Wheelers Hill Child Care Centre
303-307 Jells Road, Wheelers Hill VIC 3150 – (03) 9561 7789
wheelershillccc@bigpond.com
www.wheelershillchildcare.com.au

# Health, Safety and Wellbeing

# POLICY

## POLICY STATEMENT
Our organisation aims to protect and support the health, safety, wellbeing and welfare of all children, families, staff and visitors by complying with all relevant legislation and moral obligations to ensure a safe and healthy environment for all stakeholders. In all matters of health, safety and wellbeing, the safety, rights and best interests of children are the paramount consideration.

## BACKGROUND
The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place for health, safety and wellbeing including safety during any water-based activities.

## LEGISLATION
- National Law Act – 165, 167, 174
- National Regulations – 25, 80, 82, 86, 99, 101–115, 120, 122, 123, 126, 132–134, 158, 166, 168, 170–172, 176, 264
- National Quality Standard – 2, 3.1, 3.2.3, 4.1.1, 4.2.2, 5, 6.1.3, 7.1.2, 7.1.3, 7.2.1

## RELEVANT POLICIES
- Acceptance and Refusal of Authorisations
- Administration of First Aid
- Anaphylaxis Management
- Dealing with Complaints
- Dealing with Infectious Diseases
- Dealing with Medical Conditions
- Delivery and Collection of Children
- Emergency and Evacuation
- Enrolment and Orientation
- Excursions
- Governance and Management
- Incident, Injury, Trauma & Illness
- Interactions with Children
- Nutrition, Food, Beverages, and Dietary Requirements
- Providing a Child-Safe Environment
- Safe Arrival of Children
- Safe Transportation of Children
- Sleep and Rest for Children
- Staffing Arrangements
- Sun Protection

## LOCATION OF INFORMATION
- Centre Policy and Procedure Handbook
- Wheelers Hill Child Care Centre Website

## MONITORING AND REVIEW
This policy is required to be reviewed at least annually by the approved provider, in conjunction with nominated supervisors, responsible persons, staff, families and children.

**To be Reviewed: May 2027**

- Dates of Review:
  July 2026
  January 2025
  March 2024
  January 2023
  January 2022

# Health, Safety and Wellbeing

# PROCEDURES

## OCCUPATIONAL HEALTH AND SAFETY

- The legal duties of an employer under the *Occupational Health and Safety Act* are:
  - to provide and maintain a workplace that is safe and without risk to the health of staff.
  - to ensure other individuals, such as children, families and visitors, are not exposed to health and safety risks arising from the organisation's activities.
  - to consult with staff about OHS matters that will, or will likely, affect them directly, including identifying hazards and assessing risks, and making decisions about risk control measures.

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

- Employers and staff have responsibilities for ensuring health and safety in the workplace. Their fundamental responsibility is to provide a safe and healthy work environment. They must:
  - protect the health and safety of workers and anyone else affected by workplace activities including children, families, contractors and visitors.
  - identify and control workplace health and safety risks for all people in the workplace including staff, children, families, contractors and visitors.
  - consult with employees on matters that affect their health, safety and welfare.
  - provide adequate training and supervision for all staff to work safely.

- Staff have responsibilities for ensuring health and safety in the workplace. Everyone working in the service has a workplace health and safety responsibility, including contractors. Staff must:
  - carry out their work in a way that does not put their own health and safety, at risk, or that of others in the workplace.
  - identify and report potential workplace hazards.
  - report all work-related injuries.
  - implement the service's policies and procedures.
  - participate in workplace consultation about health and safety matters.

## RISK MANAGEMENT

- Risk management is part of the organisation's commitment to occupational health and safety to ensure that clear processes are in place for the identification of hazards, assessment of risks and implementation of control measures so far as reasonably practicable.

- Risk management is a systematic and methodical examination of potential risks and hazards within the working and learning environment. The process of risk assessment assists to:
  - identify hazards.
  - assess who or what might be harmed and how.
  - evaluate the risks and deciding on appropriate control measures.
  - record findings.
  - review the effectiveness of existing control measures regularly and update assessments regularly.
  - consult and communicate with all stakeholders.

- Risk management plans include risk identification and risk assessment. Plans are reviewed regularly to ensure that they are effective in controlling risks.

- Risks assessments are routinely conducted for emergencies including evacuation, lockdown, excursions and management of natural disasters such as bushfire, flood, cyclone and earthquake.

- Additionally, risk assessments can be undertaken when presented with a hazard, such as the potential health risk associated with exposure to COVID-19, and implement control measures to manage those risks.

## HAZARD REDUCTION

- The organisation takes every precaution to protect children, staff, families, visitors and contractors from any hazard likely to cause injury through assessing, managing and controlling hazards. These hazards must be reported to the approved provider, nominated supervisor or responsible persons and rectified immediately.

- Staff have responsibilities to take a risk management approach to all activities and plan for the safety of themselves and children. This may include:
  - always working with safety in mind
  - being aware of any hazards and reporting them immediately
  - keeping hallways and doors completely clear
  - using resources appropriately
  - opening doors slowly
  - not standing on furniture
  - walking, not running within the service
  - adhering to sun protection guidelines
  - ensuring personal safety by wearing PPE, and implementing hand hygiene procedures
  - following behaviour guidance plans to ensure personal safety and that of other children

- Staff are key members in ensuring the environment is safe for themselves, other staff, children, families, visitors and contractors.

- Staff are trained and consulted on OHS matters during team meetings and through regular workplace correspondence.

- The organisation will ensure that the grounds comply with local government regulations, as well as regulations regarding fire protection, ventilation, natural and artificial lighting, and safety glass.

## SAFETY CHECKS

- To ensure that the service's building and equipment are in good repair, staff are requested to complete a series of daily safety inspections. These inspections ensure the regular and systematic assessment of buildings, grounds and equipment, and minimises any likely risk to children, staff, families and visitors.
- Daily playground checks monitor the safety of the day-to-day play environments being provided to the children. Staff are required to check play areas and equipment, prior to use each day, for any hazards likely to cause injury.
- Trees in the grounds need to be checked regularly for overhanging, dead or dangerous looking branches as well as checked for any infestations or nests.
- Appropriate soft-fall must be utilised at all times.
- Broken and/or dangerous hazards are to be removed immediately.
- Regular pest inspections will be carried out by a pest control company. Documentation of these inspections will be kept and any findings from the pest control check will be carried out in line with the recommendation of the pest control company.

## MAINTENANCE

- Staff remove broken and/or dangerous hazards immediately & document maintenance required.
- All urgent repairs and maintenance are to be brought to the attention of the approved provider, nominated supervisor or responsible persons for immediate action.
- The organisation appoints maintenance personnel and tradespeople to conduct routine checks, general maintenance, repair and servicing of the building and its equipment on an annual basis and throughout the year as needed.
- Fire safety equipment is checked on a 6-monthly basis by *Fire Equipment Services*.
- A contract gardener, who also monitors the controls of pests and insects, maintains gardens and outdoor spaces.
- Professional cleaners undertake cleaning of the building on a regular basis.
- Throughout the day, staff follow general cleaning procedures, *e.g. sweeping, cleaning toileting areas, laundry*
- Building and maintenance is a listed agenda item for team and director meetings.
- Should the service undertake major renovations, management plans will be put in place to ensure that the safety of children, staff, families, and visitors is not compromised.

## ADEQUATE SUPERVISION

- Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that staff are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary.
- Adequate supervision means:
  - that staff can respond immediately including when a child is distressed or at risk.
  - knowing where children are at all times.

- monitoring and responding to children's activities actively and appropriately.

- All children in all areas of the service should be in sight and hearing of staff at all times including during toileting, sleep, rest and transition routines.

- Services are required to comply with the legislative requirements for educator-to-child ratios at all times that children are in attendance. However, meeting the ratios may not always be sufficient to provide adequate supervision. In some situations, additional staff members may be required.

- Variables affecting supervision levels include:
  - number, age and abilities of children
  - number and positioning of staff
  - current activity of each child
  - areas in which the children are engaged in an activity (visibility and accessibility)
  - developmental profile of each child and of the group of children
  - experience, knowledge and skill of each staff member
  - need for staff to move between areas
  - effective communication strategies
  - specific high-risk situations such as during:
    - sleep and rest
    - nappy changes
    - excursions and regular outings
    - on transportation provided or arranged by the service
    - water play
    - high risk physical activities

- Services should:
  - plan carefully where staff are positioned so that children can be seen and heard in all areas.
  - adapt and adjust where staff are positioned throughout the day where required.
  - ensure that staff are focused, constantly scanning the environment so they know where each child is and what they are doing, rather than attempting to do other tasks.
  - conduct regular staff training on supervision.
  - support teams to work together, and to constantly communicate throughout the day.
  - arrange furniture and other objects to allow clear views of children as they play.
  - make sure that routes to the bathroom are easily monitored.
  - develop policies and procedures to ensure that all staff know their responsibilities both at the service and outside on excursions, regular outings or on transportation.
  - conduct risk assessments of the service, both inside and outside in the yard, to identify areas which may pose a higher risk for children.

