

Warrumbungle Shire Council - Policies

Auspice 3.6

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Accident & Illness prevention Policy

Policy Number: YK0010610

Aim

Accidents are the result of a child's growth and developmental stage. Staff should be able to identify such hazards in each stage, and take all precautions necessary to avert such accidents. It is the responsibility of all staff members to increase and encourage parent/guardian family awareness of accident prevention, and of their child's ability to learn safety habits at a very early age.

Legislative Requirements

Children's Services Regulations 2004 NSW

Occupational Health & Safety Act 2000 & Regulations 2001 NSW

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Visitors

Implementation

- The following precautionary measures are to be implemented in the centre:
- All chemical, cleaning and other products and medications are to be kept in their original containers, and stored in cupboards not accessible to children. I.e. out of reach or with childproof locks.
- Proper medication procedures must be followed at all times. (as per the Medication policy)
- Children are to be prohibited access from the kitchen area, with the exception of children three years and over who may be involved in a planned cooking experience. Such instances should be closely supervised by staff members.
- Children are never left alone and/or unsupervised on change tables, in baths, in high chairs, or eating alone.
- The temperature of hot water systems should be consistently set between 60 to 65 degrees Celsius.
- The drinking of any hot beverage is to be restricted to childfree areas such as staff rooms. Staff should not enter child rooms with hot beverages.

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- Yuluwirri Kids has an approved earth leakage circuit breaker fitted to the main power box and tested by an approved professional monthly to ensure that they are working and in order. Such devices are not to be relied solely as electrocutions are reduced by the use of circuit breakers, rather than being prevented entirely.
- Power points must have protective shutters, or be fitted with protective plugs.
- Electrical appliances must not be used in wet areas.
- Children should be taught to respect all electrical appliances by positive staff role modelling.
- Avoid water on floors. Any spillages should be mopped up immediately and without undue delay. Particular and close attention needs to be given to the bathroom area and lunch area during use periods.
- All children must remain seated whilst eating during meal times. Babies should be closely supervised by staff at all times when drinking from a bottle.
- Plastic bags are to be kept out of the reach of children and/or in locked cupboards.
- Safe toys are to be used considering the and relevant to the age of the child. I.e. avoid small removable parts for infants, choose durable toys, avoid movable parts which may pinch the child, etc. All toys should be checked on regular basis to ensure they are in proper working order, and repair or discard any broken toys.
- All water play areas must be supervised by staff members at all times. Staff members should never leave buckets of water unattended.
- All playgroup equipment must be checked daily for:
 - Stability
 - Broken pieces
 - Insect, spider and / or snake infestation.
- All playground equipment must be checked for the following:
 - Provision of safety rails on platforms and equipment over 1.5 metres high
 - It should not be possible to fall from any structure onto an object below
 - Provision of clear landing places at the base of slides, etc.
 - Timber top edges should be rounded, and logs checked for splinters
 - Ensure there are no projections on sliding surfaces
 - Bolts should be counter-sunk
 - Check all structures regularly for stability
 - Check equipment for wear.
- Boards are to be cared for properly to avoid cracking, i.e. never leave boards out when not in use, and regularly oil boards with recommended products.
- Shock-absorbing surfaces should be implemented under play equipment.
- Provide stable and permanent barriers to prevent children running into the path of moving objects such as swings and/or other play equipment.
- Children must be supervised closely by staff members when using climbing equipment.
- Any vertical railing such as ‘monkey bars’ in the centre is to be no more than eight centimetres apart.

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- All playground equipment must be used with consideration of the child's age and ability; e.g. it may be necessary to restrict younger children using certain climbing equipment.
- Refer to recent safety standards when purchasing equipment, e.g. the Choice Guild to Baby Products, and where Australian Safety Standards approved items are available. Equipment purchased must comply with Australian standards and certification obtained and held at the centre.
- Display Emergency Exit procedures and complete practice drills on a monthly basis.
- Ensure all centre fire extinguishers are reviewed annually and instruct all staff members on their proper usage.

Sources

Children's Services Regulations 2004 www.community.nsw.gov.au

Managing a Child Care Service: A hands on guide for service providers

Health & Safety in Children's Centres Model Policies & Practices

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Policy Created date: October 2009

Last reviewed: < >

Date for next review: <insert date here>



Yuluwirri Kids

Accreditation Policy

Policy Number: YK0010611

Aim

Yuluwirri Kids actively participates in the Quality Improvement & Accreditation System (QIAS). The centre's aim is to provide the highest quality childcare available across all areas.

Legislative Requirements

Children's Services Regulation's 2004

National Childcare Accreditation Council Quality Practices Guide 1st Edition 2005

A New tax System (Family Assistance) Act 1999

National Childcare Accreditation Council

Who is affected by this policy?

Staff

Families

Child

Management

Visitors

Implementation

Our Centre participates in and values the Quality Improvement & Accreditation System (QIAS) – an Australian Government initiative linked to the funding of Child Care Benefit. This is conducted through the National Childcare Accreditation Council through scheduled validation visits and as of October 2006, spontaneous visits.

The QIAS provides standards of quality practices for care provided in our centre as well as guidance and support from the centre's self evaluation. The system also allows staff members to continually improve practices by identifying the quality aspects of care the centre is already providing and assisting the centre in developing goals for further improvement through a "continuing improvement plan". The Centre is required to complete a comprehensive self study every two & a half years.

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The steps in the QIAS system are as follows:

- STEP 1: Registration
- STEP 2: Self Study & Continuing Improvement
- STEP 3: Validation
- STEP 4: Moderation
- STEP 5: Accreditation Decision

Yuluwirri Kids will ensure that all staff members and management are informed about current practices and requirements in the QIAS process by attending appropriate in-service/training, accessing any other publications and information about the accreditation process that may be of benefit – including those published by the National Childcare Accreditation Council.

Staff members will involve parents, families and management in each stage to seek their input and views into practices and care in our centre – this includes having parent input into policy reviews, advisory committee meetings and providing updates in newsletters about the centre's current stage in the process.

For more information about the Accreditation System, please see the QIAS Handbook (3rd Ed, 2005) or visit NCAC's website: www.ncac.gov.au

Sources

Children's Services Regulations 2004 www.community.nsw.gov.au

Quality Practices Guide 2005 1st Edition www.ncac.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: September 2009

**Reviewed: <insert date here>
here>**

Date for next review: <insert date



Yuluwirri Kids

Active Play Policy

Policy Number: YK0010612

Aim: At Yuluwirri Kids we aim to establish positive attitudes to healthy lifestyle practices.

In the past 10 years the prevalence of childhood obesity has increased considerably and there is growing recognition of the need to establish positive attitudes to healthy lifestyle practices from an early age if this trend is to be reversed. Childcare centres provide ideal environments from which to develop these positive attitudes.

Legislative Requirements

Children Service Regulation 2004

Who is affected by this policy?

Child
Staff
Families
Management

Implementation

Birth–12 months	Infants' physical activity should promote the development of movement skills Infants should be placed in safe settings that facilitate physical activity and do not restrict movement for prolonged periods
Toddlers 12–36 months	Toddlers should accumulate at least 30 minutes daily of structured physical activity Toddlers should engage in at least 60 minutes and up to several hours per day of daily, unstructured physical activity and should not be sedentary for more than 60 minutes at a time except when sleeping
Pre-schoolers 3–5 years	Preschoolers should accumulate at least 60 minutes daily of structured physical activity Preschoolers should engage in at least 60 minutes and up to several hours per day of daily, unstructured physical activity and should not be sedentary for more than 60 minutes at a time except when sleeping.

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Children will be actively encouraged to accept and respect each other's range of physical abilities.

Staff will create strategies to promote active play and its benefits to children.

Staff/carers consult with families and resource agencies on providing physical experiences that reflect diverse backgrounds and abilities.

Children will be dress appropriately to support engagement in active play.

Staff will role model appropriate footwear.

Yuluwirri Kids will provide safe and adequate space in both indoor and outdoor play areas for physically active play.

Staff will engage children in physically active behaviours that are suitable for their developmental ability.

Staff will plan for opportunities for children to be more physically active by providing space and activities that vary on a daily basis in children's play areas.

Staff will ensure a balance of active and sedentary activities throughout the child's day, and minimize sedentary behaviours unless the child is tired or ill.

Sources

Children Service Regulation 2004

Physical activity guidelines for birth to five year olds (National Association for Sport and Physical Education, 2006)

Review

The policy will be reviewed annually.

The review will be conducted by:

Management

Advisory Committee

Employees

Families

Interested Parties

Policy Created date: August 2009

Reviewed: <insert date here>

Date for next review: <insert date here>



Yuluwirri Kids

Administering Medications Policy

Policy Number: YK0010613

Aim

At Yuluwirri Kids we will facilitate effective care and health management of children who are taking medications for health problems, prevention and management of acute episodes of illness or medical emergencies by the safe administration of medication, and compliance with the Regulation.

Studies of children in care have found that on any one day 5% are on medication for an illness, mostly for asthma, respiratory or ear infections, or allergies, and in a month, half will have been on over-the-counter medication for colds or allergies. Many children have chronic health problems such as asthma, diabetes, epilepsy and allergies and may be at risk of a medical emergency while in care and require emergency treatment or medication.

This section refers to general guidelines and the general requirements as stated in the Regulations regarding administration of medication by children's centre staff to children in their care and to the administration of non-invasive medications such as oral and topical (skin) medications.

Legislative Requirements

Childrens Service Services Regulation 2004

Poisons and Therapeutic Goods Act 1996 (NSW); Public Health Act 1991 (NSW);

Occupational Health and Safety Act 2000 and Regulations 2001 (NSW).

Who is affected by this policy?

Child

Staff

Families

Management

Visitors

Implementation

To facilitate effective care and health management of children who are taking medication for a health problem, prevention and management of acute episodes of illness or medical emergencies requiring administration of medication, the Centre will:

Ensure medication is administered to a child only from its original packaging. Prescribed medications must only be administered to the child for whom it has been prescribed, from a container bearing a pharmacy label showing the child's name, and a current use by date, in accordance with any doctor's instructions relating to the administration.

Ensure families provide a summary of the child's health, medications, allergies to medication or other substances, the doctor's name, address and phone number, and a First Aid Management Plan approved by their doctor if relevant, following enrolment and prior to the child starting in the service.

Ensure medication is only administered to a child enrolled for the centre with the written permission of the child's parent or legal guardian. This permission accompanied by parent/guardians signature.

If a staff member feels doubt about the safety of administering any medication or treatment, the children's centre staff should not administer the medication or treatment and refer the matter to the Manager and seek advice from the parent, doctor, or the local Public Health Unit.

Before administering medication, check that the instructions on the Medication Authority Form are consistent with both the doctor's instructions and the name and instructions on the label. If there is any doubt or inconsistency, the children's centre staff or Manager should check with the doctor or pharmacist, and advise the parent if it is considered the medication should not be administered.

Ensure the children's centre staff member who is administering the medication has another staff member available to check the medication and dosage. They must complete a Medication Authority Form and advise parents of any child to whom medication has been given the following :

- name of the medication,
- date, time, and dosage of administration,
- name of the person who administered the medication,
- name of the person who checked the medication

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Ensure a Medication Authority Form is completed and signed for every child and for each medication.

Keep the Medical Authority Form in a secure and confidential file, health records are required to be kept for a minimum of 6 years or in the case of a child until the child turns 24 years old.

Ensure an individual medication history form is completed, filed and updated accordingly.

Advise parents and families that the administration of homeopathic, naturopathic, over-the-counter or non-prescribed medications (including cold preparations and paracetamol) also needs to meet minimum legislative requirements and these guidelines include providing a Medication Authority Form, written instructions and dosage from a health professional prescribing or dispensing the medication. Do not give any unidentifiable medicine, or medicine that doesn't meet the above guidelines.

Be aware that homeopathic, naturopathic, herbal and over-the-counter medications also have adverse effects and risks.

Be aware that antibiotic resistance is an emerging problem for children in child care, and staff administering antibiotics should ensure that they are administered according to instructions and until the course is completed.

If any medical or first aid information, instructions or medication labels are written in a language other than English, ask the family to obtain an English version from their doctor or pharmacist to provide to the children's centre.

In the case of medication being required in an emergency without prior consent, ensure every attempt is made to secure consent from the child's parent or legal guardian, or from a registered medical practitioner. In any emergency, if there is no immediate access to a parent, nominated responsible person, doctor, dentist or hospital call the ambulance service on 000.

Ensure families and carers understand and acknowledge each other's responsibilities under the relevant legislation, the centre policy and these guidelines.

Advise parents who leave medication to be administered without meeting the conditions of the relevant legislation and these guidelines that the medications will not be administered, and medication prescribed for one child will not be administered to a sibling or another child.

Be informed of any child enrolled who has a chronic health problem such as asthma, epilepsy, diabetes, severe allergy, food allergy or anaphylaxis, requires ongoing medication, or might require emergency medication, treatment or first aid.

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Ensure medication is securely stored in a locked cupboard away from access by children. Medication that requires refrigeration (e.g. eye drops, antibiotics, syrups) should be stored at the back of the top shelf, in a separate compartment, or in a childproof container

If any emergency arises where there is doubt or concerns about the child's safety, the children's centre staff must act in the best interests of the child's safety and health, by contacting the family, a doctor, the Manager, or call 000 for an ambulance.

