Workplace Health and Safety

Policy statement

Goodstart Early Learning Limited (Goodstart) is committed to creating and maintaining a safe and healthy environment for its staff, children, families, contractors, students and other visitors. We strive to make our workplaces as free of foreseeable risks as is reasonably practical while remaining true to our vision and mission.

Being conscious of moral and legal obligations, Goodstart strives to go beyond basic compliance with all relevant legislation and work towards best practice to ensure a safe work environment. Goodstart is committed to continuous improvement in all areas of workplace health and safety.

Goodstart’s Board is responsible for overseeing and reviewing the effectiveness of Goodstart’s health and safety systems in order to gain assurance that employees have the support they need to be able to fulfil their responsibilities safely.

Goodstart’s Chief Executive and the Executive Committee will lead and support safe work practices that meet business needs, demonstrating management commitment by providing leadership and driving a positive health and safety culture. Goodstart recognises that safety is everyone’s responsibility, and as such supports staff through appropriate supervision, facilities, training and advice.

Related documents: Children’s Health and Safety Policy.

What does this policy apply to?

- Occupational Health and Safety - Management and Administration
- Manual Handling
- Hazardous Materials
- Rehabilitation and Safe Return to Work
- Health and Wellbeing
- Managing Emergencies
- Electrical Safety

Occupational Health and Safety - Management and Administration

Goodstart is committed to the robust administration and management of preventative and responsive health and safety procedures to support the creation and maintenance of a safe and healthy environment. Goodstart complies with all legislative reporting requirements when it comes to the notification and communication of health and safety risks, threats and incidents, and actively works with regulatory bodies and other groups to go beyond basic levels of compliance.

Manual Handling

By providing effective manual handling policies and procedures, Goodstart strives to protect all staff from the risk of musculoskeletal disorders (MSD) associated with manual tasks. Goodstart will, as far as is reasonably practical, ensure that each manual handling task is safe and without risk to the health and safety of staff.

The three key goals of Goodstart's manual handling policy and program are:

- To minimise manual handling hazards in the workplace.
- To provide timely and appropriate intervention to identify, assess and control hazardous manual handling tasks.
- To implement policy and practice consistent with legislation and best practice manual handling management.


Hazardous Materials

Goodstart strives to minimise the health and safety risks associated with the handling and storage of hazardous materials, and adopts a risk management strategy which enables practices that minimise the risk of harm, injury or illness caused by any hazardous material.

As far as is reasonably practical, Goodstart:

- Provides the least hazardous chemical, product or equipment for the task without jeopardising hygiene.
- Ensures that staff, contractors, students and visitors are protected from both short- and long-term health effects of hazardous substances and processes.
- Ensures all staff, contractors, visitors and students have access to Material Safety Data Sheets and adequate training on the safe use and storage of all hazardous substances prior to any exposure to those substances.
- Ensures that no poisonous plants are planted within the workplace and undertake regular garden and grounds maintenance to minimise the risk of toxic plants within the grounds and premises.

Related documents: Management of Asbestos Containing Material Requirement; Hazardous Substance Management Requirement; Poisonous Plants Requirement.

Rehabilitation and Safe Return to Work

Goodstart is committed to providing effective occupational rehabilitation, and to supporting staff who have sustained injuries or illness to safely return to suitable employment. This framework looks to minimise the impact of injuries on employees and the workplace, ensure the provision of timely and appropriate intervention at each stage of the rehabilitation process and to implement policy and practice which is consistent with legislation and best practice rehabilitation.

Goodstart promotes the prevention of injury and illness through maintaining a safe and healthy working environment and providing early reporting systems and intervention procedures.

For all employees with an accepted workers' compensation claim, Goodstart will ensure that the safe return to work process commences as soon as possible (consistent with medical advice) after the illness or injury occurs, and will engage necessary expert advice and assistance to ensure the process is consistent with legislative requirements.

Related documents: Rehabilitation and Safe Return to Work Procedure; Rehabilitation and Safe Return to Work Requirement.
Health and Wellbeing

Goodstart is committed to providing a safe environment free of all foreseeable risks to health and safety that may arise at our centre and office locations for all children, staff, volunteers, contractors, student and visitors, and will provide and maintain:

- Safe systems of work (such as policies, procedures and instructions);
- A safe work environment, safe plant and equipment and adequate information, instruction and training;
- Adequate facilities for the welfare of employees.

Employees also have obligations to contribute to the development and maintenance of a safe and healthy workplace including:

- Taking reasonable care of the health and safety of themselves and others, and supporting Goodstart’s efforts to comply with health and safety requirements.
- Not interfering with, or misusing, resources or property that are provided for the health, safety and welfare of other persons;
- Not obstructing attempts to give aid or attempts to prevent a serious risk to the safety of a person, nor wilfully injuring themselves or others;
- Utilising personal protective equipment where they have received the appropriate training or authority to do so.

Related documents: First Aid Management Requirement; First Aid Kits Requirement; Health and Safety Issue Resolution Procedure; Infectious Disease and Immunisation Requirement; Staff Medication Notification and Management Requirement; Infectious Diseases Identification, Management and Exclusion Procedure; Pregnancy Notification - Centre Staff Procedure.

Managing Emergencies

Goodstart is committed to providing a framework for emergency management to help employees deal with incidents or situations that could pose a threat to life, health or property.

Goodstart will ensure the preparation of emergency management response strategies at all centres and Centre Support Office locations to minimise the risk posed by natural disasters and other emergency situations, and to ensure a rapid response to emergencies when they occur.

Effective management of emergency situations is achieved through:

- preparation and planning;
- response; and
- recovery.

Related documents: Emergency Preparedness and Evacuation Drills - Centres Requirement; Emergency Preparedness and Evacuation Drills - Offices Requirement; Managing a Natural Disaster Procedure; Managing a Robbery, Hold Up or Threatening Situation Procedure.

Electrical Safety

Goodstart adopts a risk management process to minimise the risk of workplace illness, injury or harm resulting from exposure to electrical hazards. This risk management framework includes, but is not limited to:

- The maintenance of relevant procedures for Centres, Centre Support Office locations and maintenance providers.
• Appropriate recording of all identified electrical hazards and subsequent control measures to reduce or eliminate risk.
• The timely investigation of all electrical incidents and appropriate communication to all stakeholders.
• Ensuring the purchase and provision of electrical equipment is done in accordance with Goodstart's purchasing standards.
• Providing information, training and support to all staff, maintenance providers and any other person that may come into contact with electrical hazards in the workplace, either directly or indirectly.

Related documents: Electrical Safety Requirement; Residual Current Device Testing Procedure.

Responsibilities

This policy is to be implemented by: All staff.

Policy owner: Stan Coulter, General Manager, Governance and Risk.

Content owners: Kylie Warren-Wright, National Health and Safety Manager.

Definitions

Manual Handling:
• Any activity requiring the use of force exerted by a person to lift, push, pull, carry or otherwise move, hold or restrain any person, animal or thing.

Hazard:
• Anything with the potential to cause injury, illness or disease.

Risk:
• The likelihood that a hazard will actually result in an adverse consequence such as an injury to a person or damage to property.

Hazardous Material:
• Any substance that has the potential to harm the health of persons in the workplace, including chemicals scheduled under the Poisons Act.
Hazardous Substance Management

Purpose of this requirement

To ensure that the health and safety risks associated with the handling and storage of hazardous substances are minimised or eliminated. Goodstart Early Learning Limited (Goodstart) adopts a risk management strategy for the management of hazardous substances, which promotes practices that minimise the risk of harm, injury or illness caused by any hazardous items or substances.

Definitions

Hazard:
- Any situation with the potential to cause injury, illness, environmental harm, or damage to property.

Hazardous Substance:
- Any chemical or other substance that has the potential to harm the health of persons in the workplace, including chemicals scheduled under the Poisons Act.

Risk:
- The likelihood that a hazard will actually result in an adverse consequence such as an injury to a person or damage to property.

Personal Protective Equipment:
- Basic personal protective equipment available to guard against risks from Hazardous Substances.

Applicability of this requirement

A risk assessment will be conducted:
- whenever a Hazardous Substance is introduced in the work area; and
- for any procedure or process requiring the use of any Hazardous Substance.

Each risk assessment will be revised whenever:
- a new Hazardous Substance is introduced into the workplace;
- there is evidence to indicate that the assessment is no longer valid;
- there is a significant change in the work or procedure to which the assessment relates;
- when an incident investigation identifies a concern with the current procedure or practice; and
- at least every five years.
Risk Control:

Risk control means implementing effective measures to eliminate or reduce the risk of Hazardous Substances. When it is not practical to eliminate the risk, the principal that must be applied is to reduce risk to a level that is "as low as reasonably practicable". Control options must then be selected to the "Hierarchy of Control", being -

- 1. **Elimination** - where a work activity involves the use of a Hazardous Substance that is not essential to the work activity, the Hazardous Substance will be eliminated wherever practical.
- 2. **Substitution** - includes substituting a less Hazardous Substance, the same substance in a less hazardous form or the same substance in a less hazardous process.
- 3. **Isolation** - involves separation of the process from the people by distance or the use of barriers to prevent exposure.
- 4. **Administration** - includes policies, procedures, instruction and training, supervision and signage.
- 5. **Personal Protective Equipment** - includes gloves, goggles, respirators, aprons and face shield.

Hazardous Substance Registers:

A register of all Hazardous Substances will be kept at all Goodstart centres and CSO locations. This register may be kept electronically and must be updated whenever -

- New hazardous substances are introduced into the workplace
- The use of existing Hazardous Substances is discontinued.
- Reviewed Material Safety Data Sheets are provided.

Record Keeping - records for Hazardous Substances will be maintained as following:

- Risk Assessments - 5 years.
- Health Surveillance - 30 years.

Purchasing

- Purchasing staff are not to purchase any suspected hazardous substance prior to obtaining the Material Safety Data Sheet and liaising with the Health and Safety team.
- Staff members are not to purchase or bring into the workplace any chemical that is not listed on Goodstart’s Material Safety Data Sheets.

Training:

- Each person working with Hazardous Substances is to be granted access to training to recognise hazardous substances, and know where to find and how to interpret information about these substances.
- It is a requirement that all staff are provided training by the Centre Director, manager or other relevant person at the time of induction and annually thereafter (this includes mandatory online training).

Material Safety Data Sheet:

Material Safety Data Sheets (MSDS) contain information on a particular substance, including its uses, physical and chemical properties, health effects, precautions for use, safe handling requirements and first aid and emergency procedures. An MSDS should be obtained for each hazardous item / substance at the site and must be current. To obtain a copy of the MSDS if one doesn't exist for a substance within the workplace, contact healthandsafety@goodstart.org.au.
Labels - Containers of hazardous substances:

Containers of hazardous substances being used or handled must be appropriately labelled by the manufacturer so that their contents are fully identified. The label must be written in English and contain -

- The product name of the hazardous substance.
- Details of manufacturer.
- Ingredients.
- Health and safety information about the substance
- Hazards and precautions for safe use.
- If the substance is hazardous, it must have the word “HAZARDOUS” (or signal words such as “dangerous poison”, “warning” or “caution”) that indicate the severity of the hazard.

Labels - Diluted or Decanted Substances:

Where a chemical is diluted or decanted into an approved bottle or storage container, the label must include the following information -

- The name of the product.
- Safe use and handling information.
- Directions for use (where appropriate).
- First aid procedures.
- Details of manufacturer.
- The dilution rate used.
- Date the chemical was prepared.
- The name of the person who prepared the solution.

Unlabelled containers:

If an unlabelled container of a substance is found, it must be correctly labelled before the substance is used.

Containers of unknown substances should be managed in the following way -

- The container must be clearly marked “Caution do not use: unknown substance”.
- The container should be stored away from other substances until the substance can be identified.
- If the contents cannot be identified, they should be disposed of in accordance with the MSDS and when necessary in consultation with the relevant waste management authority.

Appropriate Storage:

- All hazardous substances should be stored and maintained in a lockable storage area clearly identified with appropriate signage.
- Child restraint mechanisms must be installed on all doors where hazardous substances are stored, OR the stored high or in a child resistant cupboard.
- Any hazardous substances on site must have child resistant packaging.
- Hazardous substances must never be transferred to any drink or food containers.

Safe use and handling:

- Approved Personal Protective Equipment should be used in accordance with the MSDS when handling hazardous chemicals.
- Only persons with suitable knowledge or experience are to mix chemicals unsupervised. The bench used for mixing chemicals must not be at eye level.
Safe use and supervision - children:

Where hazardous substances are to be used as part of an early childhood educational program or experience, centre staff are to ensure the safe use and supervision of children at all times. Children are not to handle any potentially hazardous items or chemicals.

Disposing of unwanted hazardous substances:

Any unwanted hazardous substances must be disposed of safely and in accordance with the manufacturer’s instructions, local council regulations or Department of Health advice. Do not flush chemicals or substances down the drain, sink, toilet, sewer or gutter.

Spills prevention:

To minimise the potential for a spill to occur at the site, ensure that -

- Chemical containers are stored appropriately, in accordance with the MSDS.
- All staff have been trained and know how to handle chemicals safely and in accordance with the MSDS.
- Storage areas are monitored and reviewed to ensure all chemicals are stored appropriately.

Spill clean-up procedure:

- A hazardous substances spill clean-up procedure specific to the site must be established and known by all staff.
- All staff must know what to do, where to find emergency clean-up equipment and how to use it.
- Emergency equipment should include mops, brooms, rags and any material to prevent spills going into drains.
- Equipment should be stored together in an accessible location at the site.

In the event of a chemical spill:

In the event of a small-scale, manageable spill or splash, undertake the following actions -

- Summon the First Aid Officer if a staff member has been in contact with a chemical spill or splash.
- All other persons not directly concerned with the spill or splash should be excluded from the contaminated area.
- Whilst ensuring the safety of all, stop the source of the spill immediately.
- Contain the spill and control its flow (as per the MSDS).
- Stop the spill from entering stormwater drains by blocking the drain inlets.
- Clean up the spill quickly (as per the MSDS).
- Dispose of any clean-up equipment as instructed by the MSDS.

In the event of a hazardous substance emergency (such as a fire or large scale spill), manage the situation in accordance with the Incident Management Procedure.

Related documents: Hazardous Substance Register Appendix; Health and Safety Consultation and Communication Guideline.

Related policies

Workplace Health and Safety Policy; Children’s Health and Safety Policy.
Responsibilities

This requirement is to be implemented by: All staff.

Content owners: Kylie Warren-Wright, National Health and Safety Manager.
Health and Safety Monthly Centre Inspection Tool

Instructions for completion: Refer to the Health and Safety Monthly Centre Inspection and Consultation Procedure. Further information is available from the Health & Safety Team via healthandsafety@goodstart.org.au.