- Adequate supervision also allows staff to engage in meaningful interactions with children, and to deepen relationships with them. It enables staff to promote children's agency and learning, by allowing the child to explore independently and make decisions on their own play, while intervening when necessary.

- Staff must ensure there are clear sight lines to all children in the group so should place themselves in an area where they can supervise as much of the whole group as possible. Even during interactions, staff should continually scan the area to check on the remainder of children.

- The indoor and outdoor environment will be designed and set up in a way that is conducive to adequate supervision.

- Staff ensure their position enables them to maintain supervision, *e.g. when sitting at a table with children, they position themselves so they don't have their back to the rest of the group.*

- Supervision standards must be maintained during each staff member's break.
- Staff must not spend long periods of time with bookwork, cleaning, room set-up, iPads, or the preparation and clearing away of activities when they should be interacting with children. These tasks are only to be carried out while children are sleeping, there are additional staff members present, or numbers are low.
- Students, volunteers and visitors attending the service are never to be left alone with children. They must be supervised by staff at all times and are not to be counted in educator-to-child ratios unless they are an employed staff member.
- The water trough should never be left unattended, and must be emptied when not in use.
- Staff check toilet, bathroom & nappy changing areas regularly. Children are never left unattended in these areas at any time. Visitors to the service, including students on practicum placements, are never left unsupervised when in a toilet, bathroom or nappy changing area with children.
- Staff ensure that any child using the bathroom is well supervised but will take into consideration that older children may prefer staff observe from a distance and allow some privacy.
- Children are well supervised during toileting, nappy changes, meal times and rest periods.
- Staff know how many children are present and do regular head counts.
- Staff are aware of where other staff members are situated at all times, and communicate with one another when moving away from their location.
- Adequate active supervision of children can be achieved in a variety of ways, including
  - Careful planning of rosters to ensure that staff are always available to respond to children.
  - Policies and procedures that address supervision clearly.
  - Flexible supervision arrangements to allow for supervision of individual children or small groups, such as sleeping children or indoor and outdoor experiences offered simultaneously.
  - Close observation of children to provide support & to extend on children's play experiences.
  - Actively engaging with children to support their learning.
  - Scanning or regularly looking around the area to observe all children in the environment.
  - Identifying appropriate positions for maximum vision of children.
  - Avoiding standing with backs to children and undertaking tasks that distract staff from supervising children, such as administrative tasks.
  - Listening carefully to children and noting any changes of tone or volume in their voice.
  - Evaluating situations to determine the potential risks and benefits for children's health, safety and wellbeing.
  - Observing children's play and anticipating what may occur next.

| **FIVE ESSENTIAL ELEMENTS OF SUPERVISION** | |
|---|---|
| **Knowing**<br>Staff need to know: | • Where each child is<br>• The number of children they care for<br>• The correct educator-to-child ratio<br>• Which experiences, areas and equipment need special supervision<br>• Which children need higher levels of supervision<br>• Where other staff are positioned<br>• When other staff are leaving the area they are supervising for any reason. |

| | |
|---|---|
| **Listening**<br>Staff need to listen for: | • Different sounds in babies and children's play<br>• Silence<br>• Different sounds in the service<br>• What children are telling them<br>• Other staff and instructions or advice<br>• Different types of verbal language |
| **Positioning**<br>Staff need to position themselves: | • To ensure they get the best possible view of the area at all times<br>• With backs to wall or fence looking out into the room or play area<br>• So they can see difficult spaces inside and outside<br>• Away from other staff to ensure there are no children who are out of sight |
| **Scanning**<br>Staff need to be aware of: | • All children in the area, even when working with an individual child<br>• The whole area by lifting their head and looking around constantly<br>• Where other staff are |
| **Physical Reach**<br>Staff need to be within physical reach: | • When children are involved in high-risk activities<br>• When children are very young<br>• When fast, direct physical contact is the most likely way to prevent injury<br>• When required to intervene due to a hazard or interaction between children |

## MANUAL HANDLING

- Manual handling is any activity requiring the use of strength by a person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.
- Manual handling injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee.
- Manual handling injuries also include overuse injuries or, because of falling during manual handling, bruising or laceration.
- Staff are encouraged to use their common sense in assessing the risk associated with manual lifting and observe the following correct lifting practices:
  - Never twist while lifting.
  - When lifting a child or object, do not stretch over and lift, but lean close and raise as close as possible to their body.

- Staff should:
  - Kneel where possible rather than bend down.
  - Sit down with the children rather than bend over.
  - Sit in an appropriately sized chair or on the floor.
  - Carry children only when necessary.
  - Refrain from carrying children on their hip.
  - Transfer heavy items to smaller containers to reduce weight.
  - Ensure two or more staff help with the lifting or moving of heavy, long or awkward equipment or furniture.
  - Store heavy goods on lower levels to avoid the necessity of lifting them above shoulder height.
  - Use a step ladder, if necessary.
  - Avoid extended reaching forward.
- When lifting staff must:
  - Place their feet apart in a striding position in line with their hips.
  - Keep their back straight.
  - Bend from their knees.
  - Brace their stomach muscles.
  - Hold child or object close to their body.
  - Move their feet, not their spine, to stand up and lift using their legs not back.
  - Prepare to move in a forward direction.

- Many injuries result from twisting while lifting. To avoid this, staff should:
  - move equipment when children are not around.
  - rearrange storage so that it is easier and safer to replace and remove items.
  - lift only within the limits of their own strength.
  - use beds and equipment that are easy to move.
  - make sure they can see where they are going when carrying equipment or children.
  - be especially careful when lifting a child with special needs.

- Lifting of children should be kept to a minimum, with staff getting down to the child's level to comfort and talk to them rather than lifting the child up.

- The correct way to carry a child is with one arm under the child's buttocks and the other arm supporting the child's back. At the same time, the child should be held facing towards the person, as close to their body as possible.

- The sides of cots must always be lowered before putting a child in or taking them out. To lift a child out of a cot, staff should lean against the cot and raise the child as close as possible to their body. Staff must not stretch over and lift.

## INJURY MANAGEMENT

- Should a staff member sustain a workplace injury or illness, their return to work needs careful management.

- Where there has been a workers' compensation claim, a return-to-work plan will generally be developed in consultation between the staff member, employer, relevant insurance company representatives, rehabilitation provider and medical professionals treating the staff member.

- It is very important to ensure that any work restrictions placed on the staff member by their treating physician are observed and that they are not required to undertake duties that will exacerbate their injury.

- Depending on the severity of the injury, the staff member may need to return on reduced hours and gradually increase their work time to the pre-injury hours.

- The staff member's rehabilitation provider and the employer's insurance company can provide information about the rights and responsibilities of both the staff member and the employer in achieving a successful return-to-work after an injury.

## PRE-EXISTING INJURIES

- Prospective staff members may be required to disclose pre-existing injuries or illnesses that may be affected by the job for which they are applying.

- The organisation will determine the prospective staff member's ability to perform required tasks without putting themselves or others at risk of illness or injury.

- Staff also have a responsibility not to place themselves at further risk of injury. Failure to disclose this information may prejudice a future worker's compensation claim if the job aggravates a pre-existing injury or illness.

- If a staff member has a pre-existing injury, the organisation must take all reasonable precautions to prevent re-injury or further damage.

## STRESS MANAGEMENT

- It is important that staff engage in regular communication to prevent a build-up of minor problems becoming major issues. Ongoing and constructive strategies need to be developed to prevent stress related illnesses occurring.

- If staff are feeling any signs of stress, they should speak to the approved provider, nominated supervisor or responsible persons so strategies and arrangements can be made to prevent and control this.

- Some physiological responses to stress include, but are not limited to:
  - Increased blood pressure
  - Insomnia
  - Rise in heart rate
  - Stomach ulcers
  - Digestive disorders
  - Headaches
  - Fatigue

- Some emotional and behavioural responses to stress include, but are not limited to:
  - Tension, anxiety or depression
  - Mental health injuries
  - Increased workplace conflict and aggression
  - Absenteeism

- To minimise stress, the organisation should:
  - Have adequate staff, resources and training for all required tasks.
  - Maintain open communication and encourage supportive peer relationships.
  - Ensure staff take scheduled breaks and regular annual leave.
  - Provide information about workplace bullying, and what to do about it.
  - Ensure staff understand the conflict resolution and grievance policy and procedures.
  - Encourage a healthy lifestyle.

## MENTAL HEALTH AND WELLBEING

- The organisation acknowledges the importance of positive mental health and wellbeing that contributes to good health and overall development. The organisation is committed to:
  - Ensuring the service environment is safe, inclusive and empowering for children, families, staff, and visitors.
  - Embedding social and emotional learning in the educational program.
  - Ensuring families, children and staff are key partners in mental health initiatives
  - Engaging partnerships with community networks.