Ensure all medication, emergency treatment and medical management policies are consistent with what is required by the relevant legislation, these guidelines and by the centre's public liability insurance policy.

Source

Health and Safety in Children's Centres Model Policies and Practices 2nd edition 2003; *Staying Healthy in Child Care*, NHMRC, 2001:
<http://www.health.gov.au/nhmrc/>

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Policy Created date: June 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Assessing Serious or Potential Infectious Diseases

Policy Number: YK0010614

Aim

Yuluwirri Kids will minimise the spread of potential infectious diseases between children, other children and centre staff, by excluding children and staff who may have an infectious disease or are too ill to attend care/work, and facilitating the prevention and effective management of acute illness in children.

Children might be brought to care with symptoms or signs of illness or while in care suddenly develop an illness that has not been diagnosed by a doctor, and that might be potentially infectious or potentially life-threatening for the child. Symptoms may not clearly fit those listed in exclusion diseases making it difficult for the children's centre staff and centre manager to decide whether to accept or exclude the child from care. Many illnesses while not fitting exclusion criteria can transmit disease to other children in care, and many non-exclusion diseases can make a child too ill to participate in normal care activities.

Legislative Requirements

Childrens Service Services Regulation 2004

Public Health Act 1991(NSW); Occupational Health and Safety Act 2000 and Regulations 2001

Who is affected by this policy?

Child
Staff
Families
Management
Visitors

Implementation

To minimise the spread of potential infectious disease between children, other healthy children and children's centre staff and to minimise the detrimental impact on a sick child and the ability of the children's centre staff to safely supervise other children, Yuluwirri Kids will:

Advise families to always inform you when their child has been sick at home prior to bringing their child to care so you can assess whether or not they are well enough to attend. Use this guide to assess whether the child is too ill to attend or needs to see a doctor, inform the family that the child cannot attend until they have recovered or have a certificate from their doctor. (See Section 2.1 Exclusions for Infectious Diseases and Acutely Ill Children, and Appendix E – NHMRC Recommended Minimum Periods of Exclusion).

If you are having difficulty assessing whether a child is ill or not fit enough to attend care, discuss with the family and contact the child's doctor if they consent.

If you are unable to contact the child's doctor, contact:

- another local doctor,
- the local hospital or emergency department,
- the local Public Health Unit.

Refer difficult or unresolved situations in relation to infectious diseases to the local Public Health Unit or Children's Services Advisor.

Advise families to take a child with any of the illnesses or symptoms listed below or a child you believe to be acutely ill or infectious to their doctor.

Write a report and include any actions and decisions taken regarding excluding a child from care or advising families to take their child to a doctor.

Exclude a child and advise the family to take the child to a doctor if you consider:

- the child has fever which has not yet been assessed by a doctor, or
- the child has fever accompanied by abnormal behaviour or symptoms or signs that indicate a possible severe illness (such as lethargy, drowsiness, severe or prolonged coughing, wheezing, difficulty breathing, unusual irritability or crying), or
- the child will be unable to participate in normal activities without possible detriment to their care and safety, or

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- the child will require extra supervision which may compromise the adequate supervision, care and safety of other children, or
- the child needs to see a doctor for any reason.

Source

Staying Healthy in Child Care, NHMRC, 2001.

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Advisory Committee
- Employees
- Families
- Interested Parties

Policy Created date: June 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Procedure for Treating Children Who Become Ill at the Centre

Policy Number: YK0010615

The **Record of Illness** form must be completed for any child who becomes ill during the day. Illness may include fever, vomiting, diarrhoea etc.

The Department of Community Services (“DoCS”) requires the Authorised Supervisor to keep a record of any particulars of treatment given to a child at the Centre and must be advised if a child is hospitalised.

PROCEDURE

- Assess the child’s state of health in consultation with a staff member holding a First Aid Certificate.
- Inform the Centre Manager.
- Inform the parent as soon as practically possible and if necessary, confirm permission for Panadol.
- Staff **MUST** attempt to contact the parent/emergency contact to inform them of the child’s illness/fever and to discuss an appropriate course of action (eg. confirm permission for Panadol).
- If the child has a fever and the parent cannot be contacted in reasonable time, staff must check the enrolment form for **parental permission for Panadol**.
- Administer appropriate treatment.
- Complete the **Record of Illness** form ensuring details for medication are completed.
- Ensure the parent signs the **Record of Illness** form and is given a copy.
- The **Record of Illness** form is to be retained until the child is **24 years of age**.

Review

The policy will be reviewed annually.

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The review will be conducted by:

- Management
- Advisory Committee
- Employees
- Families
- Interested Parties

Policy Created date: June 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Procedure For Calling An Ambulance

Policy Number: YK0010616

Aim

Yuluwirri Kids will ensure immediate action and appropriate procedures are undertaken in a medical, dental emergency or accident when contacting an ambulance.

In a medical or dental emergency or an accident involving a centre staff, child, other staff member, or visitor – the centre staff or the centre manager has a duty of care to take immediate action and provide appropriate services or care to prevent further injury or death. Prior authorization must be obtained from a parent on enrolment for a child to be provided with assistance, or call a doctor, dentist, ambulance, other person or service as is considered appropriate for the situation.

Relevant Legislations

Occupational Health and Safety Act 2000 and Regulations 2001 (NSW); Children's Services Regulation 2004

Who is affected by this policy?

Child
Staff
Families
Management
Visitors

Implementation

To ensure immediate action and appropriate procedures are undertaken in a medical, dental emergency or accident when contacting an ambulance, Yuluwirri Kids will:

Assess the injury or illness, the severity and degree of urgency, administer first aid or cardiopulmonary resuscitation (CPR) as appropriate, call for an ambulance dial 000.

Provide the following information:

- Caller's name, the name of the centre, address and phone number.
- Whether an ambulance, police or fire brigade is required.
- The name of the ill or injured person.

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- Whether they are an infant, child or an adult.
- The name of the next of kin, parent or guardian.
- The nature of the illness, injury or emergency.
- An assessment of the severity of the illness or injury.
- With the ambulance, state the urgency of the situation.
- If the person is unconscious, whether they are breathing or have a pulse.
- If the person is bleeding severely, or appears to have a major injury, or has a head injury, or is cyanosed (a 'blue' colour).
- What first aid or cardiopulmonary resuscitation (CPR) action is being taken.
- A staff member will accompany the injured child in the ambulance to the hospital until the child's family arrives. Yuluwirri Kids will be adequately staffed and have a plan in place in case a staff member is required to accompany the child to hospital.
- Inform the child's parent, guardian, emergency contact or the designated responsible person that you have called an ambulance, the nature of the emergency, action taken or first aid provided, and the hospital the child was transferred to.
- Follow up any required advice or action.
- Fill in Accident/Injury/Acute Illness Report Form, provide copies of form and other documentation to the parent. If a death of a child occurs, inform the police, WorkCover NSW and the Director-General of Community Services.

Source

Putting Children First: Quality Improvement & Accreditation System Source Book, NCAC, 2001; Health & Safety in Children's Centres; Model Policies and Practices 2003.

Review

The policy will be reviewed annually.

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The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Policy Created date: July 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Anti Bias Policy

Policy Number: YK0010617

Aim

Pursuant of Yuluwirri Kids beliefs and aims, the Centre endeavours to respect and demonstrate awareness of and appreciation for each individual's uniqueness of background. Such factors include, but are not limited to, age, culture, ethnicity, traditions, practices, beliefs, values, religion, gender, sexuality, special needs and/or socio-economic status.

Legislative Requirements

Children's Services Regulations 2004

Anti Discrimination Act 1977 NSW

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Implementation

In order to achieve this, staff members will:

Aim to develop each child's capacity to recognise and avoid bias. Each child, with the guidance and mentoring of staff members, will develop confident strategies to challenge or address bias towards themselves and/or others including children, staff members, visitors, families etc. This will also be supported by the development of positive attitudes (appreciation) and respect for each child and others regardless of perceived similarities and/or differences.

All staff members and the Advisory Committee will encourage active appreciation of differences by using resource services, materials, books, posters in the environment to help children explore, encourage education and understanding of such differences and similarities. This will include planned and spontaneous activities experiences.

All staff members will access and make available resources and information to support the delivery of anti bias concepts in the program, as well as attend regular

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training as required. Such resources should be integrated into the daily program and made publicly available to families.

Yuluwirri Kids will regularly review and reflect on the implemented practices and staff member attitudes to ensure they match the Centre's philosophy, goals and aims.

Yuluwirri Kids will regularly work with families to help educate and encourage positive attitudes and values and seek their contribution in relation to policies and practices in the Centre.

That at all times staff members & Management will ensure that all casual staff are aware of such practices and reflect these values.

That such policy directives are applied to all persons, including staff, children, visitors and families.

NB: Please see specific policies for gender, inclusion, additional needs and multicultural.

Sources

The Illawarra Children's Services: Training and support unit

Children Services Regulations 2004 www.community.nsw.gov.au

National Childcare Accreditation Council: Quality Practices Guide 1st ed.2005, www.ncac.gov.au

Handle with Care: A Guide to Early Childhood Administration

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: July 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Anti Gender Bias Policy

Policy Number: YK0010618

Aim

Pursuant of Yuluwirri Kids aims, our Centre endeavours to respect the, and demonstrate awareness of each person regardless of their gender.

Legislative Requirements

Children's Services Regulations 2004

Anti Discrimination Act 1977

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Implementation

In order to achieve this, staff members will:

Yuluwirri Kids will respect, and encourage respect of, all individuals and provide equal opportunities for each child to develop their full potential, regardless of gender.

Staff members and the Centre will show respect for children who engage in practices which occur in other societies and cultures. Staff members will work with families to engage in communication in relation to such practices and discuss the value of different experiences and values with parents/guardians.

The Centre and all staff members will access information, resources, support and ideas from outside agencies to enhance the program and environment and help implement, demonstrate and encourage anti biases to gender. Staff members will implement such resources to develop the capacity for each child to recognise and challenge bias.

Staff members will provide equal opportunities for all children to participate in all areas of the program, and demonstrate anti biases towards gender through their interactions.

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Staff members will regularly reflect on their own attitudes and practices as well as undertake regular training as required to support such anti bias policies.

Sources

The Illawarra Children’s Services: Training and support unit

Children Services Regulations 2004 www.community.nsw.gov.au

National Childcare Accreditation Council: Quality Practices Guide 1st ed.2005,
www.ncac.gov.au

Handle with Care: A Guide to Early Childhood Administration

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Management Committee
- Families
- Interested Parties

Policy Created date: August 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Allergies & Anaphylaxis - Reducing The Risk

Policy Number: YK0010619

Aim

Yuluwirri Kids will minimise the risk of exposure of children to foods and other substances, which might trigger severe allergy or anaphylaxis in susceptible children.

Food allergies in children are common and are usually due to peanuts, other tree nuts (brazil, cashew, hazelnuts, almonds), fish, shellfish, eggs, wheat, milk, milk products, soy, seed and some fruits. Food allergies are more common in children under 2 years of age. Peanut allergy is the most likely allergy to need availability of adrenaline. Other substances to which children can have a severe allergic reaction are drugs (especially antibiotics and vaccines), bees, other insect stings, and some plants. The most severe form of allergic reaction to any substance is anaphylaxis and effective immediate management requires adrenaline.

Relevant Legislation

Children Services Regulation 2004

Occupational Health and Safety Act, 2000 and Regulations 2001 (NSW).

Who is affected by this policy?

Child
Staff
Families
Management
Visitors

Implementation

To minimise the risk of exposure of children to foods that might trigger severe allergy or anaphylaxis in susceptible children, the centre will

Ensure children do not trade or share food, food utensils and food containers.

Be aware that allergy in children can be triggered in the following ways – contact through ingestion, inhalation of a dust or vapour, skin contact, or a bite or sting.

Be aware that allergies are very specific to the individual and it is possible to have an allergy to any foreign substance.

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Where possible, ensure all children with food allergies only eat food and snacks that have been prepared for them at home.

Ensure food preparation, food serving, and relief staff are informed of children and staff who have food allergies, the type of allergies they have, and the centre's procedures for dealing with emergencies involving allergies and anaphylaxis.

Restrict the use of foods likely to cause allergy in craft and cooking play.

In preparing food, prevent cross-contamination between foods, food surfaces and utensils, particularly when preparing foods containing the most likely allergens such as nuts, milk and milk products, eggs and egg products, and soy.

Where a child is known to have a susceptibility to severe allergy or anaphylaxis to a particular food, have a "food free policy" for that particular food, e.g. a "**Nut Free Policy**", which would exclude children or other people visiting the centre from bringing any foods containing nuts or nut products such as :

- peanuts, brazil nuts, cashew nuts, hazelnuts, almonds, pecan nuts
- any other type of tree or ground nuts, peanut oil or other nut based oil or cooking product, peanut or any nut sauce, peanut butter, hazelnut spread, marzipan
- any other food which contains nuts such as chocolates, sweets, lollies, nougat, ice creams, cakes, biscuits, bread, drinks, satays, pre-prepared Asian or vegetarian foods
- foods with spices and seeds such as mustard, poppy, wheat and sesame seeds
- nut and peanut material is also often in cosmetics, massage oils, body lotions, shampoos and creams such as Arachnis oil.