<table>
<thead>
<tr>
<th>Centre:</th>
<th>Month:</th>
<th>Completed by: (2 staff)</th>
<th>Date:</th>
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<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Hazards / Issues Found &amp; control required.</th>
<th>Person Responsible</th>
<th>Completion Date</th>
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<tbody>
<tr>
<td>Playground Environment / Equipment (Resources:</td>
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<td>Playground is clean, free from debris, spider webs, animal waste and hazards.</td>
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<td>All equipment, soft fall, sand pits, fences and shade sails are stable, secure, in good condition and not a hazard to health, safety and wellbeing.</td>
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<td>Playground equipment is appropriately set out (at least 1.9m away from any object i.e. fences, building or other equipment) clean, securely fixed and age appropriate.</td>
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<td>Play equipment can be stored appropriately and securely when not in use.</td>
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<td>There is certified soft fall and/or safety mats under and around all climbing equipment over 50cm.</td>
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<td>Sandpit levels are an appropriate depth, free from foreign or hazardous items and sandpit is clean, hygienic and safe.</td>
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<td>Gas cylinders and exposed piping are secure and in good working condition (no combustible materials are located or stored near bottles)</td>
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**Car Park / Footpaths / Walkways**

| These areas are clean, free from debris and hazards (esp. slip, trip and fall hazards). |     |    |     |                                           |                   |                 |
| All areas are appropriately signed and have adequate lighting. |     |    |     |                                           |                   |                 |
| External environment, building and grounds are adequately maintained, safe, clean and free from hazards. |     |    |     |                                           |                   |                 |
| The car park has a set speed limit and appropriate controls (i.e. signage / speed bumps). |     |    |     |                                           |                   |                 |
| Car park entrances and exits are clearly marked (i.e. signage or directional arrows). |     |    |     |                                           |                   |                 |

**Internal Environment / Equipment**

<p>| Indoor environment, including walls and ceilings are maintained in a safe, clean and hygienic condition and are free from hazards (i.e. mould / mildew) |     |    |     |                                           |                   |                 |
| Ensure all doors accessible to children have been fitted with internal and external (hinge side) finger guards and they are in good working condition |     |    |     |                                           |                   |                 |
| Toys and equipment used throughout the Centre are maintained in a safe, clean and hygienic condition, are in good working condition and are free from hazards. |     |    |     |                                           |                   |                 |
| Lighting and ventilation throughout the Centre is adequate. |     |    |     |                                           |                   |                 |
| The Centre is free from pests and vermin (cockroaches, mice etc). |     |    |     |                                           |                   |                 |
| Storage cupboards are suitably secured, accessible by staff but inaccessible to children and cupboards are not a ‘Hit Hazard’. Latches and locks are in good working order. |     |    |     |                                           |                   |                 |
| Storage cupboards are tidy with all items stored appropriately (i.e. large or heavy items down low) and items are not at risk of falling when other items are being removed |     |    |     |                                           |                   |                 |</p>
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<tbody>
<tr>
<td>Shelving, bookcases and other large pieces of equipment are securely fastened to a wall or adequately secure, are not at risk of falling and are not overloaded.</td>
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<td>Cots and all sleeping and nursery equipment are clean and in good working condition.</td>
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<td>Self-closing and self-latching childproof gates are in good working order and latch securely.</td>
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<td><strong>Emergency Management</strong></td>
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<td>Local Emergency Preparedness and Evacuation procedures are developed; in place and known by all staff (including casuals).</td>
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<td>Fire Evacuation Plans are up to date and clearly displayed in all rooms and an Emergency Information Sheet is displayed by all telephones.</td>
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<td>Emergency equipment is clearly signed and extinguishers etc are up to date with their testing and tagging.</td>
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<td>Next evacuation drill has been scheduled (at minimum drills are to be practiced quarterly, and no later than 3 months after the date of the previous drill) with staff and children.</td>
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<td>Emergency exits and escape routes are clear from obstruction.</td>
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<td>Evacuation cot is available; free from obstructions and can easily fit / move through all exits.</td>
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<td>Initial and / or Annual Online Emergency Management Training has been completed by all current staff members including casual staff.</td>
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<td>Fire extinguishers are available and the anti-tamper seal and safety pin are in place.</td>
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<td>The centre has smoke detectors and are they tested regularly.</td>
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<td><strong>Manual Handling</strong></td>
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<td>Best practice manual handling techniques (i.e. safe lifting, carrying techniques and use of team lifting or mechanical aids) are used by all staff.</td>
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<td>Item</td>
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<td>Items are stored at an appropriate height and do not create risk of injury i.e.</td>
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<td>- Items accessed frequently are stored between mid-thigh and waist height;</td>
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<td>- Those less frequently at / above shoulder height with stepladder used appropriately to access.</td>
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<td>- Large and bulky items stored on ground level and either team lifting or lifting / moving aids used wherever possible.</td>
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<td>Nappy change steps are installed / available for all nappy change areas.</td>
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**Slips, Trips & Falls Prevention**

Best practice cleaning is undertaken e.g. spills cleaned up immediately.

Staff wear appropriate footwear (non slip sole) and the work area is free from slips / trip hazards e.g. walkways clear, surfaces are slip resistant etc.

**Hazardous Substances**

All chemicals have a Material Safety Data Sheet (MSDS), it is readily available to all staff in the area where the chemical(s) are stored and used and it is current (i.e. reviewed by the Manufacturer in the last 5 years)

All chemicals are used for their intended purpose only and are clearly and appropriately labeled and have not passed their expiry date.

All chemicals are correctly stored in a secure area that is inaccessible to children (latches and locks are not damaged).

The centre has a [Hazardous Substances Register](#) which is maintained and up to date.

Chemicals are decanted safely and diluted accurately in accordance with manufacturer’s instructions.

Staff wear appropriate PPE (in accordance with the MSDS) when decanting and using chemicals (i.e. gloves)

Chemicals are disposed of in an appropriate manner as per the [Hazardous Substances Management Requirement](#)
<table>
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<tbody>
<tr>
<td><strong>Sun Safety</strong></td>
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<td>Sun Safe procedures are implemented consistently, including staff being role models for appropriate sun safe practices to children.</td>
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<td>All children and staff have had sunscreen applied, are wearing hats and sun safety clothing whilst playing outdoors.</td>
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<td><strong>Immunisation &amp; Infectious Disease</strong></td>
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<td>Immunisations and contact records are up to date for all children and staff and entered into QikKids.</td>
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<tr>
<td><strong>Staying Healthy in Child Care</strong></td>
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<td>Staff demonstrate an understanding of the actions required in the event of a suspected or confirmed case of infectious disease at the Centre.</td>
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</tr>
<tr>
<td>The <strong>Infectious Disease and Illness Register</strong> Appendix is saved on the office computer and is updated each time there is an infectious disease in the Centre.</td>
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<tr>
<td><strong>Health &amp; Hygiene</strong></td>
<td></td>
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<tr>
<td>Best practice health and hygiene standards including strict and thorough cleaning practices are undertaken and maintained by all.</td>
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<tr>
<td>Hand washing posters are displayed at all hand washing stations (i.e. bathrooms, kitchen / food preparation areas etc).</td>
<td></td>
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<tr>
<td>All staff and children demonstrate best practice hand washing practices.</td>
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<tr>
<td>All surfaces, equipment, facilities and nappy change mats and areas are clean, wiped down after each use and optimal hygiene standards are maintained.</td>
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<tr>
<td>NSW Only: New batches of cleaning chemicals are made up daily.</td>
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<tr>
<td><strong>Medical Management &amp; Medication</strong></td>
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<tr>
<td>All medication is labeled correctly and appropriately stored (inaccessible to children).</td>
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<td></td>
</tr>
<tr>
<td>Item</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Hazards / Issues Found &amp; control required.</td>
<td>Person Responsible</td>
<td>Completion Date</td>
</tr>
<tr>
<td>---------------------------------------------------------------------</td>
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</tr>
<tr>
<td>All staff demonstrate an understanding of procedures and required actions on how to handle, dispense, administer and dispose of medications.</td>
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<tr>
<td>Medical risk minimisation and action plans are developed and available for all children identified as at risk of diabetes, anaphylaxis, epilepsy, seizures or asthma.</td>
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<tr>
<td>Medical action plans for children at risk of diabetes, anaphylaxis, epilepsy, seizures or asthma are in place, easily identified, clearly displayed and known by all staff.</td>
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<tr>
<td>All staff, including casuals, are aware of which children in the centre are diabetic, anaphylactic, epileptic, asthmatic or suffer from seizures (even if the child is in another room)</td>
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</tbody>
</table>

**First Aid**

A First Aid officer is available and onsite at all times during operational hours.

All employees have completed Basic Life Support training with requests logged via First Aid Training Request page. First Aid Officers are up to date with their ‘Apply First Aid’ training requirements.

The First Aid kit is appropriately stored, fully stocked with all contents within expiry dates, clearly signed and inaccessible to children.

Emergency numbers are displayed on First Aid Kit.

Where a child at risk of anaphylaxis is enrolled, all staff have been trained and are up to date with anaphylaxis adrenaline auto-injection device (EpiPen / AnaPen) training requirements.

An approved sharps disposal container is available at the centre and used containers are disposed of.

**Incident Notification & Management**

All incidents, injuries and infectious diseases are reported within the required timeframes in accordance with the relevant policies and procedures.

All incidents, injuries and illnesses are reviewed in the Monthly Team Meeting.
### Food Safety

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Hazards / Issues Found &amp; control required.</th>
<th>Person Responsible</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>with control measures identified and implemented to prevent / minimise the risk of further harm occurring.</td>
<td></td>
<td></td>
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</tbody>
</table>

**Food Safety**

- Food is appropriately stored (in vermin proof containers), prepared and provided to children in accordance with food safety and hygiene standards.
- Refrigerator is clean, hygienic and in good working condition with all food stored appropriately to prevent the risk of cross contamination.
- Food preparation areas and utensils are maintained in a safe, clean and hygienic condition.
- Microwaves are regularly cleaned out, including wiping down all internal surfaces (roof, walls and tray).
- All spills are cleaned up immediately and benches are wiped down after every meal preparation.
- No items are stored on or near the stove top.
- Dishwasher is functioning correctly and dishes are thoroughly clean once they have been through the cycle.
- Children are excluded from food preparation areas (ie barn door / gate).

### Health & Safety Consultation & Training

- Team Meetings are held monthly with health and safety a key agenda item and meeting minutes completed.
- 1 Professional Development item is undertaken at each Team Meeting.
- Health and safety hazards identified (e.g. via this Audit) are raised, discussed and solutions identified with staff as part of Monthly Team Meetings.
- A copy of the minutes from the last Team Meeting is displayed on the Staff Notice board.

### Compliance

- All staff, children and visitors have been signed in and out as required.

---

**Warning** – uncontrolled when printed. This document is current at the time of printing and may be subject to change without notice.
<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Person Responsible</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirm escorted journeys / excursions currently being undertaken have been conducted as required, including the completion of necessary paperwork.</td>
<td></td>
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<tr>
<td>Staff: child ratios across the Centre are maintained in accordance with relevant regulations.</td>
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<tr>
<td>Children are appropriately supervised at all times with staff actively monitoring child play and interactions.</td>
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<tr>
<td>Age appropriate equipment, tools and activities are utilised and undertaken across the Centre for all children in attendance.</td>
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<tr>
<td>Electrical Safety</td>
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<tr>
<td>Double adaptors are not used and power boards are not “piggy backed” (i.e. one power board plugged into another power board).</td>
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<tr>
<td>Power boards are use appropriately (i.e. the board is located in a suitable position, is not a trip hazard and the board is not over crowded so you can easily identify which plug belongs to each device).</td>
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<tr>
<td>All plugs, sockets and switches are in good condition</td>
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<tr>
<td>Electrical items are safe and all leads are tagged demonstrating that they have been inspected (this includes portable equipment such as radios, projectors, laminators etc)</td>
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<tr>
<td>There are no frayed or damaged cords / leads.</td>
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<tr>
<td>Electrical cords are out of reach of children and appropriately attached to the wall where possible.</td>
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<tr>
<td>Cords do not run across walkways or create a trip hazard</td>
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<tr>
<td>Security</td>
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<tr>
<td>All external doors and windows can be securely closed and locked.</td>
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<tr>
<td>Access to the centre is restricted to the general public (i.e. they can only use the main entry door to access the centre)</td>
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<tr>
<td>The main entry door has swipe card or pin pad access.</td>
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</tr>
</tbody>
</table>
### General Health & Safety

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Hazards / Issues Found &amp; control required</th>
<th>Person Responsible</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Health &amp; Safety and Rehabilitation Policy are clearly displayed.</td>
<td></td>
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<tr>
<td>All dangerous items are stored appropriately and are inaccessible to children at all times.</td>
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<tr>
<td>Temperatures of hot water taps, accessible to children, have been checked by maintenance and do not exceed regulated temperature.</td>
<td></td>
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<tr>
<td>All taps are in good working condition and do not leak</td>
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</tr>
<tr>
<td>Staff demonstrate an understanding and model safe behaviours and practices in line with Health &amp; Safety policies, procedures and standards.</td>
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</tr>
<tr>
<td>The Centre’s telephone is available at all times, fully operational and in good working condition.</td>
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<tr>
<td>The centre has an analogue phone (a phone that does not require power) that can be plugged directly in to the eftpos or fax line and can be used during power outages.</td>
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</tbody>
</table>

**Additional Comments / Observations:**

**NOTE:** Identified hazards are to be removed immediately. If the hazard cannot be removed, secure the area, log a maintenance job (if required) and escalate to your Area Manager and/or the Health & Safety Team via healthandsafety@goodstart.org.au.

The completed Inspection Tool and your Monthly Meeting Minutes are to be uploaded into “Health and Safety Reports” on the intranet each month. Any hazards identified on the Inspection Tool (solid grey box) are to be loaded into the system along with control measures that have been, or are going to be, implemented. Anything marked in a diagonally lined box should be considered a potential hazard and needs to have an assessment undertaken to determine if there is a high risk to the centre in not having those items. Once loaded you need to submit the reports to your Area Manager for approval. A copy of the Inspection Tool is to be filed in your Health & Safety Folder with a copy of the Team Meeting Minutes for the month.
# Children's Health and Safety

## Policy statement

Goodstart Early Learning (Goodstart) is committed to ensuring that each child's health and safety needs are met. This includes individual health and comfort requirements, through the implementation of effective hygiene practices to control the spread of infectious diseases, and the prevention and management of injuries and illness.

Educators at Goodstart will promote the importance of healthy eating and physical activity by ensuring children’s nutritional and physical health needs are met and that opportunity for learning about healthy lifestyles underpins everyday routines and experiences.

Goodstart educators believe that all children have the right to experience quality education and care in an environment that provides for their protection through adequate supervision, safe experiences and environments, and emergency preparedness. Goodstart is committed to ensuring that nominated supervisors, educators and staff understand their legal and ethical obligation to act to protect any child who is at risk of abuse or neglect.

## What does this policy apply to?

- **Children's health**
- **Healthy eating and physical activity**
- **Child protection**

This policy relates to Quality Area 2 of the National Quality Standard

<table>
<thead>
<tr>
<th>Standard 2.1</th>
<th>Element 2.1.1</th>
<th>Each child’s health needs are supported.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Element 2.1.2</td>
<td>Each child’s comfort is provided for and there are appropriate opportunities to meet each child’s need for sleep, rest and relaxation.</td>
</tr>
<tr>
<td>Standard 2.2</td>
<td>Element 2.1.3</td>
<td>Effective hygiene practices are promoted and implemented.</td>
</tr>
<tr>
<td></td>
<td>Element 2.1.4</td>
<td>Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.</td>
</tr>
<tr>
<td></td>
<td>Element 2.2.1</td>
<td>Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.</td>
</tr>
</tbody>
</table>
Children’s Health

Goodstart will ensure that nominated supervisors, educators, and staff are made aware of the health requirements of all children through ongoing communication with families.

