

# POLICY & PROCEDURE MANUAL

**Reviewed November 2016** 





# POLICY & PROCEDURE MANUAL

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# WATERFALL GULLY PRE-SCHOOL PHILOSOPHY

#### Our Philosophy is for each child:

- To develop a strong sense of belonging and to feel safe and secure in their environment
- Be active participants in their learning and to follow and extend on their interests
- Seek greater independence and develop their resilience, self-confidence and a positive self-esteem
- To be respected for who they are and to show respect for others, developing their skills in being socially inclusive and being considerate of others
- To be respectful and responsive to our wider community and environment, i.e.: water conservation, reusing, recycling, animal & plant world

Our Philosophy is to provide an environment that:

- Is welcoming, supportive and fun and where children feel valued and respected through positive interactions and expectations
- Supports all children and their families to feel connected and comfortable and also encourages their participation and involvement
- Celebrates the diversity of all children and their families
- Is aesthetically pleasing and offers a wide variety of learning experiences
- Promotes positive learning
- Caters to each individual child's learning style

Our Philosophy is to promote learning that:

- Is play based
- Supports and encourages each child to challenge themselves, apply problem solving strategies and to persevere at tasks
- Is age as well as individually appropriate to the interests and needs of the children
- Involves the child, the teacher and the child's parents
- Provides equal opportunities for both genders and reflects an anti-bias approach
- Is planned and evaluated with reference to the Early Years Learning Framework (EYLF) & the Victorian Early Years Learning and Development Framework (VEYLDF)

Our Philosophy is for all Educators to:

- Contribute to the development and evaluation of the children's learning programs
- Respect and value children, parents and other staff at the service
- Become co-learners with the children and foster positive relationships with each child
- Support each child to be active participants in their learning
- Make children's learning visible through Programming & Reflection Journals, children's portfolios, displays and conversations with families
- Participate in ongoing early childhood professional training and learning
- Engage in critical reflection of their skills, learning and knowledge as Educators of young children
- Respect the natural environment, continue to improve our sustainable practices, embedding these in our daily programs and encourage children to also develop an appreciation of our natural environment
- Promote an awareness and appreciation of our Indigenous heritage in the children's programs

Our Philosophy is to value connections to our wider Community through:

- Encouraging families and children to contribute to the program and share the experiences they value
- Educators and families of the centre demonstrating respect and acceptance for the uniqueness of each family, their culture and their lifestyle
- Actively promoting family involvement in the children's programs, Committee of Management & other sub-committees, working bees, fundraising and other social events
- Encouraging educators, children and families to engage with and support local community organisations and be part of local community events
- A partnership between educators and families in promoting smooth transitions for children between home and the centre and also between other specialist services and local schools.





# DEALING WITH MEDICAL CONDITIONS







# MEDICATION

<b>APPROVAL DATE</b>
REVIEWED

October 2006 November 2016

This policy is to ensure that all children receive their correct medication, should they require it during the Pre-School program, and will define the responsibilities of staff and Parents/Guardians to ensure the safe administration of medication. Children's medication will be stored either in the fridge, in the kitchen of the relevant room or, in the case of ongoing medication, in a container in the room with an action plan.

#### PROCEDURE:

#### **One-off Medication**

If your child requires medication during Pre-School time, you must:

• Sign permission for the staff to administer the medication, including the name of the medication, time and date the last dose was administered, time and date for the next dose to be administered.

As per the *Education and Care Services National Regulations, Regulation 103*, the following details will be entered in the medication record:

- a) the name of the child;
- b) the authorisation to administer medication, signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication;
- c) the name of the medication to be administered;
- d) the time and date the medication was last administered;
- e) the time and date, or the circumstances under which, the medication should be next administered;
- f) the dosage of the medication to be administered;
- g) the manner in which the medication is to be administered;
- h) if the medication is administered to the child
  - i). the dosage that was administered; and
  - ii). the manner in which the medication was administered; and
  - iii). the time and date the medication was administered; and
  - iv).the name and signature of the person who administered the medication.; and





V). the name and signature of the person who checked the dosage administered.

