Respond to opportunities for community connection/engagement with professionalism</li></ul>  |

### Procedures

#### Engagement through the Program

The service will seek out opportunities for the service to connect and maintain relevant relationship with their local community. The service's planning will reflect opportunities to explore and experience the community surrounding OSHC, and where possible, invite individuals into the service to establish partnerships for children.

Families of the service will be encouraged to suggest suitable and appropriate community venues that may be considered for excursions, incursions etc.

The Educational Leader will be supported to ensure the service's practices are shaped by meaningful engagement with families and the community. The Educational Leader will be encouraged to facilitate educators to actively engage in dialogue, open communication, and partnerships with families.

## Service Delivery and Engagement

The service is committed to upholding a philosophy and program that reflects the needs and worldview of the families that attend and participate. The service will review the Service Philosophy as needed. Opportunities for feedback and information gathering to reflect on the service's connection to the community will be an embedded practice in the quality improvement processes of the service.

## Community Services and Resources

The service will retain a collection of helpful resources to support their community of families. The Nominated Supervisor is responsible for collecting and maintaining this catalogue of information and contacts.

## Responding to the Community

The Nominated Supervisor will treat all enquiries and concerns seriously. All interactions with community members are to be respectful and courteous. Questions, answers and required information should be responded to promptly and with integrity.

Any concerns about the service which are identified can be managed through 6.7 Feedback and Complaints policy.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.170 Offence relating to unauthorised persons on education and care service premises
- National Quality Standard:
  - QA1 – Education Program and Practice
  - QA6 – Collaborative partnerships with families and communities
- My Time, Our Place - Framework for School Age Care in Australia

### Additional Regulatory Context and Guidance

- Information Privacy Act 2009 (Qld)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## 6.7 Feedback and Complaints Handling

### Policy Statement

The service recognises feedback and complaints can be essential to ensuring a high standard of education and care is provided to children accessing the service as well as the broader community. These mechanisms inform quality improvement practices, promote inclusive access to services required to meet the needs of individuals and uphold the rights of children and families.

The service acknowledges the right of children, parents, and others to raise a complaint about any issues that impact the service delivery or the quality of care provided. All individuals will be provided with accessible complaint procedures and information on opportunities to raise a complaint.

Concerns held by stakeholders can range in their level of severity/seriousness. The service's policy reflects this, recognising that **feedback** can be either positive, affirmative communication or alternatively observations about possible suggestions or improvements, whereas **complaints** are a more serious view that something is unsatisfactory or unacceptable. The service is committed to ensuring all claims are handled in a manner consistent with principles of natural justice. Individuals should be free to raise a complaint without fear of retribution or victimisation. The Approved Provider is committed to leading a culture that reflects an openness to address concerns held by stakeholders in a fair and reasonable manner.

The Approved Provider also recognises their duty to comply the Human Rights Act (Qld) 2019 and when relevant follow Departmental policy in handling complaints relating to potential violations of any human right.

### Related Policies

- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)

### Appendices and Forms

- [Complaint Record](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Will ensure information about how to provide feedback or make a complaint is provided through enrolment information and staff induction.</li><li>• Will support the Nominated Supervisor in handling any complaints raised by parents and staff by providing guidance and advice as required.</li><li>• Periodically review the register of complaints to identify systemic issues not being addressed.</li><li>• Ensure complaints are managed in a fair manner, giving an opportunity for issues to be managed free from bias.</li><li>• Provide opportunity for complaints to be raised directly with the Approved Provider where the complainant feels it necessary to do so.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Lead a culture of fairness and ethical practice, supporting individuals to raise a complaint without fear of retribution or victimisation.</li></ul>  |

|           |   |
|-----------|---|
|           | <ul style="list-style-type: none"> <li>• Be the initial point-of-contact for most parent, community and employee raised complaints.</li> <li>• Demonstrate a willingness to constructively address feedback raised by stakeholders.</li> </ul>  |
| All Staff | <ul style="list-style-type: none"> <li>• Be open to accept feedback and complaints raised by children and parents (or other stakeholders).</li> <li>• Communicate complaints through reporting lines described in the procedure.</li> <li>• Demonstrate a willingness to access complaints mechanisms, raising concerns or complaints as outlined in the procedure where appropriate.</li> <li>• Acknowledge the opportunity to develop practice as a result of feedback and complaints.</li> </ul> |

## Procedures

### Children's Concerns

1. Children should be supported to express and raise concerns freely. Sensitivity may be required to fully understand the Children's perspectives and interests. Educators should demonstrate proactive openness to hear and understand the concerns and feedback raised by children.
2. All issues and concerns expressed by children will result in support and guidance by Educators, who will seek a timely and fair resolution.
3. Educators will communicate resolved and unresolved concerns to the Nominated Supervisor.
4. Where a resolution isn't immediately found, educators will model constructive behaviours and skills by assisting children to define the problem, its cause, discuss options and solutions, assess strategies, and arrive at an agreed course of action.
5. Issues of a serious nature will be dealt with by the Nominated Supervisor and/or Approved Provider and in the appropriate forum.
6. Serious concerns raised by children will be communicated to parents at the earliest possible convenience, ensuring this is completed by the Nominated Supervisor or Responsible Person within 24 hours.
7. Serious concerns reaching the threshold for complaint may require incident reporting and notification to the Regulatory Authority (see [2.4 Incident, Illness, Injury or Trauma](#) policy and [7.7 Managing Notifications](#)).

### Parents, Stakeholders and Employees Concerns

Parents will be advised of the Feedback and Complaints Policy on enrolment. Details will be contained in the OSHC Family Handbook. Information about the name and position of the person to whom complaints may be directed will be displayed in a prominent location. This will also include their contact information including telephone number and email address.

#### Feedback

Parent feedback is welcomed and encouraged. Parents are welcome to communicate their feedback constructively at any point. Where concerns cannot be immediately addressed, the Nominated Supervisor will follow up with the parents for discussion and steps to resolution. The person taking the feedback (Nominated Supervisor, educator etc.) should clarify if the person is indeed expressing feedback or if they would like to raise a complaint for further management and/or resolution.

## Complaint Handling Process

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1. Parents, stakeholders, and employees may raise their complaint either verbally or in writing. Any staff member can receive a complaint. Details of the complaint should be directed to the Nominated Supervisor for initial handling.
2. The Nominated Supervisor will be the preferred contact for initial complaints. However, the complainant will have the ability to raise concerns with the Approved Provider directly.
3. The Approved Provider should be the contact for complaints where:
  - a. the complaint is about the conduct of the Nominated Supervisor.
  - b. the complainant is not comfortable to take the complaint to the Nominated Supervisor.
  - c. the complainant is not satisfied with the Nominated Supervisor's handling of the complaint.
  - d. the complaint is regarding a matter of administration, management, or governance.
4. Any complaints relating to misconduct of a staff member will be handled in accordance with relevant underperformance or misconduct procedures.
5. All complaints raised are to be documented on the 'Complaints Record' and recorded in the 'Complaints Register'. These records are stored in accordance with the service's information handling policy – securely, maintaining privacy and confidentiality through password protection.
6. The Nominated Supervisor will notify the Approved Provider of any complaints. The Approved Provider and Nominated Supervisor will discuss and plan who is most suitable to fulfil the role of complaint handler. They should be free from bias, impartial, have the capacity to manage the complexity and conflict, and be suitable within the criteria listed above (item 3).

Where a complaint relates to the possible violation or restriction on a **human right**, the Approved Provider will report the details to the Principal for handling. Where the complaint is referred for Departmental handling, the service will be directed by Departmental representatives before proceeding further.

7. Matters of a complaint relating to compliance with the Education and Care Services National Law and/or Regulations or the quality of care provided are required to be notified to the Regulatory Authority. If in doubt, a representative should refer to the Regulatory Authority for further guidance and/or assistance.
8. Where the nature of the alleged complaint is suitable to be managed by the Approved Provider (internally), the complaint handler will contact the complainant to discuss (within 48 hours), seeking to identify:
  - a. the nature and details of the complaint.
  - b. the resolution sought.
9. Where a resolution can be immediately/quickly addressed, the complaint handler will collaborate an action plan with the complainant and confirm the resolved status of the complaint. These items will be documented by the complaint handler and the complaint will be considered finalised.
10. Where resolution is not easily sought due to:
  - a. strong dispute of the nature of the complaint or objection to the allegations,
  - b. the conclusion will benefit from procedural fairness,
  - c. previous resolutions have been unsuccessful, or
  - d. there is a conflict of interest.

the Approved Provider will take steps to either mediate between the relevant parties (if appropriate) or investigate the matter to conclusion.

11. The complaint handler will notify the complainant of the intention to either undertake mediation or investigation. The complaint handler will also outline anticipated timelines of either process with the complainant at this point. All anticipated timelines should be reasonable in the circumstance.
12. The mediation or investigation may be facilitated by the Approved Provider or outsourced to a third-party. Any mediator or investigator appointed should be free from bias, impartial and have the capacity to undertake the task.
13. Where an investigation is undertaken - the investigator will gather relevant information, including statements from the complainant and/or additional information from relevant parties. The investigator's role is limited to establishing the facts based on the evidence at hand and the balance of probability. The investigator will report back to the Approved Provider addressing if they have found the allegation to be either be substantiated or unsubstantiated.
14. The Approved Provider will review the findings of any investigation and provide an outcome to the complainant.
15. All finalised documentation and reports will be stored confidentially (see [7.6 Information Handling – Privacy and Confidentiality](#)).

## Quality Improvement

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The Nominated Supervisor and Approved Provider will review the complaints register periodically to identify opportunities to enhance the quality and address systemic issues not yet identified.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
- Education and Care Services National Regulations:
  - R.157 Access for parents
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.173 Prescribed information to be displayed
  - R.174 Time to notify certain circumstances to Regulatory Authority
  - R.174A Prescribed information to accompany notice
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- National Principles for Child Safe Organisations
- Department of Education and Training Child Care Provider Handbook
- Human Rights Act 2019 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 6.8 Visitors

### Policy Statement

The service seeks to provide an open and friendly environment, which values and actively encourages community participation and inclusion. In doing so, the service will remain compliant with education and care service legislation providing a safe and supervised environment for children. All visitors (and non-authorised persons) will remain in direct supervision by an educator while children are attending the service.

Visitors are defined as all people other than:

- employees,
- children enrolled and attending the service, and
- parents, family members, or authorised persons delivering or collecting children from the service.

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish effective procedures to ensure suitable persons interact directly with children being cared for by the service.</li><li>• Establish mechanisms to uphold the safety and protection of children being cared for by the service.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Provide supervision and leadership to ensure established procedures are followed.</li></ul>   |
| All Staff            | <ul style="list-style-type: none"><li>• Ensure children are not left unsupervised with visitors or unauthorised persons.</li><li>• Support all visitors to present to the OSHC office to be signed in/identified.</li><li>• Monitor for and respond to situations that might risk the safety and wellbeing of children.</li></ul> |

### Procedures

Any persons unknown to educators of the service will be requested to present to the OSHC room in order to identify themselves. The Nominated Supervisor or Responsible Person will confirm their identity with enrolment records.

#### Invited Visitors

Other visitors to the service could include incursion staff members or other community members supporting the service's program. All invited visitors will be asked to document their visit in the **Visitor Record**. Regardless of their engagement, where children are being provided care and education, an educator will remain in direct supervision of visitors at all times.

#### Community Members

At times teachers or other relevant school community members may be in the vicinity of the service's activities. Educators welcome collaboration and participation by the school community but will ensure that

where children are being provided care and education, an educator will remain in direct supervision at all times

### **Suspicious or Harassing Persons**

Any persons who does not have a valid or suitable reason for being on the premises will be respectfully asked to leave by the Nominated Supervisor, or where this is not practicable any other educator.

Where any educator is suspicious or reasonably believes there may be a potential threat to safety or wellbeing for any persons will initiate the service's Lockdown Plan.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law Act
  - s.170 Offence relating to unauthorised persons on education and care service premises
  - s.171 Offence relating to direction to exclude inappropriate persons from education and care service premises
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA6 – Collaborative partnerships with families and communities.

### **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000
- Information Privacy Act 2009 (Qld)
- Work Health Safety Act 2011 (Qld)

#### **Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
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## 6.9 Childhood Immunisation

### Policy Statement

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

### Related Policies

- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [6.2 Enrolment and Orientation](#)
- [6.4 Acceptance and Refusals of Authorisation](#)

### Roles and Responsibilities

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

### Procedures

#### Understanding Immunisation Requirements

This policy will be available to parents/families on request. Information will also be provided to families via the service Family Handbook. The service's communication will detail the potential impacts on their child's enrolment or attendance if their child's immunisation status is deemed not up to date.

The service will establish risk management procedures relating to monitoring and managing the spread of vaccine-preventable diseases at the service, this is outlined in [2.7 Infectious Diseases – Prevention and Response](#). Procedures will include but not limited to:

- Monitoring and recording children immunisation status through enrolment.
- Monitoring and recording staff immunisation status.
- Communication regarding infectious disease outbreak and management.
- Limiting attendance for vulnerable children during times of infectious disease outbreak (if enrolment has been accepted).

#### Immunisation History Statement

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

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

### **Vulnerable Children**

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

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

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

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

### **Medical Contraindication**

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

### **Conscientious Objection**

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

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Regulations:
  - R.88 Infectious diseases.
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- A New Tax System (Family Assistance) Act 1999
- Public Health Act 2005 (Qld)
- NHMRC - Staying healthy: Preventing infectious diseases in early childhood education and care services

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
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## 6.10 Children's Property and Belonging

### Policy Statement

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

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)
- [6.5 Interactions and Communication with Families](#)

### Roles and Responsibilities

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

### Procedures

#### Children's Required Belongings

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

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

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

#### Additional/Special Items

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

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

#### Care for Belongings

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

- Actively encourage children to care for their belongings.

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

Families will be asked to label all their child’s belongings clearly and consider leaving excessive or non-essential belongings at home.

**Lost Property**

- Un-named items will be placed in a central location for families to check and take items that belong to their child.
- Lost property unclaimed after three months will be used by the service as spare clothing or given to charity.
- Parents/guardians are asked to let staff/educators know if an item belonging to their child is missing or return items that do not belong to their child.
- Staff/educators will undertake a search for the missing item and place a notice up for other parents/guardians, asking if they have taken the item home by mistake.

**Legal and Regulatory Foundation**

**National Quality Framework**

- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
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## Policy Group 7

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# Governance, Leadership and Administration

The service will implement **quality leadership and management systems** to deliver quality care environments for children’s learning and development. Well developed, procedures, well-maintained records, shared values, clear direction and reflective practices enable the service to function as a learning community.