Goodstart staff will work with families to complement the routines and activities that are in place at home, at the centre. Staff will identify and cater for each child’s individual requirements for routines throughout the day as we recognise that providing for children’s individual health, nutrition, sleep, rest and relaxation is fundamental to their wellbeing.

Goodstart staff will maintain high standards of hygiene to help prevent the spread of infectious diseases and ensure good health. Staff will ensure hygiene practices are embedded to reduce the likelihood of children becoming ill due to cross-infection or as a result of exposure to materials, surfaces, body fluids or other substances that may cause infection or illness.

Within Goodstart centres, children will be encouraged to take a growing responsibility for their own health and physical wellbeing through educators modelling and reinforcing health, nutrition and personal hygiene practices. Routines will provide opportunities for children to learn about health and safety (Early Years Learning Framework, page 32; Framework for School Age Care, page 31).

Related documents: Animals in Centres Requirement; Dangerous Animals Procedure; Sleep, Rest and Relaxation Requirement; Toileting Procedure.

Healthy Eating and Physical Activity

At Goodstart, we believe that learning about healthy lifestyles, including nutrition and physical fitness, is integral to developing a child's wellbeing and self-confidence.

Goodstart centres will provide many opportunities for children to experience a range of healthy foods and to learn about food choices from educators and other children (Early Years Learning Framework, page 30; Framework for School Age Care, page 30).
Goodstart recognises that physical wellbeing contributes to children’s ability to socialise, concentrate, cooperate and learn. Educators will provide opportunities during every day routines and experiences for physical activity and attention to fine and gross motor skills to provide children with the foundations for their growing independence and satisfaction in being able to do things for themselves (Early Years Learning Framework, page 30; Framework for School Age Care, page 29).

Related documents: Food and Nutrition Requirement.

**Child Protection**

Goodstart will ensure children’s right to be protected and kept safe will be upheld.

Goodstart staff will provide adequate supervision of children, to ensure their safety in the centre environment. Staff will be alert to and aware of potential risks and hazards and will protect children from harm that may cause potential injury throughout the centre, not just within their immediate area.

Children being cared for and educated at a Goodstart centre will be protected from possible or potential hazards and dangers posed by products, plants, objects, animals and people in the immediate and wider environment.

Goodstart staff will have plans in place to manage incidents and emergencies to protect adults and children, to maintain children’s wellbeing and a safe environment and to meet requirements of relevant occupational health and safety legislation. Local centre plans for the management of emergency situations will assist educators to handle these calmly and effectively, reducing the risk of further harm or damage.

Goodstart will ensure nominated supervisors, educators and staff understand their legal and ethical obligations to act to protect any child who is at risk of abuse or neglect. Goodstart will provide learning and development opportunities to ensure nominated supervisors, educators, and staff are aware of their roles and responsibilities, including their legislative responsibilities in states and territories to respond to every child at risk of abuse and neglect.

Related documents

1. Incidents, Investigations and Emergency documents:
   - Incident Management Procedure; Investigations Guideline; Emergency Preparedness and Evacuation Drills - Centres Requirement; First Aid Kits Requirement; First Aid Management Requirement; Managing a Robbery, Hold Up or Threatening Situation Procedure.

2. Transport and Travel documents:
   - Excursions Procedure; Driver Responsibilities Requirement; Motor Vehicles Requirements; Transporting Children Procedure; Vehicle Rules Requirement.

3. Children's Health and Safety Documents:
   - Water Safety Requirement; Sun Safety and Heat Stress Procedure; Sun Safety and Heat Stress Requirement; Administration of Medication to Children Procedure; Child Safe Environment Requirement; Unwell Children Procedure; Poisonous Plants Requirement; Nappy Changing Procedure; Toileting Procedure.

4. Child Protection Documents:
   - Collection of Children Procedure; Supervision Requirement; Visitors to the Centre Procedure.

5. General Health and Safety Documents:

Responsibilities

This policy is to be implemented by: All Staff.

Content Owner: Stan Coulter, General Manager Governance and Risk.

Document Author: Sara Meredith, Child Wellbeing Manager.
# Hand Washing and Gloves

## Purpose of this procedure

To provide instructions for hand washing and the correct utilisation of wearing gloves at Goodstart Early Learning (Goodstart) Centres.

<table>
<thead>
<tr>
<th>Step No.</th>
<th>Overview</th>
<th>Description / Who is responsible</th>
<th>Next steps</th>
</tr>
</thead>
</table>
| **STEP 1** | **When to Wash Hands** | **Children:**  
- When they arrive at the Centre. This reduces the introduction of germs. Parents/Guardians can help with this.  
- Before and after eating and handling food.  
- After having their nappy changes.  
- After going to the toilet.  
- After coming in from outside play.  
- After touching nose secretions.  
- After coming into contact with blood, faeces or vomit.  
- Before and after touching animals.  
- Before joining family grouping (if applicable).  
- Before going home. This reduces the spread of germs. Parents/Guardians can help with this.  

**Staff Members:**  
- Upon arrival at the centre. This reduces the introduction of germs.  
- Before and after handling food, including babies bottles.  
- Before and after eating.  
- Before and after changing a nappy.  
- After using the toilet or helping a child to use the toilet.  
- After coming into contact with blood, faeces or vomit.  
- After wiping a nose, either a child’s or your own.  
- Before giving medication.  
- Before and after applying sunscreen.  
- Before and after wearing gloves.  
- After cleaning.  
- After handling garbage.  
- After touching animals.  
- After coming in from outside play.  

Before going home. This reduces the spread of germs. | Go to STEP 2. |
All Staff and Children:

Hand washing instructions:

- Wet hands thoroughly under running water.
- Apply liquid soap and spread over the hands. Rub the hands vigorously for at least 20 seconds, washing the whole of the hand (including the palms, back of the hands, between the fingers, under fingernails and around the wrists).
- Rinse hands thoroughly under running water.
- Dry hands with a single use paper towel or hot air blow dryer.
- Educators are to assist children with this process where required.
- Educators with cuts, abrasions, dermatitis or open wounds on their hands should have the area covered with a water resistant dressing.

Hand washing instructions when using wipes or approved sanitising lotion:

- Where taps and sinks are not readily available, an alternative is to use nappy wipes or approved sanitising lotion to clean the hands. Approved sanitising lotions should be kept well out of reach of children and only used with adult supervision.
- Apply the amount of sanitising lotion recommended by the manufacturer or a wipe to the palms of dry hands.
- Make sure to cover in between fingers around thumbs and under fingernails.
- Rub until hands are dry.

As soon as possible, hands must be washed with liquid soap and running water.

All Staff:

Staff must wash hands before wearing gloves. Gloves must be worn if there is a chance of coming into contact with faeces, urine, saliva, vomit or blood. Gloves should be worn when completing the following tasks, particularly if hands have open cuts or sores:

- Changing nappies.
- Handling blood or blood-/body fluid-soiled items.
- Cleaning bathrooms, surfaces or clothing.
- Mixing hazardous substances.
- Administering first aid.
- Wiping up spills to remove blood or body fluids.
- Emptying rubbish bins.
- Directly touching food when a hand wound is present. Please note that where a food handler is required to wear gloves they should be changed regularly between tasks. For example, when a food handler has used the toilet, after each break, coughing, sneezing, using a handkerchief, handling
raw food, handling rubbish, eating, drinking or touching the hair, scalp or body.

Gloves provide a protective barrier against germs that cause infections. Wearing gloves reduces contamination but does not eliminate it. Wearing gloves does not replace the need for proper hand washing.

Remove gloves by peeling them back from the wrist and turning them inside out, and dispose of them in a hygienic manner.

Where gloves become contaminated while the educator is wearing them, gloves must be removed before touching any clean surfaces.

Staff must wash their hands after removing gloves.

If the skin comes into contact with blood or other body fluids, the contaminated skin must be immediately and thoroughly washed.

Definitions

Approved Sanitising Lotion:

- Taren Cleanplus Antibacterial No Water Hand Sanitiser

Approved Detergent:

- Taren Neutral Cleaner

Approved Disinfectant:

- Taren Bleach 6% (dilute at 10-1)

Related policies

Children’s Health and Safety Policy

Responsibilities

This procedure is to be implemented by: All Staff.

Content owners: Sara Meredith, Child Wellbeing Manager.
Infection Control

Purpose of this procedure

To outline protocols to undertake to actively minimise the risk of cross-infection, disease or illness.

<table>
<thead>
<tr>
<th>Step No.</th>
<th>Overview</th>
<th>Description / Who is responsible</th>
<th>Next steps</th>
</tr>
</thead>
</table>
| 1        | General Cleaning | **All Staff:** This procedure supports infection control and outlines how to ensure a safe and hygienic environment is maintained during these times:  
  - Toileting.  
  - Nappy Changing.  
  - Food Safety Program.  
  - Child Safe Environment.  
  - Sleep, Rest and Relaxation.  
  
  Effective cleaning with approved detergent and warm water, followed by rinsing and drying removes the bulk of germs from centre surfaces. The following areas should be cleaned daily, plus when visibly dirty:  
  - Bathrooms (refer to Toileting Procedure).  
  - Toys (should also be cleaned if it is sneezed on, when it has been mouthed or discarded by a child who is unwell).  
  - Surfaces (that children have frequent contact with, for example bench tops, taps, cots and tables).  
  - Mattress covers and linen (refer to Sleep, Rest and Relaxation Requirement).  
  - Door knobs.  
  - Floors.  

  The following areas should be cleaned at least weekly plus when visibly dirty:  
  - Low shelves.  
  - Other surfaces.  

  Carpets and mats should be vacuumed daily and curtains should be washed every six months or when visibly dirty in hot water and approved detergent. Spot clean carpets, mats and curtains if they are visibly dirty in a small area.  

  Cushion covers should be changes daily and washed |  |  | Go to STEP 2. |
in hot water and approved detergent as well as when visibly dirty.

Children’s dress up clothes should be washed weekly in hot water and approved detergent, as well as when visibly dirty.

Additionally, in the following circumstances, incidental cleaning may be required to ensure a safe and hygienic environment is maintained at all times.

### All Staff:

Dealing with spot blood spills (e.g., a drop of blood, smaller than a 50 cent coin), faeces, vomit and urine:

- Wear gloves.
- Place paper towel over the spill. Carefully remove the paper towel and contents. Place the paper towel and gloves into a waterproof bag.
- Put on new gloves and clean the surface with approved detergent and warm water, using a disposable cloth or sponge; place the cloth into the waterproof bag, seal and put it in the rubbish bin.
- Wipe the area with approved disinfectant and allow to dry.
- Remove and discard gloves.
- Wash hand thoroughly with soap and warm water.

Dealing with blood spills (bigger than the palm of your hand):

- Wear gloves.
- Cover the area with an absorbent agent (e.g., kitty litter or sand) and allow the blood to soak in.
- Use a disposable scraper and pan to scoop up the absorbent material and any unabsorbed blood or body fluids. Place the absorbent agent, scraper and pan into a waterproof bag.
- Put on new gloves and clean the surface with approved detergent and warm water, using a disposable cloth or sponge. Place the cloth into the waterproof bag, seal and put it in the rubbish bin.
- Wipe the area with approved disinfectant and allow to dry.
- Remove and discard gloves.
- Wash hands thoroughly with soap and warm water.

Dealing with nasal discharge:

- Wash your hands every time after you wipe a child’s nose to reduce the spread of germs. If you cannot wash your hands after every nose wipe, use approved sanitising lotion. Refer to

- Go to STEP 3.
the Hand Washing and Gloves Procedure.
- Dispose of dirty tissues immediately.

Exposure:
Because of the risk of infection, it is important for everyone to avoid contact with bodily fluids. But if it does spill onto another adult or child, take the following precautions:
- Wash the area of contact thoroughly with soap and warm water.
- Wash hands thoroughly.
- If contact has been made with an open wound, broken skin, mucous membrane (such as mouth or eyes) or a penetrating injury:
  - If the fluid contacted a wound or broken skin, wash the area thoroughly with soap and water.
  - Seek medical advice.
  - Complete the online incident notification immediately.

All Staff:
All toys need to be washed at the end of each day after use, especially this in rooms with younger children.

A ‘toys to be washed’ box will be available in each room to place removed toys ready to be washed.

Remove toys for washing during the day:
- When a child sneezes on it.
- When it has been mouthed.
- After it has been discarded by a child who is unwell.
- After it has been used in the nappy change area.

Wash toys daily with warm water and approved detergent to help loosen the germs so that they can be washed away. Rinse well and dry them. All toys including cloth toys and books can be dried by sunlight.

Books should be inspected for visible dirt and soiling. Books can be cleaned by wiping them with a moist cloth with approved detergent on it, and then drying them. Leave damp or wet books out of circulation until dry.

Many toys can be cleaned in the dishwasher.

Dummies or Pacifiers:
Children should not share dummies

When not in use, dummies should be stored in...
individual plastic containers, labelled with the child’s name.

Store dummies out of children’s reach and do not let the dummies come in contact with another dummy or toy.

### All Staff:

### Sneezing and Coughing:

To control the spread of germs, children should be encouraged to either:

- Cover their mouth and nose with a tissue when they sneeze or cough, then dispose of the used tissue appropriately. Wash their hands with soap and water, and dry thoroughly, or
- Cough or sneeze into their upper sleeve, or elbow, not into their hands. Then wash their hands with soap and water, and dry thoroughly.

### Blowing Out Candles:

When it is a child’s birthday, many children like to bring a cake to share with their friends. We encourage families to provide individual cupcakes with a single candle to minimise the spread of droplet infection.

### Play dough:

Play dough has a high salt content which discourages germs from living and multiplying. The following simple steps will reduce the risk of spread of disease when using play dough:

- Hand washing before and after using play dough
- Store the play dough in a sealed container in the refrigerator between uses
- Make a new batch of play dough each week
- If there is an outbreak of vomiting and/or diarrhoea, discard play dough at the end of the day and make a new batch each day during the outbreak.

### Definitions

#### Approved Sanitising Lotion:

- Taren Cleanplus Antibacterial No Water Hand Sanitiser

#### Approved Detergent:

- Taren Neutral Cleaner
Approved Disinfectant:
- Taren Bleach 6% (dilute at 10-1)

Bodily Fluids:
- Liquids originating from inside the body of living people such as vomit, saliva, urine and mucus etc.

**Related policies**

*Children’s Health and Safety Policy; Workplace Health and Safety Policy.*

**Responsibilities**

This procedure is to be implemented by: All Centre Staff

Content owners: Sara Meredith, Child Wellbeing Manager
## Purpose of this procedure

To provide a positive and hygienic toileting experience for all children at Goodstart Early Learning (Goodstart) centres.

<table>
<thead>
<tr>
<th>Step No.</th>
<th>Overview</th>
<th>Description / Who is responsible</th>
<th>Next steps</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STEP 1</strong></td>
<td>Toilet Training Preparation</td>
<td><strong>Staff Member:</strong> Ask the family to provide information about the toileting strategies being used at home, and to provide additional changes of clothing while their child is toilet training.</td>
<td><strong>Go to STEP 2.</strong></td>
</tr>
</tbody>
</table>
| **STEP 2** | Toilet Training | **Staff Member:** The toilet training process is to be made a positive experience for children, and one which promotes their self-esteem.  

Gloves must be worn while toileting children. Educators with cuts, abrasions, dermatitis or open wounds on their hands should have the area covered with a water resistant dressing.  