#### **On-going Medication**

On-going medication procedures and medication **also** require:

- A covering letter from Parents/Guardians or doctor at the start of the Pre-School year.
- Medical procedures need to be stated clearly and agreed to by the Parents/Guardians and Teachers according to the child's needs.
- An Action Plan should be provided for the child. This plan will be included in the child's enrolment file, in the Emergency Management Plan and included in a container in the child's Preschool room along with the named medication

#### Procedure for administration of medication

If medication is administered to a child participating in the Waterfall Gully Pre-School program

- a) the medication must be administered
  - i). from its original container, bearing the original label and instructions and before the expiry or use by date; or
  - ii). if the medication has been prescribed by a registered medical practitioner, from its original container, bearing the original label with the name of the child to whom the medication is to be administered, and before the expiry or use by date; and
- b) the medication must be administered in accordance with any instructions
  - i). attached to the medication; or
  - ii). any written or oral instructions provided by a registered medical practitioner; and
- c) the dosage of the medication to be administered to the child must be checked by a person other than the person administering the medication.

Medication may be administered to a child without an authorisation in case of an anaphylaxis or asthma emergency. *(Education and Care Services National Regulations, Regulation 105).* 

If medication is administered under this regulation, Waterfall Gully Pre-School will ensure that a Parent/Guardian of the child and the child's registered medical practitioner are contacted as soon as practicable.





#### **MEDICAL CONDITIONS**

APPROVAL DATE REVIEWED

June 2016 November 2016

This policy is to ensure the safety of all children in attendance at Waterfall Gully Preschool who suffer from ongoing medical conditions, including allergies, asthma, diabetes or a child diagnosed at risk of anaphylaxis.

A copy of this policy will be provided to parents/guardians of any child enrolled at the service that is known to suffer from an ongoing medical condition.

All staff at Waterfall Gully Preschool will hold current First Aid Qualifications, which will include asthma and anaphylaxis training.

Parents/Guardians are required to inform Waterfall Gully Preschool of any medical conditions relevant to their child, upon enrolment.

Parents/Guardians are required to provide any relevant medication to the preschool. This medication will be kept on the premises for the duration of the child's enrolment. It will be kept together with the accompanying Action Plan.

All staff will be informed of all children with medical conditions through medical lists displayed on the walls in each room and containers holding action plans and medication.

For mild allergies:

Staff to complete a 'Mild Allergy Action Plan', which includes a photo of the child, details of the allergy and contact details for the parents. This action plan will be laminated and displayed in the room where the child will attend. A copy will also be kept in the child's enrolment record and in the Emergency Management Plan.

In the event of exposure to the allergen the child is to be treated as per treatment listed in the Action Plan. Parents/Guardians will be contacted immediately.

An 'Allergy and Anaphylaxis Risk Minimisation Plan & Communication Plan' will be completed by staff in consultation with Parents/Guardians. A copy of this document will be kept with the child's records.





#### For serious allergies:

An 'Action Plan for Allergic Reactions' form will be completed by the child's parents in consultation with their family doctor. A coloured photocopy of this form will be provided to the Preschool for display within the room. A copy will also be kept in the child's enrolment record and in the Emergency Management Plan.

Any medication required to be administered in an emergency will be provided to the Preschool, by the Parents/Guardians at the same time as the Action Plan.

In the event of exposure to the allergen the child is to be treated as per treatment listed in the Action Plan. Parents/Guardians will be contacted immediately.

An 'Allergy and Anaphylaxis Risk Minimisation Plan and Communication Plan' will be completed by staff in consultation with Parents/Guardians. A copy of this document will be kept with the child's records.

For Anaphylaxis Allergies: Refer to Anaphylaxis Management Policy.

For Diabetes management: Refer to Diabetes Policy.

For Asthma management: Refer to Asthma Management Policy





#### **ASTHMA MANAGEMENT**

APPROVAL DATE	
<u>Reviewed</u>	

October 2011 June 2016

Parents/Guardians are required to inform Waterfall Gully Pre-School of any medical conditions pertaining to their child upon enrolment. At Waterfall Gully Pre-School all staff will have up-to-date First Aid training.

Parents/Guardians are required to complete an Asthma Care Plan for Education and Care Services<sup>11</sup> in consultation with their child's doctor. This plan will be displayed in the preschool room and a copy will be kept with the child's enrolment record and in the Emergency Management Plan.

#### http://www.asthma.org.au

If the child may require Asthma medication whilst at Pre-School, the Parents/Guardians will need to provide this medication to be kept with the Action Plan.

If medication needs to be given in an emergency, the child's action plan will be followed and staff will advise the Parent/Guardian as soon as practicable. Staff will decide if it is necessary to call an ambulance. Staff will also document this process in the Medication Record, which will then be signed by the Parent/Guardian.