An ongoing cycle of review and improvement, including engagement with families, creates a platform for best practice and excellence.

# 7.1 Nominated Supervisor

## Policy Statement

The Approved Provider acknowledges its obligation to appoint at least one suitable person as the Nominated Supervisor at the service. The appointment of the service's Nominated Supervisor will review all relevant elements of suitability and qualification. The Nominated Supervisor will be delegated with the responsibility for managing the day-to-day operations and compliance of the service. Where the Nominated Supervisor is absent from the service, another suitably qualified and competent educator will act as the Responsible Person.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.6 Technology and Screen-Time](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [5.3 Supporting Complex Behaviours](#)
- [5.4 Supporting Additional Needs with Inclusive Practices](#)
- [5.5 Promoting Protective Behaviours](#)
- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)

- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.7 Feedback and Complaints Handling](#)
- [6.8 Visitors](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.15 Social Media and ITC Usage](#)
- [7.17 Self-Assessment and Quality Improvement](#)

## Appendices and Forms

- [Nominated Supervisor Determination Checklist](#)
- [Nominated Supervisor Compliance History Statement](#)
- [Nominated Supervisor Prohibition Notice Declaration](#)
- [Nominated Supervisor Consent Form](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Ensure the service operates with a suitable Nominated Supervisor appointed.</li> <li>• Maintain records of the appointment and suitability assessment of each Nominated Supervisor.</li> <li>• Provide notification to the Regulatory Authority where a change in Nominated Supervisor has occurred.</li> </ul> |
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Agree to their appointment in writing</li> </ul>  |

## Procedures

### Responsibilities and Function

The Nominated Supervisor is responsible for overseeing the overall operations and management of the service. They are to supervise the day-to-day events of the service and coordinate relevant management activities.

### Appointment of the Nominated Supervisor

In determining a person's suitability hold the role of Nominated Supervisor, the Approved Provider will ensure that the person/s:

- Be 18 years or over.
- Has adequate knowledge and understanding of the provision of education and care to children.
- Has the ability to effectively supervise and manage an education and care service.
- Consider their compliance history with the National law and other relevant laws.
- Review prohibition history.

Each person offered the role of Nominated Supervisor/s will be deemed suitable by the Approved Provider. The following documents will be completed and retained as evidence suitability and consent of the appointment:

- [Nominated Supervisor Determination Checklist](#)
- [Nominated Supervisor Compliance History Statement](#)
- [Nominated Supervisor Prohibition Notice Declaration](#)
- [Nominated Supervisor Consent Form](#)

If uncertainty or concern arises about a candidate's compliance history the Approved Provider will contact the Regulatory Authority and enquire if the person is subject to a prohibition notice in any state or territory.

### **Suitability Review**

Where the Approved Provider has concerns impacting the Nominated Supervisor's ability to meet the requirements of their role, a reassessment will be made of the person's suitability to hold the position of Nominated Supervisor of the service. The re-assessment will review previous determinations and other relevant information and evidence of suitability. The Nominated Supervisor Suitability Checklist will be used to review and evidence any suitability reviews.

### **Notification to the Regulatory Authority**

- When changes occur to Nominated Supervisor appointments at the OSHC service the Regulatory Authority will be notified through the NQA IT System (see [7.7 Managing Notifications](#)).
- Written consent will be attached and submitted to the Regulatory Authority via the NQA IT System.

### **Records**

All relevant information relating to the appointment of the Nominated Supervisor will be retained by the Approved Provider (see 7.6 Information Handling (Privacy and Confidentiality) including employee details and consent for appointment.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law
  - s.161 Offence to operate education and care service without nominated supervisor
  - s.161A Offence for nominated supervisor not to meet prescribed minimum requirements
- Education and Care Services National Regulations:
  - R.117C Minimum requirements for a nominated supervisor
  - R.145 Staff record
  - R.146 Nominated supervisor
  - R.173 Prescribed information to be displayed
- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- Working with Children (Risk Management and Screening) Act 2000

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 7.2 Determining the Responsible Person

### Policy Statement

The purpose of this policy is to ensure the appointment of any Responsible Person at the service is suitable and able to fulfil the requirement of the role.

The day-to-day management and supervision of the service is a critical aspect of the management and compliance of the service. It is a function that impacts the standard of safety, and the quality of education and care for children and families.

The Responsible Person is tasked with managing the operations of the service for a particular session of care, ensuring that the service adheres to regulatory and policy obligations. They are also the primary point of communication and decision-making during operational hours. The assessment and appointment of an educator to a Responsible Person role is critical. The person should demonstrate the necessary knowledge, experience and management capability (compliance, leadership, professional judgement and communication skills) to oversee and direct work.

Records created to evidence the suitability of an educator to be the Responsible Person will be retained by the service.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children’s Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.7 Feedback and Complaints Handling](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)

## Appendices and Forms

- [Responsible Persons Determination Checklist and Consent](#)

## Roles and Responsibilities

|                    |   |
|--------------------|---|
| Approved Provider  | <ul style="list-style-type: none"><li>• Ensure the suitability and capacity of persons identified to fulfil this duty.</li><li>• Ensure relevant documentation is completed and stored.</li><li>• Monitor and respond to issues relating to conduct, suitability or underperformance.</li></ul>   |
| Responsible Person | <ul style="list-style-type: none"><li>• Lead and support the team of educators to provide quality education and care.</li><li>• Report to the Approved Provider as required.</li><li>• Develop a sound working relationship with the Nominated Supervisor debriefing relevant information for further management and support.</li><li>• Demonstrate ability to understand and apply the service's policies and procedures.</li><li>• Report to critical events with diligence and timeliness.</li><li>• Notify any circumstances that might impact on their suitability or capacity to the Approved Provider.</li></ul> |

## Procedures

### Appointing a Responsible Person

Where the Nominated Supervisor (or the Approved Provider) is not present during a session of care, a Responsible Person must be appointed to be in day-to-day charge of the service.

The suitability of relevant educator to act in the Responsible Person role will occur from time to time. With the Nominated Supervisor (or the Approved Provider) to undertake a review and offer to act in this capacity. The written (and informed) consent of the educator must be obtained before any allocation.

### Assessing Suitability

In determining the Responsible Person, the Approved Provider and/or Nominated Supervisor must determine if that person is suitable. This means considering the capacity of this person to ensure children's safety and wellbeing, having regard to their qualifications, skills, knowledge, work experience age and history of compliance, includes the person's—

- Understanding of the Education and Care Services National Law and Regulations.
- Understanding of the service's policies and the responsibilities of the Responsible Person to carry out key procedures.
- Capacity to implement emergency and evacuation procedures.
- Ability to attend to parent inquiries and/or concerns.
- Capacity to supervise, manage and lead other educators.
- Ability to respond to incidents and critical events.
- Ability to effectively make written records of incidents.

## Training and Instruction

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The Nominated Supervisor will be informed by the suitability assessment in creating a relevant training plan for an educator appointed to a Responsible Person duty. They will ensure relevant instructions are available and accessible.

## Record Keeping

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Using a standardised template, the service will maintain a record the educator's suitability and consent to be the Responsible Person. Likewise, the service will maintain a record of the roster to evidence who the Responsible Person was for each session of care.

## Notice of the Responsible Person

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In accordance with regulatory requirements, a sign stating the name and position of the Responsible Person will be displayed at all times children are being educated and cared for. This signage will be displayed in the OSHC office in a location accessible and visible to parents.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.162 Offence to operate education and care service unless responsible person is present
- Education and Care Services National Regulations:
  - R.117A Placing a person in day-to-day charge
  - R.117B Minimum requirements for a person in day-to-day charge
  - R.145 Staff record
  - R.147 Staff members
  - R.151 Record of educators working directly with children
  - R.150 Responsible person
  - R.173 Prescribed information to be displayed
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA7 – Governance and leadership.

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
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| Version:          | v.2023-1          |

## 7.3 Educational Leader

### Policy Statement

The service acknowledges the need to establish a suitably qualified and experienced educator or service leader be responsible for the development and implementation of the program. This role should enhance the practices of educators and be focused on building a collaborative approach to incorporate the ideas and suggestions of a wide range of stakeholders to inform the development of the program.

The service recognises the requirement to maintain records of the designated Educational Leader.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.2 Sharing the Program and Children's Progress with Families](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [1.6 Technology and Screen-Time](#)
- [6.5 Interactions and Communication with Families](#)
- [6.6 Community Communication and Participation](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure the suitability of the Educational Leader has been documented and the Educational Leader's appointment has been agreed to in writing.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Support the Educational Leader to develop and implement the service's program.</li><li>• Maintain the records for the designation of the Educational Leader.</li></ul>  |
| Educational Leader   | <ul style="list-style-type: none"><li>• Agree to their appointment in writing.</li><li>• Undertake their role collaboratively and with professionalism.</li></ul>   |
| All Staff            | <ul style="list-style-type: none"><li>• Support the development and implementation of the service's program through completing their duties in the programming cycle - adding to the service's documentation and critical reflection to their capacity.</li></ul> |

### Procedures

#### Educational Leader Appointment

The appointment to the Educational Leader position will be based on identifying a suitably qualified and experienced educator (or another suitable individual) to fulfil the role for the service. The Nominated Supervisor will coordinate with the Approved Provider to identify and assess a suitable candidate. The Nominated Supervisor (or other appointed persons) will document their assessment of the person's suitability. This will be retained in the appropriate records, including their employee file.

The Approved Provider will ensure the designated Education Leader has confirmed their role in writing. The written evidence will be maintained by the service records, including in the employee file (see 7.6 Information Handling).

#### Programming Cycle Responsibilities

The Educational Leader will be responsible for:

1. Leading the development of the service program, using the My Time, Our Place: Framework for School Age Care in Australia to inform and guide children’s learning and development, and ensure that clear goals and expectations have been established.
2. Ensure that curriculum decision making is informed by the context, setting and cultural diversity of the families and the community.
3. Ensure that the foundation for the program is based on the children’s current knowledge, ideas, culture and interests.
4. Ensure that each child’s learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluating.
5. Ensure that critical reflection and evaluation of children’s learning and development is used for planning and to improve the effectiveness of the program.
6. Mentor educators in the implementation of the program, providing professional support to assist with further skills and knowledge and provide opportunities for ongoing reflection and feedback on current practices.
7. Ensure that families have opportunities and support to be involved in the program and service activities as well as contributing to the review of service policies and decisions.

The Approved Provider and Nominated Supervisor will ensure rostering and resources and adequate for the Educational Leader to fulfil their responsibilities.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.168 Offence relating to required programs
- Education and Care Services National Regulations:
  - R.73 Educational program
  - R.74 Documenting of child assessments or evaluations for delivery of educational program
  - R.75 Information about educational program to be kept available
  - R.76 Information about educational program to be given to parents
  - R.118 Educational leader
  - R.145 Staff record
  - R.148 Educational leader
  - R.173 Prescribed information to be displayed
  - R.299 General qualification requirements for educators—children over preschool age
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.
- My Time, Our Place - Framework for School Age Care in Australia.

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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## 7.4 Leading Compliance and Quality Assurance

### Policy Statement

The Approved Provider is committed to ensure every aspect of Coomera Rivers OSHC's operations is compliant with all relevant legal obligations through the various roles as a business, employer and Education and Care Service.

The Approved Provider will be assisted by the service's management to develop sound procedures and systems to meet the outcomes and expectations required. The Approved Provider is committed to ongoing quality improvement and will routinely review and assess the efficacy of implemented action to achieve compliance. All employees will be supported and encouraged to communicate issues or concern of legal compliance to their manager or the Approved Provider for the assessment, review and (potentially) the development of practices or procedures.

Any and all instances of non-compliance with legal obligations will be treated seriously. Review and evaluation to address issues will be a priority of the Approved Provider and its management team.

As an education and care service, we are committed to provide quality and legislative compliant education and care for our community. In doing so we recognise our obligation to meet statutory requirements outlined in the National Quality Standard and the requirements for Approved Providers and Nominated Supervisors under the Education and Care Services National Law Act and Regulations. The management and governance of the service have been designed and developed in such a way as to best fulfil our responsibilities to educate and care for children. The service expects all personnel (staff and the Approved Provider) to carry out the agreed policies and procedures of the service when discharging their duties.

The [Service Philosophy](#) reflects the commitment quality education and care consistent with the National Quality Framework. The Philosophy reflects the values promoted by the Approved Provider and the Nominated Supervisor and underpins all elements of the service's operations.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
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- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)

- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
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- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)
- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.7 Feedback and Complaints Handling](#)
- [6.8 Visitors](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.17 Self-Assessment and Quality Improvement](#)

## Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Lead a culture of quality service delivery and sound business practices.</li> <li>• Active in monitoring and supervising service outcomes and practices to ensure the service is meeting obligations and expectations.</li> <li>• Respond diligently to any concern or non-compliant issues, including relevant reporting.</li> </ul>      |
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Support the supervision and monitoring of practices and the implementation of procedures.</li> <li>• Immediately notify the Approved Provider of concern or instances of non-compliance.</li> <li>• Provide insight to opportunities for practice and policy development to support the outcomes and compliance of the service.</li> </ul> |
| All Staff            | <ul style="list-style-type: none"> <li>• Ensure practices and conduct reflect the service policies, procedures and management instructions at all times.</li> <li>• Participate in quality improvement practices and reviews by contributing ideas and perspectives on opportunities for more robust systems and procedures to meet obligations and responsibilities.</li> </ul>    |

## Procedures

### Awareness of Obligations

The Approved Provider is committed to having a sound understanding of its legal obligations and will maintain an ongoing and contemporary understanding of the responsibilities of themselves and their employees.

The Approved Provider will collaboratively develop and implement policies and procedures to assist in meeting the organisation's legal obligation. These documents will aim to reflect and articulate the responsibilities of all employees, managers and volunteers of the organisation.

### Commitment to Quality Systems and Practices

All developed and implemented practices should reflect the high-quality expected by the Approved Provider.

The Approved Provider, Nominated Supervisor and all other relevant stakeholders will be supported to collaborate on sound procedures and practices to uphold a commitment to compliant and high-quality practices.

### Responding to Non-Compliance

Any instances of non-compliance will be address with timeliness, ethical integrity and diligence.

In the event of a non-compliant or reportable incident, the Approved Provider will provide all relevant notifications to specific authorities, as it applies.

In responding to compliance incidents and concerns the Approved Provider will take a sound approach to review evidence and resources to address any applicable procedures, practices and expectations.