Toilets are preferred over potties due to the risk of potties spreading infectious diseases.  

- Encourage children to sit on the toilet or potty for as long as they are willing. Stop the process if the child shows signs of distress.  
- Do not punish or embarrass children if they have a toileting accident.  
- Encourage children to wipe from front to back, especially girls, and to flush the toilet themselves after each use.  
- Remove gloves by peeling them back from the wrist and turning them inside out and dispose of them in a hygienic manner.  
- Wash your hands and the child’s hands. Refer to the Hand Washing and Gloves Procedure.  
- If the child is using pull-ups or nappies, refer to the Nappy Changing procedure. | **Go to STEP 3.** |
| **STEP 3** | Soiled or Wet Clothing | **Staff Member:** If a child has soiled or wet their clothing, follow the steps below:  

- Wear gloves when removing soiled or wet clothing.  
- Assist the child to remove the clothing.  
- Place the child on the toilet or potty.  
- Assist the child to clean themselves using either toilet paper or disposable wipes.  
- Discard wipes in a nappy disposal bin.  
- Remove gloves by peeling them back from the wrist and turning them inside out. Dispose of them in a hygienic | **Go to STEP 4.** |
manner.

- Wash your hands and the child's hands. Refer to the Hand Washing and Gloves Procedure.
- Assist the child to redress and return to the room.
- Put a new pair of gloves on.
- Carefully empty soiled clothing into the sluice or toilet, to reduce the spread of germs.
- Place soiled, wet clothing or linen into a waterproof bag labelled with the child's name and then into a sealed plastic container. Store in the children's bathroom (where possible) for the family to collect at the end of the day.
- Remove gloves by peeling them back from the wrist and turning them inside out and dispose of them in a hygienic manner.
- Document the toileting on the Routine Information Record of your choice.

Staff Member:

- Clean bathrooms during lunchtime, at the end of the day and after any incidental spills. Check the bathroom during the day and clean if it is visibly dirty.
- Wear gloves to clean the bathroom.
- Sinks, toilets and the surrounding areas must be washed with approved detergent and warm water. Be sure to wash tap handles, toilet seats, toilet handles and door knobs.
- If there is an outbreak of an infectious disease, approved disinfectant may be used following cleaning with detergent and water.
- Rinse potties and disinfect thoroughly after each use. If the child must use a potty, empty the contents into the toilet and clean the potty with approved detergent and warm water. Do not wash the potty in a sink used for washing hands.
- If the sandpit is contaminated by animal faeces, human faeces, blood or other bodily fluids, clean the area by removing any contaminated sand with a shovel. Place the sand in a waterproof bag and dispose into the rubbish bin. The remaining sand should be raked over at intervals during the day and left exposed to the sun.

Related policies

Children’s Health and Safety Policy.

Responsibilities

This procedure is to be implemented by: All Goodstart Centre Staff.

Content owners: Sara Meredith, Child Wellbeing Manager.
### Purpose of this procedure

To ensure the identification and management of unwell children while attending Goodstart Early Learning (Goodstart) centres.

<table>
<thead>
<tr>
<th>Step No.</th>
<th>Overview</th>
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<th>Next steps</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STEP 1</strong></td>
<td>Arrival and Identification</td>
<td>Parent / Guardian: The Centre Director is to be informed upon arrival if the child appears unwell, or has a medical condition and/or has been in contact with an infectious disease.</td>
<td>Go to STEP 2.</td>
</tr>
<tr>
<td><strong>STEP 2</strong></td>
<td>Monitoring</td>
<td>All staff: Actively monitor children for signs and symptoms of being unwell throughout the day, including:</td>
<td>Go to STEP 3.</td>
</tr>
<tr>
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<td>- A temperature that remains above 38°C or continues to rise;</td>
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<td>- Irritable, agitate, fretful, constantly crying, not able to be comforted, behaving abnormally;</td>
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<td></td>
<td>- Change in eating or drinking habits;</td>
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<td></td>
<td>- Listless, quiet, inactive, has no interest in normal play activities;</td>
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<tr>
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<td>- An excess number of wet or soiled nappies and/or an unusual colour or smell to urine or faeces;</td>
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<td>- Unusual state of consciousness or behaviour or sleeping at unusual times;</td>
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<td></td>
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<td>- Reacting adversely to medication;</td>
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<td></td>
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<td>- Erratic breathing;</td>
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<td>- Vomiting;</td>
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<td>- Sudden discolouration or rash.</td>
<td></td>
</tr>
<tr>
<td><strong>STEP 3</strong></td>
<td>Temperature Monitoring</td>
<td>All Staff: Ensure regular monitoring of the unwell child’s temperature, completing the Temperature Form each time the child’s temperature is taken. A single dose of centre paracetamol may be administered in unforeseen circumstances (except in SA) and must only be administered after methods of reducing a temperature naturally have not achieved a reduction in the child’s temperature. Paracetamol must be administered in accordance with the Administration of Medication to Children Procedure.</td>
<td>Go to STEP 4.</td>
</tr>
</tbody>
</table>
## NQS2 Unwell Children PROCEDURE

<table>
<thead>
<tr>
<th>STEP</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STEP 4</strong></td>
<td><strong>Notification</strong></td>
<td><strong>All Staff:</strong> Notify the Centre Director if the child continues to appear unwell or displays increased signs or symptoms over the course of one hour.</td>
</tr>
<tr>
<td><strong>STEP 5</strong></td>
<td><strong>First Aid</strong></td>
<td><strong>All Staff:</strong> If the unwell child requires the administration of First Aid, please consult the Incident Management Procedure</td>
</tr>
<tr>
<td><strong>STEP 6</strong></td>
<td><strong>Contact Family</strong></td>
<td><strong>Centre Director:</strong> Contact the parents or guardians to inform them of the situation and advise of exclusion requirements, if appropriate, as per Staying Health in Childcare. If the parents or guardians cannot be contacted, notify the nominated emergency contacts. If unable to speak with any of the nominated emergency contacts, inform the Area Manager or State Manager.</td>
</tr>
<tr>
<td><strong>STEP 7</strong></td>
<td><strong>Exclusion Assessment</strong></td>
<td><strong>Centre Director:</strong> Assess if exclusion of the child is required. - Children exhibiting signs and symptoms outlined in Step 2 are to be excluded from the centre until well, or until the exclusion period has lapsed. - If the child’s temperature continues to remain above 38 °C over the course of one hour, request that the Parents or Guardians collect the child immediately and exclude from the centre until resolved or cleared by a medical practitioner. - For children with a contracted infectious disease, follow the Infectious Disease Identification, Management, Notification and Exclusion Procedure.</td>
</tr>
<tr>
<td><strong>STEP 8</strong></td>
<td><strong>Management and Notification of Infectious Disease</strong></td>
<td><strong>Centre Director:</strong> If the illness is suspected or determined to be an infectious disease, notification and management as per the Infectious Disease Identification, Management and Exclusion Procedure is to occur immediately to the Critical Incidents Team.</td>
</tr>
<tr>
<td><strong>STEP 9</strong></td>
<td><strong>Ongoing Management</strong></td>
<td><strong>All Staff:</strong> Continue to monitor the child throughout the day and consult with Parents / Guardians when the child is picked up as to their progress and condition while at the centre.</td>
</tr>
</tbody>
</table>

### Related Documents

- Temperature Form Appendix
- Administration of Medication to Children Procedure
- Incident Management Procedure
- Infectious Disease Identification, Management, Notification and Exclusion Procedure

### Related policies

- Children’s Health and Safety Policy

### Responsibilities
This procedure is to be implemented by: All Goodstart Centre Staff.

Document Author: Sara Meredith, Child Wellbeing Manager.
Purpose of this requirement

To ensure the safe and effective management of the enrolment, education and care of children who may suffer from asthma.

Definitions

Asthma:
- A medication condition where a person has sensitive airways in their lungs, which may become restricted, making it difficult to breathe.

Trigger:
- An agent, substance or situation that initiates or stimulates an action.

Applicability of this requirement

Identification and notification:
- Parents and guardians are required to inform the centre if their child is susceptible to asthma at the time of enrolment, or upon first becoming aware.
- Where the child has been identified as at risk of asthma, refer to the Inclusion Support Procedure.

Enrolment:
- Any child at risk of asthma must have their additional need entered in Qikkids on the child details Custom tab.
- Prior to the commencement, or upon first becoming aware of a child at risk of asthma, an individual Medical Management Plan signed by the child’s Medical Practitioner must be provided, and an Asthma Management Plan developed for each at risk child in consultation with their family.

Asthma training:
- Prior to commencement, or upon first becoming aware of a child at risk of asthma, all centre staff who have not undertaken the ‘Provide Basic Emergency life Support’ or ‘Apply First Aid Course’ must undertake first aid training.
- Centre staff must then undertake annual refresher first aid training (which covers asthma) for the duration the child at risk is enrolled at the centre.
- To arrange training, Centre Directors should consult with the Health and Safety Team at healthandsafety@goodstart.org.au.

Risk minimisation strategies and medical management plan details:

If a child at risk of asthma is enrolled at the centre, the Centre Director must ensure that -
• Strategies agreed to by the parents or guardians and the child’s Medical Practitioner on the immediate response to and management of an asthma event have been documented on the Asthma Management Plan and Medical Management Plan, and implemented.
• The at-risk child can be clearly identified at the centre by displaying the child’s Medical Management Plan in a staff-only area, though permission from the child’s family to display it in the room may be requested if centre staff believe this to be beneficial.
• All staff understand and are familiar with the types of triggers and early warning signs of asthma for each at-risk child.
• Any communication to centre staff, the at-risk child’s parents or guardians is undertaken as required.
• Any medication for the child is fully understood by centre staff and administered in accordance with the Administration of Medication to Children Procedure.
• Asthma medication is to be stored in a location that is inaccessible and out of reach to children at all times in the same room where the child is enrolled.
• The medication must be kept in its original container or bottle, clearly labelled and easily identified as belonging to the child at risk of an asthmatic event. The medication must not be kept in a child’s bag.
• Scheduled checks and reviews of the Medical Management Plan and Asthma Management Plan must be undertaken by nominated centre staff with the at-risk child’s parents or guardians.
• Essential risk minimisation strategies and immediate first-aid action for the at-risk child must be known by all centre staff.

Identification:

• The signs and symptoms of an asthmatic event can include coughing, wheezing, chest tightness, difficulty breathing and shortness of breath.
• Asthma can be caused by triggers similar to those that can cause allergies, such as cold air, exercise, colds or influenza, pollens, moulds, grasses, animal hair, cigarette smoke, and certain drugs or chemicals.
• The most noticeable signs of a severe asthma attack include: rapid, shallow and difficult breathing; difficulty speaking more than a few words; chest tightness and coughing; distress; wheezing or a whistling sound in the chest (though severe asthma can sometimes be silent); over-exaggeration of breathing; and/or disorientation in the child.
• It is important to remember that young children may not be able, or know how, to express what the problem is.

In the event of an asthma attack:

• Take immediate action as per the child’s Medical Management Plan, and follow relevant first aid processes where requirement.
• Follow the Incident Management Procedure in the event of an asthma attack.
• Notify the Critical Incident Team in the event of an asthma attack.

Related documents

- Asthma Management Plan Appendix
- Medical Management Plan Appendix
- Incident Management Procedure
- First Aid Management Requirement
- Inclusion Support Procedure
- Administration of Medication to Children Procedure

Related policies

- Children’s Health and Safety Policy
- Workplace Health and Safety Policy

Responsibilities

This requirement is to be implemented by: All Goodstart centre staff.
Document Author: Kylie Warren-Wright, National Health and Safety Manager.
Purpose of this requirement

Goodstart Early Learning (Goodstart) is committed to ensuring that all aspects of children’s safety are protected. All children have the right to experience quality education and care in an environment that provides for their health and safety. This should be complemented by a focus on promoting each child’s wellbeing and providing support for each child’s growing competence, confidence and independence (Guide to the National Quality Standard, page 50).

Children’s wellbeing can be affected by all of their experiences within and outside the setting. It is essential that educators and co-ordinators attend to children’s wellbeing by providing warm, trusting relationships and predictable and safe learning environments.

When children feel safe, secure and supported they grow in confidence to explore and learn (EYLF, page 20).

Applicability of this requirement

Indoor and Outdoor Spaces and Fencing

- Complete regular safety checks of the indoor environment and equipment throughout the day.
- Check all indoor areas, including sleep areas for any defects or hazards likely to cause injury. If a defect or hazard is identified take the required action as outlined in the Physical Environment Policy and any relevant associated procedures.
- Ensure hazardous products including chemicals are stored securely at all times in accordance with the Hazardous Substances Management Procedure.
- Indoor spaces must be well ventilated, have adequate natural light and maintained at a temperature that ensures the safety and wellbeing of children.
- There is an operating telephone or other means of communication, to communicate and receive calls (this includes for excursions).
- There is an adequate area available at the service for conducting the administrative functions, consulting with parents and conducting private conversations.
- The service has access to laundry facilities and procedures for dealing with soiled clothing, nappies, and linen, including hygienic facilities for storage prior to their disposal or laundering.
- Safety plugs are in all electrical outlets.
- Check the playground each time before children are taken outdoors. Complete and sign the Playground Checklist for each outdoor space.
- Any outdoor space used by children must be enclosed by a fence or barrier that is of such height and design that, children of pre-school age and under, cannot go through, over or under it. Check the perimeter of all outdoor areas used by children for any defects or hazards.
- The outdoor space provides adequate shaded spaces to protect children from overexposure to ultraviolet radiation from the sun.
- Complete the Lock Up Checklist at the end of each day.

Children’s Learning and Development

- Age appropriate learning experiences / resources are provided for children to ensure their safety and wellbeing.
• In accordance with the Sleep, Rest and Relaxation Requirement reasonable steps are taken to ensure that a child’s need for sleep and rest are met, having regard to each child’s age and development.
• In accordance with the Water Safety Requirement children will be supervised at all times when in contact with any source of pooled water.
• Consideration is given to how children are grouped.

Furniture, Materials, Resources and Toys
• Each child must have access to sufficient furniture, materials and developmentally appropriate equipment.
• Equipment is safe, clean and in good repair and maintained in accordance with the Scheduled General Maintenance Procedure.
• All products and equipment purchased meet Australian Standards.

Cleaning and Maintenance
• Mix bathroom cleaning products daily according to the manufacturer’s instructions. Spray bottles containing water and approved detergent must be emptied at the end of each day and should not be topped up with water to ensure the detergent is not too diluted.
• Complete the activity listed on the cleaning and maintenance schedule daily.

Food Preparation and Storage
• Safe practices are used for handling, preparing and storing food in accordance with the Food Safety Program.
• Hot drinks are prepared and consumed away from children.

Staffing Arrangements
• Two staff must be on premises at all times.
• In accordance with the Supervision Requirement, all children must be adequately supervised and educator: child ratios maintained at all times.
• Educators, staff and volunteers must not consume alcohol or be affected by alcohol or drugs (including prescription medications) that may impair their capacity to provide education and care.
• Closing staff must not leave the centre before the nominated closing time.
• Beginning and end of day duties such as cleaning, preparing early learning environments and securing the premises must not compromise the adequate supervision of children.
• Educators must ensure all children are signed in and out of the attendance record and if not initial and enter the time of arrival/departure.