- The service provides a safe, inclusive and empowering social environment, through:
  - a culture of respect, fairness and equality.
  - a sense of belonging and connectedness being created through inclusive and participatory practices.
  - children, families and staff contributing to a positive service environment.
  - respectful and supportive relationships being fostered between children, staff and families.
  - strategies promoting positive and responsible behaviour, and preventing and responding to bullying, discrimination and harassment.

- As a health promoting organisation, positive social and emotional wellbeing for children, staff and families are promoted through learning, policies, creating a safe and healthy physical and social environment, and developing community links and partnerships.

- Social and emotional learning is embedded in the service program and practice through:
  - spontaneous and planned learning opportunities supporting the development of self-awareness, social awareness, responsible decision making, self-management and relationship skills.
  - opportunities for children to make choices, accept challenges, take considered risks, manage change and cope with frustrations and the unexpected.
  - collaborative learning opportunities being encouraged and supported with peers and being balanced with opportunities for children to engage and persevere in individual activities.
  - staff taking opportunities to broaden children's perspectives and encouraging consideration of the social and emotional wellbeing of others and an appreciation of diversity & difference.

- Staff, families and children are active participants in the development and implementation of health and wellbeing policies and procedures, and are provided with information about policy requirements.

- The diversity and interests of children, families and staff are reflected in the physical environment.

- Outdoor and indoor spaces, furniture, equipment and resources enable access and active participation for every child.

- A range of opportunities are provided in the outdoor and indoor spaces and the natural environment, for children to engage in physical, explorative and creative experiences.

- Service facilities are accessible and used for family and community activities where appropriate.

- As role models, staff and families are encouraged and supported to demonstrate respectful relationships and a positive approach to mental health and wellbeing.

- The service works together with families and professionals to support children experiencing social, emotional, behavioural or mental health difficulties.

- Staff have appropriate knowledge and skills for recognising and supporting children who may be at risk of or experiencing social, emotional, behavioural or mental health difficulties, including how to access support and make appropriate referrals.
- Families, children and staff are key partners in developing and supporting mental health and wellbeing initiatives.
- Information, ideas, practical strategies and referrals to local health, parenting and family services, are provided to families and staff on a regular basis to promote and support health and wellbeing in the service and at home.
- Families and children from culturally diverse backgrounds are engaged to ensure cultural values and expectations about mental health and wellbeing are respected.
- Referral pathways to local mental health services have been developed collaboratively with local providers.
- Partnerships have been developed with other education and care settings to enable children to move successfully from one setting to another.
- Staff are supported to access resources, tools and professional learning to enhance their knowledge and capacity to promote mental health and wellbeing.
- If a child is suspected of being at risk of or experiencing social, emotional, behavioural or mental health difficulties, staff share their observations with the nominated supervisor or responsible persons who will then source resources and information on a referral. This will be done in conjunction with the child's family.
- Staff are encouraged to:
  - Understand this policy and seek clarification when required.
  - Support the team in their awareness of this policy.
  - Support and contribute to providing a safe, healthy and supportive service environment.
  - Support and contribute to the implementation of health, safety and wellbeing, including goals and objectives.
- Staying on the look-out for changes in a child that may suggest they are struggling with their mental health and wellbeing is key to being able to jump in and offer support quickly.
- Signs that a child may need extra support for their mental health and wellbeing might be physical or emotional. These may include, but are not limited to:
  - Change in behaviour, especially seeming sad or upset.
  - Crying often.
  - Frequent worrying or feeling scared.
  - Regression in areas such as toilet training or sleeping.
  - Increased separation anxiety.
  - Difficulty paying attention.
  - Lack of energy.
  - Complaining of stomach aches, feeling sick or other pain that doesn't appear to have a physical cause.
  - Loss of appetite and/or eating troubles.
- Staff encourage and support children to express their culture and enjoy their cultural rights.

- The organisation actively supports and facilitates participation, accessibility and inclusion for children of all abilities, and from all backgrounds, including First Nations children & their families.

- The organisation has a responsibility to acknowledge, appreciate and understand the strengths of First Nations culture and its importance to the wellbeing and safety of First Nations children.

- Racism will not be tolerated within the organisation. Claims of racism will be investigated by the nominated supervisor or responsible persons and acted upon. This may include suspension of attendance or employment while claims are being investigated, action plans, performance management processes, and/or additional training.

## STAFF HEALTH AND WELLBEING

- As a health promoting organisation, the health and wellbeing of all staff is promoted through learning, policies, creating a safe and healthy physical and social environment, and developing community links and partnerships.

- The organisation is committed to:
  - Providing staff with a safe, healthy and supportive environment in which to work.
  - Recognising that the health and wellbeing of staff is important, and that it not only benefits the individual, but also children, families and the wider community.
  - Providing a supportive workplace culture where healthy lifestyle choices are valued and encouraged.

- A focus on the health and wellbeing of staff can help to improve their physical and mental health, concentration and productivity, and reduce absenteeism and staff turnover. Research has shown that healthy, engaged employees are nearly three times more productive than employees with poor health.

- The organisation has a responsibility to:
  - Ensure all staff are accepted and valued as individuals and professionals.
  - Ensure effective health and wellbeing communication channels are in place.
  - Enable and cultivate a workplace culture that promotes connectedness, is inclusive and provides support.
  - Recognise staff for the work they do and provide relevant and regular feedback.
  - Provide professional development and resources as required, to support staff to enhance knowledge of their own health.
  - Ensure that staff and visitors are aware of health, safety and wellbeing policies and procedures at induction and have the opportunity to provide feedback.
  - Monitor the implementation of this policy and ensure the policy is available to all staff and easy to access.
  - Ensure that all staff are encouraged to contribute at review.
  - Discuss any changes to the policy.
  - Provide information, ideas and practical strategies to staff on a regular basis to promote and support health and wellbeing in the service and at home.
  - Ensure that information and resources are provided to staff about local services that are available to support their health and wellbeing.

- Staff are encouraged to:
  - Read, fully understand and action health, safety and wellbeing policies in their work roles.
  - Support policies to ensure the workplace culture is supportive, respectful and positive for staff health and wellbeing.
  - Be respectful of each other.
  - Comply with policies at all times while completing work related duties.

- Inform the approved provider, nominated supervisor or responsible persons if they believe policies are not being followed.
- Access resources, tools and professional learning to enhance their knowledge and capacity to promote health and wellbeing.

- The organisation will:
  - Provide a healthy physical and social environment and promote awareness of key health issues for staff that support:
    - Healthy eating and oral health
    - Physical activity and movement
    - Tobacco, alcohol and other drugs
    - Safe environments
    - Mental health and wellbeing
    - Sun protection
  - Encourage staff to provide input into health and wellbeing initiatives.
  - Engage health professionals, services and organisations who can support promotion of staff health and wellbeing.
  - Support staff who want to quit smoking, vaping, drinking or using drugs, and will refer them to appropriate agencies.

## WATER SAFETY

- A water hazard is defined as anything that can hold 5cm of water and fit a child's nose and mouth. Examples include, but are not limited to:
  - large bodies of water, *e.g., dams, creeks, rivers, lakes, pooling water*
  - swimming pools, portable pools, paddling pools and spas
  - jetted bathtubs or jacuzzis
  - fishponds
  - smaller bodies of water, *e.g., baths, mop buckets, sinks, basins*
  - water features, *e.g., wishing well*
  - containers for feeding animals
  - water troughs and containers
  - beaches and oceans

- Children are encouraged to safely explore the properties of water, building water safety messages into the educational program as appropriate.

- Clean drinking water is readily accessible but hygienically and safely stored and maintained.

- Children are discouraged from drinking water used in play experiences.

- Water use and water play experiences are closely supervised at all times.

- Children's play areas are checked each morning to ensure no containers or pools of water are accessible for children. If rain occurs during the day, outdoor play areas are checked for safety prior to the children re-entering the outdoor environment.

- Children are closely supervised at all times in and around any body of water, including water troughs, buckets, sinks and toilets.

- Water troughs and containers for water play are filled to a safe level. These activities are closely supervised at all times and are emptied onto garden areas after use.

- Water carrying vessels are emptied and cleaned out at the end of each water play activity and removed from access by children.