## Establishing Compliance

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- The service will have policies and procedures that have been developed to be consistent with the requirement of the provision of the National Quality Framework.
- The service will regularly review and update written policies for the conduct of the service to reflect best practice and legislative requirements
- The service has developed and managed the implementation of policies required by the Education and Care Services National Regulation 168 and items outlined in the National Quality Standard.
- The service's management systems ensure these polices are followed.

### Day-to-Day Compliance

- The Approved Provider will appoint a suitable and qualified Nominated Supervisor for the day-to-day management of the service's operations (see [7.1 Nominated Supervisor](#))
- The Nominated Supervisor to be responsible for day to day compliance of the NQF through:
  - Monitoring establishing systems and processes to ensure compliance with the NQF.
  - Providing ongoing training to all service employees on compliance with the NQF.
  - Monitor, record, and acting on non-compliance by the service or its employees.
  - The Nominated Supervisor is to report on all NQF compliance matters to the Approved Provider.
  - Maintain up-to-date knowledge of the Education and Care Services National Law, Regulations and the National Quality Standard which may affect or require an update to any of the policies and procedures of the service.

## Consultation and Collaboration

The Nominated Supervisor and Approved Provider will ensure that all educators within the service:

- Are consulted as appropriate in the development and modification of all relevant policies and procedures.
- Are provided with an induction and ongoing training, including relevant information to support and guide their understanding of the service's policies and procedures.
- Are provided with suitable instruction to their obligations in ensuring compliance with Education and Care Legislation on employment (see [4.1 Recruitment and Employment of Educators](#))

## Professional Support and Supervision

The Nominated Supervisor in conjunction with the Approved Provider is responsible for regular supervision and support of educators (see [4.5 Employee Performance Review and Support](#)).

## Access to Legislation

A copy of the Education and Care Services National Law and National Regulations will be made accessible at the service's premises at all times for use by the Approved Provider, Nominated Supervisor, staff members, volunteers and parents of children at the service.

## Compliance monitoring strategies will be implemented, including:

- Developing compliance management tools for use within the service on a regular basis (i.e. checklists and standards).
- Where there are expectations and responsibilities for legislative compliance, the Approved Provider will ensure policy or instruction is provided to ensure employees and volunteers to meet the service's obligation.
- The Approved Provider will ensure relevant training and instruction to all employees and volunteers is provided to outline appropriate expectations of conduct and statutory responsibilities.
- Monitor the implementation and compliance of the organisation's policies and compliance systems.
- Review and update compliance checklists on a regular basis or as new information regarding changes to the implementation of regulations, legislation or standards becomes available.
- Seeking reputable organisations to conduct external audits and to provide reports regarding compliance issues to the service on a regular basis.
- Acting on any relevant recommendations or notification to changes in compliance requirements immediately.

Information will be made accessible to families, volunteers and employees regarding the service policies and procedures in relevant handbooks as well as having access to a full copy of the service policies and procedures at the service.

Update, changes and other relevant information will be communicated to families, volunteers and employees through appropriate newsletters, flyers and other methods of communication.

## Remedying Compliance Concerns

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The service will take immediate action to remedy any non-compliance and policy/procedure breaches identified through:

- Internal compliance monitoring activities
- External compliance monitoring activities such as:
  - Spot checks undertaken by the Regulatory Authority
  - External audits

The service takes the obligation for operational compliance very seriously. Relevant management action will be taken to address any identified concerns. Where required additional external support will be sourced. Alternatively relevant actions will be set out in the QIP, with reporting to be directed back to the Approved Provider in a timely manner.

### **Compliance History Record**

In accordance with Regulation 167, the service will keep a record of its compliance history and make it accessible upon request. The history must include:

- Details of any amendment of the service approval made by the Regulatory Authority under section 55 of the Law.
- Details of any suspension of the service approval (other than voluntary suspension).
- Details of any compliance direction or compliance notice issued to the approved provider in respect of the service.

The information in the service's compliance record must not include any information that identifies any person other than the approved provider.

### **Policy and Procedure breaches**

Any action undertaken by employees, volunteers and management that is inconsistent with service policy and procedure will be considered a breach.

The action taken to remedy breaches may include:

- Reviewing the policy and procedure and updating as required
- Retraining in the policy and procedure
- Undertaking performance management procedures
- Policy and procedure breaches resulting in non-compliance with the law will be reported in accordance with policy (See [7.7 Managing Notifications](#))

### **Positive Notice Blue Card Compliance and Breach Action**

- All employees (Paid or Exemption), volunteers (V) and executive members of management (Business Owners) must hold a current and valid Working with Children Check – Blue Card.
- Prospective paid employees will not be engaged to work at the service until appropriate application for a blue card has been made. Required evidence of such application will be maintained at the service.
- A blue card register will be maintained at the service containing copies of blue cards of all employees, volunteers and executive members of management.
- The service will use the Blue Card Organisational Portal to manage the status of personnel's' blue cards.
- Any breaches to these obligations will be reported to the Approved Provider and immediate action taken to remedy the breach.

In addition to compliance with the Education and Care Services National Law, 2010 and Regulations 2011, the service will actively work towards compliance with:

- Family Assistance Law (Child Care Subsidy).
- Working with Children (Risk Management and Screening) Act 2000 and Regulations 2011.
- Child protection and workplace safety legislation.
- Employment Legislation, including:
  - Industrial Relations Act (2016)
  - Workplace health and safety legislation and relevant codes of practice.
  - Anti-discrimination legislation
- Any other law(s) that impacts or prescribes how the provision of OSHC should be conducted.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law and Regulations
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Anti-Discrimination Act 1991 (Qld)
- Building Fire Safety Regulation 2008 (Qld)
- Child Employment Regulation 2016 (Qld)
- Child Protection Act 1999 (Qld)
- Competition and Consumer Act 2010 (Cth)
- Criminal Code Act 1899 (Qld)
- Disability Discrimination Act 1992 (Cth)
- Education (General Provisions) Act 2006 (Qld)
- Electrical Safety Act 2002 (Qld)
- Fire and Emergency Service Act 1990 (Qld)
- Food Act 2006 (Qld)
- Human Rights Act 2019 (Qld)
- Industrial Relations Act 2016 (Qld)
- Information Privacy Act 2009 (Qld)
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- Public Health Act 2005 (Qld)
- Public Records Act 2002 (Qld)
- Racial Discrimination Act 1975 (Cth)
- Sex Discrimination Act 1984 (Cth)
- Superannuation Guarantee (Administration) Act 1992 (Cth)
- Tobacco and Other Smoking Products Act 1998 (Qld)
- Transport Operations (Passenger Transport) Standard 2010 (Qld)
- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000 (Qld)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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# 7.5 Governance and Management

## Policy Statement

The Approved Provider is responsible to ensure that appropriate governance arrangements - the way its business is organised, managed and operated - are in place to guide service decision making, ensuring effective oversight for those with management and control of the service.

### Persons With Management and Control

Guided by regulatory requirements, any persons appointed to relevant leadership and governance responsibilities must be able to demonstrate they are fit and proper people, including—

- Holding relevant working with children checks.
- Evidence of management capability.
- Ability to obtain relevant background/probity checks (National Police Check etc).

Persons with management and control will be guided by the organisation's constitution and relevant legislation when discharging responsibilities.

## Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [1.4 Sleep and Rest](#)
- [1.5 Food and Nutrition](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [3.3 Non-Smoking, Illicit Substance and Alcohol-free Environment](#)
- [3.4 Children's Toileting](#)
- [3.5 Emergency and Safety Equipment](#)
- [4.1 Recruitment and Employment of Educators](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [5.1 Interactions and Relationships with Children](#)
- [5.2 Positive Behaviour Support Practices](#)

- [6.1 Access](#)
- [6.2 Enrolment and Orientation](#)
- [6.3 Bookings and Cancellations](#)
- [6.4 Acceptance and Refusals of Authorisation](#)
- [6.5 Interactions and Communication with Families](#)
- [6.7 Feedback and Complaints Handling](#)
- [6.8 Visitors](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)
- [7.14 Service Closure](#)
- [7.17 Self-Assessment and Quality Improvement](#)

## Roles and Responsibilities

|                   |   |
|-------------------|---|
| Approved Provider | <ul style="list-style-type: none"> <li>• Ensure relevant suitability and management capability checks are undertaken and reported.</li> <li>• Provide quality management practices to support and guide the service's employees and leadership.</li> <li>• Ensure quality and risk management practices are sound to uphold the principles of protecting children from harm and risk to safety.</li> <li>• Fulfil reporting and notifying obligations.</li> </ul> |
|-------------------|---|

## Procedures

### Governance

#### Fit and Proper Persons

When electing individuals for responsibilities of management and control of the Approved Provider, the members of the association will consider the fitness and propriety of nominated individuals, as they will need to demonstrate these characteristics to the Regulatory Authority to hold Provider Approval.

Management capability includes (but is not limited to) the individuals' qualifications, knowledge, skills and experience in the areas of:

- Governance.
- Employment.
- Quality assurance and compliance.
- Risk management.

#### Decision-Making

The Approved Provider will ensure decision making is consistent with the organisation's governance framework and the organisation's constitution which sets out broader principles of how the organisation is managed and controlled.

The individuals with management and control of the Approved Provider will ensure that decision making is informed by and consistent with the requirements articulated in the relevant laws and provisions, including (but not limited to):

- The P&C’s or other entity’s Constitution.
- In the case of a P&C, the Accounting Manual.
- Queensland Education (General Provisions) Act if applicable.
- Education and Care Services National Law and Regulations.
- Family Assistance Law.

### Sustainable Operations and Handover

Relevant documentation and plans are created to set out and describe key systems of work to support both the efficient operations of the service and effective handover of people with management and control. These plans and structures ensure that there is minimised impact when there are changes in the executive committee.

## Day-to-Day Management and Leadership

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### Structure

The service has structured its staffing arrangements to ensure an organised, systematic, and effective approach to daily management. While the Nominated Supervisor is the person principally responsible for the day-to-day management and organisation of the service, they are supported by a leadership team, including Responsible Persons to supervise and coordinate relevant sessions of care.

### Responsibilities

Broadly the Nominated Supervisor is responsible for—

|  |   |
|--|---|
| <b>Staffing and Supervision</b>        | <ul style="list-style-type: none"> <li>• Develop and implement rosters to always ensure appropriate staff-to-child ratios and adequate supervision.</li> <li>• Conduct daily staff briefings to communicate the day's agenda, any special requirements, and to address queries or concerns.</li> <li>• Encourage and facilitate ongoing professional development for staff to enhance their skills and knowledge.</li> <li>• Review and update staff training needs, ensuring adherence to current best practices.</li> </ul> |
| <b>Maintaining a Safe Environment</b>  | <ul style="list-style-type: none"> <li>• Ensure daily safety checks of indoor and outdoor areas are carried out, ensuring spaces are safe and prepared for children.</li> <li>• Ensure cleanliness and hygiene through a consistent cleaning schedule.</li> <li>• Ensure all staff are trained and proficient in executing emergency procedures and other key procedures.</li> </ul>  |
| <b>Child Arrival and Departure</b>     | <ul style="list-style-type: none"> <li>• Ensure procedures are followed for children's arrivals and departures, keeping accurate attendance records.</li> <li>• Verify authorisation and identity of individuals collecting children.</li> </ul>  |
| <b>Communication and Collaboration</b> | <ul style="list-style-type: none"> <li>• Establish clear and consistent communication channels with families, keeping them informed about their child’s participation, behaviour and any relevant service updates.</li> <li>• Engage with staff, acknowledging their input, and providing support as needed.</li> </ul>   |

|                               |  |
|-------------------------------|--|
| <b>Administration</b>         | <ul style="list-style-type: none"> <li>• Oversee administrative tasks including enrolment management, record-keeping, and regulatory documentation.</li> <li>• Manage financial operations including fee collection, budgeting, and resource allocation.</li> </ul>    |
| <b>Continuous Improvement</b> | <ul style="list-style-type: none"> <li>• Regularly assess and evaluate the service’s practices and programs, identifying areas for improvement.</li> <li>• Implement strategies for continuous improvement, incorporating feedback from staff and families.</li> </ul> |
| <b>Reporting</b>              | <ul style="list-style-type: none"> <li>• Notify the Approved Provider of relevant information and circumstances.</li> <li>• Where needed, report relevant information to the Regulatory Authority on behalf the service.</li> </ul>                                    |

### Accountability

The Approved Provider will monitor the Nominated Supervisor’s performance in managing the service’s function. Should there be concerns regarding the operations and leadership of the service, the Approved Provider will take relevant action to address these.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA7 – Governance and leadership

### Additional Regulatory Context and Guidance

- Education (General Provisions) Act 2006 (Qld)
- A New Tax System (Family Assistance) Act 1999 (Cth)
- P&C Constitution
- National Principles for Child Safe Organisations

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 7.6 Information Handling (Privacy and Confidentiality)

### Policy Statement

In providing education and care, the service collects, uses and stores personal and sensitive information relating to families, children, staff and others. The service respects the privacy of all individuals and only obtains information which it needs to protect and care for children and handles that information with confidentiality and sensitivity and in keeping with legal requirements.

The service respects and supports the principles of privacy and confidentiality and complies with the Australian Privacy Principles in relation to information gathered and stored by the service. The Approved Provider recognises their duty to ensure information collected by the service is not shared beyond the legislated provision, including:

- to the extent necessary for the medical treatment of a child.
- with the parent of the child.
- with the Regulatory Authority or an authorised officer.
- where authorised or permitted by law.
- with written consent with the person providing the information.

The service recognises the rise in personal devices being able to covertly capture and distribute personal information and images. This behaviour is not tolerated as it jeopardises the dignity, privacy and safety of children. Any covert recording by educators, parents or other stakeholders will lead to relevant management action.

### Related Policies

- [1.1 Educational Program Development and Implementation](#)
- [1.3 Excursions](#)
- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [4.2 Working with Children Check \(Blue Card\) Management](#)
- [4.3 Volunteers and Students](#)
- [4.4 Code of Conduct](#)
- [4.5 Employee Performance Review and Support](#)
- [4.6 Employee Qualifications – Monitoring Progress](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.7 Managing Notifications](#)
- [7.8 Policy Development, Review and Implementation](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)

- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)
- [7.13 Workplace Health and Safety](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"> <li>• Ensure staff are instructed on their role and responsibility in maintaining confidential and private information.</li> <li>• Ensure there are suitable facilities and practices maintained by the service to uphold the commitment of privacy and confidentiality.</li> </ul>                                 |
| Nominated Supervisor | <ul style="list-style-type: none"> <li>• Ensure documentation is kept in a manner that upholds the privacy and confidentiality of children and families.</li> <li>• Maintain record to assist in the delivery of quality care and education.</li> <li>• Support the Approved Provider's obligation to maintain compliance with regulations.</li> </ul> |

## Procedures

### Record Keeping

The service aims to manage personal and sensitive information in an open and transparent way, with clear guidelines relating to how it is collected and stored.