Be aware that a child may have a number of food allergies or there may be a number of children with different food allergies, and it may not be possible to have an allergy free policy for all those foods involved. Nut allergy is the most likely to cause severe reaction and should take precedence.

If displaying personal information about children's or staff member's allergies in food preparation or serving areas, do so in accordance with privacy guidelines, such as displaying in an area accessible to staff and not accessible to visitors or other families. Explain to families the need to do so for purpose of safety of the child and obtain parental consent (see Section 8.4 Confidentiality).

Ensure children identified as allergic to specific triggers and substances do not have access to or contact with those substances. (See Sections 11.3 Contact between

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Children, Pets and Animals; 12.3 Precautions against Snakes, Spiders, Insects; 12.6 Hazardous Plants).

Ensure body lotions, shampoos and creams used on allergic children have been approved by their parent.

Other common groups of substances which can trigger allergic reaction or anaphylaxis in susceptible children include:

- all types of animals, insects, spiders and reptiles
- all drugs and medications, especially antibiotics and vaccines
- many homeopathic, naturopathic and vitamin preparations
- many species of plants, especially those with thorns and stings
- latex and rubber products
- Band-Aids, Elastoplast and products containing rubber based adhesives.

Source

Australasian Society of Clinical Immunology And Allergy,

<http://www.allergy.org.au>. ; *Australian First Aid*, St. John Ambulance Australia, www.stjohn.org.au; *Dealing with Food Allergy*, Soutter, V, Swain, A, Loblay, R., RPA Hospital,

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Management Committee
- Families
- Interested Parties

Policy Created date: August 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Arrival and Departure Policy

Policy Number: YK0010620

Aim

To ensure and encourage the safety of children, families, visitors and staff members during arrival and departure experiences at the Centre and to educate such persons of appropriate procedures.

Legislative Requirements

Children Services regulations 2004,

Occupational Health and Safety Act 2000 and Regulations 2001

National Childcare Accreditation Council

Who is affected by this policy?

- Child
- Families
- Staff

Implementation

The following guidelines must be adhered to at all times to ensure the safety of the children

Arrival:

- All children must be signed **IN** by their parent or responsible adult in order for parents to be eligible for Childcare Benefit. This also assists staff in the event of evacuation of the Centre. **This is the parent/caregivers responsibility.**
- To ensure each child is cared for at all times, a staff member will greet and receive the child at all times.
- A locker should be made available to children and their families. Child's Name is posted above the lockers for allocation of a locker each day.

Departure:

- Authorised Supervisors are to ensure that the authorised pick-up list for each child is kept up to date.
- No child will be released into the care of any persons not known to staff. If staff do not know the person by appearance, the person must be able to produce some

form of photo identification to prove that they are a person authorised to collect the child on the child's enrolment form.

- Parents must give prior notice where the person collecting the child is someone other than those mentioned on the enrolment form, e.g. in an emergency situation. The person nominated by the parent must be able to produce some form of identification.
- Children are not to be released into the care of persons not authorised to collect the child, e.g. court orders concerning custody and access.
- Parents must give prior notice of any variation in the persons picking up the child. If notice is not given, and staff cannot contact the parent, the child must not be released into the care of that person.
- If the person collecting the child appears to be intoxicated, or under the influence of drugs, and staff feel that the person is unfit to take responsibility for the child, the staff members are to bring the matter to the person's attention before releasing the child into their care. Wherever possible, such discussion is to take place without the child being present. Staff are to suggest that they contact the other parent or emergency numbers from the enrolment form, inform them of the situation and request they collect the child as soon as possible. If the person refuses to allow the child to be collected by another authorised person, staff members are to inform the police of the circumstances, the person's name and vehicle registration number. Staff cannot prevent a parent from collecting a child, but do have a moral obligation to persuade a parent to seek alternative arrangements if they feel the parent is in an unfit state to accept responsibility for the child.
- All children must be signed **OUT** by a parent or responsible adult of 18 years or older in order for parents to be eligible for Childcare Benefit. This also assists staff in knowing who has left the centre
- At the end of each day 2 staff members check all sign in sheets, beds and the premises including outdoors and indoors to ensure that no child remains on the premises after the centre closes.

Sources

Children services Regulations www.community.nsw.gov.au

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Review

The policy will be reviewed annually.

The review will be conducted by:

Management

Employees

Advisory Committee

Families

Interested Parties

Policy Created date: September 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Asthma Policy

Policy Number: YK0010621

Aim

Yuluwirri Kids aims to provide appropriate attention and care to children with asthma and ensure that such children are integrated into all activities. We encourage play and exercise for children with asthma. All staff members will uphold and implement positive beliefs and values in relation to children with asthma to develop a sense of security and confidence. Staff members will assist children with asthma, other children, visitors and families to understand asthma and medication in a positive manner.

Legislative Requirements

Children's Services Regulations 2004

Occupational Health & Safety Act 2000 and Regulations 2001 (NSW)

National Childcare Accreditation Council

Who is affected by this policy?

Child

Families

Staff

Management

Implementation

Management will:

- Identify children with asthma during the enrolment process
- Provide all affected families with a copy of the Asthma policy upon enrolment
- Provide staff members with a copy of the Asthma policy
- Opportunities for staff members to attend regular asthma training should be encouraged and made available by the Centre
- Provide an Asthma Record to all families of children with asthma on enrolment.
- Ensure all staff are informed of the children with Asthma in their care
- Ensure that an Asthma First Aid poster is displayed in a key location.
- Encourage open communication between families & staff

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- Identify and where possible, minimise asthma triggers using appropriate techniques, policies and procedures.

Staff will:

- Ensure that they maintain current Asthma First Aid Training
- Ensure that they are familiar with each child with asthma in the care
- In regular consultation families, optimise the health and safety of each child through supervised management of the child's asthma
- Only administer prescribed and approved medication.
- No medication prescribed for anyone other than a particular child will be given
- All medication must be clearly marked with the child's name and be stored appropriately.
- Ensure that all regular prescribed asthma medication is administered in accordance with the information on Child's Asthma Record.
- Medication is to be administered (on a non-emergency basis) and is to be recorded accurately by the parent/guardian, in relation to time and dosage, and will be signed by a staff member on its administration.
- Communicate without undue delay to management and families, if they are concerned about a child's asthma limiting his/her ability to participate fully in all activities.
- Provides families with details of Asthma Foundation NSW
 - www.asthmansw.org.au
 - 1800 645 130

Families will:

- Formally inform staff members and the Centre, either upon enrolment of their child with Asthma or on initial diagnosis (without undue delay), that their child has a history of asthma.
- Provide all relevant information regarding the child's asthma via the Asthma Record as provided by the child's doctor.
- Notify Yuluwirri Kids staff members, in writing, of any alterations to the Asthma Record.
- Ensure that their child maintains adequate supply of appropriate medication (reliever) and spacer device clearly labelled with the child's name including expiry dates.
- Communicate all relevant information and concerns to staff as the need arises.
- Parent/guardian must give written authority for medication to be dispensed by filling in a Medication Form. If the medication Form is not filled in, except in the case of an emergency, medication will not be administered on that day.
- Do not leave medications in your child's bag or locker. Give it directly to a staff member upon arrival.

In the event of a child having an asthma attack whilst at the Centre:

1. The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained staff member.
2. Asthma medication will be administered as outlined in the child's Asthma Record Form.
3. The parent/guardian will be contacted by phone immediately if staff members become concerned about the child's condition.
4. In the event of a severe attack, the Ambulance service will be contacted on 000 immediately and the 4 Step Asthma First Aid Plan will be implemented until Ambulance officers arrive.

Sources

Asthma Foundation NSW www.asthmansw.org.au

Health & Safety in Children's Services Model Policies and Practices

Occupational Health & Safety Act

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: October 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Asthma Record

Asthma friendly children's services

This form is to be completed by parents/carers AND the child's doctor (general practitioner or specialist). Parents/carers should inform the service immediately if there are any changes to the child's asthma management. A new Asthma Record should be provided at the beginning of each year.

Please tick the appropriate box, and print your answers clearly in the blank spaces where indicated.

Personal Details

Child's Name: _____

Gender: M / F

Date of Birth: __ / __ / ____

Name of Children's Service: _____

Emergency Contact 1

Name: _____

Relationship: _____ (E.g. parent / carer)

Telephone (home): _____ Telephone (work): _____

Emergency Contact 2

Name: _____

Relationship: _____ (E.g. parent / carer)

Telephone (home): _____ Telephone (work): _____

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Doctor's Detail

Doctor's name: _____

Doctor's Telephone: _____

Asthma Management Plan

Does the child tell the carer when he / she needs medication? Yes No

Child's symptoms (e.g. wheezing):

Triggers:

Medication requirements

(Parents need to supply asthma medication e.g. puffer and spacer)

Name of medication Method of delivery (e.g. puffer and spacer) When and how much?

In an EMERGENCY, follow the Plan below that has been ticked

Standard Asthma First Aid Plan

Step 1: Sit the child upright and remain calm and provide reassurance. Do not leave the child alone.

Step 2: Give 4 puffs of a blue reliever (Airomir, Asmol, Epaq or Ventolin), one puff at a time, through a spacer device*. Ask the child to take 4 breaths from the spacer after each puff.

Step 3: Wait 4 minutes.

Step 4: If there is little or no improvement, repeat steps 2 and 3. If there is still little or no improvement, call an Ambulance immediately (Dial 000). Continue to repeat steps 2 and 3 while waiting for the ambulance.

*Use a blue reliever puffer (Airomir, Asmol, Epaq or Ventolin) on its own if no spacer is available

OR

My Child's Asthma First Aid Plan as written in consultation with my child's doctor

(Full details must be attached or staff will use the above Standard Asthma First Aid Plan)

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Additional Comments:

I authorise the staff at the service to follow the preferred Asthma First Aid Plan and assist my child with taking asthma medication should he/she require help. I will notify you in writing if there are any changes to these instructions. Please contact me if my child requires emergency treatment or if my child regularly has asthma symptoms whilst attending the service.

Signature of Parent/Carer: _____

Date: _____

Signature of Child's Doctor: _____

Date: _____



Yuluwirri Kids

Bullying Policy

Policy Number: YK0010622

Aim

Bullying can occur in numerous and various forms such as physical, verbal, gesture, extortion, exclusion and digital. It is important that staff respond to bullying in a swift and effective manner to ensure the safety and wellbeing of all children at Yuluwirri Kids. It is important not to label a child who bullies as a “Bully”.

Legislative Requirements

Children’s Services Regulations 2004 NSW

Occupational Health & Safety Act 2000 & Regulations 2001 NSW

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Visitors

Implementation

Characteristics of Children Who Bully

- Children of all backgrounds can bully
- Preconceived notions of children who bully should be avoided
- The child who bullies may also be the victim of bullying
- The child who bullies will often think that they are innocent, and that the child being bullied is somehow deserving of this negative experience.
- Recent research demonstrates that aggressive and bullying inclinations begin in some children as early as two years old, which highlights the importance of children’s services staff in effectively responding to children who bully.

Characteristics of Victims of Bullying

- Children of all backgrounds can fall victim to bullying
- Preconceived notions of children who fall victim to bullying should be avoided
- Boys are victims of bullying more than girls.
- Victims may have low self-esteem, confidence, lack social skills or viewed as unpopular.
- It is important to remember that victims are often sensitive and easily hurt, and feel incapable of preventing or stop such negative experiences.

Strategies to Overcome Bullying

- Practice all-encompassing and socially inclusive care. Daily programs should recognise value and reflect the social and cultural diversity of our community.
- Role model and actively encourage appropriate behaviours
- Form a close relationship with family members in order to work cooperatively to overcome instances of bullying.
- Empower children by giving them responsibilities as they will feel valued.
- Help children deal with their anger. This includes offering alternative dispute resolution techniques that are socially acceptable
- Seeking the support of children's services professionals may be necessary

Sources

Children's Services Regulations 2004 www.community.nsw.gov.au

Managing a Child Care Service: A hands on guide for service providers

Slee, J. (2003). Managing difficult behaviour in young children. NSW: ECA.

Warrumbungle Shire Council - Policies

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Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: November 2009

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Child and Staff Immunisation Policy

Policy Number: YK0010623

Aim

To encourage all children, their families and staff members to maintain up to date immunisation and provide such records in accordance with the Australian Standard Vaccination Schedule and to ensure such records are maintained in an orderly and up to date manner at all times.