- Buckets used for general cleaning are emptied immediately after use. No buckets will be left in play areas or will be accessible to children.
- Water waste is minimised and the water conservation message is reinforced by ensuring that water is only used for planned water play experiences.
- Families are regularly provided with water safety information including the availability of learn-to-swim programs offered in the local area.
- Community water safety programs are engaged to educate children on the importance of being safe around water.
- Children are encouraged to be sustainable with water by watering gardens with leftover water from mealtimes.
- A risk assessment will be conducted prior to any regular outing or excursion taking place, with particular attention focused on water safety when the outing is near any body of water.
- In addition to the requirements for excursions and regular outings, risk assessments for outings and excursions near water hazards must include:
  - Proximity of water hazard to the planned activity.
  - How children's access to the water hazard will be prevented.
- If an excursion or regular outing is in close proximity to a beach, river, lake or other place where there is a significant water hazard, staff will be in attendance that have current approved first aid qualifications and the knowledge and ability to implement water safety procedures.
- A range of factors shall determine the adequacy of supervision during any excursion or regular outing which is in close proximity to a water hazard, including:
  - Numbers, ages and abilities of the children.
  - Number and positioning of staff.
  - Each child's current activities.
  - Areas where children are playing, in particular the visibility and accessibility of these areas.
  - Risks in the environment and experiences provided to children.
  - Staff knowledge of each child and each group of children.
  - The experience, knowledge and skill of each staff member.

## SLIPS, TRIPS AND FALLS

- All staff should:
  - wear covered shoes with slip resistant soles and heels.
  - be alert for any object that could be a trip hazard.
  - pick up any objects sticking up from the floor or ground.
  - ensure warning signs alerting others of wet and slippery floors are used.
  - immediately clean any spills to avoid slips and falls.
  - notify the nominated supervisor or responsible persons if a slip or fall is witnessed.
  - ensure the appropriate paperwork is completed, including notification to the regulatory authority, if required.

## HAZARDOUS MATERIALS

- Seek medical advice immediately if poisoning or potentially hazardous ingestion, inhalation, skin or eye exposure has occurred. For immediate assistance, call an ambulance on **000**, or contact the *Poisons Information Centre* on **13 11 26**.

- In any major emergency involving a hazardous chemical or equipment, a hazardous gas, or a fire or explosion hazard, call emergency services on **000**.
- The organisation must also notify the regulatory authority and *WorkSafe*.
- Cleaning products used are non or low toxic to minimise the risk of exposure to the children, staff and families using the service.
- The laundry contains a folder that holds all relevant *Safety Data Sheets (SDS)* for each chemical used at the service. SDS provide the information needed to allow the safe handling of hazardous substances used at the workplace.
- The use of cleaning products is done with consideration of the spray and droplets affect. All cleaning products are sprayed out of reach of children, or onto paper towel or cloths, and then used to clean as necessary.
- Chemicals are stored appropriately, properly labelled and are inaccessible to children. Staff and contract cleaners are informed of appropriate ways of handling the chemicals on the premises.
- Potentially dangerous products are used sparingly and away from children, where possible.
- Dangerous chemicals, substances, and medicines are kept in their original containers provided by the manufacturer. All labels and/or use by dates are kept intact at all times.
- Dangerous chemicals, substances and equipment are stored in a locked place or facility which is labelled, secure and inaccessible to children. These materials may include, but are not limited to, cleaning materials, detergents, poisonous substances, dangerous tools and equipment including those with sharp and razor edges, and toiletries.
- Children are not permitted in the kitchen or laundry, as these areas are not specified for children's use at any time.
- Specific storage areas are provided for all potentially dangerous products. These products are inaccessible to children by means of childproof locks, locked containers for refrigerated medication and out of reach shelving.
- Soiled nappies and other soiled clothing are kept in securely covered containers in locked cupboards, bathrooms or the laundry.
- To control chemical hazards:
  - Clearly label all chemicals.
  - Store chemicals safely and out of reach of children.
  - Read the Safety Data Sheet (SDS) and have information readily available with first aid instructions.
  - Use all personal protective equipment provided.
  - Read and apply instructions for use, *e.g., use correct dilution.*
  - Display warning signs where dangerous products are stored.
  - Immediately clean up chemical spills.

## HAZARDOUS PLANTS

- No poisonous or hazardous plants will be grown inside the building, in the outdoor spaces, or within the boundary of the service.
- Any poisonous plants will be identified and removed during playground checks.

- Staff seek advice from outside resources regarding the list of plants that are not recommended around children.
- If staff are in any doubt, the *Poisons Information Centre* will be contacted on **13 11 26.**
- When children are going to be participating in gardening experiences, staff first check the directory of plants to ensure they provide plants that are safe for children.
- As a general guide, any plant with a strong smell, milky sap, red berries, or self-sown seed could be poisonous and will be treated as such.
- Staff will endeavour to be aware of biting and stinging insects in the environment.
- The building and surroundings are regularly checked for insects and their nests and webs.
- Children are educated at an appropriate level to the dangers of biting and stinging insects.
- There is at least one staff member attending the service at all times who has completed approved first aid, anaphylaxis management and emergency asthma management training. All staff are familiar with the anaphylaxis management policy.
- The following plants are highly poisonous:
  - Asthma or stick weed *(Parietaria judaica)*
  - Rhus *(Toxicodendron succedaneum)*
  - Yellow oleander *(Thevetia peruviana)*
- The following plants are avoided:
  - Cactus
  - Chilies
  - Dumb cane *(Dieffenbachia)*
  - Mushrooms and toadstools
- The following plants are poisonous and treated with caution:
  - Agapanthus
  - Amaryllis
  - Angel's trumpet *(Brugmansia)*
  - Arum lily
  - Azaleas
  - Cycads
  - Daffodils
  - Foxgloves *(Digitalis)*
  - Grevilleas
  - Lily of the valley
  - Oleander *(Nerium oleander)*
  - Poinsettia
  - Rhododendrons
  - Rhubarb leaves
  - White cedar
  - Wisteria

## EQUIPMENT, RESOURCES AND TOYS

- Before equipment is bought, it is checked for suitability of use and any recommendations that need to be put in place for its use.

- Equipment and resources will be checked regularly by staff to ensure they are clean and safe.
- Children will be carefully introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Staff will notify the nominated supervisor or responsible persons on any equipment that needs maintenance.
- Equipment that should only be used under supervision will be stored in a safe place out of children's reach.
- The use of pools and toys or equipment which involves the use of water will be used under the direct supervision of staff. All equipment will be emptied of water when not in use and stored in such a manner that it cannot collect water.
- Resources and equipment will be chosen to reflect the cultural diversity of the community and the cultural diversity of contemporary Australia.
- Staff clean the children's equipment and toys on a regular basis in order to minimise cross contamination and the spread of illnesses.
- Staff wash resources immediately if they have been sneezed on, mouthed, soiled or have been discarded after play by a child who has been unwell.
- Rooms are to clean their resources frequently as per these toy washing procedures:
  - Remove toys for washing during the day if they are visibly dirty or have been mouthed, sneezed on, soiled or used by a child who is unwell.
  - Use warm water and detergent help to loosen the germs so that they can be washed away.
  - Frequently used resources to be washed weekly or when visibly soiled.
  - Larger equipment to be wiped cleaned and dried regularly.
  - Equipment and resources to be washed, disinfected and dried before going back in cupboards, storerooms, on shelves and returning to play.
  - The dishwasher may be used for washing and drying hard plastic resources.
  - Sunlight is the preferred method of drying.
  - Soft resources to be washed weekly.
  - Tables, chairs, benches, and play surfaces to be wiped down daily.
  - Nappy changing mats to be disinfected at least daily and also after each nappy change.
  - Children's bedding is to be washed at least once per week, and after soiling.
  - The service is cleaned daily after hours by contract cleaners.

## INFECTION CONTROL

- Good hygiene practices for children and adults are important for assisting in infection control and prevention of disease transmission. The most common ways of controlling infection are handwashing, immunisation, cleaning, disinfecting and exclusion of unwell children and adults.
- The service follows infection control and cleaning recommendations listed in the *Staying Healthy in Child Care* guidelines.
- To minimise exposure to infectious diseases or viruses such as COVID-19, the organisation adheres to all recommended guidelines from the *Australian Health Protection Principal Committee (AHPPC)* and the *National Health and Medical Research Council (NHMRC).*

- Children are involved in discussions and programmed experiences that are developmentally appropriate, regarding rules of health, hygiene and oral care.
- Families are provided with information regarding practices and principles of good health, hygiene and oral care.
- Staff ensure children's rooms, resources and equipment are hygienic and safe.
- Messes and spills are cleaned up swiftly using correct cleaning procedures.
- Each child has their own set of bedding and this is washed on a weekly basis, as a minimum.
- Staff ensure children do not use bowls, plates, cups or utensils that have been previously used by another child and do not eat food which another child has eaten or dropped on the floor.
- Children are encouraged to flush the toilet after each use.
- As part of their daily routines, children wash and dry their hands before and after meals and at many other times throughout the day.
- Mouthed toys are removed, washed and dried each day.
- Staff role model appropriate health, hygiene and handwashing techniques to children.
- Cleaning contractors hygienically clean the service after closing and on weekends.
- Cleaning procedures are implemented including handwashing, use of gloves, bathroom cleaning schedules, colour-coded cleaning systems, and laundry management.