If it is known that the child will require their medication on a particular day, the Parent/Guardian will need to complete the medication record at the beginning of the session. Staff will provide the child with their medication according to the Medication Record and a second member of staff will witness the administering.

An Asthma Risk Minimisation Plan will be completed by staff in consultation with parents/guardians before the child commences attending the preschool. A copy of this plan will be kept with the child's records.

An Asthma Communication Plan will be completed by staff and parents and a copy of this plan will be kept with the child's records.

<sup>&</sup>lt;sup>11</sup> Asthma Action Plan template

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Waterfall Gully Pre-School will provide Asthma Reliever medication and a spacer device to be used in emergencies. The use-by-date of the asthma reliever will be monitored by staff and replacements will be issued as required.

If a child enrolled at Waterfall Gully Pre-School has a specific healthcare need, allergy or other relevant medical condition, the Pre-School will provide a copy of the Medical Conditions Policy document to the child's family.





#### ANAPHYLAXIS MANAGEMENT

<b>APPROVAL</b>	DATE
Reviewed	

October 2011 June 2016

Parents/Guardians are required to inform Waterfall Gully Pre-School of any medical conditions pertaining to their child upon enrolment or on diagnosis of their child's allergies.

At Waterfall Gully Pre-School all staff will have up-to-date First Aid training and Anaphylaxis Management Training. This training will be updated every 12 months. Staff will also practice using an adrenaline auto-injection device using an auto-injection device trainer and "anaphylactic scenarios" on a regular basis, preferably quarterly, and these rehearsals will be documented.

Parents/Guardians of a child diagnosed at risk of anaphylaxis, are required to complete an Action Plan for Anaphylaxis. This plan will be developed in consultation with, and signed by, the child's registered medical practitioner. The plan will be displayed on the wall in the preschool room of the child and a copy will be kept with the child's enrolment record and in the Emergency Management Plan.

Parents/Guardians are required to provide medication as per the child's Anaphylaxis Medical Management Plan, to be kept at the Pre-School should the need arise. The medication will be kept with the 'Action Plan for Anaphylaxis'.

If medication needs to be given in an emergency, the child's action plan will be followed and staff will advise the Parent/Guardian as soon as practicable. Staff will decide if it is necessary to call an ambulance. Staff will also document this process in the Medication Record, which will then be signed by the Parent/Guardian.

In the situation where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction, staff will:

- Call an ambulance immediately by dialling 000 (mobile 112)
- Commence first aid measures
- Contact the Parent/Guardian
- Contact the person to be notified in the event of illness if the Parent/Guardian cannot be contacted.





If a child with a diagnosed risk of anaphylaxis is enrolled at Waterfall Gully Pre-School, an 'Allergy and Risk Minimisation Plan and Communication Plan'<sup>12</sup> will be developed in consultation with the family. This plan will be kept with the child's records.

A sign will be displayed at the entrance to the Pre-School stating:

"A child who has been diagnosed as at risk of anaphylaxis is being educated at this service"

Regulation 165 (2E) Education and Care Services National Regulations.

If a child enrolled at Waterfall Gully Pre-School has a specific healthcare need, allergy or other relevant medical condition, the Pre-School will provide a copy of the Medical Conditions Policy document to the child's family.





#### DIABETES MANAGEMENT

#### APPROVAL DATE REVIEWED

July 2011 June 2016

Parents/Guardians are required to inform Waterfall Gully Pre-School of any medical conditions pertaining to their child upon enrolment. At Waterfall Gully Pre-School all staff will have up-to-date First Aid training.

In consultation with Parents/Guardians, staff will write a Diabetes Management and Risk Minimisation Plan for the individual child. This plan will outline the individual needs of the child and the actions to be taken by staff in response to the child's diabetes.

Parents/Guardians will be required to provide their child with the correct type and amount of food and drink needed by their child. On special occasions, such as cooking and the sharing of birthday treats, staff will consult Parents/Guardians as to the preferred action in relation to the Child with diabetes.

On the occasion of an excursion, an individual risk management plan will be written in consultation with the Parents/Guardians.

If a child enrolled at Waterfall Gully Pre-School has a specific healthcare need, allergy or other relevant medical condition, the Pre-School will provide a copy of the Medical Conditions Policy document to the child's family.





# **EMERGENCY AND EVACUATION**







#### **EMERGENCY AND EVACUATION PROCEDURE**

# Approval Date Reviewed

October 2006 August 2016

For the purposes of preparing the emergency and evacuation procedures, Waterfall Gully Pre-School must ensure that a risk assessment is conducted to identify potential emergencies that are relevant to the service.