Legislative Requirements

Children's services Regulations 2004,

Public Health Act (Amendment) 1992,

Occupational Health and Safety Act 2000 and regulations 2001(NSW)

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Visitors

Implementation

To minimise risks, complications and the spread of vaccine preventable diseases, Yuluwirri Kids will:

- The Public Health (Amendment) Act 1992 requires parents/guardians of all children enrolling in child care facilities and pre-schools to provide written/documented evidence of the child's immunisation status and records. Immunisations received should be appropriate to the child's age. Immunisation is not compulsory; however, in the event of an outbreak of a vaccine-preventable disease at the centre, unimmunised children will be required to remain at home throughout the duration of the outbreak. Documentation accepted is
 - A letter from the doctor, baby health clinic or nurse, local council or hospital or
 - The Personal Health Record ("Blue Book") or

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- The Australian Childhood immunization Register History Statement
- It is the families' responsibility to ensure that their child's immunisation is up to date.
- An up to date and orderly immunisation register will be kept with a separate record for each child and staff member at the centre.
 - Parent will be provided regularly with reminders to update their immunization register
 - Parents must provide updates to the child's immunisation record. Failure to comply with this directive will mean the child will be regarded as being unimmunised.
- Staff will advise management with updates to immunisation.
- Yuluwirri Kids will provide information on and encourage all children and staff to have up to date/age appropriate immunisation in accordance with the current Australian Standard Vaccination Schedule.
- When required, inform families that homeopathic immunisation has not been proven to give protection against infectious diseases. Children who have only received homeopathic immunisation are considered not to be protected against vaccine preventable diseases and they are not considered immunised for the purposes of the Public Health Act (1991).
- Aboriginal and Torres Islander children have a different immunisation schedule which is available on request/or if needed.
- The Public Health Unit is to be advised as soon as the centre is aware that a child has contracted a vaccine-preventable disease. The Medical Officer of Health may direct that unimmunised contacts be excluded from the centre for the duration of the outbreak. Any such directive must be complied with by all staff members, children, families and visitors.
- If required by the Public Health unit, all families, staff members and persons normally working in and/or visiting the premises will be notified in writing that an outbreak of a particular infectious disease has occurred
- On instruction from the Public Health Unit, the child/staff that is to be excluded will be notified in writing and the Centre must ensure that the child/staff is excluded for the specified period.
- The Immunisation Register must be made available for inspection by the Medical Officer of Health of the local Public Health Unit.
- Parents will be informed on enrolment that all unimmunised children will be excluded if there is an outbreak of a vaccine preventable disease, if advised by the Public Health Unit.
- Parents are responsible for payment of fees while their child is excluded under all circumstances.

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Sources

Health & Safety in Children's Centre's: Model Policies & Practices

Australian Standard Vaccination Schedule:

www.health.gov/pubhlth/immunise/schedule_n2.htm

Children's Services Regulations 2004 www.community.nsw.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: December 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Child Health Policy

Policy Number: YK0010624

Aim

Yuluwirri Kids aims to provide, promote and encourage the maintenance of a safe and healthy environment from which children will learn about the world in which they live. The implementation of preventative measures through a comprehensive infection control process aims to minimise and/or prevent the spread of infections and will be upheld by all staff, children, families, visitors or other persons attending the child care Centre at any time.

Legislative Requirements

Children's Services Regulation 2004

Occupational Health & Safety Act 2000 and Regulations 2001

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Management

Implementation

Hygiene

- Hand washing is considered to be the most effective way of controlling infection in the Centre. Caregivers and children should wash their hands:
 - When arriving at the centre to reduce the introduction of germs.
 - Before all clean tasks e.g. handling and preparing food and eating.
 - After all dirty tasks e.g. nappy changing, toileting, cleaning up faeces, vomit or blood, wiping a nose, playing outside, handling animals.
 - After removing gloves
 - Before and after giving a child medication
 - After giving first aid
 - Before going home to prevent taking germs home.
- Nappy changing will be done only in the nappy change area which will be properly stocked with paper towels, towelettes, plastic bags, fresh nappies, clean clothes, rubbish bin with sealed lid lined with plastic. After each nappy change the child's

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and caregivers hands will be washed and the change table cleaned. At the end of each day the nappy change area will be disinfected with germex. The procedure for nappy changing will be displayed in the nappy change area.

- The centre requires parents to provide children's nappies
- The laundry area includes a washing machine and sink with hot & cold water supply for the laundering of soiled cloths, linen and nappies.
- Soiled laundry Items returning to a child's home for laundering will have soiling removed and will be stored securely and not placed in the child's bag in contact with personal items. It will be hygienically stored in a sealed container, until such a time as it is removed from the premises.
- Yuluwirri Kids will ensure that toilets and hand washing facilities are easily accessible to children. Children will be encouraged to flush toilets and wash hands after use.
- Staff will use separate cloths or tissues to wipe different children's faces and noses. Tissues will be disposed of immediately after wiping a child's nose.
- Each child will have their own bedding which will be supplied by the family.
- Or if a family forgets to send bedding Yuluwirri kids will supply each child with their own bedding, when used by one child is washed before it is used by another child.
- Yuluwirri Kids will wash mouthed toys daily using warm water and soap, and dry in the sun, rotate toys to allow for washing and use individual toy bags for babies, clean books by wiping with moist cloth and drying, clean storage areas weekly.
- Surfaces will be cleaned with detergent after each activity and all surfaces cleaned thoroughly daily. Floor in all classrooms will be washed each day. Areas contaminated with body fluids will be disinfected with Germex after washing.
- Each child will be provided with their own drinking and eating utensils at each mealtime. These utensils will be washed after each use. Staff will encourage children not to use drinking or eating utensils which have been used by another child or dropped on the floor.
- Staff will ensure that children do not eat food that has been handled by another child or that has been dropped on the floor.
- Food will be prepared; kept and served hygienically.
- Food preparation facilities will be maintained according to Children's Services Regulation 2004 requirements.
- The Centre will ensure it meets all requirements for food handling premises in accordance with the FSANZ Food Safety Code.
- The rules of hygiene and dental care will be included in the child's program and staff will initiate discussion about these subjects with groups and individual children at appropriate times.
- Information on hygiene and dental care principles and practices will be displayed in the reception area and drawn to the attention of all parents on a regular basis.
- No alcohol or unlawful substances will be consumed on the premises of the centre at any time when the service is being provided to the children
- No smoking of any substance will be smoked on any part of the premises of the centre at any time when the service is being

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Sources

Children's Services Regulations 2004 www.community.nsw.com

Health & Safety in Children's Services Model Policies & practices 2nd edition revised

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: January 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Child Health - Request For Medical Information

PARENT/GUARDIAN PERMISSION

To be completed by Parent/Guardian

In order for the staff at Yuluwirri Kids to assess the centre's ability to meet the medical needs of my child:

—
Child's full Name

the Manager seeks information about my child's medical condition and medication or treatment.

My child's proposed/confirmed attendance pattern at the centre is:

Mon Tues Wed Thurs Fri

Hours per day: _____

I hereby request that you provide all information that is relevant to the proper treatment of my child to the Manager of the centre.

I understand that the information so disclosed may be discussed by the Manager of the Centre and the Centre Consultant with the other members of the centre staff in order to assess the ability of the centre to meet my child's medical requirements.

Parent's/Guardian's Name (please print)

Signature

Date

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MEDICAL INFORMATION TO BE COMPLETED BY MEDICAL PRACTITIONER/SPECIALIST

State the child's medical condition(s) requiring regular treatment:

State the child's medical condition(s) requiring intermittent or emergency treatment:

Detail the medication to be administered during the child's attendance hours at the centre.

For Condition	Name of medication or medical procedure	Dosage route	Frequency or times of administration	Before/after/with meals or not applicable

Detail the medical procedure to be administered to the child:

Indicate which, if any, of the medications can be self-administered by the child under supervision:

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List any dietary restrictions or other medications which need to be restricted whilst the child is taking any of the above medications:

If the child requires intermittent or emergency treatment, what signs or symptoms indicate that treatment is required and which medication should then be given?

Intermittent _____

Emergency _____

Are there any activities or experiences that the child should not participate in whilst at the centre?:

Any other comments regarding the management of this child's medical condition:

Are you available to meet with the staff to provide instructions on the application of the above medication and procedures?

Yes No

If yes, when is the best time to contact you to arrange a meeting with staff?

Name:

Signature:

Date: Contact telephone number:



Yuluwirri Kids

Child Protection Policy

Policy Number: YK0010625

Aim

Yuluwirri Kids takes its responsibility towards providing a safe and caring environment for all children and believes that the safety of children is paramount at all times and aims to protect a child's right to be safe from abuse of any kind.

We aim to defend its staff's rights to confidentiality if a complaint against them is made and is found to be unsubstantiated. The centre will ensure that all parties affected by this policy are made aware of their roles and responsibilities regarding child protection.

Yuluwirri Kids aims to educate all parties about their roles in child protection and also about signs of abuse and ensure that all requirements of child protection requirements are being met.

Legislative Requirements

The Centre and all staff members must ensure all operations are compliant to the following Acts/Regulations as required by the State of New South Wales. Failure to meet the below requirements is a criminal offence and may result in fines of up to \$22,000.

Children's Services Regulations 2004 NSW

"Child protection legislation" means the [Child Protection \(Prohibited Employment\) Act 1998](#), the [Children and Young Persons \(Care and Protection\) Act 1998](#), the [Commission for Children and Young People Act 1998](#) and Part 3A of the [Ombudsman Act 1974](#).

13 Information about training and development

(1) Centre based or mobile children's service

An application for a licence for a centre based or mobile children's service must be accompanied by information to demonstrate that the applicant:

- (ii) understand their responsibilities under the child protection legislation, and*
- (iii) are fit and proper persons to care for children.*

Note. The required abilities to care for children are specified in clause 6. The licensee of a centre based or mobile children's service is required by clause 51 to ensure that members of the primary contact staff are fit and proper persons to be members of the primary contact staff.

5 Authorised supervisor

(2) Subject to this clause, a person is eligible to be an authorised supervisor for a children's service if the person:

(e) has successfully completed a course in child protection approved by the Director-General for the purposes of this clause (being a course that covers all applicable requirements under the child protection legislation).

Note. The required abilities to care for children are specified in clause 6.

51 Employment of staff

(1) The licensee of a centre based or mobile children's service must not employ a person as a member of the primary contact staff for the service unless the licensee is satisfied that the person is a fit and proper person to be a member of the primary contact staff.

Note. Part 7 of the [Commission for Children and Young People Act 1998](#) requires an employer to conduct employment screening of a preferred applicant for certain child-related employment, including employment in child care centres.

The [Child Protection \(Prohibited Employment\) Act 1998](#) prohibits a person convicted of a serious sex offence from applying for, undertaking or remaining in child-related employment.

(2) For the purposes of subclause (1), the licensee of a centre based or mobile children's service must ensure that each person whom the licensee employs or proposes to employ as a member of the primary contact staff has:

(a) an understanding of the principles set out in section 202 of the Act, and

(b) an understanding that the environment of a children's service must be safe for children, and

(c) a basic knowledge of the stages of physical, emotional, cognitive, social and cultural development of children, and

(d) a basic knowledge of activities and learning experiences that are appropriate for the various ages and stages of development of children, and

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- (e) a basic knowledge of the health, hygiene and nutrition needs of children, and*
- (f) except in the case of a trainee, experience in caring for children.*
- (3) A licensee of a centre based or mobile children's service must not employ a person as a member of the primary contact staff of the service unless the person is at least 18 years of age.*
- (4) The licensee of a centre based or mobile children's service is to ensure that all primary contact staff for the service understand their responsibilities under the child protection legislation.*

Children and Young Persons (Care and Protection) Act 1998

The Ombudsman's act 1974 (with the relevant child protection amendment in the reprinted version)

The Commission for Children and Young People Act 1998

Child Protection (Prohibited Employment) Act 1998

Children's Services Regulation 2004

Children Legislation Amendment (Wood Inquiry Recommendations) Act 2009 No 13

Who is affected by this policy?

Staff

Families

Child

Management

Advisory Committee

Implementation

The following outlines the responsibilities for staff and related people to children's services:

Children's Services Staff must:

- Report any situation where they suspect a child is at risk of significant harm to the Child Protection Helpline.
- Promote the welfare, safety and wellbeing of children at the centre.
- Have an awareness of referral agencies for families where concerns of harm do not meet the significant harm threshold.
- Be aware of obligations as per the Mandatory Reporter Guide.
- Assist in supporting children and families when liaising with Human Services (formerly DoCS) or other government agencies.

It is imperative to remember that all employees, staff, carers and licensees are mandatory reporters for Human Services. Yuluwirri Kids procedure dictates that reports regarding a child at risk to be made by the Authorised Supervisor/Director or Licensee. However, if this person fails to make a report you continue to be legally responsible to do so. It is the responsibility of the person that suspects a child abuse to ensure a report is made.

Children's Services Employers must:

- Ensure that all employees are:
 - Clear about their roles and responsibilities regarding child protection.
 - Aware of their obligations to immediately report suspected abuse to the Child Protection Hotline.
 - Aware of the indicators when a child may be at risk of harm or significant harm.
- Provide training and development for all employees in the recognition and reporting of abuse and harm.
- Provide reporting procedures and professional standards for care and protection work.
- Conduct a Working with Children Check for anyone that will be heavily involved with centre operations.
- Report to the NSW Ombudsman any reportable allegations and convictions made against an employee and ensure they are investigated by the Head of the Agency with appropriate actions being taken when the investigation is complete.
- Notify the Commission for Children and Young People of details of employees against whom relevant disciplinary proceedings have been completed and or persons whose employment has been rejected because of a risk identified in employment screening processes.
- Enable staff to have access to relevant acts, regulations, standards and other resources in order for them to complete their obligations.

The following agencies have responsibilities regarding child protection. Our centre will liaise with these services and agencies should child protection become an issue at our centre. The services, and their responsibilities are as follows:

Child Protection Helpline

- Receive and assess reports of children who are at risk of significant harm.
- Investigate and assess reports where there is a likelihood of risk of significant harm to a child or children.