## HANDWASHING

- Children and staff are required to frequently wash their hands with soap and warm, running water.
- Toilets and handwashing facilities are accessible to children. Children are actively encouraged to flush toilets and wash their hands after going to the toilet. Paper towel is provided in the children's bathrooms.
- For staff, this should occur at a minimum:
  - Before preparing, serving or eating food.
  - After each nappy change and assisting with toileting.
  - After handling animals.
  - After cleaning tasks.
  - Whenever cross contamination from body fluids is possible, *e.g., administering medicines, applying first aid, wiping of mouth or nose.*
- For children, this should occur at a minimum:
  - Before preparing, serving or eating food.
  - After a nappy change or toileting.
  - After handling animals.
- It is recommended that all adults and children wash their hands thoroughly with soap and warm water, or use an alcohol-based sanitiser:
  - upon arrival at the service.
  - when hands are visibly dirty.
  - when coming inside from being outside.

- before eating.
- before putting on disposable gloves.
- before preparing food items.
- after touching raw meats.
- before and after toileting children and coming into contact with any body fluids such as blood, urine or vomit.
- before and after wearing gloves to change nappies.
- after touching animals or pets.
- after blowing their nose or sneezing and after assisting a child to blow their nose.
- after meals.
- after going to the toilet.
- before and after administering first aid.
- before and after administering medication.
- before and after preparing children's bottles.
- after removing protective gloves.
- after using any chemical or cleaning fluid.
- after gardening or attending to plants.

## COMMUNICABLE DISEASE

- *National Health & Medical Research Council (NHMRC)* recommend staff are immunised against:
  - Hepatitis A
  - Measles, Mumps and Rubella *(MMR)*
  - Varicella (for staff who have not had chicken pox)
  - Pertussis (whooping cough)

- All staff should also consider having yearly influenza vaccinations.

- Additional vaccinations are recommended for special categories of staff:
  - Hepatitis B is recommended for staff who care for children with intellectual disabilities.
  - Japanese Encephalitis is recommended for staff who work in the outer Torres Strait Islands for 1 month or more during the wet season.

- Pregnant staff members should be made aware that some infections can affect an unborn child, particularly rubella, chicken pox and cytomegalovirus.

- The health and safety of pregnant staff members must also be considered when rostering or allocating work, *e.g., it may be unwise to place a staff member who is pregnant in a 0-2 room where ongoing lifting is required.*

## NATURAL DISASTERS

- In the event of a natural disaster, such as a severe storm, the service will follow emergency procedures and evacuate or lockdown as necessary.

- In the event of a lockdown due to a natural disaster:
  - Windows, doors and blinds are to be shut.
  - Staff are to conduct a head check against the attendance books of each room to make sure all children are accounted for.
  - Nominated supervisor or responsible persons to bring the emergency lighting torch, and portable phone, if working, to contact families, if necessary.
  - Staff to bring emergency kits from their rooms.

- Nominated supervisor and responsible persons to contact local authorities to gain instructions on the best course of action.
- Staff to keep children calm and engage them in an activity. Discuss with the children the cause and effect of extreme weather.
- A radio will be kept on to remain informed on the current situation.
- Emergency kits are to be checked and re-stocked regularly.

## TOBACCO, ALCOHOL AND OTHER DRUGS

- As a health promoting organisation, the service provides a smoke-, tobacco-, vape-, alcohol-, and drug-free environment for children, staff and families, and promotes low-risk alcohol consumption through learning, policies, creating a safe and healthy physical and social environment, and developing community links and partnerships.

- The organisation acknowledges the importance in reducing harm from tobacco, e-cigarettes, alcohol and other drugs.

- The organisation is committed to:
  - Ensuring a smoke-, tobacco-, vape-, alcohol-, and drug-free environment for children, staff, families and visitors.
  - Promoting low-risk alcohol consumption to the service community.
  - Encouraging staff to build on opportunistic learning moments with children.
  - Providing information to staff and families about the health benefits of not smoking, vaping or taking drugs, and low-risk alcohol consumption.

- The consumption of tobacco, vapes, alcohol and drugs is prohibited in all areas including:
  - Inside.
  - Outside in the playgrounds.
  - Outside in any car-park.
  - Within ten (10) metres of any entrance to the service, property boundary, fence line or outdoor space.

- The consumption of tobacco, vapes, alcohol and drugs is also prohibited:
  - During incursions, excursions, and regular outings at any time during the event.
  - While travelling with a child.
  - At team meetings, professional development or job interviews.
  - Any events, including excursions, fetes or celebrations.
  - At any social activity, whether in work hours or not, where children, staff and families are involved and/or attending.
  - On the service property at any time, including after hours.

- To enforce the policy of tobacco, alcohol and other drugs, the organisation will:
  - display no smoking and no vaping signs throughout the service.
  - require all smoking and vaping to be done at least 10 metres off the property boundary and out of sight of children and families.
  - only allow staff to smoke or vape on their approved breaks.
  - refuse entry to staff members and families under the influence of any substances.

- Staff are expected not to smoke or vape during work hours. Staff have a professional and ethical responsibility to minimise the risk of children inhaling any residual environmental smoke if they have smoked a cigarette or vape prior to contact with children. If a staff member does smoke or vape, they must:
  - Stay more than ten (10) metres away from any entrance to the service, property boundary, fence line or outdoor space.
  - Keep out of sight of children, families and the community when smoking or vaping.

- Wash hands thoroughly upon return.
- Change clothes, prior to having a cigarette or vaping, to avoid retaining the smell of tobacco or vapour on their clothing.
- Dispose of cigarette butts thoughtfully.

- Under no circumstances will any person attend the service if they are affected by alcohol or drugs, including prescription medication, if the consumption of these items puts children, staff or families in any danger. Breaching this policy may result in disciplinary procedures.

- In the event of a staff member attending the workplace under the influence of alcohol or other drugs, the nominated supervisor or responsible persons will:
  - inform the staff member they can no longer work for the day.
  - organise a safe way for them to leave the premises and return home.
  - give them a written warning and inform them that any further indiscretions will result in one last written warning before instant dismissal.

- In the event of a staff member or family member attending the service under the influence of alcohol and/or drugs and disrupting or threatening the children and staff, the nominated supervisor or responsible persons will:
  - tell them to leave the building or escort them from the building.
  - contact the police on **000**, if required.

- Staff, families and children are active participants in the development and implementation of this policy, and are provided with information about policy requirements.

- Volunteers, contractors and visitors are not permitted to consume tobacco, vapes, alcohol or other drugs whilst on the premises.

- Volunteers, contractors and visitors model appropriate behaviours and refrain from using illicit substances, or consuming tobacco, vapes, alcohol or other drugs, whilst at the service.

- Tobacco, alcohol, vape and drug education and related health messages are reinforced in opportunistic learning moments.

- Staff guide age-appropriate, sensitive discussions about health issues relating to tobacco, e-cigarettes, alcohol and drug use as opportunities arise, *e.g., if a child is pretending to smoke.*

- Staff are supported to access resources, tools and professional learning to enhance their knowledge and capacity to provide opportunistic learning about health issues related to tobacco, e-cigarettes, alcohol and other drug use as opportunities arise.

- Families, children, and staff are key partners in developing & supporting healthy living initiatives.

- Information, ideas and practical strategies are provided to families and staff on a regular basis to promote and support tobacco, vape, alcohol and drug-free behaviour in the service and at home.

- The service engages with families and children from culturally diverse backgrounds to ensure cultural values and expectations on tobacco and vaping are considered.

- All events, on and off site, are smoke-, vape-, alcohol-, and drug-free.

- All events, celebrations, awards, gifts and fundraising are free of alcoholic products.

- The service does not have any partnerships with organisations that manufacture or wholesale alcoholic, tobacco or e-cigarette products.
- Staff who smoke, vape, drink or use illicit substances are supported to quit or manage habits.
- Partnerships have been established with relevant organisations and health professionals, such as *SunSmart, Cancer Council Victoria, Victorian Government Achievement Program* etc., to support smoke-, vape-, and drug-free and alcohol harm reduction initiatives where appropriate.
- Staff represent the organisation within the community and, as such, must not use tobacco, vapes, alcohol or illicit substances while wearing uniform.
- Under no circumstances can staff bring any illicit substance or illicit paraphernalia into the service or inside the property boundary, including carparks, footpaths, or roads surrounding the service.
- Information about policies relating to tobacco, e-cigarettes, alcohol and other drugs are shared with new staff members during the induction process.