As by the *Education and Care Services National Regulations, 107*, the meaning of emergency includes:

- cyclone;
- flood; fire or bushfire;
- the presence of dangerous animals and insects;
- a situation that requires the Waterfall Gully Pre-School premises to be locked-down;
- a situation that requires the evacuation of the Waterfall Gully Pre-School premises.

All procedures for different situations are listed in detail in Waterfall Gully Preschool's Emergency Management Plan. Please refer to this document for detailed procedures.

A summary of lockdown and fire evacuation procedures are listed below.

### EMERGENCY LOCKDOWN PROCEDURE SUMMARY

- Call 000
- Initiate lockdown using alarm.
- Bring all children inside and to the lockdown areas.
- Educators to bring sign in book and all medications to lockdown area and check all external doors are locked. Teachers to monitor children.

Unit 1 and threes: kitchen area

- Kitchen doors to be locked. Blinds to be drawn. Roll to be taken. Wait for further instruction from Nominated Supervisor. Unit 2: middle store room.
- Doors to be locked. Roll to be taken. Wait for further instruction from Nominated Supervisor.

Groups can communicate via mobiles.





#### FIRE EVACUATION PROCEDURE SUMMARY

- Call 000
- Initiate evacuation using alarm.
- Gather all children.
- Educators to bring sign in book, mobile phone, medications and Emergency Evacuation trolley to assembly area. Teachers and additional staff to monitor children and warn other adults within the building.
- All teachers and staff to move to the evacuation point together.
- Check all children and adults are present at the evacuation point. Wait for further instruction from the Nominated supervisor.

#### EVACUATION POINT: TWO ASSEMBLY AREAS

AREA A: Front of Pre-School and Maternal Health Centre by swings AREA B: Far back corner of playground at the swings

(Refer to Pre-School emergency and evacuation floor plan)

Staff will ensure that emergency and evacuation procedures are practiced at least once per term and these rehearsals are documented.

Depending on the type of emergency, and at the Teachers discretion, Committee of Management members will be asked to inform Parents/Guardians of an alternative pick up point.

A copy of the emergency and evacuation floor plan and instructions are displayed in a prominent position near each exit and in each children's room.<sup>13</sup>

Refer to the Emergency Management Plan for all emergency policies and procedures

### APPENDICES:

<sup>3</sup> Emergency Management Plan

<sup>&</sup>lt;sup>13</sup> Emergency & evacuation floor plan

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# HEALTH & SAFETY







# HEALTHY EATING AND ORAL HEALTH POLICY

# Approval Date Reviewed

November 2016

#### <u>Purpose</u>

The educators, staff and management at Waterfall Gully Preschool acknowledge the importance of healthy eating and oral health behaviours, which contribute to overall health and wellbeing.

This policy confirms our commitment to:

- encourage children to make healthy food and drink choices
- promote the importance of a healthy lifestyle, which includes drinking water, eating healthy food and maintaining oral health.
- As a health promoting service we will promote healthy eating and oral health to children, educators, staff and families through learning, policies, creating a safe and healthy physical and social environment and developing community links and partnerships.

#### Policy statement

#### Background

Healthy eating and good nutrition have a major influence on children's health and wellbeing and a direct impact on their growth and development. The important social and cultural role of food, and the wide range of attitudes to it, is acknowledged within the service.

Oral health is essential for children's overall health and wellbeing. Oral diseases can negatively affect individuals through pain, discomfort, general health and quality of life. The main oral health condition experienced by children is tooth decay, effecting over half of all Australian children, making it five times more prevalent than asthma.<sup>14</sup> Tooth decay is Australia's most prevalent health problem despite being preventable.<sup>15</sup>

It is important to provide access to and establish good healthy eating and oral health practices at a young age as most children have formed lifelong habits by school age.

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<sup>&</sup>lt;sup>14</sup> Australian Research Centre for Population Oral Health, 2011. Dental caries trends in Australian school children. Australian Dental Journal, Vol 56, pp 227–30.

<sup>&</sup>lt;sup>15</sup> Rogers J, Prevention and Population Health Branch, Government of Victoria, Department of Health, 2011, Evidence-based oral health promotion resource





### Whole service engagement

It is recognised that every member of the service impacts on children's health and can contribute to creating an environment that promotes healthy eating and good oral health. All members of our service including educators, staff, children, families and volunteers will be supported in implementing this policy.