Incidents and Emergencies
• The centre has appropriate lock down and emergency evacuation procedures.
• An up to date risk register is maintained.
• An appropriate number of first aid kits are provided that are easily recognisable and readily accessible to adults.
• A minimum of (1) person with a current First Aid and CPR qualification will be in attendance at all times.
• The Incident Management Procedure must be followed in the event that a child is injured, becomes ill or suffers a trauma. The parent or emergency contact must be notified as soon as possible. An incident report must be kept and stored until the child is 25 years of age.
• All staff are familiar with the Emergency Preparedness and Evacuation Drills Requirement.
• The arrival and departure of children procedure is followed to ensure children are only released into the care of authorised persons.
• If children have not been collected by closing time, follow the Collection of Children Procedure. Closing staff must not leave the centre before all children have been collected by the parent or authorised person.
• Physically check each area to ensure that all children are accounted for, including sleep areas, outdoor areas and storage sheds.
• All staff who work with children are aware of the current child protection law in the services jurisdiction and understand their obligations under that law.
Excursions

- A risk assessment is completed for all excursions.

Health and Hygiene

- Adequate health and hygiene and infection control practices are implemented.
- Reasonable steps are taken to prevent the spread of infectious diseases and ensure that the parent or emergency contact of each child enrolled at the service is notified of the occurrence of an infectious disease as soon as possible.
- Medication (including prescription, over the counter and homeopathic medications) must not be administered to a child without authorisation by the parent or a person with authority to consent to medication administration for the child.
- The Children’s Health and Safety Policy and associated procedures set out practices for dealing with the management of medical conditions, specific health care needs and allergies. All staff and volunteers are informed about the practices that must be followed. If a child enrolled at the service has a specific health care need, allergy or other relevant medical condition, parents must be provided with a copy of the policy.
- Adequate, developmentally and age-appropriate toilet, washing and drying facilities are available for use by children being educated and cared for by the service.

Visitors

- In accordance with the Visitors to the Centre Procedure, the identification of visitors must be verified and access only provided with appropriate authority. Non-Goodstart staff and contractors without working with children checks must be supervised at all times.

Related Documents

Emergency Management Documents:

Emergency Preparedness and Evacuation Drills - Centres Requirement; Managing a Natural Disaster Procedure; Managing a Robbery, Hold Up or Threatening Situation Procedure.

Physical Environment or Facilities Documents:

Lock Up Checklist; Playground Checklist; Emergency Maintenance Procedure; Scheduled Maintenance Procedure.

General Children’s Health and Safety Documents:

Administration of Medication to Children Procedure; Driver Responsibilities Requirement; Excursions Procedure; Food and Nutrition Requirement; Hand Washing and Gloves Procedure; Infectious Disease Identification, Management and Exclusion Procedure; Incident Management Procedure; Infection Control Procedure; Medical Conditions Requirement; Medication Administration Consent Form Appendix; Sleep, Rest and Relaxation Procedure; Sun Safety and Heat Stress Requirement; Supervision Requirement; Toileting Procedure; Transporting Children Procedure; Visitors to the Centre Procedure; Water Safety Requirement.

Related policies

Children’s Health and Safety Policy; Collaborative Partnerships with Families and Communities Policy; Physical Environment Policy; Staffing Arrangements Policy; Workplace Health and Safety Policy.
Responsibilities

This requirement is to be implemented by: All Goodstart staff.

Document Author: Sara Meredith, Child Wellbeing Manager.
Purpose of this requirement

To ensure adequate supervision is in place at all times when care and education is being provided to children.

Supervision is a key aspect of ensuring that children’s safety is protected in the service environment. Staff need to be alert to and aware of risks and hazards and the potential for accidents and injury throughout the service, not just within their immediate area (Guide to the National Quality Standard, page 72).

Definitions

**Supervision:**
- Children being in sight and / or hearing of a staff at all times including during toileting, sleep, rest and transition routines.

**Direct or Close Supervision:**
- Children being in sight of staff when they are in situations that present a higher risk of injury, for example during water play or excursions.

**Attended:**
- Children being paid close attention when they are in situations that present a higher risk of injury, for example on a nappy change table or in a high chair.

Applicability of this requirement

To ensure effective supervision is maintained at all times when:

Supervising children within the service premises -
- Staff have an understanding of and implement the educator-to-child ratios prescribed by legislation for their state or territory.
- Children are supervised in all areas of the service, by being in sight and / or hearing of a staff member at all times including during toileting, sleep, rest and transition routines.
- Children are unable to access unsafe or unsupervised areas in the service.
- Children are closely supervised when they are in a situation that presents a higher risk of injury – for example on an excursion near a road or water [link].
- Staff adjust their level of supervision depending on the area of the service and the skills, age mix, dynamics and size of the group of children they are supervising.
- Equipment, furniture and activities are arranged to ensure effective supervision while also allowing children to access private and quiet spaces.
- Staff inform new and / or relief staff of the supervision arrangements and what they are required to do in relation to supervising children.
- Babies and toddlers are attended to at all times when they are eating or drinking.
• Babies and toddlers are attended to closely when they are in situations that present a higher risk of injury – for example on a nappy change table or in a highchair.
• Supervision arrangements are flexible to accommodate individuals or small groups of children, such as while sleeping and while both indoor and outdoor experiences are offered.
• If children are taken on excursions, the service must have a completed Excursion Plan [link] and Risk Assessment [link] detailing the supervision plan.
• Staff plan for the supervision of children in indoor and outdoor areas including supervision of nappy changing / toileting, and meal and sleep routines.

Supervising children outside of the service premises:

Vehicle Supervision -

• At no time are children to be left in a vehicle unsupervised.
• Goodstart buses are fitted with a rear-view convex mirror on the front passenger side so that the driver has a clear view of all children.

Walking Supervision

• Where possible children must walk in pairs (two lines).
• Staff will be positioned at the front and back of the group or in a position where all children can be observed at all times.
• Staff will keep children together as a group at all times.
• Where possible, all children are to stay on the footpath and main roads will only be crossed at designated pedestrian crossings. All persons must adhere to traffic rules and pedestrian safety guidelines.

Related Documents: Child Safe Environment Requirement; Water Safety Requirement; Excursions Procedure.

Related policies

Children’s Health and Safety Policy; Physical Environment Policy.

Responsibilities

This requirement is to be implemented by: All Goodstart Centre Staff.

Content owners: Tara Harnett, Quality Manager.
Medical Conditions

Purpose of this requirement

To ensure that Goodstart Early Learning (Goodstart) minimises the potential risk that may arise from any medical condition, including anaphylaxis, that could adversely affect the health, safety and wellbeing of any person enrolled or employed at a Goodstart Centre.

Definitions

Anapen®:
- An adrenaline auto-injection device containing a single dose of adrenaline.

Anaphylaxis:
- The most severe form of an allergic reaction, which has the potential to be life threatening.

Adrenaline auto-injection device:
- A device containing a single dose of adrenaline, delivered by a spring-activated device which is concealed until administered.

At-risk:
- Those whose medical condition has been diagnosed by a Medical Practitioner and who are at risk of the condition affecting them whilst they are at a Goodstart Early Learning site, service or facility.

Epipen®:
- This is one form of an auto-injection device containing a single dose of adrenaline. Two strengths are available, an Epipen® and an Epipen Jnr®, which are prescribed according to the child's weight.

Medical Emergency:
- An illness or injury that immediately jeopardises the health, safety and wellbeing of a person, ie a critical incident.

Oral Medication:
- The administration of a tablet, a capsule, an elixir or a solution or other liquid form of medication by mouth.

Severe Allergy:
- Any allergy which results in an illness, respiratory complications or anaphylaxis.

Subcutaneous:
- A subcutaneous injection is an injection in which a needle is inserted just under the skin.

Trigger/Event:
- An agent, substance or situation that initiates or stimulates an action.
Applicability of this requirement

- Children at risk of a medical condition that has the potential to escalate to a medical emergency will be identified upon enrolment.
- A Medical Management Plan must be provided for any child enrolled at a Goodstart centre with a specific health care need, allergy or relevant medical condition, which is to be followed in the event of an incident relating to the child's condition. The Medical Management Plan will also include a risk minimisation plan and communication plan.
  - The risk minimisation plan will outline the agreed risk minimisation strategies that will be adopted by centre staff to ensure the best practice prevention and management of a child identified at risk of a medical condition that has the potential to escalate to a medical emergency. The risk minimisation plan will be developed in consultation with the family for children enrolled at the centre.
  - The communication plan will ensure that all centre staff (including contractors, volunteers and students) are informed about the medical management requirement, medical management plan and risk minimisation plan for the child. The plan will also ensure that all centre staff (including contractors, volunteers and students) can identify the child and the location of their medication. Staff must complete the Staff Acknowledgement of Medical Management Plan Appendix.
  - The communication plan will ensure changes can be made to the Medical Management Plan and risk minimisation plan for the child in writing at any time.
  - The Medical Management Plan must be reviewed at least annually.
  - The Medical Management Plan is to be displayed in an area accessible by staff who are responsible for the child's education and care, unless the family does not consent.
  - A copy of the Medical Management Plan must be kept on the child's enrolment file.
  - A separate Medical Management Plan is to be provided by a Medical Practitioner for diabetes and epilepsy, which must include a detailed action plan for the management and treatment of these conditions.
- All centre staff (including contractors, volunteers and students), parents and guardians must be provided with this Medical Conditions Requirement to inform them about how the centre manages the risk of medical conditions that have the potential to escalate to a medical emergency, for at risk children enrolled at the centre.
- The agreed risk minimisation strategies will be implemented to ensure the risk of exposure to known allergens, which may trigger an allergic reaction or response for a child identified as at risk of anaphylaxis, is minimised to as low as reasonably practicable.
- Best practice training, information and guidance will be provided to staff and families to raise awareness of medical conditions that present a risk to the health, safety and wellbeing of any child enrolled at a Goodstart centre.
- A child with a specific health care need, allergy or relevant medical condition must not attend the service without medication prescribed by their medical practitioner in relation to the specific health care need, allergy or relevant medical condition. All reasonable action will be taken to call the child’s emergency contact to notify of an expired or missing medication and the need for this to be replaced immediately if the child is in attendance.
- All centre staff have adequate knowledge of allergies, anaphylaxis and emergency procedures to ensure the immediate response in the event of a person experiencing anaphylaxis or allergic reaction by initiating appropriate treatment, including administering an adrenaline auto-injection device (ie EpiPen® or Anapen®).
- At least one staff member on duty must have current approved first aid, asthma and anaphylaxis management training and immediate first aid treatment and the administration of medication will be provided in the event of a child experiencing a medical condition that escalates to a medical emergency.
- Children must not self-administer medication whilst in attendance at a Goodstart centre.
Related Documents

Allergy and Anaphylaxis Enrolment and Management Requirement; Anaphylaxis Risk Minimisation Plan Appendix; Asthma Enrolment and Management Requirement; Asthma Management Plan Appendix; Diabetes Enrolment and Management Requirement; Diabetes Management Plan Appendix; Epilepsy and Seizures Enrolment and Management Requirement; Epilepsy and Seizures Management Plan Appendix; Medical Management Plan Appendix; Staff Acknowledgement of Medical Management Plan Appendix.

Related policies

Children's Health and Safety Policy.

Responsibilities

This requirement is to be implemented by: All Goodstart Centre Staff.

Document Authors: Sara Meredith, Child Wellbeing Manager.
Purpose of this requirement

To ensure each child’s comfort is provided for and there are appropriate opportunities to meet each child’s individual need for sleep, rest and relaxation in accordance with safe sleeping practices.

To ensure all infants in our care are slept in a safe sleeping environment to reduce the risk of Sudden and Unexpected Death in Infancy (SUDI), including Sudden Infant Death Syndrome (SIDS) and fatal sleeping accidents through best safe sleeping practice (SIDS and Kids Infant Safe Sleeping Child Care Kit 2013).

Definitions

Approved Sanitiser

- Germex or Taren Neutral Cleaner.

Rest

- A period of inactivity, solitude, calmness or tranquillity, and can include a child being in a state of sleep.

Relaxation

- Recreation or other activity for bringing about a feeling of calm in your body and mind.

Sudden Infant Death Syndrome (SIDS)


Comforter

- Belonging of the child that invokes a sense of security.

Sudden and Unexpected Death in Infancy (SUDI)

- The sudden and unexpected death of an infant under 1 year of age after they were placed to sleep. It includes explained and unexplained deaths.

Infant

- Young children between the ages of 1 month and 12 months.

Applicability of this requirement

Regulation 81 of the Education and Care Services National Regulations (2011) relating to 'sleep and rest', identifies that the educators must take reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for by the service are met, having regard to the ages, development stages and individual needs of the children.

On arrival at the centre educators must:
• Seek regular information from children and families concerning sleep, rest routines and practices which relate to their values and beliefs and discuss how this will occur at the centre.
• Assist families to store any linen provided. Linen must be appropriate for the season and be provided for children on a weekly basis in an individually named sleep bag for storage.
• Have access to current safe sleeping information at the centre which can be accessed by staff or families as required.
• Educators will consider the request of families in relation to children's sleep routines while taking into account the needs of the group and individual needs of each child.

Preparation of Rest Area:

• Cots and other bedding equipment and accessories must meet Australian Standards.
• Position beds and cots with unobstructed access to assist in managing emergency situations and to reduce the risk of cross infection or injury.
• Provide children with a safe sleeping environment removing from reach all potential dangers including cords or strings, heaters and electrical appliances.
• Only one child is permitted per bed or cot for rest time.
• If a child does not have linen for rest time, the centre must provide clean linen for use on the day.
• Ensure that the room temperature and linen is appropriate for the climate.
• Older children are to be encouraged to make their own beds.
• Ensure sleep room viewing windows are free from obstruction.
• Cots must be prepared following the below:
  o The bottom sheet must be firmly tucked in.
  o The covering sheet and light blanket must be firmly tucked in at the bottom to prevent the baby or child from covering their head during rest.
  o Do not use doonas, pillows, lamb's wool, thick quilts, bumpers, soft toys or pacifiers attached to a chain in cots.

Child Transition to Rest Time

• Each child's face and hands are to be washed before transitioning to sleep and rest time. Encourage older children to do this for themselves.
• Remove excess clothing including jewellery, bibs and shoes from all children. Encourage older children to do this for themselves.
• Ensure clothing is appropriate to the season and room temperature.
• If a child does not change clothes, respect their need for privacy.
• Ensure there is sufficient lighting for staff to observe children resting and enable children to undertake quiet activities.
• Provide well-ventilated areas for sleeping and resting.
• A bottle required prior to rest, must be offered before laying the infant down. Infants are not to be placed in the cot with a bottle. Young children must always be sitting down while feeding from a bottle or sippy cup.
• To reduce the risk of SIDS and fatal sleep accidents ensure the following practices are being carried out:
  o Always place infants on their back to sleep. Infants who are easily able to turn over and move around in the cot must still be placed on their backs while resting, even if they later choose their own resting position. This usually occurs when the child is six months or older.
  o If a family requests their child sleeps contrary to these requirements, staff are to provide them with current evidence based educational resources such as SIDS fact sheets in order to facilitate informed decisions regards safe sleeping. If the family is still not in agreement due to a rare medical condition, then a letter from a medical practitioner or specialist must be provided, outlining alternative sleep positions for the child. This will need to be submitted to the inclusion support team as part of an inclusion support application.
  o Position the infant's feet at the bottom of the cot.
  o Ensure the infant's face remains uncovered.
Sleep and Rest Time:

Staff must adequately supervise infants and children during sleep and rest time in accordance with relevant legislative requirements.