## ORAL HEALTH

- The service is aware of the importance of having a dental care routine that is followed through at home, and the importance of establishing dental care practices at an early age.
- Due to a large number of children in attendance, time prohibits staff from giving children the 1-on-1 time and supervision they require for effective tooth brushing. The high risk of contamination during storage of brushes and the hygiene risks associated with cleaning of brushes would make tooth brushing an ineffective procedure. Instead, children are encouraged to drink during and after their meals to encourage dental hygiene through the rinsing of their mouths.
- Children are encouraged to eat a well-balanced diet, including fresh fruit and vegetables, and to avoid sweet, sugary foods.
- Staff encourage children to drink water and milk only. No fruit juice, flavoured milks or sweet drinks will be given to children.
- Drinking water is readily accessible to children and staff actively encourage the children to drink water throughout the day.
- Staff include dental hygiene in the educational program and discuss dental hygiene with children during routines.
- Bottles are given to babies upon demand or in accordance with individual routines.
- Staff will take a bottle away once a baby has finished drinking to discourage the bottle being used as a pacifier.
- Staff discourage families from adding any flavouring to dummies.
- Bottles are replaced with feeding cups as soon as possible.
- Staff discourage bottles being used to help a child fall asleep in order to reduce the incidence of cavities.
- Staff are discouraged from using sugary snacks or lollies as behavioural rewards.

- Staff provide information about what children have eaten while attending the service.
- Families are provided information on oral hygiene through many communication mediums.
- Dental incursions and dentist visits will be organised by the service.

## BOTTLE WARMING

- Bottle warmers are used to heat all bottles, including breast milk and formula. Microwaves are never used to heat bottles, as they heat unevenly and can create hot spots that may scald a baby.
- When using a bottle warmer to heat a bottle:
  - Read manufacturer's instructions carefully.
  - Before feeding, drop a little milk on the inside of the wrist to check the temperature.
  - Refer to formula water measurement grid or breast milk water measurement grid in the bottle warmer instruction manual.
- When using formula:
  - Follow the manufacturer's instructions carefully.
  - Throw away any formula that is left over.
  - Do not freeze or reheat leftover formula.
  - Ensure bottles are clearly labelled with the child's name & date formula was made.
- When using breast milk:
  - Breast milk can be stored in the refrigerator for 48 hours or in the freezer for 6-12 months.
  - Frozen breast milk should be thawed quickly.
  - Do not immerse breast milk in boiling water or it will curdle.
  - Place the bottle of breast milk in a bottle warmer.
  - Do not shake the milk, but gently roll it to mix.
  - Ensure temperature is not excessive and that there is no danger the baby may be scalded.
  - Frozen breast milk that is thawed in the fridge (but not heated) will last 24 hours in the fridge and four hours at room temperature. It cannot be refrozen.
  - If milk has been thawed outside the fridge, using warm water or a bottle warmer, it will last for four hours in the fridge, but cannot be refrozen.

## NAPPY CHANGING

- Children must never be left unattended on a nappy change mat as accidents happen very quickly. One hand is to be kept on the child at all times, *e.g., when reaching for wipes.*
- Change nappies only in the nappy change areas.
- Ensure correct lifting techniques are used at all times.
- Separate nappy change areas from food preparation and eating areas.
- Do not allow pacifiers, toys, bottles, or food on the nappy change bench.
- Ensure all items required are within reach, *e.g., nappies, wet wipes, paper towel, gloves etc*.
- Dispose of soiled nappies properly.
- Staff must wash their hands before and after each nappy change and before and after assisting each child with toileting.
- The change bench must be disinfected and wiped clean after each nappy change.

- Hand soap, hand sanitiser and disposable gloves are provided for staff use during these routines.

- All staff must follow the nappy changing procedure:
  - Encourage walking child to walk to the change area. Carry a non-walking child.
  - Wash hands.
  - Place paper on the change table.
  - Always wear gloves when changing nappies.
  - Remove the child's nappy and put it in a 'hands-free' lidded bin.
  - Remove any clothes with urine or faeces on them.
  - Clean the child's bottom.
  - Remove the paper and put it in a 'hands-free' lidded bin.
  - Remove gloves by peeling them back from wrists, and turning them inside out. Do not let skin touch the outer contaminated surface of the glove.
  - Put the gloves in the bin.
  - Put on a clean nappy and redress the child.
  - Wash and dry the child's hands.
  - Take the child away from the change table.
  - Clean and disinfect the change table after each nappy change.
  - Wash hands thoroughly with soap and water and then dry them with a hand dryer, face washer or paper towel.

- At the end of each day:
  - Thoroughly wash the nappy change mat and table well with disinfectant and warm water.
  - Use a paper towel to clean and dry the surface.
  - Thoroughly wash the nappy bins well with disinfectant and warm water.
  - Use a paper towel to clean and dry the inside and outside of the bin.

## TOILET TRAINING

- Staff will assist children with toilet training when they demonstrate they are interested and developmentally ready to toilet train.

- A child may be ready to toilet train when they:
  - Tell an adult they are wet or soiled.
  - Tell an adult they want to go to the toilet.
  - Can wait and control the urge to wet or soil.
  - Show an interest in the toilet, or a desire to not wet or soil nappies.
  - Undress or at least pull own pants down.

- Other signs that the timing is right include, but are not limited to:
  - Longer, dryer periods between wet nappies.
  - Regular bowel movements that are passed easily.
  - General good health.

- Strategies to support children's positive toileting experiences include, but are not limited to:
  - allowing children to take their time, avoiding pressuring them.
  - responding to children's cues and allowing them to be active participants in the process.
  - using the correct terms for going to the toilet.
  - being sensitive to individual children's needs and styles, and tailoring individual toileting procedures to each child.
  - prompting children by asking or reminding them about using the toilet.
  - always being positive about toilet training.
  - being respectful and sensitive to children's dignity and rights to privacy.

- It is recommended that toilet training is not started if a child is unwell.
- Families are asked to provide multiple changes of spare clothing and underwear whilst their child is toilet training.
- Staff will not wash soiled underpants and clothing for hygiene reasons. Staff will put on gloves and carefully tip any excess faeces into the toilet and flush away. They will not scrape, rinse or wash any soiled clothing.
- Soiled clothing will be placed into a plastic bag and sealed tightly. It will be kept out of the children's reach until home time in a soiled clothing bucket. The bag will be given to the family at the end of the day for soaking and washing.
- Information fact sheets and resources on toilet training are available at the service.
- Children are encouraged to flush the toilet and wash their hands with soap and running water after using the toilet. It is recommended that children count to ten slowly or sing a song, *e.g., "This is the way we wash our hands..."*
- Staff monitor bathroom areas throughout the day and clean toilets and taps as required.
- Staff assist children's independence in the bathroom, encouraging them to pull down and pull up their own clothing, use the toilet independently, flush the toilet, and wash and dry their own hands.
- Children's independence is encouraged in accordance with their abilities.
- Staff check toilet, bathroom & nappy changing areas regularly. Children are never left unattended in these areas at any time. Visitors to the service, including students on practicum placements, are never left unsupervised when in a toilet, bathroom or nappy changing area with children.

## RISKY PLAY

- Staff provide an environment that encourages children to effectively learn in play which involves supporting them to take calculated risks.
- No play space is risk free. It is important for children's development to become adventurous and participate in opportunities to explore and test their own capabilities, manage risk, and to grow as capable, resourceful, and resilient people.
- Staff assess the risks to children's safety and develop guidelines to encourage children to test their abilities within a safe environment.
- When children are exploring risky play, staff supervise and assist when appropriate.

## ROAD SAFETY

- The organisation is committed to increasing awareness of road safety initiatives, and providing consistent road safety messages between the service and home.
- Staff use planned and spontaneous learning experiences to promote key road safety messages, *e.g., always wear a seatbelt when in the car.*
- Families are provided with up-to-date road safety information, particularly based around child restraints and active transport initiatives.
- Families are encouraged to hold their child's hand when in the service car park and are reminded of the importance of closing gates and doors.

- Staff are regularly updated on current road safety practices and initiatives through road traffic regulatory authorities, *e.g., VicRoads*.

- Age-appropriate transport safety, pedestrian safety, road safety and playing safely are part of the program and reinforced frequently with children and families.

- Areas are provided at the service for families to leave prams, bikes and tricycles.

- Families are encouraged to walk or ride with children if the distance is suitable.

- Specific arrangements are made for disabled parking.

## WHEN A CHILD IS AT RISK OF HARM WHILE BEING TRANSPORTED TO OR FROM THE SERVICE

- Children are at risk of harm while being transported to or from the service when a parent, guardian or authorised nominee is observed:
  - not using a child restraint.
  - using the wrong child restraint.
  - placing a small child in the front seat.
  - using a child restraint inappropriately, or
  - engaging in other unsafe behaviours, *e.g., parking illegally; not using a bicycle helmet.*

- In case of the above circumstances, the service must:
  - talk with the person about the importance of safe transport procedures, including the correct use of child restraints and/or relevant road safety behaviours.
  - provide or refer the person to relevant information regarding safe transport.
  - inform the approved provider, nominated supervisor or responsible persons.