#### Definitions

**Healthy eating:** Eating a wide variety of foods from the five food groups each day. These are:

- fruit
- vegetables and legumes/beans
- grain (cereal) foods, mostly wholegrain
- milk, yoghurt, cheese, and alternatives
- lean meat, poultry, fish, eggs, tofu, nuts and seeds and legumes/beans.

Healthy eating also means eating in a way that is socially and culturally appropriate, having regular meals and snacks and eating food to satisfy hunger, appetite and energy needs.<sup>16</sup>

Nutrition: The process of providing or obtaining the food necessary for health and growth.  $^{\rm 17}$ 

**'Sometimes' foods and drink:** Sometimes foods are high in fat, sugar and salt or a combination of these.<sup>18</sup> They typically have very little nutritional value and are often processed and packaged. \* See appendix 1.

**Oral health:** Eating, speaking and socialising without discomfort or embarrassment.<sup>19</sup>

### **Procedures**

#### **Healthy policies**

- Educators, staff, families and children are active participants in the development and implementation of the whole service healthy eating and oral health policy.
- Educators, staff and families are provided with information about policy requirements.

<sup>19</sup> UK Department of Health (1994) in Spencer, JA, Australian Health Policy Institute, Commissioned Paper Series, 2004 (dental) C:\Users\admin\Desktop\Secretary Files\Policy & Procedure Manual\current P&P manual\WFG Policy Document version 3.1 2016 PART 2.docx

<sup>&</sup>lt;sup>16</sup><sub>17</sub> Nutrition Australia Victorian Division, www.nutritionaustralia.org

<sup>&</sup>lt;sup>17</sup> http://oxforddictionaries.com/definition/english/nutrition

<sup>&</sup>lt;sup>18</sup> Get Up and Grow Healthy Eating and Physical Activity for Early Childhood. Australian Government, 2009





# Healthy physical environment

- Families are encouraged to provide fruit and vegetables daily in children's lunchboxes and other foods in line with the service's healthy eating and oral health policy.
- 'Sometimes' foods and sweetened drinks, such as juices, cordial and soft drinks, are not provided by the service and families are discouraged from sending from home.
- Safe drinking water is available at the service indoors and outdoors and is accessible to all children. Children are encouraged to drink water regularly. Only tap water is provided.
- Cooking and food experiences provided in the service focus on healthy food options and promote fruit and vegetables.
- Children are encouraged to taste a wide variety of foods with a range of flavours, colours, textures and aromas through food experiences.
- Foods are provided which are culturally appropriate, varied, and meet the children's developmental needs.
- Staff and educators are supported by having healthy food options for staff meetings and for professional learning.
- The service seeks to ensure any sponsorship, advertisements or marketing of food and drinks are consistent with the service's healthy eating and oral health policy. Fundraising activities reflect the healthy eating policy and promote healthy lifestyle messages.
- Children and families are encouraged to pack cold packs in their lunch boxes to keep their food fresh and cold.

#### Healthy social environment

- Breastfeeding at the service is welcomed and an appropriate comfortable space is provided for mothers to breastfeed or express milk.
- The service provides a positive eating environment with relaxed, social and enjoyable experiences by: ----encouraging independence at meal and snack times
- -educators and staff sitting with the children at meal and snack times to role model healthy eating and for socialisation and learning
- -giving children plenty of time to eat and socialise.
- Food and drink are not used as an incentive, bribe or reward at any time.
- As role models educators, staff and families are encouraged to bring foods and drinks in line with the service's healthy eating and oral health policy.





- PRE SCHOOL
  Healthy body image and an enjoyment of eating are encouraged by the service.
- Food and oral health practices from diverse cultural backgrounds and traditional beliefs are respected and valued within this service.

#### Learning and skills

- Educators and staff involve children in healthy food experiences through growing, cooking and shopping.
- Opportunities to learn about and develop skills for healthy eating and oral health are embedded in the educational program.
- Educators talk to children about age appropriate tooth brushing and why this is important.
- Educators are supported to access a range of resources to increase their capacity to promote healthy eating and oral health initiatives for children.

#### Engaging children, educators, staff and families

- Educators, staff, children and families are key partners in developing and supporting healthy eating and oral health initiatives in the service.
- Educators, staff and families are provided with information, ideas and practical strategies on a regular basis to support healthy eating and oral health in the service and at home.
- Families' experiences, expertise and interests are drawn upon to support healthy eating and oral health initiatives.
- Families and children from culturally diverse backgrounds are consulted to ensure cultural values and expectations about food, eating and oral health are respected.
- The service will provide families with information on oral hygiene and how and where to access public dental services.