- In cases involving child sex abuse or serious physical abuse the Child Protection Hotline will plan, conduct and manage with Police, the NSW Health Department (where a medical examination and counselling or support are needed) a joint investigation.
- Provide, arrange and request care and/or support for children and families.
- Inform reporting agencies of the progress and outcomes of assessments and investigations as permitted by law.

Child Wellbeing Unit

- To help and identify whether a case meets the new threshold or risk of significant harm.

NSW Ombudsman's Office

- Monitor the investigation of and in some cases investigated reportable allegations made against employees in government and non-government agencies, such as children's services.
- The Ombudsman must be notified of all allegations of abuse or neglect of a child by a children's services employee.
- A volunteer is also counted as an employee in this situation.

The Commission for Children and Young People

- Monitors trends and makes recommendations to government and non-government agencies on legislation, policies, practices and services affecting young children.
- Provides guidelines relating to employment screening for child related employment and maintains database of relevant disciplinary proceedings.

Indicators of Abuse

There are many indicators of child abuse and neglect. The following is a guide only. One indicator on its own may not imply abuse or neglect. Each indicator needs to be considered in the context of other indicators and the child's circumstances.

General indicators of abuse and neglect

- marked delay between injury and seeking medical assistance
- history of injury
- the child gives some indication that the injury did not occur as stated
- the child tells you someone has hurt him/her
- the child tells you about someone he/she knows who has been hurt
- someone (relative, friend, acquaintance, sibling) tells you that the child may have been abused

Indicators of Neglect in children

- poor standard of hygiene leading to social isolation
- scavenging or stealing food
- extreme longing for adult affection
- lacking a sense of genuine interaction with others
- acute separation anxiety
- self comforting behaviors, e.g. rocking, sucking
- delay in development milestones
- untreated physical problems

Indicators of Neglect in parents and caregivers

- failure to provide adequate food, shelter, clothing, medical attention, hygiene or leaving the child inappropriately without supervision
- inability to respond emotionally to the child
- child abandonment
- depriving or withholding physical contact
- failure to provide psychological nurturing
- treating one child differently to the others

Indicators of Physical Abuse in children

- facial, head and neck bruising
- lacerations and welts
- explanations are not consistent with injury
- bruising or marks that may show the shape of an object
- bite marks or scratches
- multiple injuries or bruises
- ingestion of poisonous substances, alcohol or drugs
- sprains, twists, dislocations
- bone fractures
- burns and scalds

Indicators of Physical Abuse in parents and caregivers

- direct admissions from parents about fear of hurting their children
- family history of violence
- history of their own maltreatment as a child
- repeated visits for medical assistance

Indicators of Emotional Abuse in children

- feeling of worthlessness about them
- inability to value others

- lack of trust in people and expectations
- extreme attention seeking behaviors
- other behavioral disorders (disruptiveness, aggressiveness, bullying)

Indicators of *Emotional Abuse* in parents and caregivers

- constant criticism, belittling, teasing of a child or ignoring or withholding praise and affection
- excessive or unreasonable demands
- persistent hostility, severe verbal abuse, rejection and scapegoating
- belief that a particular child is bad or “evil”
- using inappropriate physical or social isolation as punishment
- exposure to domestic violence

Indicators of *Sexual Abuse* in children

- they describe sexual acts
- direct or indirect disclosures
- age inappropriate behaviour and/or persistent sexual behaviour
- self destructive behaviour
- regression in development achievements
- child being in contact with a suspected or know perpetrator of sexual assault
- bleeding from the vagina or anus
- injuries such as tears to the genitalia

Indicators of *Sexual Abuse* in parents, caregivers of anyone else associated with the child

- exposing the child to sexual behaviours of others
- suspected of or charged with child sexual abuse
- inappropriate jealousy regarding age appropriate development of independence from the family
- coercing the child to engage in sexual behaviour with other children
- verbal threats of sexual abuse
- exposing the child to pornography

Indicators of Domestic Violence in children

- show aggressive behaviour
- develop phobias & insomnia
- experience anxiety
- show symptoms of depression
- have diminished self esteem
- demonstrate poor academic performance and problem solving skills
- have reduced social competence skills including low levels of empathy
- show emotional distress
- have physical complaints

Definition of Significant Harm

A child is at risk of significant harm when the circumstances that are causing concern are present to a significant state. This means the concern is sufficient to warrant a response by a statutory authority, such as the NSW Police Force or Community Services, regardless of a family's consent.

What is significant is not minor or trivial and may reasonably be expected to produce substantial and adverse impacts on the child's safety, welfare or wellbeing.

The significance can be a result of a single act or omission or an accumulation of acts and omissions.

Concerns don't meet the Risk of significant Harm Threshold

When concerns of harm do not meet the significant harm threshold, the centre should offer and coordinate assistance or make a referral to other services. Services may be located through the Family Referral Services or through Human Services. Family consent will be sought before making referrals.

Suspecting a Child is at Risk of Significant Harm

Staff access the Mandatory Reporter Guide (www.keepthemsafe.nsw.gov.au) to decide if any of the following conditions are present to a significant risk:

- Physical abuse
- Neglect
 - Supervision
 - Physical shelter/environment
 - Food
 - Medical care
 - Mental health care
 - Education
- Sexual abuse
- Problematic sexual behaviour
- Psychological harm

- Relinquishing care
- Carer concerns
 - Parent/carer substance abuse
 - Parent/carer mental health
 - Parent/carer domestic violence
- Unborn child

If a staff member has reasonable grounds to suspect risk of significant harm, they are to use the Mandatory Reporter Guide to assess whether their concerns meet the threshold of risk of significant harm.

If there is an immediate danger to the child the police and/or the Child Protection Hotline should be contacted directly.

Reasonable grounds refers to the need to have an objective basis for suspecting that a child may be at risk of significant based on:

- First hand observation of the child, young person or family
- What the child, young person, parent or other person has disclosed
- What can be reasonably be inferred based on professional training and/ or experience.

When the use of the Mandatory Reporter Guide advises risk of significant harm, mandatory reporter must make a report to the Child Protection Helpline.

Documentation

The centre will maintain records to prepare and support its ability to make a report to the Child Protection Helpline. Records will be kept in line with our Privacy, Security and Confidentiality of Records Policy.

The helpline will ask for the following information;

Child's Information

- Name of the child or young person (or alias) or other means of identifying them
- Age and date of birth (or approximation)
- If the child is Indigenous
- Cultural background of the child, language spoken, religion and other cultural factors
- Name, age of other household children or young people
- Address of child and family
- If the child has a disability – nature/type, severity, impact on functioning
- Is the child/young person subject of an Apprehended Violence order?

- Is the child or young person under the care of the minister or residing in out-of-home care?

Family information

- Name, age of parents/carer and household adults
- Home and/or mobile phone number
- Cultural background of parents, languages spoken, religion and other cultural factors
- Information about parental risk factors and how they link to child's risk of harm
- Domestic violence
- Alcohol or other drug misuse
- Unmanaged mental health
- Intellectual or other disability
- Protective factors and family strengths
- Non-offending carers' capacity to protect child
- Any previous suspicious death of a child or young person in the household?
- Is the carer/parent pregnant?
- Is the parent/carer subject of an Apprehended Violence order?
- Description of the family structure.
- Name, age, gender of siblings. Do siblings live with the child or young person?

Reporters Details

- Name, centre name, address, phone and email details
- Position
- Reasons for reporting today
- Nature of contact with child or family
- Nature of ongoing role with child or family (include frequency, duration and type)
- If report is being made by someone else in the agency, name of the agency worker who sourced the report

Other information

- If parent knows of the report and their response
- If child or young person knows about the report and their views
- Information related to worker safety issues
- Outcome of mandatory reporters guide

Once a report is made to the Child Protection Helpline no further report needs to be made unless new information comes to hand.

Notification of Abuse

When someone with mandatory reporting obligations has responsible suspicion of abuse they need to contact the Help and provide them with the necessary details. It is preferable that all documentation needed be available at the time of the call to ensure that all information can be given at once.

Consult the Mandatory Reporters Guide to assess whether a child is at risk of significant harm.

The Child Protection Helpline phone number for mandatory reporters is

133 627

It is important that when making a notification that the notifier asks the following questions in relation to notification;

- Name of person at Helpline who you spoke to.
- What the next step in the process is to be?
- What confirmation will be sent to confirm the report has been made?
- Is there any further action you as the notifier need to take?

Notification of those involved in Children's Services

In the case that someone that provides care for children in a children's service has witnessed or has suspicions of another person involved in the care of children in children's services of abusing children the same definition of abuse applies to those involved in children's services as it would to anyone outside the service.

Any person involved with the service is a mandatory reporter if they suspect someone involved in the service is abusing children. Any incident involving another person involved in the service must report the incident or suspicion to the Child Protection Helpline. The above details must be provided to the Helpline. Your concerns should be raised with the highest point of contact for your centre (management, licensee or authorised supervisor) as part of the process of notification.

If the above point of contact is the person that has raised suspicion then the most senior member of staff should notify the Helpline. As well as notifying the Helpline the most senior member of staff should contact their Children's Services Advisor from the Department to inform them of the incident as it may also breach the regulations and be investigated as a licensing matter.

Confidentiality

It is important that any notification remains confidential, as it is vitally important to remember that no confirmation of any allegation can be made until the matter is investigated.

Safeguards for reporters

A individual's details who reports to Community Services is kept confidential. The reporter's identity is protected by law if the report is made in good faith. The law offers the following protections:

- The report shall not be held to be breach of professional etiquette or ethics or a departure from acceptable standards of professional conduct
- No liability for defamation can be incurred because of making of report
- The report, or its contents, is not admissible in any proceedings as evidence against the person who made the report
- A person cannot be compelled by a court to provide the report or give any evidences as to its contents
- A report is exempt document under the *Freedom of Information Act* 1989.

If the law enforcement agencies require the identity of the reporter in order to investigate serious offences alleged to have been committed against children, the identity of the reporter may be released to the police.

Disclosure

The individual who makes the complaint should not inform the person they have made the complaint about. This ensures the matter can be investigated without prior knowledge and contamination of evidence.

Further Information

All staff should be aware that when dealing with children who have been abused or are in other way related or affected by an abusive situation that they are not question about the abuse as this may hinder the formal investigation of the situation. Staff should not coerce additional information from children, but should keep a record of their disclosure should children disclose information. This information will be used as part of the formal investigation.

Notifying the Ombudsman

Special procedures are in place to deal with allegations of reportable conduct or convictions against employees of all government and some non-government agencies in NSW. The Ombudsman Act requires the Head of Agency to notify the Ombudsman within 30 days of becoming aware of any reportable allegations or

conviction made against an employee in children's services. The Ombudsman needs to be informed of any allegation regardless of the outcome.

Visit www.ombo.nsw.gov.au for any forms required.

Some matters are notifiable to the Ombudsman as an allegation of reportable conduct. These are only reported to the Child Protection Helpline if there are also current concerns or children at significant risk.

Allegations against those involved in the service

The service will provide appropriate support for any staff member who has an allegation made against them.

Definitions of Terms

Agency: The Child Care Centre

Reportable Allegations: any sexual offence, or sexual misconduct, committed against, with or in the presence of a child (including a child pornography offence), any assault, ill treatment or neglect of a child, any behaviour that causes psychological harm to a child.

Employee of Agency: There are two groups of people who are considered to be employees and who may have reportable allegations made against them or be the subject of a reportable conviction.

These two groups are:

- any employee of the agency, whether or not employed in connection with any work or activities of the agency that relates to children, and
- any individual engaged by the agency to provide services to children (including in the capacity as a volunteer).
 - contractors
 - sub-contractors
 - volunteers
 - work experience participants, students on placements, eg TAFE, secondary or tertiary students

Head of Agency: the Licensee/Owner of the Centre or nominated person

Sources

Children and Young Persons (Care and Protection) Act 1998

The Ombudsman's act 1974 (with the relevant child protection amendment in the reprinted version)

The Commission for Children and Young People Act 1998

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Child Protection (Prohibited Employment) Act 1998

Children's Services Regulation 2004

Children Legislation Amendment (Wood Inquiry Recommendations) Act 2009 No 13

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: September 2009

Reviewed: 19th February 2010
2011

Date for next review: 19th February



Yuluwirri Kids

Clothing Policy

Policy Number: YK0010626

Aim

With consideration to social and cultural beliefs, values, practices and traditions, Yuluwirri Kids understands that the way in which a child is dressed for care can and may affect them in many contexts, and may assist and/or inhibit their independence throughout the day. Staff members will respect each child's and family's individual decisions, beliefs, values, practices and traditions. The safety and independence of the child is paramount at all times.

Legislative Requirements

Children Services Regulation 2004,

Occupational Health and Safety Regulation 2001

National Childcare Accreditation Council

Who is affected by this policy?