- If the person persists with unsafe road use behaviours, the service must:
  - contact the person directly and discuss the importance of child restraint use and/or safe road user behaviour, including legal requirements and implications.
  - offer or provide assistance to the person on accessing the correct restraint or bicycle helmet for the child.
  - follow up with the person, where required, to ensure that they have the most appropriate restraint for their child and that it is being used correctly.

- If the person appears to be impaired or intoxicated when collecting a child, the service must:
  - encourage the person to use an alternative form of transport or contact another authorised person to collect the child.
  - If the person is not willing to use an alternative form of transport, the service cannot prevent them from taking the child.
  - notify the police and/or child protection authorities immediately if the service is of the opinion that the child may not be safe in the care of the parent, guardian or authorised nominee.

## ACTIVE PLAY

- All children are encouraged to participate in active indoor and outdoor play experiences for at least 2 hours per day, with vigorous active play involvement for at least 60 minutes of this time, divided into short intervals of 10-15 minutes each day.

- Children must be dressed appropriately to support engagement in active play, and enable them to play outdoors in all types of weather.

- Staff consult with families and resource agencies on providing physical experiences that are accessible and reflect diverse backgrounds and abilities.

- Children are actively encouraged to accept and respect each other's range of physical abilities.
- Outdoor play environments include areas for active climbing, running and energetic individual or group games.
- The program includes activities which are project or task based, *e.g., digging in the sandpit; working in the vegetable garden; moving equipment from one area to the next.*
- Active packing up requires physical exertion and all children are encouraged to help.
- Staff role model enjoyment of and participation in active play.
- Active play includes moving and dancing to music, balancing and coordination activities, group games, indoor and outdoor obstacle courses, ball games and dramatic play areas suitable for active role play.
- Incursions and extra-curricular programs often include elements of active movement.
- Families and staff are encouraged to participate in active play programs and initiatives, and share ideas, updates, strategies and suggestions towards active play, reflecting the organisation's commitment to operating health promoting services.
- Active play and physical activity and movement information is provided to families, such as strategies to minimise sedentary behaviour and increase physical activity.
- Local parks, bike paths and recreation facilities are used and promoted where appropriate to encourage active play and physical activity.

## SCREEN TIME

- The *Australian Physical Activity Guidelines for Children Under 5* recommend:
  - Avoid sedentary screen-based activities for children under 2 years of age.
  - Avoid more than 1 hour per day of sedentary, screen-based activities for children aged 2 to 5 years.
  - Limit the time spent sitting or lying down, except when sleeping.
  - Spend quiet time reading, storytelling, doing puzzles or doing other activities that support their development.
- Sedentary, screen-based activities, *e.g., television, iPads, computers,* are limited in the service.
- When screen time is provided to children, it is limited to 10 minutes and is only used as a resource for children's learning, *e.g., watching a documentary about underwater creatures and providing question time for children to extend on what they observed.*
- As an occasional exception, an age-appropriate, G-rated children's movie may be shown as part of a planned special event or school holiday activity, in line with the Safe Use of Digital Technologies and Online Environments policy. Children are supervised and offered alternative activities.
- Careful consideration is given when children are using technology as part of the program to ensure that it is educational, meaningful, useful and does not override the importance of other learning experiences.
- Children are closely supervised when using screens and staff are actively involved.

- Information on screen time and internet safety is available to families, and alternatives to screen time are provided regularly.

## SUSTAINABILITY

- The organisation aims to take an active role in caring for the environment and contribute to a sustainable future by:
  - Embedding sustainable practices into service operations.
  - Supporting children to become environmentally responsible and show respect for the environment.

- All staff within the organisation are responsible for introducing and maintaining sustainable practices at the service.

- Sustainable practices are embedded in the operations of the service, including the use of environmentally friendly products where practicable.

- Children are encouraged to respect the environment and participate in experiences that build their understanding of the responsibilities necessary for a sustainable future.

- Strategies to support these objectives include but are not limited to:
  - Appoint a Green Team or Sustainability Leader.
  - Embed sustainable practices into service operations.
  - Develop and monitor sustainability action plans.
  - Promote children's understanding about their responsibility to care for the environment.
  - Comply with all applicable local, state, and federal environmental regulations.
  - Embed a culture of sustainability in daily routines, procedures and practices.
  - Provide staff with professional development in the area of sustainability.
  - Continually seek to improve the environmental performance of the service.
  - Engage families and suppliers in meeting sustainability objectives.
  - Actively promote reducing, reusing and recycling.
  - Encourage families to introduce sustainable practices at home.
  - Use limited resources, including paper, energy and water, as efficiently as possible.
  - Encourage children to become environmentally responsible and show respect for the environment through intentional teaching and the educational program.
  - Include as many natural elements as possible in play, *e.g., mud, trees, sand, water*
  - Utilise recycling stations and recycling bins.
  - Reuse recyclable materials.
  - Collect waste materials for play from local businesses.
  - Build connections with the local community.

## ROLES AND RESPONSIBILITIES

| | |
|---|---|
| **Approved Provider** | • Provide and maintain an environment that protects and supports the health, safety and wellbeing of all children, staff, families and visitors.<br>• Ensure children's health, safety and wellbeing is integral to all decision-making and embedded in organisational leadership, governance & culture.<br>• Manage the risks of abuse or harm to each child, including fulfilling duty of care and legal obligations to protect children and prevent any reasonable, foreseeable risk of injury or harm.<br>• Ensure children are adequately supervised and protected from harm.<br>• Ensure supervision procedures consider the ages, abilities, groupings and developmental stages of children.<br>• Ensure supervision standards are maintained during staff break times. |

| | |
|---|---|
| | • Identify high-risk activities, including excursions, through a risk management process, and implement strategies to improve children's safety.<br>• Complete detailed risk assessments that identify and assess risks associated with hazards and water-based activities.<br>• Be aware of water sources around the service and take action to prevent access to these areas, including buckets, pools, spas, and ponds.<br>• Ensure hazards and risks to health, safety and wellbeing are identified, assessed and eliminated or effectively controlled.<br>• Introduce measures to eliminate or control hazards and risks to health, safety and wellbeing which are monitored and evaluated regularly.<br>• Implement procedures to effectively manage incidents and emergencies that are regularly rehearsed and reviewed.<br>• Investigate and manage any incident to prevent further reoccurrence.<br>• Provide and maintain an environment that is tobacco, alcohol and drug free.<br>• Ensure at least one staff member who holds a current approved first aid qualification is in attendance at the service at all times.<br>• Ensure a minimum of two staff members are rostered on duty at all times children are in attendance at the service.<br>• Consult appropriately with staff on OHS matters.<br>• Implement procedures to recruit, employ, induct, train and manage staff.<br>• Ensure there is appropriate information, instruction, induction, training and supervision for staff.<br>• Provide return to work programs that facilitate safe and sustainable return to work for staff members.<br>• Ensure workplace incidents are reported and investigated to ascertain the circumstances leading up to the incident, and appropriate action is taken to prevent further incidents from occurring.<br>• Implement systems to maintain buildings, playgrounds and equipment.<br>• Ensure playgrounds and equipment are fit for purpose and meet Australian Safety Standards.<br>• Maintain safe play spaces, which allow for adequate supervision, including safe fall zones, good traffic flow, maintenance of buildings and equipment, and minimising trip hazards.<br>• Ensure hazardous materials are stored safely and inaccessible to children.<br>• Provide adequate facilities to protect all persons from risks to their health and safety including access to adult toilets, provision of hand hygiene resources and personal protection equipment.<br>• Keep up to date about current health risks and implement risk minimisation measures to reduce the risk of transmission of viruses.<br>• Remain up to date with current legislation on child restraints in vehicles if transporting children.<br>• Notify the Victorian Early Childhood Regulatory Authority (VECRA) within 24 hours of a serious incident occurring at the service, or a complaint alleging that the health, safety or wellbeing of a child has been compromised or that the law has been breached (VECRA: 1300 307 415, vecra@education.vic.gov.au).<br>• Read, understand, follow and enforce the organisation's policies and procedures. |
| **Nominated Supervisor and** | • Provide and maintain an environment that protects and supports the health, safety and wellbeing of all children, staff, families and visitors. |