Children:

- Ensure children’s needs for sleep and rest are met, having regard to each child’s age and development.
- Routines and environments should be flexible enough to support children who do not require a sleep and those who seek rest and relaxation throughout the day (Guide to Education and Care Services National Law and the Education and Care Services National Regulations, page 57).
- Provide quiet play activities for children who choose not to sleep or rest.

Infants:

- Infants must not sleep in a pram, rocker or bouncer. If they fall asleep in these pieces of equipment, transfer the infant to a cot.
- Cot sides must be pulled up when an infant is placed in a cot.
- Staff ensure that sleeping infants are closely monitored. Physically check resting/sleeping infants at regular intervals. Check each child in the infant sleep room to ensure that their chest or back is rising and falling and the colour of their skin to ensure their safety and wellbeing.
- The Infant Sleep Room Record (link) is to be completed as educators regularly monitor sleeping infants. Document each child’s individual sleep/rest on the Routine Information Record (link) of your choice.

Child Transitioning Out of Rest Time

- Acknowledge children as they wake.
- Ensure infants and children’s clothing is appropriate to the season and temperature. Encourage older children to dress themselves. If children change clothes, respect their need for privacy.
- Prior to children moving to quiet learning experiences, encourage them to remove the bed linen and place it in their sleep bag.
- Store linen appropriately to prevent cross contamination.
- Clean beds with an approved sanitisier and stack safely at the end of rest time.
- Linen is to be laundered after the child’s last day of attendance each week. Only Centre provided linen is to be washed at the Centre. Soiled linen should not be carried against clothing, instead use a basket, waterproof bag or other alternative. Linen is not to be shared by children without prior washing. Insure there is sufficient clean linen for the number of children attending each week.
- Make up each infant’s cot for the next day of care and sanitise the mattress after the child’s last day of attendance for the week.
- If a child has soiled themselves during rest time refer to the Toileting Procedure (link). Parent provided linen that has been soiled should be placed into a waterproof bag, labelled with the child’s name and then into a sealed plastic container. Centre provided soiled linen should be handled wearing gloves and:
  - Soaked to remove the bulk of the contamination
  - Washed separately in hot water and detergent
  - Dried in the sun or on a hot cycle in the clothes dryer

Things you might like to consider when thinking about sleep, rest and relaxation:

- Play suitable rest music to create a soothing atmosphere. See the reference to the use of music in the Curriculum Development Guideline (link) when considering the use of music during rest time.
- Children who do not sleep in a cot may be provided with a comforter where necessary, ensuring adequate supervision is provided by educators at all times.
- Sleep and rest practices that are consistent with contemporary views about children’s health, safety and welfare and that meet children’s individual needs are considered (Guide to the National Quality Standard, page 56).
Research has found that there are long-term benefits of sleep, particularly in infants. Sleep is an important part of the cognitive process in which activity in certain brain regions are more active during sleep than when awake.

- Sleep plays a critical role in consolidating learning into long term memory throughout the lifetime (Oats et al. 2012).

**Related Documents**

*Infant Sleep Room Record Appendix; Routine Diary – Nursery and Toddler Appendix; Routine Record 3 to 6 years Appendix; Routine Record – Nursery and Toddler Appendix; Routine Record – Toddler and Kindy Appendix; Toileting Procedure; Curriculum Development Guideline.*

**Related policies**

*Children's Health and Safety Policy*

**Responsibilities**

This requirement is to be implemented by: All centres across Australian States and Territories

Document Authors: Tania Howard, NQF Analyst
Sun Safety and Heat Stress

Purpose of this requirement

To minimise the possibility of illness or risk to health from heat stress and/or Ultraviolet Radiation (UVR) by ensuring that all children and staff are protected against the harmful effects of the sun’s UVR.

Definitions

Heat Discomfort

- Factors which cause discomfort without having adverse health effects. For example, rashes.

Heat Exhaustion

- Heat exhaustion is the result of excessive loss of body fluid through perspiration. Symptoms are: fatigue, nausea, dizziness, headaches and clammy skin.

Heat Strain

- Series of physical responses to heat stress. The responses may vary from discomfort to heat disorders such as heat exhaustion and heat stroke.

Heat Stress

- The combination of environmental and physical work factors which make up the heat load on the body.

Heat Stroke

- Heat stroke is more unusual and more dangerous than heat exhaustion. It occurs when the body’s heat-regulating mechanism fails completely. Early recognition and medical attention are essential. Warning signs include confusion, irritability, fitting and hot dry skin.

Sun Safe Clothing and Equipment - Sun Smart Clothing

- Hats must protect the face, neck and ears, ie legionnaire, broad brimmed or bucket hats. Baseball caps do not offer enough protection and therefore are not acceptable
- Sleeved shirts with high neck collars – made of UPF 50+ material (close-weave material that blocks UVR)
- Shorts - loose and long-legged
- Sunglasses:
  - 100% UV resistant conforming to Australian Standard 1067 (as labelled on the swing tag) - having side protection from the sun’s rays, but which do NOT obscure peripheral vision.
- Sunscreen:
  - Broad spectrum, water resistant SPF 30+ sunscreen. Apply at least 20 minutes before exposure so that cream can be “absorbed” into the skin, for effective protection. Note: With higher SPF sunscreens a small number of people may be sensitive to some types of sunscreens. If skin rashes occur, choose a brand designed for sensitive skin.

SPF

- Sun protection factor refers to the ability of a sunscreen to block ultraviolet rays, which cause sunburn.
UPF

- Ultraviolet protection factor. The UPF rating indicates how effective a fabric is at blocking out ultraviolet radiation.

UV/UVR

- Ultraviolet radiation is found in sunlight. Ultraviolet radiation is invisible to the human eye. There is limited correlation between UV level and daytime temperature. This means that UV levels can still be dangerously high, even on cooler days. UV radiation can also penetrate through clouds. Over-exposure to UV radiation causes eye damage, skin damage, freckles, sun spots, wrinkles, sunburn, and skin cancer.

Applicability of this requirement

A healthy balance of exposures to the sun's UVR is important for health. Too much UVR from the sun can cause sunburn, skin damage, eye damage and skin cancer. Sun protection is needed whenever UVR levels reach three and above. When UV levels are below three, most people do not require sun protection unless they are near highly reflective surfaces such as water or snow, have very fair skin, or if they are outside for extended periods.

Too little UV from the sun can lead to low Vitamin D levels. Vitamin D is formed in the body when the skin is exposed to UVR from the sun and is essential for the development and maintenance of healthy bones, muscles and teeth. The production of Vitamin D varies according to a number of factors including location, time of year, time of day and skin colour. Those with a very dark skin (dark brown/black), or those who rarely/never burn or tan very easily may need 3-6 times the amount of UV exposure for adequate Vitamin D production compared to people with fair skin. Families with children who have very dark skin (dark brown/black), or those who rarely/never burn or tan very easily are encouraged to contact the local Cancer Council for further information and guidelines in relation to Vitamin D. Families that make an informed decision for their child not to have sun protection measures applied in accordance with the Sun Safety and Heat Stress Procedure must complete an acknowledgement and waiver.

State-specified Sun Protection Measures

- Sun protection measures must be adhered to in accordance with the recommendations for your state as specified below and on all days with a moderate UVR Level of 3 and above.
  - ACT: Sun protection is necessary for part or most of each day between August to May when UVR levels reach 3 and above. Minimise outdoor activities and events as much as reasonably practicable between 11am and 3pm during the daylight saving period.
  - NSW: Sun protection measures at all times from October to March, and between 10am and 2pm April to September. Minimise outdoor activities between 11am and 3pm during daylight saving.
  - NT: Sun protection is required all year round as UVR is always high (6-7), very high (8-10) or extreme (11+) during peak UV periods between 10am and 3pm. As the UVR level is often above 3 outside of peak UV periods the UVR level must be checked daily to ascertain when sun protection is required outside peak UV periods.
  - QLD: Sun protection measures required all year round. Plan outdoor activities wherever practicable before 10am and after 3pm, all year round. Outdoor and physical activity must be carefully planned to take place at times during the day when UV levels are lower. Outdoor activities should be avoided around the midday hours when UV levels are highest. Multiple sun protection methods are required whenever the UV Index level is forecast to reach three or above. In Queensland, the UV Index level is usually at three or above all year round.
  - SA: Sun protection measures from September to April with particular care between 10am and 3pm.
  - TAS: Sun protection measures are required from mid-September to mid-April. Active outdoor play is encouraged throughout the year.
  - VIC: Sun protection measures are required from mid-September to mid-April. Active outdoor play is encouraged throughout the year, provided appropriate sun protection measures are used when necessary.
  - WA: Sun protection measures are required all year round when the UVR Level is 3 or above.
• During the months when sun protection is not required in your state, use sun protection measures when near highly reflective surfaces such as snow in alpine regions or when outdoors for extended periods.
• Ensure that outdoor spaces provided include adequate shaded areas to protect children from overexposure to ultraviolet radiation from the sun (Education and Care Services National Regulation 114).
• Exposure to UVR for children under the age of one year is to be minimised. Engage in play with children under one year in shaded areas, including verandas, under trees or indoors. Because children under one have thinner skin and underdeveloped melanin, their skin burns more easily than that of older children.
• Read sunscreen labels carefully. Many sunscreens are not recommended for children under one. Always check the expiry date of sunscreen.
• If a child arrives during outdoor play, ask parents or guardians if sunscreen has been applied. If not, apply sunscreen and encourage the child to play in a shaded location for 20 minutes to allow the sunscreen to become effective.
• Children who refuse to wear sun safe clothing are encouraged to play in an area protected from the sun. Where a child is encouraged to play in shaded areas, discuss the requirement to provide appropriate sun safe clothing with families.

Education and Awareness

• It is a requirement that all staff at the time of induction and regularly thereafter are provided with training in relation to sun safe practices and heat stress.
• All Goodstart staff are to act as role models for children and demonstrate sun safe practices. Families and visitors are also encouraged to act as role models by adopting sun safe practice.
• Sun safety information is available for all families.
• A copy of the Sun Safety and Heat Stress procedure and requirement [link] is to be available to all families, staff, contractors, students and volunteers.
• Where possible staff are to incorporate sun safety awareness learning experiences into the educational program.
• Sun safety and the availability of shade will be considered when planning all outdoor activities and excursions.

Provide Personal Protective Equipment/Clothing

• Families are requested to provide sun safe clothing for their child/ren’s use.
• Families of children with known skin allergies are required to provide their own sunscreen.
• Staff must wear sun safe clothing and apply sun protection measures.

People who spend a lot of time in the sun risk developing heat stress and heat-related illness, which is a physical response designed to reduce body temperature. Types of heat illness and the symptoms associated with them include:

• Mild heat illness / discomfort - flushed skin, increased sweating, heat rashes (prickly heat), feeling tired, weak or dizzy, cramps, reduced work / learning capacity, reduced attention span, irritability;
• Heat exhaustion - fainting, headache, low blood pressure, nausea, clammy, pale or flushed skin, normal to high body temperature (up to 39C);
• Heat stroke - irritability, confusion, speech problems, hot dry skin, convulsions, unconsciousness, body temperature above 40C, cardiac arrest - potentially fatal.

If you believe a person or child is suffering from a heat illness, keep them in a cool location and encourage them to drink cool but not cold fluids. Seek immediate first aid from the first aid officer.

To assist in reducing the risk of heat illness:

• Ensure there is cool drinking water accessible at all times.
• Drink water at frequent intervals to reduce fluid loss in sweating;
• Have rest breaks in a cool place;
• Staff / families should inform their Director/Manager of any underlying health condition that may increase the risk of heat illness;

• Wear sun safe clothing and apply sun protection measures;
• Use mechanical aids where possible to reduce physical exertion.

Related policies

Children’s Health and Safety Policy.

Responsibilities

This requirement is to be implemented by: All Goodstart Centre Staff.

Content owners: Sara Meredith, Child Wellbeing Manager
Infant Sleep Room Record

After each sleep room check, place an initial beside the corresponding minute interval.

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**DOCUMENT NUMBER & TITLE**: NQS2 Infant Sleep Room Record APPENDIX

**POLICY OWNER**: Stan Coulter, General Manager, Governance and Risk

**CONTENT OWNER**: Briony McDougall, NQS Support Officer

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# Medication Administration Consent Form

## Child and Parent/Guardian Details

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<th>Parent/Guardian (Primary):</th>
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<tbody>
<tr>
<td>Date of Birth:</td>
<td>Parent/Guardian (Secondary):</td>
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<tr>
<td>Child’s Known Allergies:</td>
<td>Contact Telephone Number:</td>
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## Parent/Guardian or Authorised Nominee to Fill in Details

<table>
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<tr>
<th>Medication</th>
<th>Last Dosage Given</th>
<th>Administration Instructions</th>
<th>Authorisation</th>
<th>Received By</th>
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<td>Date</td>
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## Administrator to Fill in Details, Person Checking and Parent/Guardian or Authorised Nominee to Sign After Administration

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<th>Acknowledgement</th>
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Ensure you are using the latest version of this policy. You can find it at http://policies.goodstart.org.au/PoliciesandProcedures/NQS2%20Medication%20Administration%20Consent%20Form%20APPENDIX.docx

Warning – uncontrolled when printed. This document is current at the time of printing and may be subject to change without notice.
# Asthma Management Plan

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<th>Date:</th>
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**Usual Asthma Management**

**How often does your child have asthma symptoms?**

- [ ] Infrequently (less than 5 times per year)
- [ ] Frequently (more than 5 times per year)
- [ ] Most Days / Daily
- [ ] Usually when exercising

**How do you recognise that your child is having an asthma attack?**

- [ ] Wheezing (whistling noise from the chest)
- [ ] Difficulty with breathing
- [ ] Coughing
- [ ] Tightness in chest
- [ ] Other: [ ]

**How do you recognise that your child’s asthma is worsening?**

**What are your child’s asthma triggers (things that make asthma symptoms worse)?**

**Does your child tell you when he/she needs asthma medication?**

- [ ] Yes
- [ ] No

**Does your child need assistance to take asthma medication?**

- [ ] Yes
- [ ] No

**Does your child take any asthma medication before exercise/play?**

- [ ] Yes
- [ ] No

**Does your child require asthma medication whilst the centre?**

- [ ] Yes
- [ ] No

**Medication** | **Dose (i.e. two puffs)** | **Method (i.e. puffer & spacer)** | **Frequency**
---|---|---|---

**What reliever medication does your child normally take when asthma symptoms worsen?**

**Medication** | **Dose (i.e. two puffs)** | **Method (i.e. puffer & spacer)** | **Frequency**
---|---|---|---

**Parent/Guardian Name:** [ ]

**Director Name:** [ ]

**Parent/Guardian Signature:** [ ]

**Director Signature:** [ ]

**Date:** [ ]

**Date:** [ ]

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**DOCUMENT NUMBER & TITLE**

NQS2 Asthma Management Plan APPENDIX

**POLICY OWNER**

Stan Coulter, General Manager, Governance and Risk

**CONTENT OWNER**

Kyle Warren-Wright, National Health and Safety Manager

**DATE PUBLISHED**

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**DOCUMENT VERSION**

V6.0

**REVISION DUE DATE**

18/11/2015

**RECORD MANAGEMENT SCHEDULE**

Child Enrolment - Cc3yrs

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Ensure you are using the latest version of this policy. You can find it at:


Warning – uncontrolled when printed. This document is current at the time of printing and may be subject to change without notice.
# Playground Checklist

This checklist must be completed for every playground, each time before children are taken outdoors. If either box is not ticked, a control measure or follow up is needed.