#### **Community partnerships**

• The service works with local health professionals, services and other organisations to support educators and staff to deliver and promote healthy eating and oral health initiatives.

### Related legislation and policies

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2011:





PART 4.2—CHILDREN'S HEALTH AND SAFETY 97 Division 1—Health, safety and wellbeing of children — Regulations 77, 78, 79, 80

PART 4.7—LEADERSHIP AND SERVICE MANAGEMENT Division 2—Policies and procedures — Regulation168 (2) (a) (i)

National Quality Standard 2011 – Quality Area 2

Get Up and Grow. Healthy Eating and Physical Activity for Early Childhood. Australian Government, 2009

Belonging, Being and Becoming. The Early Years Learning Framework for Australia. Commonwealth of Australia, 2009

Victorian Early Years Learning and Development Framework For all Children from Birth to Eight Years. Department of Education and Early Childhood Development, 2009

Guide to the National Quality Standard. ACECQA, 2011

Australian Dietary Guidelines. National Health and Medical Research Council, 2013

Infant Feeding Guidelines, National Health and Medical Research Council, 2012

#### Service policies this may link to:

Healthy eating or nutrition Anaphylaxis or food allergies Health and hygiene Food safety Behaviour guidance Celebrations Fundraising Staff health and wellbeing

#### Appendix – Additional information

#### Appendix 1

Examples of 'sometimes foods' include:

- chocolate, confectionery, jelly
- sweet biscuits, high fat/salt savoury biscuits, chips
- high sugar/high fat cakes and slices
- cream, ice cream
- deep fried foods (e.g. hot chips) and pastry based foods (pies, sausage rolls and pasties)
- most fast food and takeaway foods





- Some processed meats (e.g. sausages, frankfurts/hot dogs, salami, strasbourg, devon, some commercial chicken nuggets and fish fingers)
- soft drinks, fruit juice and fruit drinks, cordial, sports drinks, energy drinks, flavoured milk and flavoured mineral water.<sup>20</sup>

Sometimes foods may also be referred to as 'discretionary' or 'extra' foods.

#### Appendix 2

#### Healthy Eating Guidelines<sup>5</sup>

- Make sure that food offered to children is appropriate to the child's age and development, and includes a wide variety of nutritious foods consistent with the Australian Dietary Guidelines
- Plan mealtimes to be positive, relaxed and social.
- Encourage children to try different food types and textures in a positive eating environment.
- Offer an appropriate amount of food, but allow children to decide how much they will actually eat themselves.
- Offer meals and snacks at regular and predictable intervals.
- Ensure that food is safely prepared for children to eat from the preparation stages to consumption.

#### Appendix 4

#### **Oral Health Messages for the Australian Public**<sup>21,22</sup>

- Use an appropriate fluoride toothpaste (e.g. child's toothpaste) over the age of 18 months.
- Children should have an oral health assessment by the age of two.
- Brush teeth and along the gum line twice a day with a soft brush.
- Drink plenty of tap water (fluoridated if available).
- Limit sugary foods and drinks.
- Choose healthy snacks fruits and vegetables.

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<sup>&</sup>lt;sup>20</sup> Healthy Together Healthy Eating Advisory Service menu planning checklist

<sup>&</sup>lt;sup>21</sup> <u>Roberts-Thomson, K</u> (2011) Oral health messages for the Australian public. Findings of a national consensus workshop, *Australian Dental Journal*, 2011; 56(3):331–5.

<sup>&</sup>lt;sup>22</sup> Infant Feeding Guidelines, National Health and Medical Research Council, 2012, <u>http://www.eatforhealth.gov.au</u>





#### THE SERVING OF FOOD AND BEVERAGES

#### APPROVAL DATE REVIEWED

October 2011 September 2016

At Waterfall Gully Preschool children are required to provide their own snacks, lunch and drinks. The promotion of healthy eating options will be encouraged (refer to Healthy Eating and Oral Health Policy).

The kindergarten will ensure a supply of dry biscuits and appropriate toppings are available for children who may not have enough food for the day or have forgotten their snack/lunch. If these occasions arise, the staff at the preschool will contact the parent of the child to arrange food to be dropped off at the premises. If this cannot be arranged, the child will be provided with the alternative options listed above.

At Waterfall Gully Pre-School, children always have access to fresh drinking water and are provided with regular opportunities to eat.