| | |
|---|---|
| **Responsible Persons** | • Ensure children's health, safety and wellbeing is integral to all decision-making and embedded in organisational leadership, governance & culture.<br>• Manage the risks of abuse or harm to each child, including fulfilling duty of care and legal obligations to protect children and prevent any reasonable, foreseeable risk of injury or harm.<br>• Ensure children are adequately supervised and protected from harm.<br>• Ensure supervision procedures consider the ages, abilities, groupings and developmental stages of children.<br>• Ensure supervision standards are maintained during staff break times.<br>• Ensure flexibility of supervision to provide for staff to supervise individual children or small groups of children.<br>• Ensure staff are positioned to observe the maximum area possible.<br>• Identify high-risk activities, including excursions, through a risk management process, and implement strategies to improve children's safety.<br>• Complete detailed risk assessments that identify and assess risks associated with hazards and water-based activities.<br>• Be aware of water sources around the service and take action to prevent access to these areas, including buckets, pools, spas, and ponds.<br>• Ensure hazards and risks to health, safety and wellbeing are identified, assessed and eliminated or effectively controlled.<br>• Introduce measures to eliminate or control hazards and risks to health, safety and wellbeing which are monitored and evaluated regularly.<br>• Implement procedures to effectively manage incidents and emergencies that are regularly rehearsed and reviewed.<br>• Investigate and manage any incident to prevent further reoccurrence.<br>• Minimise the transmission of illness through effective hand-hygiene, exclusion of ill children and staff, effective environmental cleaning, and promotion of immunisation and health programs.<br>• Provide and maintain an environment that is tobacco, alcohol and drug free.<br>• Ensure at least one staff member who holds a current approved first aid qualification is in attendance at the service at all times.<br>• Ensure a minimum of two staff members are rostered on duty at all times children are in attendance at the service.<br>• Develop and maintain rosters that ensure continuity of care and adequate supervision at all times.<br>• Ensure staff are able to respond to any situation immediately, particular when a child is distressed or in a hazardous situation.<br>• Consult appropriately with staff on OHS matters.<br>• Implement procedures to recruit, employ, induct, train and manage staff.<br>• Ensure there is appropriate information, instruction, induction, training and supervision for staff.<br>• Ensure workplace incidents are reported and investigated to ascertain the circumstances leading up to the incident, and appropriate action is taken to prevent further incidents from occurring.<br>• Provide return to work programs that facilitate safe and sustainable return to work for staff members.<br>• Implement systems to maintain buildings, playgrounds and equipment.<br>• Ensure playgrounds and equipment are fit for purpose and meet Australian Safety Standards.<br>• Maintain safe play spaces, which allow for adequate supervision, including safe fall zones, good traffic flow, maintenance of buildings and equipment, and minimising trip hazards.<br>• Ensure hazardous materials are stored safely and inaccessible to children. |

| | |
|---|---|
| | • Provide adequate facilities to protect all persons from risks to their health and safety including access to adult toilets, provision of hand hygiene resources and personal protection equipment.<br>• Keep up to date about current health risks and implement risk minimisation measures to reduce the risk of transmission of viruses.<br>• Remain up to date with current legislation on child restraints in vehicles if transporting children.<br>• Notify the regulatory authority within 24 hours of a serious incident occurring at the service, or a complaint alleging that the health, safety or wellbeing of a child has been compromised or that the law has been breached.<br>• Read, understand, follow and enforce the organisation's policies and procedures. |
| **Educators and Staff Members** | • Provide and maintain an environment that protects and supports the health, safety and wellbeing of all children, staff, families and visitors.<br>• Ensure children's health, safety & wellbeing is integral to decision-making.<br>• Manage the risks of abuse or harm to each child, including fulfilling duty of care and legal obligations to protect children and prevent any reasonable, foreseeable risk of injury or harm.<br>• Ensure children are adequately supervised and protected from harm.<br>• Ensure supervision procedures consider the ages, abilities, groupings and developmental stages of children.<br>• Ensure supervision standards are maintained during staff break times.<br>• Ensure positioning allows observation of the maximum area possible.<br>• Adjust supervision strategies to suit the environment, staff skills, age mix, dynamics and size of the group of children being supervised and the activities being undertaken.<br>• Ensure all children are in sight and hearing at all times.<br>• Arrange environment to ensure effective supervision while also allowing children to access quiet and private spaces.<br>• Promote children's agency by making decisions about supervision that allow children to engage in independent exploration and appropriate risk taking.<br>• Ensure no child is left unsupervised or left alone with a visitor while eating, sleeping, or at nappy change and toileting times.<br>• Provide direct, constant and proximal monitoring to children undertaking activities that involve some risk and recognise when the ratio of staff to children needs to be increased.<br>• Avoid leaving a child unattended on a nappy change mat at any time.<br>• Identify high-risk activities, including excursions, through a risk management process, and implement strategies to improve children's safety.<br>• Complete detailed risk assessments that identify and assess risks associated with hazards and water-based activities.<br>• Ensure no child is left unattended at any time with a body of water.<br>• Be aware of water sources around the service and take action to prevent access to these areas, including buckets, pools, spas, and ponds.<br>• Empty all water troughs or water play containers when they are not in use.<br>• Inspecting indoor and outdoor environments for potential hazards, particularly during and after wet or stormy weather.<br>• Complete daily safety inspections.<br>• Ensure hazardous materials are stored safely and inaccessible to children.<br>• Administer and store medication as per medication procedures. |

| | |
|---|---|
| | • Ensure hazards and risks to health, safety and wellbeing are identified, assessed and eliminated or effectively controlled.<br>• Introduce measures to eliminate or control hazards and risks to health, safety and wellbeing which are monitored and evaluated regularly.<br>• Implement procedures to effectively manage incidents and emergencies that are regularly rehearsed and reviewed.<br>• Investigate and manage any incident to prevent further reoccurrence.<br>• Minimise the transmission of illness through effective hand-hygiene, exclusion of ill children, and effective environmental cleaning.<br>• Promptly raise and escalate health and safety concerns to the approved provider, nominated supervisor or responsible persons.<br>• Ensure there is appropriate information, instruction, induction, training and supervision for staff.<br>• Inform new and relief staff about supervision arrangements, outlining their supervision responsibilities<br>• Take practical steps and responsibility for own health, safety and wellbeing and that of others affected by their actions at the service.<br>• Comply with any reasonable instruction or lawful direction, including wearing personal protective equipment as required.<br>• Ensure workplace incidents are reported to the approved provider, nominated supervisor or responsible persons.<br>• Meet obligations under the return-to-work program and other guidelines to support return to the workplace following injury or illness.<br>• Reinforce health, safety and wellbeing messages, including water safety, within the educational program.<br>• Protect children's health, safety and wellbeing when interacting with online technology through close supervision, and activation of online controls and safe search settings.<br>• Support and encourage children to share their concerns and involve them in decisions regarding their health, safety, and wellbeing.<br>• Seek and consider children's ideas to improve safety.<br>• Support children's understanding of health, safety and wellbeing by regularly incorporating concepts into the educational program.<br>• Read, understand, follow and enforce the organisation's policies and procedures. |
| **Parents, Guardians and Families** | • Co-operate with reasonable OHS procedures implemented by the service.<br>• Avoid acting recklessly and/or placing the health and safety of others at risk.<br>• Reinforce water safety practices with children<br>• Take practical steps and responsibility for own health, safety and wellbeing and that of others affected by their actions at the service.<br>• Promptly raise and escalate health and safety concerns to the approved provider, nominated supervisor or responsible persons.<br>• Inform staff their child has arrived or is departing from the service.<br>• Ensure internal and external doors and gates are closed after entry or exit.<br>• Be aware of the movement of other children near gates and doors when entering or exiting the service.<br>• Enable staff to effectively supervise children by making arrangements to speak with them at a safer time.<br>• Supervise own children before signing them in and after signing them out.<br>• Supervise other children in their care, including siblings, while attending or assisting at the service. |

| | |
|---|---|
| | • Comply with any reasonable instruction or lawful direction, including wearing personal protective equipment as required.<br>• Minimise the transmission of illness through effective hand-hygiene and staying home when unwell.<br>• Refrain from smoking, vaping, consuming alcohol or using drugs when at the service or within 10 metres of the service boundary.<br>• Read, understand and follow the organisation's policies and procedures. |

## SOURCES


- ACECQA – *Active Supervision: Ensuring Safety and Promoting Learning* – July 2023
- ACECQA – *Supporting Educator Wellbeing* – April 2020
- ACECQA – *Toileting and Nappy Changing Principles and Practices* – July 2023
- Australian Children's Education and Care Quality Authority
- Australian Government – *Connections: A Resource for Educators about Children's Wellbeing*
- Australian Government – *National Children's Mental Health & Wellbeing Strategy*
- Child Australia – *Work Health and Safety in Education & Care Services* – March 2012
- Children, Youth and Families Act 2005 – September 2023
- Department of Health – *Physical Activity and Exercise Guidelines (Birth-5 Years)* – May 2021
- Early Childhood Australia Code of Ethics 2016
- Education and Care Services National Law Act 2010 – July 2023
- Education and Care Services National Regulations 2011 – July 2023
- Guide to the National Quality Framework 2018 – July 2023
- NHMRC – *Staying Healthy in Childcare* – June 2013
- NQS PLP – *Health, Safety and Wellbeing* – November 2012
- Practical Outcomes – *How to Support Children's Wellbeing and Mental Health*
- VicRoads – *Starting Out Safely Program*
- WorkSafe Victoria – *Children's Services OH&S Compliance Kit* – October 2019
- Victorian Early Childhood Regulatory Authority (VECRA)