<table>
<thead>
<tr>
<th>Control measure or follow up needed</th>
<th>1. Time</th>
<th>2. Time</th>
<th>3. Time</th>
<th>4. Time</th>
<th>5. Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area and perimeter check</strong></td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
</tr>
<tr>
<td>The entire outdoor area is clean, free from debris and hazards, including fallen tree branches.</td>
<td></td>
<td></td>
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<tr>
<td>The entire outdoor area has been checked and is free of any foreign objects.</td>
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<tr>
<td>Identify any dangerous animals or insects - if found follow Dangerous Animals Procedure.</td>
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<tr>
<td>All fences and gates are intact with no footholds, holes, entrapment areas or breakages.</td>
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<tr>
<td>All fences/gates are secure with working latches/locks in place. Keys are readily accessible to staff in case of emergency evacuation.</td>
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<tr>
<td>Paths and/or bike tracks are clean and swept if required.</td>
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<tr>
<td>Shade sails are still securely fastened to a permanent structure (not a fence or unstable structure).</td>
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<tr>
<td>Neighbouring property is checked for any construction activity - if activity is noted notify your Facilities Manager.</td>
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</tr>
<tr>
<td><strong>Equipment check</strong></td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
</tr>
<tr>
<td>Climbing equipment is at least 1.9 metres away from any fences, buildings or other equipment and objects.</td>
<td></td>
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<tr>
<td>All A-frames and other portable equipment is placed on level ground and is safe. Planks have been securely fastened to the A-frames.</td>
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<tr>
<td>Certified soft fall/tan bark and/or safety mats are placed under and around all climbing equipment that exceeds 50cm in height.</td>
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<tr>
<td>Soft fall mats are in good condition and free from tripping hazards e.g. rips, tears or divots.</td>
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<tr>
<td>Equipment and resources are not placed or stored next to a fence to enable children to scale and exit the premises.</td>
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</tr>
<tr>
<td>All equipment is in good condition, no loose screws, bolts or protruding objects.</td>
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<tr>
<td>All equipment set out is age appropriate, clean, securely fixed, and safe.</td>
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</tr>
<tr>
<td>All equipment and surfaces are safe and do not retain heat from sun exposure.</td>
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</tr>
<tr>
<td>Determine safe locations or boundaries for learning experiences giving consideration to the shade available.</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Sand and bark check</strong></td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
<td>N/A</td>
<td>Y</td>
</tr>
<tr>
<td>Sand and bark are in good condition and free from tripping hazards e.g. rips, tears or divots.</td>
<td></td>
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</tr>
</tbody>
</table>
Remove and store sandpit cover in the shed or an area inaccessible to children. Ensure team lifting or mechanical aids are used.

The sand and bark has been raked.

Area around the sandpit/bark pit has been swept and excess unsold sand/bark has been swept back into the pit. Soiled sand/bark is placed in a plastic bag and in the rubbish bin.

Animal droppings, if found, have been removed.

<table>
<thead>
<tr>
<th>Centre specific check</th>
<th>Y</th>
<th>N/A</th>
<th>Y</th>
<th>N/A</th>
<th>Y</th>
<th>N/A</th>
<th>Y</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check the pool and surrounding area is clean, free from debris and any foreign objects.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>Tyres are checked inside for dangerous animals and the tyre is safe</td>
<td>☐</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Swings are securely fastened</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Any other issues that have been identified.

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Signature:</td>
<td>Name:</td>
<td>Signature:</td>
<td>Name:</td>
<td>Signature:</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Daily Sun Safety Risk Assessment

This sun safety risk assessment must be completed each morning to determine when sun protection measures (slip, slop, slap, seek, slide) are needed. Where possible, the outside play schedule should be designed to minimise outdoor activities during UV alert periods for your local area. Sun protection measures must be adhered to in accordance with the recommendations for your state (below) and on those days with a moderate UV level of three and above.


<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>UV alert periods, minimise outdoor activities during this time.</td>
<td>From:</td>
</tr>
</tbody>
</table>

Maximum UV level for today.

**ACT:** Sun protection is necessary for part or most of each day between August to May when UV levels reach 3 and above. Minimise outdoor activities and events as much as reasonably practicable between 11am - 3pm during the daylight saving period.

**NSW:** Sun protection measures at all times October to March, and between 10am and 2pm April to September. Minimise outdoor activities between 11am and 3pm during daylight saving.

**NT:** Sun protection is required all year round as UV radiation is always high (6-7), very high (8-10) or extreme (11+) during peak UV periods between 10am and 3pm. As the UV level is often above 3 outside of peak UV periods the UV level must be checked daily to ascertain when sun protection is required outside peak UV periods.

**QLD:** Sun protection measures from January to December. Plan outdoor activities wherever practicable before 10am and after 3pm, all year round.

**SA:** Sun protection measures from September - April particular care between 10am and 3pm.

**TAS:** Sun protection measures September to April. From May to August UVR levels fall considerably, a safe dose of sunlight is recommended for vitamin D production during this time but only when the UVR level does not exceed three. Active outdoor play is encouraged throughout the year, ensuring appropriate sun protection measures are used when necessary.

**VIC:** Sun protection measures September to April. Active outdoor play is encouraged throughout the year, ensuring appropriate sun protection measures are used when necessary.

**WA:** Sun protection measures are required all year round when the UV Index is 3 or above.

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**DOCUMENT NUMBER & TITLE:** NQS2 Playground Checklist APPENDIX

<table>
<thead>
<tr>
<th>CONTENT OWNER</th>
<th>DOCUMENT AUTHOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stan Coulter, General Manager, Governance and Risk</td>
<td>Sara Meredith, Child Wellbeing Manager</td>
</tr>
</tbody>
</table>

**DATE PUBLISHED:** 5/05/2014

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**REVISION DUE DATE:** 18/11/2015

**RECORD MANAGEMENT SCHEDULE:** Health and Safety General - 7yrs

Ensure you are using the latest version of this policy. You can find it at http://policies.goodstart.org.au/PoliciesandProcedures/NQS2%20Playground%20Checklist%20APPENDIX.docx.

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Policy statement

At Goodstart Early Learning (Goodstart) children are central to everything we do. Families are our primary partners in our work. Goodstart recognises that every child belongs within their family, their cultural group, neighbourhood and wider community. Goodstart believes that a child’s earliest development and learning takes place through their relationships, particularly with their family, who are a child’s first and most influential educators. Goodstart commits to respectful and collaborative relationships with families and communities, as we work together to create a positive environment for our children - both where they live and where they learn - to actively promote children’s wellbeing, learning and development.

Related documents: (Belonging, Being & Becoming, the Early Years Learning Framework for Australia, 2009)

What does this policy apply to?

- Goodstart’s vision
- Family rights and responsibilities
- Family involvement
- Information for families
- Connecting with our communities
- Enrolment, orientation and transition
- Children’s comfort, safety and wellbeing
- Children’s belongings
- Collection and access arrangements for children
- Family complaints
- Use of photographic images

This policy relates to Quality Area 6 of the National Quality Standard

<table>
<thead>
<tr>
<th>QA6</th>
<th>Collaborative partnerships with families and communities</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1</td>
<td>Respectful supportive relationships with families are developed and maintained.</td>
</tr>
<tr>
<td>6.1.1</td>
<td>There is an effective enrolment and orientation process for families.</td>
</tr>
<tr>
<td>6.1.2</td>
<td>Families have opportunities to be involved in the service and contribute to service decisions.</td>
</tr>
<tr>
<td>6.1.3</td>
<td>Current information about the service is available to families.</td>
</tr>
<tr>
<td>6.2</td>
<td>Families are supported in their parenting role and their values and beliefs about child rearing are respected.</td>
</tr>
<tr>
<td>6.2.1</td>
<td>The expertise of families is recognised and they share in the decision making about</td>
</tr>
<tr>
<td>6.2.2</td>
<td>Current information is available for families about community services and resources to support parenting and family wellbeing.</td>
</tr>
<tr>
<td>6.3</td>
<td>The service collaborates with other organisations and service providers to enhance children's learning and wellbeing.</td>
</tr>
<tr>
<td>6.3.1</td>
<td>Links with relevant community and support agencies are established and maintained.</td>
</tr>
<tr>
<td>6.3.2</td>
<td>Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.</td>
</tr>
<tr>
<td>6.3.3</td>
<td>Access to inclusion and support assistance is facilitated.</td>
</tr>
<tr>
<td>6.3.4</td>
<td>The service builds relationships and engages with the local community.</td>
</tr>
</tbody>
</table>

**Goodstart’s vision**

Our Vision is for Australia’s children to have the best possible start in life.

Our Mission is to provide high-quality, accessible, affordable, community-connected early learning in our centres, as well as partner and openly collaborate with the sector to drive change for the benefit of all children.

Our Guiding Principles:
- Children are at the centre of everything we do;
- Families are our primary partner;
- Being a valued part of each unique community.

*Related documents: Goodstart Strategic Plan.*

**Family rights and responsibilities**

Goodstart respects our children, staff and families’ rights to a safe and positive environment at their Goodstart centre. Goodstart educators are required to ensure practices in the centre respect families’ rights and responsibilities.

At Goodstart our families have a responsibility to be in control of their behaviour at all times and conduct themselves in a lawful, safe and responsible manner that respects the rights of others. Families must use appropriate language and volume of speech. The following behaviour towards any person are unacceptable: all forms of bullying, harassment, abuse, discrimination, actions that put another person at risk of harm, or threats of any kind.

Upon enrolling, families agree to the Family Rights and Responsibilities listed in the Enrolment Form. Should families fail to comply with these responsibilities Goodstart may exclude them from the Centre.


**Family involvement**

Goodstart is committed to genuine collaborative relationships between families and early childhood professionals where we can value each other’s knowledge of our children, communicate freely and respectfully with each other, share insights and engage in shared decision-making. We encourage families to be involved in the Centre, provide
input into learning programs, spend time with our educators and contribute their skills and resources to the Centre to enhance children’s wellbeing, learning and development.

Related documents: (Belonging, Being & Becoming, the Early Years Learning Framework for Australia, 2009); Goodstart Strategic Plan; The Early Years Learning Framework, Principle 2 - Partnerships; National Regulation 74, 75, 76, 99, 102, 111, 157; Children's Belongings Requirement; Collection of Children Procedure; Confidentiality, Privacy and Digital Information Security Requirement; Educational Program and Practice Policy; Enrolment and Orientation Procedure; Family Complaint Procedure; Relationships with Children Policy.

Information for families

To support collaborative partnerships with families, Goodstart will ensure current and readily understood information is available and effectively communicated about the service. This includes information on policies and procedures, programs and their child’s participation, Centre participation in the National Quality Framework, and community services and resources to support parenting and family wellbeing.

Related documents: Goodstart Strategic Plan; Family Handbook Appendix; National Regulation 74, 75, 76, 80, 86, 91, 172, 173, 177, 185; Children's Belongings Requirement; Collection of Children Procedure; Confidentiality, Privacy and Digital Information Security Requirement; Educational Program and Practice Policy; Enrolment and Orientation Procedure; Family Complaint Procedure; Relationships with Children Policy.

Connecting with our communities

Goodstart is committed to ensuring children’s learning at the Centre is integrated and interconnected with their learning at home and in the community. Goodstart believes that children’s learning and wellbeing are enhanced when the Centre, families, community organisations and individuals develop links, share information and work in collaboration. We encourage our families to develop relationships with each other that are supportive. We encourage our educators to understand and provide links to the services available in the community that will support our families.

Related documents: (Belonging, Being & Becoming, the Early Years Learning Framework for Australia, 2009); Goodstart Strategic Plan; The Early Years Learning Framework, Principle 2 - Partnerships; National Quality Standard, Standard 6.3; (Guide to the National Quality Standard, 2011).

Enrolment, orientation and transition

Goodstart actively communicates with families to provide effective orientation when they first join our Centre and when they transition to new rooms. During enrolment, orientation and transitions, information about children, their routines and belongings, is exchanged by educators and families to support continuity of learning and care between the child’s home, the centre and other services in the community, in a way that meets the individual requirements of each child and their family. We encourage families to spend time at the Centre to participate in orientation and information sessions, ask questions and exchange as much information with our educators as possible.

Related documents: Enquiry, Centre Tour and Waitlist Management Procedure; Goodstart Strategic Plan; Enrolment and Orientation Procedure; Relationships with Children Policy; Family Handbook Appendix; Enrolment Form Appendix; Regulation 155 – Interactions with children;

Children's comfort, safety and wellbeing

Goodstart promotes children’s comfort, safety and protection while participating in the program both indoors and outdoors, during rest and sleep, when storing and administering children’s medication, and when storing and preparing children’s food. We encourage families to work with us to meet each child’s particular dietary, medical, sun protection and other safety needs.
Related documents: Children’s Belongings Requirement; Children’s Health and Safety Policy; Collection of Children Procedure; Enrolment and Orientation Procedure; Inclusion Support Procedure; Regulation 78 – Food and beverages; Regulation 81 – Sleep and rest; Regulation 93 – Administration of medication; National Quality Standard, Elements 2.1.2; 2.1.3 and 2.3.2.

Children’s belongings

Goodstart promotes a strong sense of identity in children by encouraging them to bring their own family's ways of being into the early childhood program. We recognise that children’s own special belongings help them to feel secure, confident and connected to familiar people and places. We encourage families to bring their children's familiar belongings to the Centre and will work with children and families to look after their belongings.

Related documents: (Belonging, Being & Becoming, the Early Years Learning Framework for Australia, 2009); Children's Belongings Requirement.

Collection and access arrangements for children

To promote the safety and wellbeing of children, families and Centre employees, Goodstart endeavours, where reasonable, to comply with court orders, parenting plans and other written agreements for the collection of, and access to, children.

Related Documents: Collection of Children Procedure.

Family complaints

Families are actively encouraged to provide feedback to Goodstart. Goodstart will promptly address any concerns from families to resolve issues and maintain good relationships. Goodstart provides a variety of avenues for families to raise concerns or compliments:

- In person, by speaking directly with the Centre Director
- By phoning the Family Support Team on 1800 222 543
- Via the ‘Contact Us’ form on the website (www.goodstart.org.au)
- By writing to the Family Support Team, Goodstart Early Learning, PO Box 10120, Adelaide Street, QLD 4000.

Feedback and concerns are valuable for improving the learning and care provided by Goodstart to children and families.

All Goodstart staff respect the privacy of families when addressing any concern.

Goodstart ensures that any necessary notifications about complaints and incidents are made to the relevant regulatory authorities.

Related Documents: Family Complaint Procedure.

Use of photographic images and video recordings

To protect the privacy of all children, families and staff at Goodstart, strict measures are in place regarding engagement and taking of photographic images or video recordings facilitated by the organisation. All photographs and video recordings will be undertaken in a manner that is respectful and maintains the integrity of the original image. Goodstart will only use and store photographic images of children according to the permission granted by families in their completed enrolment documentation or specifically sought for media and marketing purposes.

Responsibilities

This policy is to be implemented by: All Staff.