The service will only collect and record information needed in order to deliver its service, including the responsibilities to protect and care for children, families and educators.

The service is required to maintain the following records and information (see table below):

| Record Type                       |                                      | Nature of Information  | Storage                      |
|-----------------------------------|--------------------------------------|--|------------------------------|
| <b>Child &amp; Family Records</b> | Enrolment Records                    | <ul style="list-style-type: none"> <li>• Personal information for children and families.</li> <li>• Centrelink Customer Reference Numbers</li> <li>• Authorisations.</li> <li>• Names, addresses and contact details for family members and authorised nominees.</li> <li>• Court orders/parenting plans.</li> <li>• Children's medical/additional needs details.</li> </ul> | OWNA<br>(Archive – hardcopy) |
|                                   | Health and Medication Records        | <ul style="list-style-type: none"> <li>• Medical conditions details (history, diagnosis, support)</li> <li>• Risk management plans</li> <li>• Action/management plans (including treatment and medication)</li> <li>• Medical practitioner/s details</li> <li>• Immunisation status</li> </ul>   | OWNA<br>(Archive – hardcopy) |
|                                   | Incident, Injury, Trauma and Illness | Details of: <ul style="list-style-type: none"> <li>• Events including observations, treatment and/or response.</li> <li>• Witnesses.</li> <li>• Notification and communication.</li> </ul>   | OWNA<br>(Archive – hardcopy) |
|                                   | Accounts                             | <ul style="list-style-type: none"> <li>• Account statement, transactions, and fees paid/owed.</li> </ul>   | OWNA                         |
| <b>Attendance Records</b>         |                                      | <ul style="list-style-type: none"> <li>• Days of attendance and absence</li> <li>• Persons signing in and out</li> </ul>   | OWNA<br>(Archive – hardcopy) |

|   |  |  |                     |
|---|--|--|---------------------|
| <b>Evaluations of the Educational Program</b> |  | <ul style="list-style-type: none"> <li>Evidence of the development of the program (reflections, observations, learning stories, planning documents).</li> <li>Evaluations of children’s wellbeing, development and learning (reflections, observations, photos and stories).</li> </ul>  | SharePoint and OWNA |
| <b>Staff and Volunteer Record</b>             | Employee Personal Details                        | <ul style="list-style-type: none"> <li>Personal information on employees such as emergency contact details, qualifications, recognised training and places of previous employment.</li> <li>Blue card records.</li> <li>Rosters and timesheets.</li> <li>Detail of performance reviews and workplace matters.</li> <li>Details of income and payment information.</li> </ul> | OWNA and SharePoint |
|   | Volunteer  | <ul style="list-style-type: none"> <li>Records of volunteers and students including personal details and days and hours participating.</li> </ul>  |                     |
|   | Nominated Supervisor                             | <ul style="list-style-type: none"> <li>Record of the nominated supervisor and any person in day-to-day charge of the education and care, including suitability information.</li> </ul>   |                     |
|   | Responsible Person                               | <ul style="list-style-type: none"> <li>A record of the name of the responsible person at each session the service operates.</li> </ul>   |                     |
|   | Educational Leader                               | <ul style="list-style-type: none"> <li>A record of the name of the person designated as the Educational Leader.</li> </ul>   |                     |
|   | Workplace Health & Safety                        | <ul style="list-style-type: none"> <li>Details of accidents, incidents and complaints.</li> <li>Risk management assessments.</li> <li>Copies of notifications supplied to WHS.</li> </ul>  |                     |
| <b>Management Records</b>                     | Records of the service’s compliance with the Law | Records of any amendment, suspension, compliance notice or compliance direction, including: <ul style="list-style-type: none"> <li>Reasons.</li> <li>Dates of effect and/or end dates.</li> <li>Steps to be take.</li> </ul>   | SharePoint          |
|   | Complaints and Feedback Records                  | Information may contain: <ul style="list-style-type: none"> <li>Details of grievances, allegations, communication.</li> <li>Identifying information about complainants.</li> <li>Investigation details.</li> <li>Recommendations and outcomes.</li> </ul>  | SharePoint          |

### **Informed Consent**

The service sets out the enrolment process to provide informed consent when supply information to the service. Any use of personal information by the service is solely for providing care to the child (including communicating learning outcomes of the program) and any other relevant duty to ensure the child’s safety, welfare and protection.

Should the service seek to share information beyond this purpose, additional consent will be obtained from the parent.

### **Accuracy of Records**

The service will ensure the accuracy of enrolment information by requesting parents to check, update or confirm the accuracy of records from time-to-time.

### **Access and Requests for Information**

Parents may request information from the Approved Provider with regard to their child/ren’s participation and attendance at the service, with the exception of where there is a prohibition from a court order (or similar) preventing this access.

Parents are entitled access to:

- Documentation around their children’s learning and participation in the educational programs.
- Incident, injury, trauma and illness record.
- Medication record.
- Attendance record.
- Their child’s enrolment record.

However, if any of these documents will disclose the *personal information* of one of the following people, written consent of that person’s information being disclosed must first be obtained before the service can share the information with the parent—

- a parent of a child, other than the person requesting the information,
- a person required to be notified of an emergency if a parent cannot be contacted,
- an authorised nominee of a child,
- a person authorised to consent to medical treatment or to authorise the administration of medication to a child,
- a person authorised to authorise an educator to take a child outside the service premises, or
- a person authorised to authorise the service to transport or arrange transportation of a child.

When a request has been made by a parent, the service will confirm the consent before a disclosure is made. Consent may be withdrawn at any time after it has been given, however, withdrawal of consent must be in writing.

*Personal information* is defined in the Privacy Act 1988 (Cth) and includes any information about an identified individual, such as their home address, email address, telephone number, date of birth, medical records, bank account details, and tax file number.

Requests for information should be directed to the Nominated Supervisor in the first instance, alternatively, the Responsible Person. Where there are concerns held to the right to information or breaching of confidentiality, all requests will be managed by the Approved Provider.

### **Document Retention**

The service will maintain a document retention schedule, which will specify the records to be kept by the service and the length of time required by relevant provisions.

The Nominated Supervisor will report the details of the retention and disposal of documentation/records every year to the Approved Provider.

The Nominated Supervisor will prepare documentation for archiving each year. Archived documents will be clearly labelled with planned retention timelines. All archived documentation will be managed by the Approved Provider and stored securely.

The service recognised the current disposal freeze (Public Records Act 2002) applying to records of allegations, investigations or evidence of child sexual abuse and records containing possible corroborating evidence to support future allegations of child sexual abuse.

### **Information Security**

The Approved Provider will ensure that information is not divulged or communicated, directly or indirectly, to another person other than when authorised by the parent or allowed/required by law.

The service protects the individual’s privacy by ensuring that the information collected is stored securely, including--

- All relevant hard copy records will be stored in a locked filing cabinet.

- All electronic documents or information will be stored-
  - on devices owned or subscribed by the service only.
  - with suitable password protection/account management.

The Approved Provider is to have administrator/global access to all accounts operated by the service. The Approved Provider is to administer the relevant privileges to allow users access to systems and information accessible to the service's employees/users.

Where a person has responsibility for the security of private and sensitive information, the service expects a high degree of professionalism and integrity is maintained. Any breaches of confidential information will be treated seriously and may result in disciplinary action.

All relevant persons are bound by the code of conduct in the sharing of information and maintaining confidentiality. Breaches of the expectation in keeping information confidential will be treated seriously and may result in relevant action taken by the Approved Provider.

### **Sharing of Information in the Protection from Harm**

The Approved Provider, Nominated Supervisor and educators are free from liability or breaching Privacy Principles when sharing confidential information, if they are acting honestly and if their actions in doing so are consistent with the purpose of information sharing under the Child Protection Act 1999.

### **Confidentiality and Conduct**

The Approved Provider, Nominated Supervisor and employees of the service are bound by the code of conduct in the sharing of information and maintaining confidentiality. Breaches of the code will be treated seriously as outlined by the relevant disciplinary policy.

All parents, guardians, and stakeholders attending CROSHC have a shared responsibility to uphold the privacy, dignity, service and safety of all children, families, and staff. To ensure a respectful and secure environment, the covert use of personal electronic devices—including smartphones, smartwatches, and wearable technology such as smart glasses—to record, photograph, or video individuals without their explicit consent is strictly prohibited. Any unauthorised capturing or distribution of images or recordings not only violates our privacy and confidentiality policy but may also breach legal protections governing personal information. We ask all visitors to be mindful of their responsibilities and to respect the privacy of others by refraining from any form of covert recording while on the premises. Any concerns regarding privacy should be directed to OSHC management for appropriate action. Any person found engaged in such conduct will be subject to disciplinary action, including restriction for using the service.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.175 Offence relating to requirement to keep enrolment and other documents
- Education and Care Services National Regulations:
  - R.87 Incident, injury, trauma and illness record
  - R.92 Medication record
  - R.145 Staff record
  - R.151 Record of educators working directly with children
  - R.158 Children's attendance record to be kept by approved provider
  - R.160 Child enrolment records to be kept by approved provider and family day care educator
  - R.161 Authorisations to be kept in enrolment record
  - R.162 Health information to be kept in enrolment record
  - R.167 Record of service's compliance

- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.181 Confidentiality of records kept by approved provider
- R.183 Storage of records and other documents
- R.184 Storage of records after service approval transferred
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership

**Additional Regulatory Context and Guidance**

- Information Privacy Act 2009 (Qld)
- Child Protection Act 1999 (Qld)
- A New Tax System (Family Assistance) Act 1999 (Cth)
- Department of Education and Training Child Care Provider Handbook
- Public Records Act 2002 (Qld)

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 7.7 Managing Notifications

### Policy Statement

The Approved Provider recognises its obligation to ensure sound reporting and information sharing is established and effective. The service will ensure notifications are made as required and to the relevant authority. The Approved Provider recognises as an approved Education and Care Service it must notify authorities within statutory guidelines to ensure compliance.

This policy and procedure developed by the service aims to identify specific obligations for staff and management to ensure proper internal and external reporting.

The Approved Provider also recognises their duty to comply with Education and Care Services National Law Sections 39, 56, 59, 173 & 174 and Education and Care Services National Regulations 12, 36, 37, 175, 176, & 168 (2)(b)(c)(d)(e)(o).

### Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [7.1 Nominated Supervisor](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Seek appropriate advice from the Regulatory Authority, when required.</li><li>• Report all matters outlined in the regulations for notification to the Regulatory Authority.</li><li>• Report other notifiable information to relevant bodies as required.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Report relevant matters to the Approved Provider as relevant.</li><li>• Seek support and advice from the Approved Provider for significant matters.</li><li>• Communicate with parents routinely, ensuring significant matters are notified in a timely manner, and at a minimum within 24 hours.</li><li>• Support staff to report and record information timely and accurately.</li><li>• Ensure compliant storage of reports and information.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Record and report information necessary for notification to the Regulatory Authority.</li><li>• Seek support from the Nominated Supervisor (or relevant other) where required.</li></ul>   |

### Procedures

#### National Quality Framework (Regulatory) Notifications

##### NQAITS Portal – Notification Submissions

The relevant delegate must make the submission on behalf of Coomera Rivers OSHC to the Regulatory Authority using the National Quality Agenda IT System (NQA IT System).

The management of user accounts will be delegated at the discretion of the Approved Provider, it is expected this would include:

- Any Nominated Supervisors.
- Relevant Responsible Persons and/or administrators.

Procedures specify the circumstances where notifications are to occur and the role responsible for making relevant submission. For circumstances outside of incidents and complaints, it will be a representative of the Approved Provider who will manage notifications the submission of attachments.

### Regulatory Authority Notifications

The National Law and Regulations sets out particular circumstances and information that must be provided to the Regulatory Authority within strict timeframes. These are outlined in the following table:

| <b>Incidents and Complaints</b>   |  |  |
|---|--|--|
| Serious incident - Death of a child   |  | <b>As soon as practicable, but within 24 hours</b> |
| Serious incident  | Any incident involving serious illness of a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital  | <b>Within 24 hours</b>                             |
|   | Any incident involving serious injury or trauma to a child while being educated and cared for which the child attended or ought reasonably to have attended a hospital, or a reasonable person would consider that the child would require urgent attention from a registered medical practitioner |  |
|   | Any emergency for which emergency services attended  |  |
|   | A child is missing or cannot be accounted for or appears to have been removed from the premises by a person not authorised by a parent   |  |
|   | A child is mistakenly locked in or out of the premises or any part of the premises   |  |
| Any complaint alleging that a serious incident has occurred or is occurring at an education and care service, or the National Law has been contravened  |  | <b>Within 24 hours</b>                             |
| Any incident that requires the approved provider to close, or reduce the number of children attending the service for a period  |  |  |
| The centre-based service is educating and caring for extra child/ren due to an emergency  |  |  |
| Any circumstance at the service that poses a risk to the health, safety or wellbeing of a child attending the service   |  | <b>Within 7 days</b>                               |
| Any incident where the approved provider reasonably believes that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service |  |  |
| Allegations that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service  |  |  |
| <b>Change to information about Approved Provider</b>  |  |  |
| Change to address or contact details of approved provider   |  | <b>Within 7 days</b>                               |
| Any change relevant to approved provider's fitness and propriety  |  |  |

|  |  |
|--|--|
| The appointment of receivers or liquidators to the approved provider or any matters that affect the financial viability and ongoing operation of the service                               |  |
| Death of approved provider   |  |
| Notice of any appointment or removal of a person with management or control of service   | <b>Within 14 days</b>  |
| Notice of change in name of approved provider  |  |
| <b>Change to information about education and care service</b>  |  |
| Any change to the hours and days of operation of the service   | <b>Within 7 days</b>   |
| Any proposed change to the premises  |  |
| Ceasing to operate the education and care service  |  |
| A nominated supervisor is no longer employed at the service, is removed from the role or withdraws consent to the nomination   |  |
| Adding nominated supervisor(s)   | <b>Ideally prior to commencement, but no more than 14 days after</b> |
| Suspension or cancellation of a working with children card or teacher registration of a nominated supervisor, or disciplinary proceedings of a nominated supervisor under an education law | <b>Within 14 days</b>  |
| Intention to transfer service approval   | <b>At least 42 days</b>  |