The dietary requirements of individual children will be on display in the kitchen for reference to ensure the safety and well-being of the children. If a child enrolled at the service has a severe allergy, the other children enrolled will be asked to refrain from including that item in their child's lunch boxes.

Waterfall Gully Preschool requests that all lunch boxes are kept free of nuts to ensure any child that may at risk of anaphylaxis and in attendance at the service is provided with a safe environment.

All cooking experiences on offer at the kindergarten will ensure that any allergies within the group are addressed by providing alternative ingredients within the recipe. All cooking experiences for children with allergies will be planned in consultation with parents/families.

The concepts of healthy lifestyle and nutrition will be explored through the curriculum at Waterfall Gully Pre-School.

At Waterfall Gully Preschool the children and staff are in attendance for a full day. On occasion, the staff may consume hot beverages. These will be safely consumed using non-spill, heat proof receptacles to ensure the ongoing safety of the children.





# CHEMICAL USE IN THE KINDERGARTEN ENVIRONMENT

#### APPROVAL DATE REVIEWED

September 2016 September 2016

Waterfall Gully Preschool limits the use of harmful chemicals to ensure the safety and wellbeing of all humans and non-humans at the service.

Our philosophy is to use non-hazardous products to limit the amount of chemicals being introduced into the environment. Cleaning products in use at the service are selected for their limited environmental impact.

#### The indoor environment:

Tables and surfaces are cleaned using vinegar and bi-carbonate of soda.

Toilets and sinks are cleaned using vinegar. Twice a week (and when deemed necessary) the toilets are cleaned with Earth Choice Multipurpose Spray.

Windows and mirrors are cleaned with vinegar

Dishes are cleaned using standard dishwashing liquid

Floors are cleaned using a specially formulated cleaning solution called Cleanmop that contains no ammonia

Soap is provided for staff and children at sinks. This is standard hand soap solution.

Disinfectant bacterial spray is used when deemed necessary. This is the eucalyptus spray.

#### The outdoor environment:

No chemicals are used to spray weeds.

Gardening techniques used are natural. Snails are repelled by the use of copper tape, eggshells etc. Bugs and pests on the vegetable garden are sprayed with coffee solutions and natural oils, if required.

On occasion, chemicals of a commercial nature may need to be used to ensure the health and wellbeing of the staff and children in attendance at the kindergarten. Examples of this may be rat baiting and spider spraying. On these occasions, the most environmentally friendly option will be chosen.





## SUNSMART



October 2014 September 2016

The SunSmart policy has been developed, with reference to the Cancer Council of Victoria SunSmart Guidelines, to ensure all children attending the Pre-School have a healthy UV exposure balance to help with vitamin D and are protected from skin damage caused by the harmful overexposure to ultraviolet rays of the sun. It is to be implemented throughout the year with particular emphasis from 1<sup>st</sup> September to 30<sup>th</sup> April.

As part of general SunSmart strategies, Waterfall Gully Pre-School will observe the following procedures.

#### PROCEDURE:

Educators and children are encouraged to access the daily local sun protection times at <u>www.sunsmart.com.au</u> or on the free <u>SunSmart app</u> to assist with the implementation of this policy.

A combination of sun protection measures are used for all outdoor activities from **September to the end of April** and whenever UV levels reach 3 and above.

Each child is to wear a named hat which protects the face, neck and ears (such as a wide brimmed hat or bucket style) whenever they are outside. It is the responsibility of Parents/Guardians to provide a hat for their child. NO CAPS as caps do not offer enough protection from the sun.

Hats are not provided for children who do not have their own, due to health and hygiene factors. ANY child without a hat is to remain in the shaded areas, such as under the verandah, at all times.

All children are to wear clothing that protects and covers the back of the neck, back and shoulders, as these areas are extremely sensitive and susceptible to sunburn. Parents/Guardians are advised to ensure that their children do not come dressed in sun dresses with fine shoulder straps and tank tops, as we strongly recommend t-shirts and short sleeve dresses.





SPF-30 or higher broad spectrum water resistant sunscreen is to be applied by the Parent/Guardian **upon or before** arrival at the Pre-School.

Waterfall Gully Pre-School will request that each child have their own individually named roll-on sunscreen to be kept in their bags. This will assist in developing each child's independence when re-applying sunscreen every two hours and will help to promote positive SunSmart behaviour.

With parental consent, children with naturally very dark skin are not required to wear sunscreen to help with vitamin D requirements.