Content Owner: Sara Parrott, General Manager Strategic Communications

Document Authors: Jayne Kinley, Senior Advisor Families and Communities (Children’s belongings, Children’s comfort, safety and wellbeing, Connecting with our communities, Family involvement, Information for families); Warren Bright, Chief Operations Officer (Collection and access arrangements for children, Enrolment, orientation and transition); Sara Parrott, GM Strategic Communications (Family complaints, Use of photographic images)

Definitions

Children:
- Each baby, toddler, three to five year old and school age child; children as individuals and as members of a group in the education and care setting, unless otherwise stated. It is inclusive of children from all social, cultural and linguistic backgrounds and of their learning styles, abilities, disabilities, gender, family circumstances and geographic locations (Guide to the National Quality Standard, 2011).

Children’s belongings:
- Clothing, footwear, accessories and personal items that belong to a child.

Communities:
- Social or cultural groups or networks that share a common purpose, heritage, rights and responsibilities and/or other bonds (Belonging, Being & Becoming, the Early Years Learning Framework for Australia, 2009)

Families in relation to a child:
- A parent, grandparents, sibling, uncle, aunt or cousin of the child, whether that relationship arises by birth, marriage (including a de facto relationship) or by adoption or otherwise; or
- A relative of the child according to Aboriginal or Torres Strait Islander tradition; or
- A person with whom the child resides in a family-like relationship; or
- A person who is recognised in the child’s community as having a familial role in respect of the child (National Law) (Guide to the National Quality Standard, 2011).
Purpose of this requirement and guidelines

To ensure children’s belongings are safe and suitable for the purpose for which they are intended and that they are well cared for when a child brings them to a Goodstart Early Learning (Goodstart) Centre.

Definitions

Children’s belongings:

- Includes clothing, footwear, accessories and other personal items belonging to children.

Applicability of this requirement

<table>
<thead>
<tr>
<th>Regulations</th>
<th>Detail</th>
</tr>
</thead>
</table>
| Regulation 81 | Sleep and rest  
The nominated supervisor of an education and care service must take reasonable steps to ensure children’s individual needs for sleep and rest are met and have regard for age, developmental stages and individual needs of the child. |
| Regulation 95 | Procedure for administration of medication  
Refer to requirements for Safe Administration of Medication |
| Regulation 96 | Self-administration of medication  
Refer to requirements for Safe Administration of Medication |
| Regulation 103 | Premises, furniture and equipment to be safe, clean and in good repair  
Refer to requirements for Children’s Health and Safety |
| Regulation 155 | Interactions with children  
An approved provider must take reasonable steps to ensure that the education and care service provides education and care to children in a way that:  
- encourages children to express themselves and their opinion; and  
- allows children to undertake experiences that develop self-reliance and self-esteem; and  
- maintains at all times the dignity and rights of each child; and  
- gives each child positive guidance and encouragement toward acceptable behaviour; and |
- has regard to the family and cultural values, age, and physical and intellectual development and abilities of each child being educated and cared for by the service.

<table>
<thead>
<tr>
<th>National Quality Standards</th>
<th>Detail</th>
</tr>
</thead>
</table>
| Quality Area 1             | Element 1.1.1  
Curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners, and effectiveness as communicators.  
Element 1.1.2  
Each child's current knowledge, ideas, culture, abilities and interests are the foundation of the program.  
Element 1.1.6  
Every child's agency is promoted, enabling them to make choices and decisions, and to influence events and their world.  
Element 1.2.2  
Educators respond to children's ideas and play and use intentional teaching to scaffold and extend each child's learning. |
| Quality Area 2             | Element 2.1.2  
Each child's comfort is provided for and there are appropriate opportunities to meet each child's need for sleep, rest and relaxation. |
| Quality Area 3             | Element 3.1.1  
Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose.  
Element 3.1.2  
Premises, furniture and equipment are safe, clean and well maintained. |
| Quality Area 5             | Element 5.1.3  
Each child is supported secure, confident and included.  
Element 5.2.3  
The dignity and rights of every child are maintained at all times. |
| Quality Area 6             | Element 6.1.1  
There is an effective enrolment and orientation process for families.  
Element 6.1.2  
Families have opportunities to be involved in the service and contribute to service decisions.  
Element 6.2.1 |
The expertise of families is recognised and they share in decision making about their child’s learning and wellbeing.

**Element 6.3.2**

Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.

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**Purpose of these guidelines**

The following guidelines are intended to assist educators support high quality professional practice in respect of children’s rights and responsibilities for their belongings.

- Decisions about suitability, safety and correct use of children’s belongings should be made in consultation with each child and his or her family. Goodstart employees should also refer to the following documents for further information:
  - Enrolment and orientation procedure

- Consider how children’s individual belongings reflect their family, their personal preferences, and the routines and activities at home and encourage children to feel comfortable, safe and secure.

- To promote children’s feelings of safety, comfort and security, allow them access to their belongings when participating in the program, when sleeping or resting, during meal times, and at other times.

- Encourage children and families to provide clothing, footwear and other belongings that are comfortable and suitable for the experiences in which children participate. Goodstart employees should also refer to the following procedures:
  - Educational program and practice
  - Sun safety and heat stress
  - Sleep and rest
  - Meal times

- Offer children suitable protective clothing for their safe and comfortable participation in the program. This includes but is not limited to gardening gloves, hats, wet weather items, cold weather items, etc.

- Encourage families to provide a supply of spare clothing for their child. This will support peace of mind for the child when participating in “messy play” or if accidents occur. Store children’s wet and soiled clothing appropriately and remind families that these items have been stored with their child’s other belonging to take home.

- Encourage families to clearly label children’s belongings to prevent loss and promote children’s early literacy skills and their sense of identity.

- Respect the dignity of each child and his or her right to privacy. Always offer a private place for children to dress and undress.

- The rights and best interests of the child are the primary considerations when making decisions that affect the child and family.

**Related documents:** Enrolment and Orientation Procedure; Food and Nutrition Requirement; Sleep, Rest and Relaxation Requirement; Sun Safety and Heat Stress Requirement.

**Related policies**

Children’s Health and Safety Policy; Collaborative Partnerships with Families and Communities Policy; Educational Program and Practice Policy; Relationships with Children Policy.
Responsibilities

These requirements and guidelines are intended to be used by: All Goodstart Centre Staff.

Content owners: Jayne Kinley, Senior Advisor, Early Learning and Research.
# Purpose of this procedure and requirement

To ensure that arrangements for the collection of and contact with children attending the service are in accordance with enrolment records, Court Orders, parenting plans and other written agreements for the purpose of promoting the safety and wellbeing of children.

## Step No. | Overview | Description / Who is responsible | Next steps
--- | --- | --- | ---
**STEP 1** | **Authorised Nominee** | Centre Director: Ensure every child has a completed Authorised Nominee form on record. | • If there is a Court Order in place, go to STEP 2  
• If there is no Court Order in place, go to STEP 3

**STEP 2** | **Court Orders** | Centre Director: Where a Court Order prohibits a parent or guardian from spending time with a child at certain times, or from collecting a child at certain times, the Centre Director should work with the Account Holder/s to provide the centre with a detailed Parental Responsibility Action Plan. The Centre must retain a signed copy of any Court Order, parenting plan or other written agreement, and keep it with the child’s enrolment records in a secure area to maintain confidentiality.  

All persons entitled to collect child/ren from the centre under a Court Order, parenting plan or other written agreement should be entered on the Parental Responsibility Action Plan and added as an Authorised Nominee by the Account Holder/s.  

The Centre Director/Person in Charge must ensure that all centre personnel are aware of current Court Orders, parenting plans or other written agreements in place.  

The Centre Director/Person in Charge must place a copy of the Parental Responsibility Action Plan in a secure location that is accessible by all centre personnel but is not accessible to parents or guardians.  

If parents/guardians make the centre aware of any amendments to the collection/contact arrangements, the Centre Director/Person in Charge must be informed.

• Go to STEP 3
**STEP 3** Establish purpose of visit

**Centre personnel:** Greet the person on their arrival to the centre and determine the purpose of their visit.

- If the person wishes to set up a new enrolment go to the Enquiry, Centre Tours and Waitlist Management Procedure.
- If the person is delivering a child/ren to the service go to STEP 4
- If the person is collecting a child/ren from the service go to STEP 6
- If the person is visiting a child/ren attending the service or participating in the early learning program go to STEP 5
- For all other visitors go to the Visitors to the Centre Procedure.

**STEP 4** Sign in on attendance records

**Person delivering the child/ren to the service:** Must sign the child/ren into the attendance record, noting the time of arrival. If the attendance record is not completed by the person delivering the child/ren to the service, an educator will sign the attendance record and note the time of arrival. When this step is complete, educators then have responsibility for the child/ren.

**STEP 5** Visits

**Centre personnel:** If the person is unknown to centre personnel, identification must be provided. Unless a Court Order, parenting plan or other written agreement prevents a parent or guardian from spending time with a child at the time of the visit, parents and guardians are welcome to visit their child/ren at the service. Visitors must be in a suitable state to visit.

Persons other than Parents or Guardians are not allowed to spend time with children at Goodstart centres.

**Visitor:** When visiting children at the service, the visitor’s book must be signed on arrival and departure.
**Centre personnel:** Must verify the identity, authority and suitability of the state of the person collecting the child/ren from the service.

If the person is unknown to centre personnel, photo identification must be provided.

- If the person is not in a suitable state to collect the child/ren go to STEP 7.
- If the person is not authorised to collect the child/ren, go to STEP 8.
- If the person is an Account Holder, or an Authorised Nominee who **is prohibited** from collecting the child/ren under a Court Order, parenting plan or other written agreement at the time of collection and a Parental Responsibility Action Plan is in place IMPLEMENT THE PARENTAL RESPONSIBILITY ACTION PLAN.

**STEP 6**

Verify authority and suitability to collect

- If the person is in a suitable state to collect the child/ren, go to STEP 7.
- If the person is unknown to centre personnel, photo identification must be provided.

**STEP 7**

Persons not in a suitable state to collect a child

- If the person is not suitable to collect the child/ren from the service because they appear to be intoxicated, under the influence of drugs or appear to be unfit to take responsibility for the child/ren
  - Take the person to an appropriate area to discuss the situation ensuring support is available from other centre personnel.
  - Offer to contact an Authorised Nominee to collect the child/ren.
  - Centre personnel are not legally able to prevent a parent or guardian from collecting their child/ren. If there is a reasonable belief that the child/ren may be at risk of immediate harm, contact the Police.
  - Document the incident and inform the Area Manager and the Critical Incident Team.

**Centre personnel:** In the event that a person is not suitable to collect the child/ren from the service because they appear to be intoxicated, under the influence of drugs or appear to be unfit to take responsibility for the child/ren

- If the person is an Account Holder, or an Authorised Nominee who **is prohibited** from collecting the child/ren under a Court Order, parenting plan or other written agreement at the time of collection but no Parental Responsibility Action Plan is in place, go to STEP 8.
- If the person is an Account Holder, or an Authorised Nominee who **is not prohibited** from collecting the child/ren under a Court Order, parenting plan or other written agreement at the time of collection, go to STEP 9.
**STEP 8**

**Person not authorised to collect child**

Centre personnel: Ask the person collecting the child to provide written permission from the Account Holder/s.

If the person does not have written authorisation to collect the child/ren:

- Contact the Account Holder/s to seek authorisation.
- Document all unauthorized visitors in the centre diary.
- Take all reasonable measures to ensure that the child/ren remain at the service until permission has been granted. However at no time will centre personnel endanger themselves or other children at the service.
- Contact the police immediately if the person becomes aggressive or abusive.
- At no time should centre personnel attempt to restrain a person or take any action that may place anyone at the service in danger.

**STEP 9**

**Sign out on attendance records**

Authorised person collecting the child/ren from the service: Must sign the child/ren out of the attendance record, noting the time of departure.

If the attendance record is not completed by the person collecting the child from the service, an educator will sign the attendance record and note the time of departure. The Centre Director or Person in Charge will immediately notify the parent/guardian/person with parental responsibility that their child was not signed out and confirm the child has been collected from the service.

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**Requirement relating to Court Orders**

- The parent or guardian is encouraged to provide the centre with a copy of the most up to date Court Order, parenting plan or other written agreement affecting their child/ren. Court Orders must be signed and sealed by the Court. Parenting plans and other written agreements must be signed by the parents/guardians specified therein.
- Court Orders, parenting plans and other written agreements are provided to Goodstart in confidence and for the purpose of ensuring the wellbeing and protection of children. Goodstart will not use or disclose personal or sensitive information that is contained in those documents to a third party for any other purpose without consent unless such use or disclosure is authorised or required by law.
- The centre must retain a signed copy of any Court Order, parenting plan or other written agreement and keep it with the child’s enrolment records in a secure area to maintain confidentiality.
• All persons entitled to collect child/ren from the centre under a Court Order, parenting plan or other written agreement should be entered on the Parental Responsibility Action Plan and added as an Authorised Nominee by the Account Holder/s.
• Where a Court Order prohibits a parent or guardian from spending time with a child at certain times, or from collecting a child at certain times, the Centre Director should work with the Account Holder/s to provide the Centre with a detailed Parent/Guardian/Person with Parental Responsibility Action Plan.
• The Centre Director/Person in Charge must ensure that all centre personnel are aware of current Court Orders, parenting plans or other written agreements in place.
• The Centre Director/Person in Charge must place a copy of the Parental Responsibility Action Plan in a secure location that is accessible by all centre personnel but is not accessible to parents or guardians.
• If parents/guardians make the centre aware of any amendments to collection/contact arrangements, the Centre Director/Person in Charge should update the Parental Responsibility Action Plan and communicate the changes to other centre staff.

Definitions

Court Order:
• family court order, domestic violence order, apprehended violence order.

Authorised Nominee:
• defined in the national Law, a person who has been given permission by a parent or family member of the child to collect the child from the education and care service.

Parent/Guardian/Person with Parental Responsibility
• a parent, family member or person with parental responsibility of a child who is being educated and cared for by the education and care service.

Related policies

Children’s Health and Safety Policy; Collaborative Partnerships with Families and Communities Policy.

National regulations

<table>
<thead>
<tr>
<th>Regulation 99</th>
<th>Children leaving the education and care service premises</th>
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<tbody>
<tr>
<td></td>
<td>Children must not leave the centre except with a parent of the child, or with an authorised person named on the child’s enrolment record, or with a person authorised by a parent.</td>
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<tr>
<th>Regulation 157</th>
<th>Access for parents</th>
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<td></td>
<td>A parent authorised to collect a child must be allowed to enter the centre provided that parent does not pose a risk to the safety of children or employees at the centre, or that their entry would conflict with any duty of employees under the Law, or if the employees are aware that the parent is prohibited by the court from having contact with the child.</td>
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| Regulation 177 | Prescribed enrolment and other documents to be kept by approved provider (in so far as they directly relate to children and families) |
The following documents must be kept:

- Children’s assessment or evaluations for delivery of the program
- Incident, injury, illness and trauma records
- Medication records
- Children’s attendance and enrolment records
- Record of the centre’s compliance with the Law

Records relating to an enrolled child and to the centre’s compliance with the Law must be made available to a parent of the child on request in a form that is easily understood by the family.

**Responsibilities**

This procedure is to be implemented by: All centre staff

Content owners: Sara Meredith, Child Wellbeing Manager