## Department of Education and Training Notification (CCS)

All CCS reporting is submitted via OWINA or the Provider Entry Point (PEP). Coomera Rivers OSHC must report relevant information to ensure compliance, including about the following matters:

| <b>Matters to be notified</b>  | <b>Timeframe</b>   |
|--|--|
| The number of anticipated vacancies (an ongoing OSHC full-session vacancy).  | By 8.00 pm (AEST) each Friday.                               |
| The total hourly fee charged by the service including any change to the fee information.   | <b>Within 14 days</b>  |
| Any change to the operating hours.   |  |
| Ceasing to operate an approved child care service.   | <b>At least 42 days</b>                                      |
| Ceasing to operate to avoid being in breach of a law of the Commonwealth, a state or a territory or due to circumstances beyond the provider's control (when 42 days' notice cannot be given). | <b>Within 24 hours after ceasing to operate the service.</b> |
| Change of physical or postal address of the provider or the service's premises.  | <b>No later than 30 days</b>                                 |
| Change to the name of the provider or the service.   | <b>Within 14 days</b>  |

|  |                        |
|--|------------------------|
| Change contact details (email, website, phone, fax) of the provider or service:  |                        |
| Information about any new person with management or control of the provider (including any person who becomes responsible for the day-to-day operation of any of the provider's approved child care services)  | <b>Within 7 days</b>   |
| Change of the name or contact details for a person with management or control of the provider (including any person who is responsible for the day-to-day operation of any of the provider's approved child care services)   |                        |
| The provider becomes aware, because of a background check undertaken for a specified person, that the person: <ul style="list-style-type: none"> <li>▪ has a serious conviction or finding of guilt for any of the following offences under a law of Australia or of a foreign country <ul style="list-style-type: none"> <li>• an indictable offence punishable by a maximum of two years imprisonment or 40 penalty units</li> <li>• an offence involving violence or a sexual offence</li> <li>• an offence involving fraud, stealing or dishonesty</li> </ul> </li> <li>▪ is an undischarged bankrupt, or</li> <li>▪ was a director or secretary of a corporation when the corporation went into administration, receivership or liquidation, or at any time during the 12 months beforehand.</li> </ul> |                        |
| An event or circumstance in relation to a person with management or control of the provider (including a person responsible for the day-to-day operation of any of the provider's approved child care services) that reasonably indicates that the person is not likely to be a fit and proper person to be involved in the administration of Child Care Subsidy.  |                        |
| A person stops having management or control of the provider (including when a person stops having day-to-day responsibility for the operation of any of the provider's approved child care services).  |                        |
| An educator obtains a child care qualification from a registered training organisation   |                        |
| A provider or a person with management or control of the provider obtains an interest, or is likely to obtain an interest, in a business which may affect their ability to comply with Family Assistance Law, where the approval may benefit the business or where a conflict of interest might reasonably be perceived to exist.  |                        |
| Change in the status of a working with children card (blue card) for anyone who is required to have such a card  | <b>Within 24 hours</b> |
| The provider enters into administration, receivership, liquidation or bankruptcy, and the details of this event.   |                        |
| Unexpected closure of any of the provider's approved child care services due to unforeseen circumstances.  |                        |
| A serious conviction or finding of guilt of a person with management or control of the provider (including a person who becomes responsible for the day-to-day operation of any of the provider's approved child care services),   |                        |

## Additional Reporting

## Mandatory Reporting (Child Protection)

Where a staff member of the service has a reasonable suspicion, a child may be in need of protection they are to follow the [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#) policy and report the matter to Child Safety.

## Work Health Safety – WHSQ Notifications

As a business and employer, Coomera Rivers OSHC has an obligation to report incidents to Workplace Health and Safety Queensland, if any of the following happens at the service or is cause by the service—

|   |   |
|---|---|
| Death of a person                       | Where the cause of death is related to the running of the business.   |
| A serious injury or illness of a person | <p>An injury or illness requiring the person to have-</p> <ul style="list-style-type: none"><li>• Immediate treatment as an in-patient in a hospital.</li><li>• Immediate treatment for:<ul style="list-style-type: none"><li>○ The amputation of any part of his or her body</li><li>○ A serious head injury</li><li>○ A serious eye injury</li><li>○ A serious burn</li><li>○ The separation of his or her skin from an underlying tissue.</li><li>○ A spinal injury</li><li>○ The loss of a bodily function</li><li>○ Serious lacerations</li><li>○ Medical treatment within 48 hours of exposure to a substance</li></ul></li><li>• Any infection to which the carrying out of work is a significant contributing factor.</li></ul> |
| A dangerous incident                    | <p>An incident that exposes a worker, or any other person, to a serious risk to their health or safety from an immediate or imminent exposure to (non-exhaustive list):</p> <ul style="list-style-type: none"><li>• An uncontrolled implosion, explosion or fire.</li><li>• Electric shock.</li><li>• The fall or release from a height of any plant, substance or thing.</li><li>• The collapse or partial collapse of a structure.</li></ul>  |

WHS notification will be made by a P&C representative via phone (1300 362 128) or the [online incident notification form](#).

## Public Health

While unlikely, there is potential for the service to report relevant occurrence of infectious diseases to the local Public Health Unit. Circumstances surrounding notifications and reporting is set out in policy 4.2 Infectious Diseases.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law:
  - s.173 Offence to fail to notify certain circumstances to Regulatory Authority
  - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulations:

- R.12 Meaning of serious incident
- R.168 Education and care service must have policies and procedures
- R.170 Policies and procedures to be followed
- R.171 Policies and procedures to be kept available
- R.174 Time to notify certain circumstances to Regulatory Authority
- R.174A Prescribed information to accompany notice
- R.175 Prescribed information to be notified to Regulatory Authority
- R.176 Time to notify certain information to Regulatory Authority
- National Quality Standard:
  - QA2 – Children’s health and safety
  - QA7 – Governance and leadership

**Additional Regulatory Context and Guidance**

- Information Privacy Act 2009 (Qld)
- Work Health Safety Act 2011 (Qld)
- National Principles for Child Safe Organisations

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 7.8 Policy Development, Review and Implementation

### Policy Statement

Coomera Rivers OSHC acknowledges the fundamental need for effective policy and procedures to guide and manage the service's delivery and the duties of employees. The service's policies should reflect the statutory obligation of the service and its employees. Therefore, policies should be developed through integrating a wide range of relevant information sources including legislation, guidelines and operating handbooks.

The service's policies and procedures will undergo regular review to support the effectiveness and coverage. The Approved Provider will maintain the authority to approved and endorse developed policy; however, the services employees will have an active role in the facilitating policy review and the drafting of new and amended policy. The service's suite of policies will be reviewed at least **annually** or where required.

The Approved Provider also recognises their duty to comply with Education and Care Service National Regulations 168, 170-172 to ensure relevant policies are developed, accessible by employees and families. The service will ensure it upholds adequate notification to families where there are changes to policies.

### Related Policies

- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Develop and implement required policies for Regulation compliance.</li><li>• Support ongoing development and review of service policies to drive quality education and care.</li><li>• Review and endorsed (ratify) proposed policy suggestions.</li><li>• Ensure access and compliance with policies, addressing concerns as they arise.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Support the Approved Provider through identifying, drafting and proposing amended changes to policies.</li><li>• Maintain a record of amendments and changes to service's policies.</li><li>• Maintain accurate knowledge of service's requirements and advise the Approved Provider of any required policy developments.</li><li>• Monitor and supervised the implementation and compliance of policies.</li><li>• Ensure employees, families and other relevant stakeholder are provided with access and information to policies as required.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Contribute ideas, wishes and insights to the quality and coverage of policies.</li><li>• Ensure policies and procedures are followed at all times.</li></ul>  |

### Procedures

#### Policy and Procedure Quality Standards

- The service will develop policies and procedures which reflect the true nature of the service's operations.
- Where possible, specific roles will be identified to outline responsibilities and delegation.
- Translating legislative obligations will be reflected and explicitly stated.

- The service will ensure that generic policy documents, samples and templates adopted are reviewed and customised to meet the individual and unique circumstance of the service.
- All policies will include references to external documentation, resources, guidelines and principles used to develop or guide the development of the policy.
- Version control will be used to manage policy development and communication records.
- Policy sourcing should also take into considerations other provisions such as copyright laws.

### **Policy Review**

- Policies will be developed or amended either as needed or as a result of periodic review.
- The suite of policies will be reviewed by the Nominated Supervisor each year. The Nominated Supervisor can delegate out aspects of the review to suitably capable educators. The Nominated Supervisor will present a report of the review to the Approved Provider
- Any proposed amendments or policy development will be drafted and submitted to the Approved Provider for ratification/approval.

### **Policy Approval**

- Policies and procedures may be drafted by
  - Suitably capable employees.
  - the Approved Provider.
  - with prior approval, a appropriate third party.
- Where substantial change is being proposed, the writer should consult with the Approved Provider to discuss a summary of the proposal. Additional consultation may be directed as part of policy development.
- The Approved Provider will review proposed policies and can either:
  - ratify,
  - reject, or
  - request amendments.
- All ratified policies will have the date and version recorded.

### **Policies Compliance**

- Employees are expected to maintain compliance with service policies at all times.
- Employees will be provided with adequate induction to orientate their knowledge of the service's procedures and expectations for performance and conduct.
- Policies will be made accessible, and where possible, will outline clear expectations and responsibilities to support employees in their duty.
- Where employee's conduct for performance is not consistent with the service's policies the employee will be managed by the procedures outlined in [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#).

### **Policy Accessibility**

- The service's full policy and procedure manual will be available at the service's premises for employees, volunteers and families to access when required.

### **Policy Notification and Communication**

- The Approved Provider will ensure families are notified at least 14 days before any policy or procedure referred to in National Regulation 168 takes effect.
- Notification to families will include email messages and signage at the service.
- The date of notification will be recorded on the policy (where relevant)

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Regulations:
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA4 – Staffing arrangements
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Work Health Safety Act 2011 (Qld)
- Working with Children (Risk Management and Screening) Act 2000
- National Principles for Child Safe Organisations

#### Polic Controls

Endorsed by: Approved Provider

Date Endorsed: 01 September 2023

Date implemented: 14 September 2023

Version: v.2023-1

## 7.9 Budgeting, Procurement and Financial Planning

### Policy Statement

The Coomera Rivers OSHC Approved Provider seeks to implement measures which provide financial protection and minimise the risk of fraudulent, inappropriate or negligent financial practices. The service takes a responsible approach to fiscal planning and spending to ensure these risks are well managed. The service's financial management practices are designed and implemented to protect both the financial reputation of the organisation and its ongoing viability.

To ensure the effective and efficient management of the service, the Approved Provider and Nominated Supervisor will work collaboratively together to develop workable and responsible budgets and financial planning guidelines for the ongoing operation of the service.

The following principles will be adopted and reflected all purchasing decisions of the service:

- Open, transparent and effective communication.
- Value for money.
- Enhancing the capabilities of local business and industry.
- Environmental protection.
- Ethical behaviour and fair dealing.

### Related Policies

- [7.5 Governance and Management](#)
- [7.10 OSHC Fees and Family Accounts](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

### Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish sound processes for the service's financial management consistent with established financial management procedures of the school.</li><li>• Ensure budgets are prepared and are adequate to meet the needs of providing quality education and care.</li><li>• Use judgement and act in a manner that supports the principles of the policy for purchasing decision.</li></ul>   |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Monitor the service's day-to-day spending and financial management, ensuring compliance with organisational policy and procedures.</li><li>• Support the Approved Provider in preparing, reporting and reviewing service budgets and financial reports.</li><li>• Coordinate and supervise the processing of fees and income.</li><li>• Use judgement and act in a manner that supports the principles of the policy for purchasing decision.</li><li>• Report any concerns or issues immediately to the Approved Provider.</li></ul> |
| All Staff            | <ul style="list-style-type: none"><li>• Follow the service's procedures for spending within the level of authority, approval or delegation.</li></ul>   |

### Procedures

#### Annual Budget

1. A service budget will be prepared for by the Approved Provider, this will provide guidance on spending and additional resourcing for the service.
2. The budget will reflect the provision of quality care are include at least the following items:
  - a. Staffing arrangements (remuneration and associated costs for qualified and adequate staff)
  - b. Facilities and asset maintenance/replacement
  - c. Program, medical and safety equipment (or replacement)
  - d. Professional development needs
  - e. Costs of care (food, consumables etc.)
3. The Approved Provider and Nominated Supervisor may seek external expertise to inform budgets using relevant industry standards.

The service’s approved budget will form the standard purchasing delegation for the Nominated Supervisor to purchase or procure items using the following guide to approval.

### **Purchasing and Procurement**

|                        |   |
|------------------------|---|
| Items under \$500      | <ul style="list-style-type: none"> <li>• General purchasing for day-to-day operational items such as groceries, consumables, arts and crafts materials and replaceable items such as sports equipment will be done in accordance with the approved service budget by (or overseen by) the Nominated Supervisor.</li> <li>• The Approved Provider will ensure that the Nominated Supervisor has access to accounts for the efficient purchasing of day to day items.</li> <li>• Purchasing of items of less than \$500 includes the use of petty cash or use of bank or other business accounts (e.g. Officeworks or grocery account).</li> </ul>  |
| Items \$500 to \$5,000 | <ul style="list-style-type: none"> <li>• The purchase value of single items over \$500 should be approved by the Approved Provider prior to purchase, even if the items have been included in the service’s annual operational budget.</li> <li>• Other purchase requests must be in writing to the Approved Provider of the service. The responsibility for ordering will be with the service Nominated Supervisor or Administrator.</li> <li>• In extenuating circumstances, authorisation for purchases of single items over \$500 may be approved in events of emergency where two approved members of the executive have been contacted and agreed to the expense. Documentation of such discussion will be made and presented at the next Approved Provider meeting.</li> </ul> |
| Items above \$5,000    | <ul style="list-style-type: none"> <li>• All purchases over \$5,000 will require two written quotes or research evidence.</li> <li>• Purchases over \$20, 000 will require three written quotes or research evidence depending on the scope of purchase.</li> </ul>   |

The Approved Provider will ensure that the purchasing policy does not negatively impact on the efficient operations of the service and that all purchase requests are followed up in a timely manner.

The service will avoid using cash for purchasing, where possible. The Approved Provider has made load ‘n’ go (pre-paid credit card) facilities available.

All purchasing will require an appropriate receipt to be retained. These financial documents will be stored and collated for bookkeeping and reporting purposes.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Regulations:
  - R.103 Premises, furniture and equipment to be safe, clean and in good repair
  - R.104 Furniture, materials and equipment
- National Quality Standard:
  - QA7 – Governance and leadership.

**Additional Regulatory Context and Guidance**

- P&C Accounting Manual
- Australian Government Child Care Provider Handbook

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

## 7.10 OSHC Fees and Family Accounts

### Policy Statement

CROSHC is committed to providing accessible, high-quality school-age care that supports the wellbeing, development, and engagement of all children and families. We recognise that effective financial management, transparent fee structures, and equitable account procedures are essential to maintaining a sustainable and reliable care service.