Children

Staff

Families

Management

Implementation

Children:

- Children should be clothed in an appropriate manner which will allow them to explore and play freely and not restrict them using equipment while at play
- Clothing should also allow easy access for toileting i.e. elasticised trousers, track pants – rather than buttons, zips, belts etc.
- Children will be encouraged by staff members to use aprons for messy play and art experiences to protect their clothing. For this reason it is important to not send the children in their best clothes. We suggest that children come in their “play clothes”.
- Children should be appropriately protected from the sun during outdoor play - please refer to sun safety policy for further directives on hats and clothing.
- Child clothing should accommodate weather conditions. I.e. be loose and cool in summer to prevent overheating and warm enough for cold weather – including

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outdoor play. At all times staff will monitor children to ensure they are appropriately dressed for all weather

- Children should have appropriate footwear that enables them to play comfortably and not cause safety concerns. I.e. thongs, clogs or backless shoes have a trip factor and do not allow children to use equipment safely.
- Comfortable and non restrictive clothing is important at sleep time to promote your child's comfort at this time of the day.
- Clean and appropriate spare clothing will be made available to children should it be needed.
- All clothing and belongings must be clearly labelled with the child's name.

STAFF

Staff members are positive role models for children. All staff members are required to wear appropriate, smart, casual clothes and present clean for work each day. Shirts must have sleeves (pursuant to the Sun Protection Policy) and must be of appropriate length to cover hips. Closed in shoes that are supportive and non-slip must be worn. Please refer to the Staff dress code

- Staff *must* set an example by wearing a sunhat (minimum 10cm brimmed hat) and sunscreen when outside AT ALL TIMES.
- Staff must be aware of their obligations under the OHS Act 2000 and OHS Regulations 2001 and conditions of employment to abide by Centre policy.

Sources

Children's Services Regulations 2004 www.community.gov.au

The Cancer Council www.cancercouncil.com.au

National Child Care Accreditation Council: Quality Practices Guide 1st edition 2005 www.ncac.gov.au

WorkCover NSW www.workcover.nsw.gov.au

Review

The policy will be reviewed annually.

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The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Confidentiality Policy

Policy Number: YK0010627

Aim

This policy is to address the issues of privacy and confidentiality of children, staff, volunteer workers and parents / guardians of children in care. It aims to protect the privacy and confidentiality by ensuring that all records and information about individual children, families, staff and management are kept in a secure place and are only accessed by or disclosed to those people who need the information to fulfil their responsibilities at the centre or have a legal right to know.

Legislative Requirements

Laws relating to protection of privacy and confidentiality; duty of confidentiality arising from contract with parent; to whom and when information must be disclosed; Long Day Care Handbook July 2000 (Cth.); Privacy Act 1988 (Cth.); Workplace Relations Act 1996 (Cth.).

National Childcare Accreditation Council

Who is affected by this policy?

Child
Families
Staff
Management
Advisory Committee

Implementation

- **Personal information will only be collected in so far as it relates to the service's activities and functions, and in line with relevant legislation.** (National Privacy Principle 1.1 - Privacy Act 1998.)
- **Collection of personal information will be lawful, fair, reasonable and unobtrusive.** (National Privacy Principle 1.2 - Privacy Act 1998.)
- **Individuals who provide personal information will be advised of: the name and contact details of the service; the fact that they are able to gain access to their information; why the information is collected; the organisations to which the information may be disclosed; any law that requires the particular information**

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to be collected; and the main consequences for not providing the required information. (National Privacy Principle 1.3 – Privacy Act 1998).

- **The use or disclosure of personal information will only be for its original collected purpose, unless the individual consents or unless it is needed to prevent a health threat, or is required or authorised under law.** (National Privacy Principle 2.1 – Privacy Act 1998).
- **The service will take steps to ensure the personal information collected, used or disclosed, is accurate, complete and up to date.** Parents will be required to update their enrolment details annually, or whenever they experience a change in circumstances. Computer records will be updated as soon as new information is provided. (National Privacy Principle 3 – Privacy Act 1998).
- **Personal information will be kept in a secure and confidential way, and destroyed by shredding or incineration, when no longer needed.** (National Privacy Principle 4 – Privacy Act 1998).
- **Individuals will be provided with access to their personal information and may request that their information be up-dated or changed where it is not current or correct.** (National Privacy Principle 6 – Privacy Act 1998).
- Individuals wishing to access their personal information must make written application to the Manager, who will arrange an appropriate time for this to occur. The Manager will protect the security of the information by checking the identity of the applicant, and ensuring someone is with them while they access the information to ensure the information is not changed or removed without the Manager/Supervisor's knowledge.
- The Manager will **deal with privacy complaints promptly and in a consistent manner**, following the centre's Grievance Procedures. Where the aggrieved person is dissatisfied after going through the grievance process, they may appeal in writing to "The Director of Complaints, Office of the Federal Privacy Commission, GPO Box 5218, Sydney NSW 1042, or phone the Commissioner's Hotline on 1300 363 992. (Privacy Act 1998). www.privacy.gov.au
- Every employee and the Operator is provided with clear written guidelines detailing:
 - What information is to be kept confidential and why
 - What confidential information they may have access to in order to fulfil their responsibilities and how this information may be accessed.
 - Who has a legal right to know what information?
 - Where and how the confidential information should be stored.
- Every employee and the Operator are required to sign a Confidentiality Statement.
- Every enrolling parent/guardian is provided with clear information about:

- What personal information is kept, and why.
 - Any legal authority to collect personal information.
 - Third parties to whom the service discloses such information as a usual practice.
- Confidential conversations that staff have with parents, or the Co-ordinator has with staff members will be conducted in a quiet area away from other children, parents and staff. Such conversations are to be minuted and stored in a confidential folder.
 - **Personnel forms and employee information will be stored securely.** (Workplace Relations Act 1996).
 - Applicants, students or volunteers will be informed that their personal information is being kept, for what reason, for how long, and how it will be destroyed at the end of the time period.
 - Applicants will be asked for their consent before their references are checked. Unsuccessful applicants will be advised of when and how their personal information will be destroyed.
 - **Information about staff members will only be accessed by the Manager, Human Resources and the individual staff member concerned.** (Workplace Relations Act 1996.)
 - **All matters discussed at committee meetings will be treated as confidential.** (Privacy Act 1998.)
 - No member of staff may give information or evidence on matters relating to children and/or their families to anyone other than the responsible parent/guardian, unless prior written approval by the responsible parent/guardian is obtained. Exceptions may apply regarding information about children when subpoenaed to appear before a court of law. Notwithstanding these requirements, confidential information may be exchanged in the normal course of work with other staff members at the Centre and may be given to the Operator, when this is reasonably needed for the proper operation of the Centre and the wellbeing of users and staff. (Children's Services Regulations 2004, Division 2; and Privacy Act 1988).
 - Reports, notes and observations about children must be accurate and free from biased comments and negative labelling of children.
 - Staff will protect the privacy and confidentiality of other staff members by not relating personal information about another staff member to anyone either within or outside the centre.
 - Students/people on work experience/volunteers will not make staff/children or families at the centre, an object for discussion outside of the centre (e.g. college, school, home etc.), nor will they at any time use family names in recorded or tutorial information.

Warrumbungle Shire Council - Policies

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- Students/people on work experience/volunteers will only use information gained from Yuluwirri Kids upon receiving written approval from the Centre to use and/or divulge such information, and will never use or divulge the names of persons.

Sources

Children's Services Regulations 2004 www.community.gov.au

Privacy Act 1998 www.privacy.gov.au

Workplace Relations Act 1996 www.workchoices.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created date: November 2009

Reviewed: <insert date here>
here>

Date for next review: <insert date

Confidentiality Statement

I Staff Member/Volunteer/Student/Advisory Committee member

Have read the Confidentiality Policy

I fully understand this policy and agree to abide by it at all times. I understand if I do not abide by the policy, it will result in disciplinary procedures

Signed: _____ Date: _____



Yuluwirri Kids

Continuity of Care Policy

Policy Number: YK0010628

Aim

Yuluwirri Kids aims to ensure the continuity of care of all children attending the Centre in the absence of their family members and/or primary carers. Our Centre will strive to ensure that all children feel comfortable and secure whilst at the Centre.

Legislative Requirements

National Childcare Accreditation Council

Who is affected by this policy?

Child

Staff

Families

Implementation

- When Yuluwirri Kids employs casual staff, or where volunteers and work experience students are present at the Centre, these persons will be engaged in an induction process that familiarises them with the Centre environment and any needs of children.
- The Centre's policies and procedures, a staff handbook and description of their roles and responsibilities at the Centre will be available to the abovementioned persons.
- Yuluwirri Kids will seek to make use of the same casual staff where possible. This will ensure that casual staff members are able to familiarise themselves with the Centre environment, expectations, and routine and children and their families.
- The Centre will seek to employ casual staff on a regular day where possible. This will ensure that casual staff members are able to familiarise themselves with the children and their families attending the Centre on that day. Building positive relationships between staff, children and families will encourage effective continuity of care.

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- Where possible and without undue delay, regular staff members will inform family members via the Centre newsletter and noticeboard of any changes to staffing that will be occurring.
- Casual staff members are encouraged, and should be encouraged by the Centre, to display a photo of themselves with an introductory paragraph about them to help children and their families familiarise themselves.

Sources

Children's Services Regulations 2004 www.community.nsw.gov.au

Quality Practices Guide 2005 www.ncac.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Dangerous Chemicals and Substances Policy

Policy Number: YK0010629

Aim

Yuluwirri Kids will actively seek to protect all children, staff members, families and visitors who attend the Centre at any time from any risks associated with dangerous chemicals, substances, medicines and equipment that are in and around the Centre.

Legislative Requirements

National Childcare Accreditation Council Quality Practices Guide 1st Edition 2005.

Australian Standards for storage and handling of hazardous chemicals and materials.

Who is affected by this policy?

Child

Staff

Families

Management

Visitors

Implementation

When purchasing, storing and/or using any dangerous chemicals, substances, medicines or equipment, Yuluwirri Kids will:

- Select and make use of the least hazardous substance or equipment.
- Aim to purchase and make use of substances which have child resistant lids or caps. Staff members will ensure that such lids or caps are properly fixed at all times.
- Store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times. Any substance or medicine found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where appropriate should not be used under any circumstances. Containers should be disposed of correctly following local council guidelines, and not reused under any circumstances.

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- All dangerous chemicals, substances, medicines and equipment must be stored in a locked place or facility which is labelled, secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges, toiletries, medicines and all first aid equipment.
- Staff members should follow the instructions of manufacturers, particularly of medicines which may need to be stored in a refrigerated environment pursuant to the abovementioned directives.
- Particularly dangerous and hazardous materials such as pesticides, herbicides, petroleum, kerosene, solvents and equipment which is operated by an engine or hazardous to children, will be stored in a locked facility external to the main Centre building. The facility must have a bonded floor and be inaccessible to children and clearly labelled as storing dangerous substances and/or equipment. Such facilities should be separate from children's play or outdoor environments.
- All hazardous containers and equipment should be properly discarded pursuant to local council guidelines.
- Any substances that need to be refrigerated, they are stored in a labelled child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children.
- If bulk chemicals or non-domestic products and quantities are used or stored, have a Hazardous Substances Register and Risk Assessment in accordance with the OHS Act and Regulation. This should record product name, application, whether the product is labelled, whether a MSDS (Material Safety Data Sheet) is available, what class risk the chemical is, the controls for prevention of exposure that are required and what first aid, medical or safety action should be taken if a person is exposed.
- The manufacturer's instructions for use, storage, and first aid instructions should be followed and recording on an MSDS (Material Safety Data Sheet).
- Yuluwirri kids should keep a register of all hazardous chemicals, substances, medicines and equipment used at the Centre. Information recorded should include where they are stored, their use, any risks, and first aid instructions.
- Appropriate personal protective clothing should be worn pursuant to the manufacturer's instructions when using and disposing of hazardous substances or equipment.
- Seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on 131126, or call an Ambulance on 000.

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- In the case of any child or staff member injured by a chemical, substance or equipment, institute your emergency, medical and first aid procedures, notify WorkCover NSW immediately and any other person or authority as required by the regulation or these guidelines
- In any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard, call the emergency services, dial 000 and notify WorkCover NSW immediately and any other person or authority as required by the Regulation or these Guidelines

Sources

The Toxic Playground, Immig, J, 2000; *Managing the Risks in*

Children's Services, Caton, S. Roche D., 1999; *Handling Pesticide Wastes* - EPA:

www.epa.nsw.gov.au ; *Managing OHS in Children's Services*, Tarrant. S., 2002.

Staying Healthy in Child Care

Preventing infectious diseases in child care

4th edition - Endorsed December 2005

Planet Ark FACT SHEET ON CLEANING PRODUCTS & METHODS The health & environmental hazards of synthetic cleaning products Retrieved June 21, 2007, from <http://www.planetark.com.au>

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Death of a Child Policy

Policy Number: YK0010630

Aim

Staff members will ensure that immediate and appropriate action is taken to notify any relevant authorities in the event of the death of a child whilst at the Centre.

Legislative Requirements

National Childcare Accreditation Council (NCAC).

Who is affected by this policy?

Child

Staff

Families

Management

Implementation

Staff members will follow and implement this procedure:

- Identify DR ABCD pursuant to current guidelines.
- Attempt CPR pursuant to current guidelines.
- Call an Ambulance immediately on 000.
- Staff to remove children from the scene.
- The Manager/Community Services Director will call the parents/guardians of the child and arrange to meet at the Hospital or medical facility.
- Medical staff will advise parents of medical status.
- Notify state Police Department
- Notify the Department of Community Services Director General
- Contact Insurance Company.

Sources

National Children Accreditation Council

Review

The policy will be reviewed annually.