This policy outlines the framework for setting, collecting, and managing fees and family accounts, including the implementation of a bond system to reinforce financial responsibility and reduce the risk of bad debt. Our approach aims to balance affordability for families with the need to fund a high-standard service that reflects our philosophy, values, and regulatory obligations.

The service sets fees in line with an annual budget that is designed to:

- Ensure the delivery of safe, engaging, and enriching care programs
- Support recruitment and retention of qualified and experienced educators
- Maintain high-quality environments, resources, and facilities
- Respond to changes in government funding and market conditions

We are committed to being fair and consistent in the management of accounts, including:

- Providing families with timely and accurate billing information
- Offering flexibility and support to families experiencing hardship
- Ensuring compliance with the Education and Care Services National Regulations, specifically R.168(2)(n) and 172(2), and the CCS Provider responsibilities (Family Assistance Legislation).

To support financial sustainability, the service requires all families to pay a refundable bond upon enrolment. This bond serves as a security for unpaid fees and reflects our commitment to responsible financial planning. Clear procedures for fee payment, bond management, overdue accounts, and debt recovery ensure that the service can continue to operate efficiently and equitably.

The service also supports families in accessing the Child Care Subsidy (CCS) and ensures that all CCS-related obligations are met with accuracy, transparency, and regulatory compliance.

By maintaining a strong, well-governed fee and account management system, we are able to ensure long-term viability, high-quality programming, and continuity of care for our community.

### Related Policies

- [7.5 Governance and Management](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy \(ACCS\)](#)

### Roles and Responsibilities

#### Approved Provider

- Undertake an annual review of fees charged based on annual budget required for the provision of quality OSHC.
- Comply with Child Care Subsidy requirement including the management being 'fit and proper persons'.

|                                     |  |
|-------------------------------------|--|
|                                     | <ul style="list-style-type: none"> <li>• Ensure systems to manage fees (including third-party software) and record keeping practices reflect the requirement of the Child Care Provider Handbook.</li> </ul>   |
| Coordinator (Children and Families) | <ul style="list-style-type: none"> <li>• Respond to concerns or issues raised by parents/account holders.</li> <li>• Ensure practices reflect the requirements outlined in the Child Care Provider Handbook.</li> <li>• Communicate accrued debts and payment issues to the Approved Provider.</li> </ul>  |
| Finance Manager                     | <ul style="list-style-type: none"> <li>• Undertake the issuing of statement and collection of fees as directed by the Approved Provider and procedures below.</li> <li>• Submit session report and enrolment information to Department of Human Services.</li> <li>• Collect payments from parents/account holders and issue receipt.</li> <li>• Monitor account debts and liaise with parents/account holders.</li> </ul> |

## Procedures

The current fees for the service are included in a Fee Schedule.

Fees are reviewed annually by the Approved Provider in consultation with the Nominated Supervisor. Typically, fee adjustments will occur around Term school year. Fee increases are based on of the provision of quality Outside School Hours Care, reflecting the costs associated with meeting the service’s philosophy, goals of the program and within the framework of the service’s policy and procedures.

Communication of fee changes occur at least **14 days** before making changes to the rate of fees. Notification occurs via OWNA and the newsletter.

### Vacation Care Fees

Excursion and incursion fees are compulsory according to days booked and fees will be calculated following a cost analysis for each event.

### Issuing of Statements and Payment of Fees

Fees will be paid, for all days booked, by Friday each week.

Statements are available for all families showing the previous week’s charges and transactions. The statement will show reduced fees and estimated reduced fees for each child receiving Child Care Subsidy. Accepted payment methods is limited to direct debit only.

### Child Care Subsidy

The appropriate personnel will keep parents informed about the availability of Child Care Subsidy (CCS) by:

- Advising all parents of their option to apply for Child Care Subsidy with Centrelink through information provided in the enrolment package.
- Making information available for parents in newsletters, on websites, through Facebook page and by email.

To be eligible for reduced fees families are required to provide all personal information as requested on the enrolment form. Full fees will be payable without the subsidy until the service receives current and correct information from the family such as CRNs and that information has been acknowledged by Centrelink. Families should lodge their claim for Child Care Subsidy prior to enrolling their child. Subsidy claims can only be backdated 28 days before the claims were made.

Credit for fees already paid will be made in accordance with the Australian Government's Child Care Provider Handbook.

All CCS records will be kept for 7 years from the last entry on the record in accordance with the Australian Government's Child Care Provider Handbook (see [Policy 7.6](#)).

### **Late Collection Fees**

Closing time is 6.30pm. Parents who collect their children after this time will incur an initial fee of \$20 plus \$1 per minute thereafter.

### **Overdue Fees**

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**Prior** to an account being in arrears, parents in hardship are encouraged to discuss their matters with the Finance Manager to explore possible options and access to additional supports.

1. Where fees are not paid by 3pm on Friday, the family enrolment will be suspended immediately without notice until full payment is received by the service. All bookings will be removed from OWNA.
2. If the account is not paid in full within 7 days after the due date, the family enrolment will be cancelled immediately (unless an agreement has been put in place between the service and the family). A family will be advised of this by email. If cancelled, there is no guarantee that your space will remain available at re-enrolment.
3. Where no contact can be made, or where payment of fees continues to have not been received within the agreed timeframe, the enrolment will be suspended and the debt may be referred to our debt collection agency e-Collect or QCAT (small claims tribunal).

### **Cancellations and Refunds**

Cancellations of bookings will be made in accordance with the Bookings and Cancellations Policy (see [Policy 6.3](#)) and will incur any relevant fees and charges according to such policy.

If a family has permanently cancelled care and their account is in credit, they must provide written instructions to the service indicating:

- A refund is required and have provide account details for transfer, or
- A donation of credit balance to the service

### **Changes to Collection of Fees**

In the event the service makes changes to the amount or the way in which fees are charged, the service will communicate this change at least **14 days** before changes taking effect. Communication will occur via email, notices and newsletter updates.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Regulations:
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership

## Additional Regulatory Context and Guidance

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Department of Education and Training Child Care Provider Handbook
- Competition and Consumer Act 2010 (Cth)

### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# Coomera Rivers OSHC Fee Schedule

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Current OSHC fees as of [date]:

|                                 |                           |   |
|---------------------------------|---------------------------|---|
| Before School Care              | Permanent Bookings        | \$21.00 per session                                       |
| After School Care               | Permanent Bookings        | \$41.50 per session                                       |
| Vacation Care                   | Standard Session*         | \$100.00 per session                                      |
|                                 | Excursions and Incursions | Fees outlined for individual sessions, dependent on costs |
| Non-Notification (Absent) Fee** |                           | \$x.00 per occurrence.                                    |
| Late Collection Fee**           |                           | \$x for the first xx minutes and \$x per min thereafter   |

\*An indicative base fee only. Please refer to each vacation care program for actual costs.

\*\* Not eligible for Child Care Subsidy out-of-pocket fee reduction.

## 7.11 Administration of Child Care Subsidy and Additional Child Care Subsidy (ACCS)

### Policy Statement

The service is committed to ensuring that Child Care Subsidy (CCS) and Additional Child Care Subsidy (ACCS) is administered effectively and in accordance with relevant legislation. The procedures outlined in this policy describe the steps taken to ensure compliance with the service's obligations as an approved child care service for the purpose of administering ACCS.

Additional Child Care Subsidy provides additional fee assistance to support vulnerable or disadvantaged families and children. This support recognises the preventative and protective influence of quality child care on a child's health, wellbeing and development, and the importance of continuity of care.

There are four different payments under Additional Child Care Subsidy:

1. Additional Child Care Subsidy (child wellbeing) — to help children who are at risk of serious abuse or neglect.
2. Additional Child Care Subsidy (grandparent) — to help grandparents on income support who are the principal caregiver of their grandchildren.
3. Additional Child Care Subsidy (temporary financial hardship) — to help families experiencing financial hardship.
4. Additional Child Care Subsidy (transition to work) — to help low-income families transitioning from income support to work.

With the exception of ACCS (child wellbeing), the claims for ACCS are may by parents/caregivers via MyGov or Centrelink. Where relevant, the service will support families to access relevant fee assistance through providing information.

### ACCS (Child Wellbeing)

This particular payment provides assistance with the cost of care for families who care for a child at risk of serious abuse or neglect. Unlike other subsidies, Coomera Rivers OSHC applies for the child wellbeing subsidy on behalf of a family.

The application and management of ACCS (child wellbeing) payments will uphold the service's commitment to integrity of the CCS system.

### Reporting and Integrity

The service recognises that strategies must be in place to ensure the service complies with the requirements for the administration of Child Care Subsidy, including reporting and that the service has an obligation to design and implement procedures for the detection and prevention of fraud in relation to CCS payments.

### Related Policies

- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.5 Governance and Management](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)
- [7.10 OSHC Fees and Family Accounts](#)

## Roles and Responsibilities

|  |  |
|--|--|
| Approved Provider                            | <ul style="list-style-type: none"><li>• Ensure the service fulfils its duties for assessment of fit and proper persons.</li><li>• Ensure only authorised persons has access to the service CCS administration software</li></ul>   |
| Nominated Supervisor and Responsible Persons | <ul style="list-style-type: none"><li>• Monitor the day-to-day compliance of the services IT systems to ensure only authorised persons are accessing CCS software.</li><li>• Support families to access ACCS services as required.</li><li>• Monitor and respond to 'at-risk' children to ensure access to ACCS (Child Wellbeing) as required.</li></ul> |

## Procedures

### CCS Administration

The service will implement the following procedures to comply with the administration requirements of child care subsidy:

- Ensure that only **\*authorised persons** within the service have access to the service's licensed software for the administration of CCS.
- Ensure that all staff who require access to the system used to administer CCS meet the fit and proper requirements.
- Ensure that all committee members of the 'Approved Provider' meet the **fit and proper** (see below) requirements.
- Reconcile payments received with payments expected.

The service will implement procedures to detect and minimise fraud, including:

- Ensuring all persons administrating CCS elements on behalf of Coomera Rivers OSHC meet specified fit and proper requirements.
- Ensuring all service finances are handled in accordance with service policy, accounting manuals and best practice guidelines.
- Ensuring there is no personal 'conflict of interest' of staff or the governing body in the management of CCS.
- Ensuring staff are appropriately trained in CCS compliance and the use of service software.

\*Authorised person means a person who has been identified by the service in writing as having permission to access the service's CCS administration software and has been provided with a username and password to access the system. Access may include management of enrolments, bookings, absences and cancellations. The Approved Provider will ensure 'Authorised' persons are appropriately trained and competent in the use of the software

### Fit and Proper Persons

A 'fit and proper person' is a person (who has met the requirements of Section 43 of the Child Care Subsidy Minister's Rules 2017) which requires a provider to undertake particular suitability checks for each Person with Management or Control of the Provider. These are:

- An Australian National Police Criminal History Check dated no earlier than 6 months from the date the individual was linked to the organisation.
- A Working With Children Check (Blue Card) if the Person with Management or Control is required to hold such a check under their state or territory's regulatory law.
- National Personal Insolvency Index check performed using the Bankruptcy Register Search service provided by the Australian Financial Security Authority (AFSA) dated no earlier than 3 months from the date the individual was linked to the organisation.

- A Current and Historical personal name extract search of the records of the Australian Securities and Investments Commission (ASIC) dated no earlier than 6 months from the date the individual was linked to the organisation.
- Evidence that the person does not appear on the banned and disqualified register held by ASIC (in the form of a computer printout of the results of the search) dated no more than 3 months from the date the individual was linked to the organisation.

The service understands that evidence of these checks are required in a CCS application and, where personnel are added after CCS approval, the evidence must be made available to be shown to the department on request.

## **Additional Child Care Subsidy (ACCS)**

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The service will maintain access to a current copy of the Australian Government Child Care Provider Handbook to support in accessing relevant guidance on ACCS.

### **ACCS (Child Wellbeing)**

As a provider, the service is centrally involved in identifying children who require extra support through ACCS (child wellbeing).

For the purposes of Additional Child Care Subsidy (child wellbeing), a child is taken to be at risk of serious abuse or neglect if the child is at risk of experiencing harm, as a result of current or past circumstances or events that resulted in the child being subject to, or exposed to, any of the following:

- serious physical, emotional or psychological abuse, or
- sexual abuse, or
- domestic or family violence, or
- neglect.

The Minister's Rule sets out in detail the circumstances when a child is taken to be at risk of serious abuse or neglect for the purposes of Additional Child Care Subsidy (child wellbeing).

The definition of 'at risk' includes situations where the child is likely to experience those circumstances in the future (for example, the future risk is 'real and apparent'). This allows families to be eligible for the subsidy at the appropriate earliest point and potentially before they are known to a child protection agency.

Any child who is identified as being at risk under state or territory child protection law will meet the definition of at risk and the individual (or provider) will, therefore, be eligible to receive the payment.

There are two ways for the service to access Additional Child Care Subsidy (child wellbeing):

- 1) Giving an Additional Child Care Subsidy (child wellbeing) certificate
- 2) Additional Child Care Subsidy (child wellbeing) determination.

When accessing ACCS the services will refer to the Australian Government Child Care Provider Handbook for up-to-date information and guidance.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- National Quality Standard:
  - QA2 – Children's health and safety
  - QA5 – Relationships with children

- QA6 – Collaborative partnerships with families and communities
- QA7 – Governance and leadership.

### **Additional Regulatory Context and Guidance**

- A New Tax System (Family Assistance) Act 1999 (Cth)
- Australian Government Child Care Provider Handbook

#### **Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |

# 7.12 Insurance

## Policy Statement

Coomera Rivers OSHC recognises and acknowledges the need for a responsible approach to identifying and managing risks and therefore, will ensure there is adequate insurance protection for the service. Employees, children, parents, volunteers and management will be protected from the financial repercussion of public liability through the service's purchasing of suitable insurance.

Coomera Rivers OSHC also recognises the responsibility to comply with insurance requirements outlined in the Education and Care Services Law (Section 51) and Regulations (29 & 180).

## Related Policies

- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

## Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure suitable insurance coverage, in particular, Public Liability Insurance is maintained.</li><li>• Provided evidence of currency to the Nominated Supervisor for recording.</li><li>• Monitor and respond to assessments of coverage for insurance products for potential liabilities.</li><li>• Liaise with the relevant insurer when submitting an insurance claim.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Retain evidence of Public Liability coverage at the service's premises.</li><li>• Monitor and inform the Approved Provider of suspected vulnerabilities in insurance coverage.</li><li>• Communicate potential insurance claim details to the Approved Provider in a timely manner.</li></ul>   |

## Procedures

### Public Liability Insurance

- To comply with Education and Care Services National Law and Regulations, the Approved Provider will maintain public liability insurance with a minimum cover of \$10 million.
- Evidence of the Certificate of Currency will be retained at the service premises, through a copy being provided to the Nominated Supervisor on each renewal.

### Additional Insurance

- The Approved Provider will source and manage relevant insurance products.
- Appropriate cover will also be taken for building and contents and other personal accident insurances.
- The Approved Provider will request the Nominated Supervisor monitor and gather information as necessary to enable an informed assessment and decisions on the insurance needs of the service.
- Where relevant, the Nominated Supervisor will provide Approved Provider with relevant details of activities and excursions undertaken as to assess if additional insurance coverage is required. The Approved Provider will liaise with their insurance broker when determining added cover.

### WorkCover

- The Approved Provider is responsible for ensuring that the service has adequate worker's compensation insurance for all staff including volunteers.

## Insurance Claims

- The Nominated Supervisor will report any potential instances of insurance claims to the Approved Provider in a timely manner.
- The Approved Provider will collate relevant information and communicate these details with their insurer.
- The Approved Provider (or any relevant delegate) will follow all directions of the insurer and in the case of material or significant claims, seek legal advice for the service where necessary.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s51 Conditions on service approval
- Education and Care Services National Regulations:
  - R.180 Evidence of prescribed insurance
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA3 – Physical environment
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Education (General Provisions) Act 2006
- Work Health Safety Act 2011 (Qld) 2011

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

# 7.13 Workplace Health and Safety

## Policy Statement

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

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

## Related Policies

- [2.1 Providing a Safe Environment](#)
- [2.2 Supervision and Educator Ratios](#)
- [2.3 Safe Arrivals and Departures of Children](#)
- [2.4 Incident, Illness, Injury or Trauma](#)
- [2.5 Administration of First Aid](#)
- [2.6 Water Safety](#)
- [2.7 Infectious Diseases – Prevention and Response](#)
- [2.8 Hygiene, Health and Wellbeing Practices](#)
- [2.9 Children with Medical Conditions](#)
- [2.10 Medication Administration](#)
- [2.11 Sun Safety](#)
- [2.12 Food Handling, Preparation and Storage \(Food Safety Program\)](#)
- [2.13 Emergency Evacuation, Lockdown and Drills](#)
- [2.14 Handling Disclosures and Reporting Suspicions of Harm \(Including Mandatory Reporting\)](#)
- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [4.8 Employee Underperformance, Misconduct and Disciplinary Actions](#)
- [4.9 Workplace Bullying, Discrimination and Sexual Harassment](#)
- [7.5 Governance and Management](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

## Auxiliary Plans and Templates

[Indoor Safety Checklist](#)

[Outdoor Safety Checklist](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Exercise due diligence to eliminate or minimise health and safety risk so far as it is reasonably practicable.</li><li>• ensure the service has and uses appropriate resources and processes to eliminate or minimise risks to health and safety.</li><li>• Consult with workers who are directly affected by a health and safety matter so far as it is reasonably practicable.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Lead the risk management procedures for the service.</li></ul>   |

|           |   |
|-----------|---|
|           | <ul style="list-style-type: none"> <li>• Consult and collaborate on risk management activities with educators and those who will be directly affected.</li> <li>• Monitor controls to ensure they are working as planned, undertake a review of the risk management processes when needed.</li> </ul>   |
| All Staff | <ul style="list-style-type: none"> <li>• Take reasonable care for their own health and safety and do not adversely affect the health and safety of other persons.</li> <li>• Comply with any reasonable instruction and co-operate with any reasonable health and safety policy or procedure.</li> <li>• Collaborate with risk assessment planning and delivery.</li> </ul> |

## Procedures

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

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

## Workplace Health and Safety - Risk Management

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

Regular periodic inspections will include but are not limited to:

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

### Managing workplace risks is a four-stage process to:

|                                |   |
|--------------------------------|---|
| <b>Identify hazards</b>        | Discover and document what could cause harm.  |
| <b>Assess risks</b>            | Understand- <ul style="list-style-type: none"> <li>• the nature of the harm that could be caused by the hazard,</li> <li>• how serious the harm could be, and</li> <li>• the likelihood of it happening.</li> </ul> |
| <b>Control risks</b>           | Implement the most effective control measure that is reasonably practicable in the circumstances  |
| <b>Review control measures</b> | Monitor and supervise control measures to ensure they are eliminating or isolating risks as planned.  |

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

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

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

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

## Consultation

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

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

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

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

## Managing Identified Workplace Hazards (Routine Practices)

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### Dangerous Substances

The Nominated Supervisor must ensure that:

- All poisons, disinfectants, corrosive substances and other poisonous and/or dangerous substances and items are clearly labelled as per manufacturer safety instructions, kept out of reach of children and placed in a child proof storage facility.
- Risk assessments are conducted for all dangerous substances used at the service and all educators trained in safe usage.
- Unused or unnecessary substances are disposed of in a safe manner.
- All hazardous substances have a safety data sheet (obtained from the manufacturer) which will be kept close to the storage of the product. All hazardous substances are recorded in a register, including a copy of the relevant safety data sheet.
- Storage of medications and service first aid kit/s are accessible to educators but not to children.

### Environment Risks and Management

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

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

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

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

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

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

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

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

### **Manual Handling**

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

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

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

### **Sharps/Dangerous Objects**

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

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

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

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

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

If you are injured by a used needle:

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

### **Psychosocial Hazards**

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

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

Expectations of conduct are clearly contained within relevant policy, including the service's code of conduct (4.4 Code of Conduct). At all times workplace interactions will be expected to be respectful, courteous and professional.

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

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

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Law:
  - s.165 Offence to inadequately supervise children
  - s.166 Offence to use inappropriate discipline
  - s.167 Offence relating to protection of children from harm and hazards
- Education and Care Services National Regulations:
  - R.155 Interactions with children
  - R.156 Relationships in groups
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
- National Quality Standard:
  - QA2 – Children's health and safety
  - QA7 – Governance and Leadership

### **Additional Regulatory Context and Guidance**

- Work Health Safety Act 2011 (Qld)
- Codes of Practice:
  - How to manage work health and safety risks
  - Work health and safety consultation, co-operation and co-ordination.

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
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| Version:          | v.2023-1          |

## 7.14 Service Closure

### Policy Statement

Coomera Rivers OSHC acknowledges that there may be times when the service is required to close due to both planned and unforeseen circumstances. The service recognises that effective communication and management procedures must be established to meet family expectations, provider requirements and to uphold the safety and care for children.

The Approved Provider recognises the obligation to comply with Family Assistance Law, Education and Care Service National Law Section 174 and Education and Care Services National Regulation 175 in notifying the Regulatory Authority of service closures.

### Related Policies

- [2.1 Providing a Safe Environment](#)[7.5 Governance and Management](#)
- [7.1 Nominated Supervisor](#)
- [7.2 Determining the Responsible Person](#)
- [7.6 Information Handling \(Privacy and Confidentiality\)](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure the safety and protection of stakeholders accessing the service.</li><li>• Ensure stakeholders (including government bodies) are suitably notified of any closures, disruptions due to emergency events, or another time the service cannot operate.</li></ul>  |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Ensure the service is able to fulfil its duty to protect from harm. Where extreme and emergency events hinder the ability to care for children, ensure the safety and protection of children through sound management of service closure.</li><li>• Deliver sound professional judgement and provide accurate information to the Approved Provider in consulting service closures.</li><li>• Ensure communication with families and stakeholders adequately notifies of service closure and other relevant requirements.</li></ul> |

### Procedures

The service will operate as per the approved and advertised opening hours for each session of care where Child Care Subsidy is claimed unless there is an appropriate reason (i.e. emergency closure) and notification is given to:

- the Regulatory Authority (Queensland Government Department of Education - Early Childhood Education and Care).
- the Australian Government Department of Education.

### Emergency Closure

Closure of the service may occur in the following instances:

- Extreme weather conditions.
- Emergency situation, such as fire or other external threat.
- Loss of power and/or water.

Determination for closure will be made in consultation with the Approved Provider and/or emergency services personnel, if relevant.

### Parent Communication

In the case of immediate closure of the service, the Nominated Supervisor will:

- Contact families to collect the children from the service.
- Ensure the safety of all children and educators involved.
- Notify the Regulatory Authority and Australian Government in accordance with Policy [7.7 Managing Notifications](#).

In the case of planned (or upcoming) closure, the Nominated Supervisor will:

- Communicate with families as soon as reasonably practicable.
- Provide information for the reason for closure. where possible.
- Provide anticipated timelines to the disruption.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.174 Offence to fail to notify certain information to Regulatory Authority
- Education and Care Services National Regulation
  - R.174 Time to notify certain circumstances to Regulatory Authority
  - R.174A Prescribed information to accompany notice
  - R.175 Prescribed information to be notified to Regulatory Authority
  - R.176 Time to notify certain information to Regulatory Authority
- National Quality Standard:
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Family Assistance Law  
Department of Education and Training Child Care Provider Handbook

#### Policy Controls

Endorsed by: Approved Provider

Date Endorsed: 01 September 2023

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## 7.15 Social Media and ITC Usage

### Policy Statement

The service acknowledges a key role technology plays in the community and business, especially as a tool for communication. Therefore, the Approved Provider will support the effective and safe use of technology through suitable policies and procedures to ensure devices and tools are used appropriately and in the best interests of the children, families and employees who use the service.

Coomera Rivers OSHC recognises that their IT equipment is a critical resource in managing the privacy and confidentiality of business, family and employee information. The service is committed to ensuring the management and use of equipment upholds the obligation and commitment to information handling. Likewise, the service understands that social media networking and other online communication platforms are an effective method for communicating with families who use the service. In doing so, Coomera Rivers OSHC is committed to ensuring and promoting safe and positive communications.

The established guidelines, policies and procedures for:

- the administration of the OSHC social media pages/sites with the intention to ensure communication is respectful, ethical and is consistent with the purpose of community engagement principles.
- the management of children's access to equipment and resources is appropriate and suitably supervised.
- supporting the interaction and relationship of stakeholders and employees of the service to uphold safety and protection.

Employees will be guided on expectation for the use of communication mediums (i.e. social media platforms) that could interfere with their employment and obligations and an employee. The service acknowledges that employees may access social networking sites (such as Facebook, Twitter, Instagram, etc.) to interact with friends, colleagues, and the community. This policy aims to establish guidelines on the access and usage of online social networking, with the aim upholding safety, protection and reputation for the service and its stakeholders.

### Related Policies

- [4.4 Code of Conduct](#)
- [4.7 Fit for Work](#)
- [7.13 Workplace Health and Safety](#)

### Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Provide guidance and expectations on the use of technology, devices and social media etc. to support the safety and protection of children, families, employees and the business reputation.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Respond and communicate instances of non-compliance.</li><li>• Ensure the service's equipment and practices reflect the obligation of confidentiality and privacy owed to stakeholders.</li></ul>      |
| All Staff            | <ul style="list-style-type: none"><li>• Ensure children are provided with suitable supervision to support the expectations of the service social media and ITC policy.</li></ul>   |

## Procedures

### Devices, Technology and Programming

1. The use of electronic devices and technology will be included in the program as a valuable learning tool for children.
2. Potential resources include computer equipment, electronic games, internet access, tablets and cameras.
3. Any internet usage by children will be effectively monitored and supervised by educators. Before any access is facilitated, children will be instructed on expectation and safe usage/access.
4. The service will ensure games and media accessible to children are appropriate for children, using government classifications (G and PG-rated) as the guiding principle.
5. Parents will be instructed to ensure any devices or equipment brought from home is consistent with the service's expectations (especially rating requirements). Any items that are inappropriate will be stored in the office until the child is collected.

### Employee Social Media and Communication

For the purposes of this policy 'social media' and online communication will refer to any online tool, functions or platform that allow people to communicate via the internet. This includes, but is not limited to, applications such as:

- Social networking sites (e.g Facebook, Pinterest, LinkedIn, Instagram).
- Video and photo sharing (e.g YouTube)
- Messaging platforms (Snapchat, Messenger)
- Blogging sites, forum or discussion boards (e.g. Twitter, Reddit)
- Online gaming

### Responsibilities

All employees have a duty to uphold the reputation of the service (see Code of Conduct). Communication and information sharing via social media/the internet have the potential to harm a stakeholder of the service or harm the service's reputation.

Employees are to recognize their employment relationship extends beyond the hours of work. therefore it is the responsibility of employees to ensure their conduct is consistent with the policies and guidelines of the service when using social media for personal use. Demonstrating professionalism and management of social boundaries is the responsibility of the employee. Interactions with employees and other stakeholders that harasses, threatens, jeopardises trust, or harms the reputation of the services will be treated seriously. Employees engaging in this conduct will be subject to disciplinary action, up to and including termination.

### Guidelines

Employees are expected to display conduct consistent with the following guidelines to ensure safety and protection of others, themselves and the service:

- There should not be any personal interaction with children of the service via social media, including being 'friends' or following accounts etc. If a child of the service attempts to interact with you online, **do not respond**. Review your privacy settings and notify the Nominated Supervisor or Approved Provider who will communicate the service's expectation with the family directly<sup>1</sup>.
- Harmful, threatening, suggestive or harassing comments are not to be made about fellow employees or stakeholders. This will be viewed as cyberbullying (unlawful conduct) and will prompt disciplinary action.
- The service name cannot be mentioned in online posts or other online commentaries (either directly or implied).
- Privacy and confidentiality must be maintained at all times. Employees should not discuss or disclose work-related matters in any capacity.

- Photos of employees in work uniform are not to be placed online.
- If anything is posted online by others which may harm the reputation of the service, its employees or stakeholders, and you have the capacity to delete such information, the Approved Provider asks that you do so immediately.

### Reporting Breaches

If any employees become aware of:

- conduct or communication that breaches this policy.
- finds any online material that is potentially dangerous or damaging to the image or people of the service.

Then, the employee should immediately report this information to either the Nominated Supervisor or Approved Provider. This disclosure should not be shared with others.

<sup>1</sup>Employees who are also family members of children/service users may be excluded from this condition. Disclosure of the relationship with families and children of the service is **essential**. In these extenuating circumstances, the social media responsibilities will be managed on a case-by-case basis by the Nominated Supervisor or Approved Provider.