The review will be conducted by:

Warrumbungle Shire Council - Policies

Auspice 3.6

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Dental Care Policy

Policy Number: YK0010631

Aim

Yuluwirri Kids will actively seek to establish good dental health practices at the Centre, and educate and encourage children and their families to implement good dental health practices at all times.

Legislative Requirements

National Childcare Accreditation Council.

Who is affected by this policy?

Child

Staff

Management

Families

Implementation

- Yuluwirri Kids will arrange for dental health professionals to attend the Centre to discuss good dental health practices and guidelines with staff members, children and family members.
- Staff members should actively seek to be positive role models for children and families in attendance at the Centre.
- Staff members form positive relationships with family members and children to discuss and encourage good dental health practices and ensure the continuity of care of each child. Information should be made available to family members and staff in their home language.
- Yuluwirri Kids integrates educative information and guidelines on good dental health practices into the daily routine. This should include information on tooth brushing, tooth friend snacks and drinks and going to the dentist and/or dental health professionals.
- The Centre will actively encourage good dental health practices including eating and drinking habits, tooth brushing and going to the dentist and/or dental health professionals.
- Children will be encouraged to drink water to quench their thirst and remain hydrated.
- Children will be encouraged to rinse their mouths with water to remove food debris after every meal or snack. Staff members will supervise such practices. For

Warrumbungle Shire Council - Policies

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babies, their gums should be cleaned gently with a damp cloth to remove plaque and milk.

- Family members should be informed without undue delay any incident or suspected injury or issue with their child's dental health which may include teeth and gums, gum swelling, infection in the mouth, or problems, pain or discomfort the child has with chewing, eating or swallowing food or drink.
- Staff members will be aware of dental first aid and receive appropriate professional development opportunities where appropriate.

Sources

Health & Safety in Children's Centres: Model Policies & Practices

Children Services Regulations 2004 www.community.nsw.gov.au

Occupational Health and Safety Act 2000 and Regulations 2001
www.workcover.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Dental Accidents Policy

Policy Number: YK0010632

Aim

To facilitate the prevention and management of dental trauma in children, Yuluwirri Kids will in general:

Facilitate training for child care staff in dental first aid in consultation with public health dentists. The training will include training staff to be able to identify the difference between deciduous (baby teeth) and permanent teeth, and to be skilled in dealing with a dental emergency and applying first aid for a dental injury.

Who is affected by this policy?

Child
Staff
Families
Management
Visitors

Implementation

First Aid for a knocked out or chipped tooth in a younger child

If a child has a dental injury where the tooth is chipped or the whole tooth is knocked out:

Manage as an emergency, inform the parents/family and complete an injury report form.

Do not reinsert the tooth back into the socket (avulsed deciduous teeth are not usually placed back).

Gently rinse the tooth or tooth fragments in clean milk or clean water to remove blood and place in a clean container or wrap in cling wrap to give to the parent or dentist.

Seek dental advice as soon as possible and ensure staff or the parent takes the tooth/tooth fragments to the dentist with the child.

First Aid for a knocked out or chipped permanent tooth in an older child or adult

Manage as an emergency, inform the parents/family and complete an injury report form.

Warrumbungle Shire Council - Policies

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Gently rinse the tooth fragments in clean milk or clean water for a few seconds to remove excess dirt and blood.

Handle the tooth by its crown (the white enamel top part of the tooth), not its root and be careful not to rub off the endothelial fragments on the root of the tooth as these are needed for the tooth

to take if replaced by the dentist. In an adult or older child who can be relied on not to swallow their tooth, it is preferable to replace the tooth back into the socket. (Be certain that the tooth is placed into the socket the correct way round, in its original position, using the other teeth next to it as a guide).

Hold the tooth in place by gently biting on a clean handkerchief or gauze pad.

If unable to reinsert the tooth, get the casualty to hold the tooth inside the mouth next to the cheek or place the tooth in clean milk, sterile saline, or clean water. Place a firm pad of gauze over the socket and have the casualty bite gently on the gauze.

Seek dental advice as soon as possible and ensure you or the family takes the child to the dentist with the tooth/tooth fragments within 30 minutes, as the root endothelial layer begins to deteriorate after 30 minutes.

If the tooth has been in contact with dirt or soil, advise the family that tetanus prophylaxis may be required and advise them to consult with both their dentist and doctor.

Source

Australian Dental Association (Victorian Branch); Dental FAQs – Dental Emergencies, Dept of Human Services (Public Health Division), Victorian Government; Dental Health for Children 0-6 years 1998; St John Ambulance Australia 2002; Australian First Aid, Forrest, ACT; Dept of Human Services (Aged, Community and Mental Health); Victorian Government, Oral Health Promotion: A Practical Guide for Children's Services.

Warrumbungle Shire Council - Policies

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Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Last reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Equipment Policy

Policy Number: YK0010633

Aim

Yuluwirri Kids will purchase toys and equipment that are pursuant to Australian safety standards and appropriate to the developmental stages, interests, and social and cultural considerations of each child at the Centre. Toys which encourage violence or inappropriate behaviour will not be purchased.

Staff members will ensure that all toys and equipment are maintained, used and stored in a safe, clean, hygienic condition. Children will be educated on how to use equipment appropriately.

Management will liaise with staff members to determine which equipment is most appropriate for the Centre, taking into account; durability, easy maintenance, cost, benefit to the children's program. If large/expensive items of equipment are requested the Operator will determine the centre's budget limitations.

Legislative Requirements

Australian Standards, Trade Practices Act 1974 (Cth) Sections 65B-65T Product Safety,
National Childcare Accreditation Council.

Who is affected by this policy?

Children

Families

Staff

Management

Implementation

- The Licensee will maintain an up to date inventory/registry of equipment at the Centre.
- The Licensee will be ultimately responsible for any purchases of equipment.
- Staff members will compile a list for the Licensee of equipment which needs maintenance on a prioritised basis, twice annually.
- Yuluwirri Kids will actively seek the input of parents/guardians regarding toys and equipment at the Centre.

Warrumbungle Shire Council - Policies

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- All new equipment will be checked against Australian Safety Standards.
- Children will be carefully introduced to new toys & pieces of equipment and taught how to use and care for them appropriately.
- Equipment that should only be used under supervision will be stored in a safe place pursuant to the dangerous substances, chemicals and equipment policy directives.
- The use of pools and toys or equipment which involve the use of water will be used under the direct supervision of staff members. All equipment will be emptied of water when not in use, and stored in such a manner that it cannot collect water.
- Children will only use a trampoline whilst under the direct supervision of an adult staff member.
- Equipment will be checked regularly by the staff to ensure it is in a clean and safe condition.
- The Licensee will advise the staff and parent committee about the purchase of new equipment and ensure a risk assessment is carried out.
- All equipment purchased for Yuluwirri Kids will be within budget limitations.

Sources

Managing a Child Care Service: A hands on guide for Service Providers

Handle with Care: A guide to Early Childhood Administration

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Ethical Conduct Policy

Policy Number: YK0010634

Aim

Yuluwirri Kids has adopted the Moral Code of Conduct which establishes the expected behavioural requirements for staff members whilst at the Centre. The Code guides staff members to act appropriately and assist them in fulfilling their statutory duty and social obligations to act honestly and professional in their interactions with other staff members, children, families and visitors.

KEY PRINCIPLES:

The Model Code of Conduct for our Centre is based on the following key principles:

Integrity

Selflessness

Respect

Honesty

Leadership

Accountability

Objectivity

Openness

Legislative Requirements

Children's Services Regulation 2004

Children and Young Persons (Care and Protection) Act 1998

Ombudsman Act 1974

National Childcare Accreditation Council

Who is affected by this policy?

Staff

Management

Implementation

GENERAL OBLIGATIONS

You must avoid conduct that:

- Is detrimental to the pursuit of the charter of the centre.
- Is improper or unethical.
- Is an abuse of power.

- Causes or involves intimidation, harassment or verbal abuse.
- Causes or involves discrimination, disadvantage or adverse treatment in relation to employment.

You must act lawfully, honestly and exercise diligence. You must treat others with respect at all times.

Fairness and Equity

You have an obligation to consider issues fairly and consistently. That being, you must take all relevant facts into consideration and you must not take irrelevant matters into consideration when making decisions.

Harassment and Discrimination

You must not harass or discriminate against others, or support those who do the same.

Development Decisions

It is your duty to ensure that decisions are properly made and that parties involved are dealt with fairly. If there is any uncertainty about the ethical issues around an action or decision you are about to take, you should consider these four points:

- Is the decision or conduct lawful?
- Is the decision or conduct consistent with centre policy and objectives?
- What will the outcome be for management, work colleagues, parents, children and any other parties?
- Do these outcomes raise a conflict of interest?

You have the right to question any instruction or direction given to you which you consider to be unethical. If you are uncertain you can seek advice from your manager or Authorised Supervisor or from the following organisations:

Independent *Commission Against Corruption* 02 8281 5999
NSW Ombudsman 02 9286 1000

Gifts or benefits

You must not:

- Never accept an offer of money, regardless of the amount
- Seek or accept a bribe
- By virtue of your position acquire personal profit
- You may accept gifts or benefits of a nominal or token value that do not create a sense of obligation on your part.
- If you receive a gift of more than token value in circumstances where it cannot reasonably be refused or returned, you should accept the gift and disclose this promptly to your supervisor.

RELATIONSHIPS

Obligations of staff

The Manager is responsible for the efficient and effective operation of the centre. Employees have an obligation to:

- Give their attention to business of the centre while on duty.
 - Ensure that their work is carried out efficiently, economically and effectively.
- Carry out lawful directions given by any person having authority.

Obligations during meetings

You must respect management, other staff, parents or visitors present during meetings.

Inappropriate interactions

The following interactions are inappropriate:

- Employees approaching other employees directly on individual staff matters that don't concern them.
- Use centre information for personal purpose or benefit.
- Disclose any information discussed during a confidential meeting
- Use confidential information with the intention to improperly *cause* harm to another person.
- Convert any property of the centre to your own use unless properly authorised
- Use the centre's computer resources to search for, download, access or communicate any material of an offensive, obscene, pornographic, threatening or abusive nature.

You must:

Protect confidential information

- Only access information needed for centre business;
- Not use confidential information for any non-official purpose;
- Only release confidential information if you have authority to do so;
- Only use confidential information for the purpose it is intended;
- Only release other information in accordance with established Centre policies and procedures and in compliance with relevant legislation;
- Be scrupulous in your use of Centre property and should not permit misuse by any other person or body.

REPORTING BREACHES, COMPLAINT HANDLING PROCEDURES:

Corrupt conduct, maladministration and waste of centre resources

You should report any instances of the above in accordance with Warrumbungle Shire Council reporting policy

Reporting breaches of the code of conduct

You should report suspected breaches of the code of conduct to the Manager, preferably in writing. Where you believe that the Manager has failed to comply with this code, you should report the matter to the Authorised Supervisor, Community Services Director or next in charge, preferably in writing.

Complaint handling procedures - staff conduct (excluding the Manager)

Where appropriate the Manager will make enquiries into breaches of the code of conduct regarding members of staff. Where the Manager has determined not to enquire into the matter, the Manager will give the complainant the reason/s in writing. Enquiries made into all staff conduct which might give rise to disciplinary action must occur in accordance with the relevant local government award and make provision for procedural fairness.

Sources

NSW Ombudsman www.nswombudsman.nsw.gov.au

Managing a Child Care Service – a hands-on guide for managers

Handle with Care – A guide to Early Childhood Administration

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Excursion Policy

Policy Number: YK0010635

Aim

Yuluwirri Kids acknowledges the value of relevant excursions in allowing children to gain a greater insight of the society in which they live, and learn from these experiences. Our Centre will actively seek to minimise any risks associated with excursions, and respond promptly and appropriately to any emergency whilst on an excursion. Staff members will educate children and families regarding safe road (or other transport) and play practices.

Legislative Requirements

National Childcare Accreditation Council

Who is affected by this policy?

Children

Staff

Family

Volunteers

Management

Advisory Committee

Implementation

Planning

- a) Prior to planning an excursion, staff members must define the rationale for going on the excursion, and identify any objectives they wish to achieve.
- b) Prior to going on the excursion, staff members must familiarise themselves with the site(s) involved in the excursion to order to outline any safety issues, accessibility and facilities such as toilets.
- c) The itinerary must include the following details:
 - Date and times
 - Proposed destinations (sites)
 - The activities children will be taking part in on the day

- Staff members and/or other adult supervisors attending
 - The name of the staff member with First Aid qualifications who will accompany the children on the excursion
 - An emergency contact number for the day of the excursion
 - A timetable for the excursion
 - Mode(s) of transport
 - Alternative weather plans or contingents
 - Guidelines for appropriate children's attire
 - Arrangements for mealtimes and toilet routines
 - Arrangement for special needs children, e.g. push chairs, etc
- d) A copy of this itinerary is to be available to all parents/guardians of children attending the excursion at least twenty-four hours before the excursion is to take place.

Parent Permission

- a) All parents/guardians of children attending the excursion must receive a copy of the written itinerary, which will also outline the rationale for the excursion, prior to permission being given for the child to attend.
- b) Children who have been given written permission to attend the excursion by their parent/guardian may only the excursion. Permission must be given for each individual excursion. The form must include the excursion dates, the child's name and the authorising parent/guardian's name and signature and date of authorisation which will be kept on the child's file. Under no circumstance can a child participate in an excursion if a parent / guardian has not given written permission for the child to do so.
- c) In the event that a child is absent from the Centre and twenty-four hours notice cannot be given, the child's parent/guardian may grant written approval on the day of the excursion. However, the Centre is to attempt to contact the parents of the child prior to the excursion, and to ensure that appropriate arrangements have been made for the child to remain at the Centre, if the parent wishes.

First Aid Requirements

- a) At least one supervising adult attending the excursion on the day must have a current First Aid Certificate. Contingencies should be made in the event that this person cannot attend the excursion on the day.
- b) A basic and stocked First Aid Kit should be taken on all excursions.
- c) When children aged 0 – 2 years attending an excursion, a staff member with appropriate qualifications for children 0 – 2 years must accompany them.

If children aged 0 – 2 years are remaining in the centre, a staff member with appropriate qualifications for children 0 – 2 years must remain on the premises.

Supervision Requirements

The ratios below are given as a minimal requirement, and the use of additional adults should be sought if the Authorised Supervisor feels it is necessary.

- a) Adult child ratios are to be:
 - one adult for each two children under three years of age
 - one adult for each five children who are three or more years of age
- b) The adult to child ratios on any excursion that involved the use of motor or other transport or crossing a major road are to be:
 - one adult for each two children who are under three years of age
 - one adult for each four children who are three or more years of age
- c) The adult to child ratios on any excursion to a beach, river, lake or other place where there is a significant water hazard are to be:
 - one adult for each child who is under three years of age, and
 - one adult for each two children who are three or more years of age but who do not normally attend school, and
 - One adult for each five children who normally attend school.
- d) The Authorised Supervisor must ensure that all excursions involving swimming are organised only for the purposes of learning water safety and/or learning to swim. The minimum adult to child ratio of participants in this type of excursion is one adult for each child, no exceptions.

- e) The Authorised Supervisor must ensure that children are not taken on a excursion to a beach, river, lake or other place where there is a significant water hazard unless two of the adult persons accompanying the children have:
- a certificate issued on completion, within the period of twelve months immediately before the excursion, of a Senior First Aid course that relates to resuscitation approved by the Work Cover Authority under the *Occupational Health and Safety Act 2000* and
 - A Bronze Medallion Award, or award given on completion of a water rescue test, issued by the Royal Life Saving Society Australia and
 - The knowledge the ability to implement water safety procedures
- f) When Special Needs children attend any excursion, adult to child ratios may be increased dependent upon the disability of the child (children) attending. This will ensure that the child with Special Needs is most effectively incorporated into the excursion and activities and ensure the safety of all persons attending. Consultation with primary stakeholders that have formed the individual education plan should be contacted to discuss the requirements of extra staff and the needs of the child for the excursion.
- g) Supervising staff members and/or adults must be assigned specific children for whom they are responsible. This will ensure all children are cared for at all times. These expectations should be clearly explained to all supervising adults prior to the excursion commencing. The Authorised Supervisor who is responsible for the care of all children. Accompanying adults who are not members of staff should not be left unsupervised with the children. A member of staff must remain with the children at all times.
- h) A list of children attending the excursion is to be taken on the excursion, and checked periodically during the time out of the centre. Particularly, attendance should be checked prior and after transportation, before returning to the Centre and at other times.

Transport

The means of transport must be stated on the permission note.

Buses – ensure that the seating capacity as displayed on the compliance plate is not exceeded. All children must sit on seats, preferably with, or close to, an adult. Seat belt guidelines must be followed depending on the bus. If the bus has seat belts, they must be worn at all times.

Warrumbungle Shire Council - Policies

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Trains – contact the station prior to the excursion to inform them of the time you will be travelling, the destination and the number of children and adults who will be travelling. Arrangements should be made to arrive at the station an adequate amount of time to allow for safe boarding. This will allow the station to inform the train guard so that he / she can hold the train for the period of time for safe boarding and alighting. All children should be seated at all times, with an adult close by. All children should be seated in the one carriage, if possible.

Cars – Any motor vehicle that is used to transport children on excursion (other than a motor vehicle with seating more than nine persons) is fitted child restraints and/or seatbelts that are appropriate for the age and weight of each child, that conform to the Australian Standards, and are professionally installed or checked by an authorised restraint fitter.

Insurance

Any excursion planned must be consistent with the requirements / exclusions of the Public Liability Cover held by the service.

Sources

Roads and Traffic Authority www.rta.nsw.gov.au

Australian Standards

Quality Practices Guide 2005 1st Edition www.ncac.gov.au

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Family Law and Access Policy

Policy Number: YK0010636

Definitions

Parental Responsibility – means that each parent/guardian has equal responsibility for their children’s welfare, either in the long-term or on a day to day basis and includes matters such as where the children will live and with whom they will have contact. It is not affected by any change in the parents’ relationship, for example if they separate or remarry.

Parenting Orders – are orders that the court will make when parents cannot decide on matters themselves. They change parenting responsibilities and stipulate which parent has what responsibilities. There are 4 types of parenting orders:

- Residence – an order to say with whom the child lives, including any shared arrangements
- Contact – an order to say the times that a child may have contact with a parent with whom they are not living, or anyone else who plays an important part in their life, such as a grandparent (contact can either be face to face, or by phone, letters)
- Child Maintenance – an order that provides for financial support of a child
- Specific Issues – an order about any other aspect of parental responsibility (this may include the day-to-day care, welfare and development of a child, issues relating to religion, education, sport, or other specific issue)

Residency

The parent with whom the child lives is responsible for day-to-day decisions like:

- Discipline
- Going out
- Clothes
- Accommodation
- Pocket money

Residency can be a shared arrangement.

Legislative Requirements

Family Law Act (Commonwealth) 1975 and Amendments

National Childcare Accreditation Council

Who is affected by this policy?

Children

Families

Staff

Management

Implementation

Parents/guardians, regardless of their marital status, have joint and equal legal responsibilities for their children unless there is a Court Order determining otherwise. Yuluwirri Kids staff members need to be knowledgeable of which parent/guardian has specific legal rights and responsibilities. Thus, the Centre will need to access any relevant Court Orders issued. Services are not legally able to allow children to leave the Centre without permission of the custodial parent/guardian.

In the case where guardianship and custody is legally defined, Centre policy must be followed as stated on the enrolment form. When situations change a copy of the Custody Order must be provided to Yuluwirri Kids. Where confrontation situations arise over custody the child will be kept at the Centre, the custodial parent must be contacted without undue delay and if necessary the Police and/or the Department of Community Services.

Information and access to be denied to certain persons

(1) Despite any other provision of this Division, a person who has been forbidden by court order from having contact with a child attending a children's service:

(a) must not be given any information concerning the child, and

(b) must not be allowed to enter the premises of the children's service while the child is attending the service, and

(c) must not be permitted to collect the child from the service.

(2) The licensee of a children's service must ensure that procedures are in place to ensure that the requirements of subclause (1) are complied with.

Sources

The above information has been adapted from the Family Court of Australia website 2002 www.familycourt.gov.au

Warrumbungle Shire Council - Policies

Auspice 3.6

Review

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Advisory Committee
- Families
- Interested Parties

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Fees Policy

Policy Number: YK00106637

Aim

For parents to pay their child care fees on time.

Legislative Requirements

A New tax System (Family Assistance) Act 1999

National Childcare Accreditation Council

Who is affected by this policy?

Parents

Management

Implementation

The following outlines the how fees can be paid. Fees must be paid in the week the first bill is issued before your child next attends.

- Upon enrolment, families must pay a booking fee of \$20.00.
- Invoices are issued one week in arrears.
- Fees must be kept up to date as invoices are issued.
- Fees can be paid weekly, fortnightly or monthly in advance by:
 - Directly to office staff;
 - Placing the payment in the envelopes provided and placing it in the payment box;
 - By making payment at Warrumbungle Shire Council, John Street, Coonabarabran between the hours of 9am and 4pm, Monday to Friday. You need to have your bill with you when you attend Council or otherwise your payment will not be accepted;
 - Internet payment (instructions for this are printed on the invoice)
 - Posting a cheque or money order made out to Warrumbungle Shire Council to PO Box 191, Coonabarabran NSW 2357.
- Fees are payable for every day that your child is enrolled at the centre. This **includes** public holidays, sick days and family holidays but excludes the shutdown period over the Christmas Holidays.
- A holiday rate is available to child/ren enrolled as Long Day Care. Each child is entitled to four holiday absences per one day enrolment. These are charged

Warrumbungle Shire Council - Policies

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at half the Long Day Care daily rate. Two weeks written notice is required to obtain holiday absences.

- Child Care Benefits (CCB) is available to all families who are Australian Residents. To find out their eligibility, families must contact the Family Assistance Office.
- Child Care Benefits can be received as:
 - A reduction of fees through the centre.
 - A lump sum payment to families at the end of the financial year that the centre is used in.

A receipt will be issued for all fees. This will include the child/children's full name/s, date of care, date of payment, amount, etc. If the incorrect amount is paid, change will not be given but will be credited to the families account.

A **booking fee of \$20.00** is required when lodging an enrolment form. This is non-refundable if your child does not take a place at our centre.

Our **terminating policy** requires two weeks written notice must be given. As CCB cannot be claimed after you have given notice, if your child does not attend during the notice period, **2 WEEKS FULL FEES** will be billed to you.

Overdue Fees

Any family who we have not received payment of fees from in over a week will receive a **Friendly Fee Reminder**. Parents experiencing difficulties with payments should see the Centre Manager. We may be able to assist you with a payment plan. Continually not paying fees will put your child/ren's place/s in the centre in jeopardy.

Dishonoured Cheques

If this happens, we regret to inform you a charge of **\$9.00** will be billed to your account.

Legal Action

Legal action may be taken for outstanding fees if suitable arrangements are not made with the centre manager.

Sources

Managing a Child Care Service – a hands-on guide for managers

Warrumbungle Shire Council - Policies

Auspice 3.6

Review

The policy will be reviewed annually.

Review will be conducted by:

- Management,
- Employees,
- Family Members
- Interested parties.

Reviewed: <insert date here>
here>

Date for next review: <insert date



Yuluwirri Kids

Food and Nutrition Policy

Policy Number: YK0010638

Aim

Yuluwirri Kids aims to provide children with food and nutrition that is supported by national dietary guidelines. We also aim to support and provide adequately for children with food allergies or specific cultural practices. This dietary information will also be provided to families so they can plan a child's home meals.

Legislative Requirements

Children's Service Regulations 2004,
Occupational Health and Safety Act 2000 and Regulations 2001,
Food Safety Act 1989 (NSW)
National Childcare Accreditation Council

Who is affected by this policy?

Child
Staff
Families
Management

Implementation

We feel we have a responsibility to help children and their families develop good food habits and attitudes.

In order to achieve these habits and attitudes, our centre will:

- Provide a menu based on the Australia Dietary Guidelines.
- Cater to individual children's needs whether they be cultural, lifestyle-based or medical.
- Present food attractively.
- Develop awareness and act to the best of our abilities on cross-cultural eating patterns and related food values.
- Provide food that is hygienically sound and has a reduced risk of choking.

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- Make meal times a relaxed and pleasant and timed to meet the needs of the children.
- Discuss food and nutrition with the children.
- Not allow food to be used as a form of punishment or to be used as a reward or bribe.
- Not allow the children to be force fed.
- Encourage children to be independent and develop social skills at meal times.
- Establish healthy eating habits in the children by incorporating nutritional information into our program.
- Talk to families about their child's food intake and voice any concerns about their child's eating.
- Display the centre's menu and put up posters with nutritional information on them.
- Provide fresh drinking water at all times of the day and ensure that a child's liquid intake is adequate.
- Ensure each child is given a fresh cup of water at each meal time. Staff are to monitor the intake of clear fluid's.
- Encourage parents to the best of our ability to continue our healthy eating message in their homes. This information will be provided through newsletters, displays, conversations on a regular basis and as new information becomes available.
- Encourage staff to present themselves as role models. This means maintaining good personal nutrition and eating with the children at meal times.
- Provide nutrition and food safety training opportunities for all staff including an awareness of other cultures food habits.

In regards to infants, the centre will aim to provide for their special needs by:

- Providing support and encouragement to mothers with infants to breast feed them for as long as possible.
- Providing cooled boiled water for infants should they need extra fluids.
- Offer a supportive environment for breast feeding mothers to use when at the centre.

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- Encouraging families to introduce solid food to their infant at about 6 months.
- Providing gluten free cereals, pureed vegetables and fruits as an infant's first solids.
- Introducing food containing iron (meat, poultry, fish, legumes and whole grain cereals) between 6-9 months.
- Providing a suitable range of food textures according to age and development of the infant.
- Encouraging the use of a cup rather than a bottle from about 12 months of age.

Sources

Health and Safety in Children's Services: Model Policies & Practices 2003

NSW Health www.mhcs.health.nsw.gov.au

Children's Services Regulations 2004 www.community.nsw.gov.au

Caring for Children – Food, Nutrition and Fun Activities, 4th Edition 2006

Review

The policy will be reviewed annually.

Review will be conducted by:

- Management,
- Employees,
- Advisory Committee
- Families
- Interested Parties.

Policy Created Date: February 2010

Reviewed: <insert date here>
here>

Date for next review: <insert date