## Legal and Regulatory Foundation

### National Quality Framework

- Education and Care Services National Law
  - s.167 Offence relating to protection of children from harm and hazards
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children’s health and safety
  - QA4 – Staffing arrangements
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- Working with Children (Risk Management and Screening) Act 2000
- eSafety Commissioner - Best Practice Framework for Online Safety Education
- National Principles for Child Safe Organisations
- Guide for Preventing and Responding to Workplace Bullying (Worksafe Australia)

#### Policy Controls

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
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# 7.16 Asset Management

## Policy Statement

In order to have sound financial management, meet the requirements of auditing and insurance and for the benefit of future planning, Coomera Rivers OSHC will maintain an assets register. The register will be maintained by the Nominated Supervisor and will itemise the non-consumable assets of the service. To support the accuracy of the register an inspection will be undertaken at least every six months.

## Related Policies

- [3.1 Space and Facilities Requirements](#)
- [7.1 Nominated Supervisor](#)
- [7.5 Governance and Management](#)
- [7.9 Budgeting, Procurement and Financial Planning](#)

## Roles and Responsibilities

|                      |  |
|----------------------|--|
| Approved Provider    | <ul style="list-style-type: none"><li>• Authorise the disposal of significant asset write-off/disposal</li></ul>                           |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Maintain the service's asset register – including review, updating and disposal changes.</li></ul> |

## Procedures

The Nominated Supervisor will maintain an accurate register of the significant (capital) belongings of the service.

The register will include categories such as:

- Furniture.
- ICT equipment.
- Outdoor/sporting equipment.
- Kitchen/cooking equipment.
- Child-related resources (other than consumables).

### New Assets

Every fixed item purchased for the service (other than consumables) will be entered into the register immediately following the purchase. The details to be contained in the register in respect of purchases will include:

- Name or description
- Asset code
- Date of purchase
- Item type (categorised)
- Purchase price
- Supplier
- Warranty terms (if applicable)

### Asset Review

- The register will be reviewed and updated every 6 months, in accordance with the financial year of audit.
- The date of review will be recorded in the asset register.

## Disposal of Items

- Items may be disposed of when they are damaged, aged or unsuitable for their purpose.
- In the event that items are in need of disposal, Nominated Supervisor will reflect this outcome in the asset register and record the reasons for the disposal.
- Any asset being disposed of with a value great than \$500 will be included in either direct communication or formal reporting to the Approved Provider.

## Legal and Regulatory Foundation

### National Quality Framework

- National Quality Standard:
  - QA3 – Physical environment
  - QA7 – Governance and leadership.

### Additional Regulatory Context and Guidance

- P&C Accounting Manual

#### Policy Controls

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# 7.17 Self-Assessment and Quality Improvement

## Policy Statement

Coomera Rivers OSHC acknowledges and recognises that continuous improvement is an integral part of the National Quality Framework. Coomera Rivers OSHC will take a proactive approach to establish effective processes and systems for evaluating and reviewing current practices and identifying areas and opportunities for improvement. The service recognises self-assessment and continuous improvement is an ongoing process, building upon previous efforts and plans.

The Approved Provider expects the Nominated Supervisor and educators will actively work towards developing a culture of critical reflection, self-assessment and continuous improvement in every aspect of service operations.

The Approved Provider will ensure the service's Quality Improvement Plan is developed, reflecting an assessment of the quality and area of improvement that has been identified. The Approved Provider will be supported by the Nominated Supervisor, educators and OSHC Committee members in developing and reviewing the document at least annually to maintain compliance with Education and Care Services National Regulations 55 and 56.

## Related Policies

- [6.5 Interactions and Communication with Families](#)
- [7.1 Nominated Supervisor](#)
- [7.3 Educational Leader](#)
- [7.4 Leading Compliance and Quality Assurance](#)
- [7.5 Governance and Management](#)

## Roles and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Ensure a QIP is developed and reviewed at least annually, and fulfils the requirements outlined in legislation.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Support a culture of continuous improvement and high-quality expectation.</li></ul>                                       |
| All Staff            | <ul style="list-style-type: none"><li>• Provide copy of QIP as requested by the Regulatory Authority.</li></ul>   |

## Procedures

### Culture of Continuous Improvement

The Nominated Supervisor and educators will be empowered to identify and respond to opportunities for continuous improvement, which includes continuous monitoring of the quality of collective and individual educator practices.

As part of the service's overall continuous improvement process, all standards and elements of the National Quality Standard will be reviewed on a regular basis in order to identify:

- Effectiveness of current practice in delivering quality outcomes for children, families and educators.
- Improvements to current practices, procedures and service routines.
- Changes to be implemented as a result of review.

The Nominated Supervisor will be delegated to instruct and manage educators to improve any aspects of practice that has been identified. Where significant changes are required the Nominated Supervisor will communicate intentions to the Approved Provider.

## **Quality Improvement Plan (QIP) Development and Review**

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All stakeholders (management, educators, families and children) will be encouraged to be involved in the service's continuous improvement process with ideas and suggestions for practice improvements welcomed.

The Approved Provider will ensure that a Quality Improvement Plan is prepared and maintained for the service that:

- Contains a statement of philosophy of the service.
- Includes the assessment of the quality of practices of the service against the National Quality Standard and the National Regulations.
- Identifies the areas requiring improvement, goals and the steps to improve.
- Maintains notes with dates of the progress being made

The Approved Provider will ensure that the service's Quality Improvement Plan is reviewed and revised:

- At least annually, or
- Whenever directed by the Regulatory Authority

The Nominated Supervisor is responsible for ensuring all relevant improvement actions are documented in the service's QIP. The Nominated Supervisor will provide reviewed versions of the QIP to the Approved Provider.

## **QIP Access**

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The Approved Provider will submit the service's current Quality Improvement Plan to the Regulatory Authority on request.

The QIP will be accessible to educators, families and other relevant stakeholders for review and feedback.

## **Legal and Regulatory Foundation**

### **National Quality Framework**

- Education and Care Services National Regulations:
  - R.31 Condition on service approval—quality improvement plan
  - R.32 Condition on service approval—entitlement to occupy premises
  - R.55 Quality improvement plans
  - R.56 Review and revision of quality improvement plans
- National Quality Standard:
  - QA1 – Educational program and practice
  - QA2 – Children's health and safety
  - QA3 – Physical environment
  - QA4 – Staffing arrangements
  - QA5 – Relationships with children
  - QA6 – Collaborative partnerships with families and communities
  - QA7 – Governance and leadership

### **Additional Regulatory Context and Guidance**

- National Principles for Child Safe Organisations

**Policy Controls**

|                   |                   |
|-------------------|-------------------|
| Endorsed by:      | Approved Provider |
| Date Endorsed:    | 01 September 2023 |
| Date implemented: | 14 September 2023 |
| Version:          | v.2023-1          |



## 7.18 Managing Concerns of Harmful Sexual Behaviours

### Policy Statement

The service is committed to ensuring a child-safe environment that acts to ensure children attending OSHC are safeguarded from harm. In doing so, the service's policies draw upon the National Principles of Child Safe Organisations, recognising our role and obligation to addressing risks of harmful sexual behaviours.

The term 'harmful sexual behaviours' refers a range of behaviours that are outside the expected range of sexual behaviour for a child or young person's level of development. Harmful sexual behaviours include but are not limited to—

- acts that problematic to a child's own development (compulsive masturbation or inappropriate nudity),
- violations of privacy,
- exposure to sexual materials, or
- forced or coercive sexual acts (such as sexual assault).

These behaviours are very serious as they can cause significant harm to other children. They can also be indicator of a child or young person having been harmed themselves and may place the child displaying such behaviours at risk of sexual exploitation.

The purpose of this policy is to complement adjacent policy and recognise the unique response required for children displaying problematic or harmful sexual behaviours. The procedures contained set out—

- how the service increases the knowledge of educators and stakeholders to better identify behaviours, and
- clear steps to be taken in response to concerns around a child's behaviours.

### Key Tasks and Responsibilities

|                      |   |
|----------------------|---|
| Approved Provider    | <ul style="list-style-type: none"><li>• Establish a framework for the identification and management of concerns relating to children's harmful sexual behaviours.</li><li>• Allocate adequate resources and training to be available to train and support educators in responding to potential incidents of harmful sexual behaviour.</li><li>• Ensure effective supervision is provided to minimise the likelihood of children being exposed to harmful sexual behaviours.</li><li>• Ensure procedures are followed to undertake relevant investigations and management actions to ensure the safety and protection of children.</li></ul> |
| Nominated Supervisor | <ul style="list-style-type: none"><li>• Be the initial point of contact for parents to raise concerns regarding harmful sexual behaviours.</li><li>• Ensure details of concerns and incidents are captured for investigation.</li><li>• Report relevant concerns to the Approved Provider.</li></ul>  |
| Educators            | <ul style="list-style-type: none"><li>• Supervise and support children to ensure guide children towards acceptable behaviour.</li><li>• Follow relevant incident management and reporting procedures for instances around concerning behaviour.</li><li>• Direct any parent concerns to the Nominated Supervisor.</li></ul>   |

## Procedures

### Education and Prevention

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#### Initial Instruction

Consistent with the procedures set out in [2.12 Child Protection and Mandatory Reporting](#), all educators/staff will receive instruction around identifying child abuse, including child sexual abuse, upon commencement.

#### Further Training and Resources

Initial training and instruction is complemented by a range of additional learning materials to promote a robust understanding of harmful sexual behaviours, including—

- Online learning modules or webinars.
- Contemporary guidelines and information papers from reputable sources.

Due to the collective nature of additional training, these sessions and resources are typically made available at periodic points throughout the year in a planned approach to professional development. Where circumstances suggest further training or support is required, the service will prioritise the availability of these.

At a minimum, contact details for True (<https://www.true.org.au/>), as the organisation with the most relevant expertise to this context, will be maintained as an initial avenue for information and support. This is complemented by the service's leadership team collating any other relevant local community supports, primarily to parents, should interventions or therapeutic support be required.

#### Effective Supervision

The service's environment and embedded practices support educator's knowledge to address the risks of children being exposed to harmful sexual behaviours. The service continues to critically reflect on opportunities to increase the integrity of supervision to ensure children are cared for in a safe and supportive environment.

### Responding to Concerns of Harmful Sexual Behaviours

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

#### Identified by the Service

1. Where an educator becomes aware of an instance of harmful sexual behaviour possible occurring at the service, they will follow the steps set out in [2.9 Incidents, Illness, Injury, and Trauma](#) to—
  - a. redirect any children,
  - b. offer support as needed, and
  - c. document the events.
2. Relevant parents will be notified of the incident at the earliest convenience (but within 24 hours). Likewise, depending on the seriousness, notification to the Regulatory Authority may also be submitted.
3. In holding concerns of harmful sexual behaviour, the Nominated Supervisor (or if timeline requires, Responsible Person) will consider the service's capacity to maintain the safety of children. Should the service reasonably believe children's safety or wellbeing may be risked, the child's enrolment will be suspended, pending further guidance, management action and planning.
4. Should any service representatives believe the child is in need of protection, the steps set out in [2.12 Child Protection and Mandatory Reporting](#) will be followed.

#### Complaint of Harmful Sexual Behaviours

Consistent with the [6.3 Feedback and Complaints](#) policy, both children and parents can raise their concerns with a representative of the service at any time. All representatives of the service (Nominated Supervisor, educators etc.) will treat any concerns or complaints seriously – taking the appropriate action—

1. While the Nominated Supervisor is the preferred contact, upon receiving relevant concerns or complaints relating to harmful sexual behaviours (as defined in this policy), educators or other representatives, should immediately inform the Nominated Supervisor (or in their absence, the Responsible Person).
2. Details of relevant behaviours and incidents will be documented by the service, using the Complaints Record.
3. The Nominated Supervisor (or Responsible Person) will notify a representative of the Approved Provider at the earliest convenience to develop a response plan, including the person(s) responsible for specific tasks and will be based on the information available to—
  - a. Ensure the safety of children of the service.
  - b. Comply with notification and/or reporting requirements.
  - c. Collect relevant information to assess the veracity of the complaint.
4. Should information indicate the safety or wellbeing of children attending the service be risk and is beyond the capacity of the service to ensure protection, the service may decide to suspend the relevant child's enrolment, pending further guidance, management action (including an investigation) and planning.
5. Parents of the child alleged to have displayed harmful sexual behaviours will be notified of the details of the concerns/complaint and offered relevant contacts for community support. Should the service believe the child is need of protection, the steps set out in [2.12 Child Protection and Mandatory Reporting](#) will be followed.
6. Once relevant information and guidance has been collated and established, the Approved Provider, in collaboration with the Nominated Supervisor will determine the appropriate outcome to provide care that safeguards all children attending the service, this may include but is not limited to the development of behaviour/care plans.
16. All documentation, communication and reports will be stored confidentially, as set out in the [7.2 Privacy and Confidentiality of Records](#) policy - via a password protected system.

## Legal and Regulatory Foundation

In preparing and implementing this policy, the Approved Provider recognises the obligations and requirements related to –

### National Quality Framework

- **Education and Care Services National Law:**
  - s.167 Offence relating to protection of children from harm and hazards
- **Education and Care Services National Regulations:**
  - R.84 Awareness of child protection law
  - R.85 Incident, injury, trauma and illness policies and procedures
  - R.86 Notification to parents of incident, injury, trauma and illness
  - R.87 Incident, injury, trauma and illness record
  - R.168 Education and care service must have policies and procedures
  - R.170 Policies and procedures to be followed
  - R.171 Policies and procedures to be kept available
  - R.172 Notification of change to policies or procedures
  - R.173 Prescribed information to be displayed
  - R.174 Time to notify certain circumstances to Regulatory Authority
  - R.174A Prescribed information to accompany notice
  - R.181 Confidentiality of records kept by approved provider
  - R.183 Storage of records and other documents
- **National Quality Standard:**

- QA2 – Children’s health and safety
- QA7 – Governance and leadership

### **Additional Regulatory Context and Guidance**

- [National Principles for Child Safe Organisations](#)
- [Volume 10, Children with harmful sexual behaviours of the Royal Commission into Institutional Responses to Child Sexual Abuse](#)

## **Related Policies and Procedures**

[2.1 Providing a Child Safe Environment](#)

[2.12 Child Protection and Mandatory Reporting](#)

[6.1 Enrolment and Orientation](#)

[6.3 Feedback and Complaints](#)

[7.2 Privacy and Confidentiality of Records](#)

[7.3 Managing Notifications](#)

# Appendix – Procedural Flowcharts

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Procedural flowcharts are developed to set out as a visual summary of key processes and systems of work. Flowcharts are to be read with relevant procedures and any other work instructions.

Need to add incident management and children's whereabouts flowcharts.

# Complaint Handling Flowchart (Policy 6.7)