Waterfall Gully Pre-School will ensure that there are sufficient areas of shade provided in the outdoor environment. Children are encouraged to use these areas.

Staff and visitors will ensure they role model appropriate SunSmart behaviour by applying sunscreen and wearing covering clothing and a hat when outdoors.

Sun protection and Vitamin D are incorporated into the learning and developmental program. The SunSmart policy is reinforced through educator and children's activities and displays.

Legislation and Standards

- Occupational Heath and Safety Act 2004
- Children's Services Act 1996
- Children's Services Regulations 2009
- Child Wellbeing and Safety Act 2005 (Vic) (Part2: Principles for Children)
- Education and care Services National Law Act 2010





# HYGIENE

# APPROVAL DATE REVIEWED

October 2011 October 2016

The Committee of Management will ensure the premises are cleaned daily whilst in operation.

They will also ensure annual cleaning requirements will be undertaken.

Staff will implement effective hygienic systems for cleaning. Colour-coded sponges will be used to minimise cross-contamination.

Sandpits, tanbark, paths and grassed areas will be inspected daily to ensure they are maintained in a safe and hygienic manner. Staff will complete a daily checklist.<sup>23</sup>

Chemicals and cleaning agents are stored out of reach of children and in clearly labelled containers.

Staff will ensure they will wear disposable gloves when dealing with bodily fluids. Gloves, after each use, along with other soiled materials, will be disposed of in a plastic bag.

Staff will maintain the premises in a clean and hygienic manner throughout the day, such as wiping benches and tables, before and after eating, cleaning up spills and ensuring toilet facilities are well maintained.

Staff will wash their hands according to hand-washing guidelines, and encourage children to do the same.

Staff will ensure toys and equipment remain in a hygienic condition throughout the year.

Staff will encourage children to develop good hygienic practices including, but not limited to, toileting, eating and drinking, and blowing their nose.

<sup>&</sup>lt;sup>23</sup> Health and safety inspection daily checklist

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# WATER SAFETY



October 2011 September 2016

Water play is beneficial for sensory exploration and is an effective tool for calming children.

Water play also contributes to a child's social skills, problem solving and the development of mathematical concepts.

At Waterfall Gully pre-School, water play will be provided throughout the year, and is always fully supervised.

Safety is always paramount when children are playing with water.





#### THE ADMINISTRATION OF FIRST AID

# APPROVAL DATE REVIEWED

October 2011 September 201

Waterfall Gully Pre-School will ensure all staff are up-to-date with their First Aid training. A suitably equipped First Aid Kit will be provided for each room and staff will ensure that it remains well stocked.

Any medical treatment that is provided to children will be recorded in the Accident/Injury/Trauma and Illness record, for Parents/Guardians to read and sign on their arrival.





#### **OCCUPATIONAL HEALTH AND SAFETY**

# APPROVAL DATE REVIEWED

September 2016 September 2016

Waterfall Gully Pre-School will ensure the kindergarten environment is safe for the physical and emotional wellbeing of the children and staff.

All educators are responsible for the monitoring of the environment for safety. Any safety issues that arise must be conveyed to the Director of the service as soon practicable. The Director is responsible for organising the repair or maintenance of the environment.

Maintenance issues that arise come under two categories. These are shire and non-shire maintenance.

Non-shire maintenance items need to be listed in the Maintenance folder kept in the office. These items will be fixed by parent volunteers, allocated to lists for working bees, given to Justin for completion or will be completed by contractors (after approval from the Committee of Management).

Maintenance items that fall under the jurisdiction of the shire include anything that relates to building fixtures (ie. heaters, plumbing, roof leaks etc.) or grounds maintenance (ie. soft fall, sand pit refills, wear and tear to fixed climbing equipment, gates, fencing etc.)

#### Any maintenance item that poses a risk to the safety of children or staff must be reported to the Director of the service immediately.

It is the responsibility of the Director to communicate to the Committee of Management about any ongoing maintenance issues that may cause a hazard or danger to the employees or children attending the service.

Any injuries that occur to staff whilst working on the premises must be documented on the 'Register of Staff Injuries' form kept in the Workplace Health and Safety Folder (above the Directors desk). Any injuries must be brought to the attention of the Director. The Director will then inform the Committee of Management. Any incident will be addressed on an individual basis.

The Workplace Health and safety folder also contains fact sheets for staff regarding health and safety procedures and practices within the workplace.





# PROVIDING A CHILD SAFE ENVIRONMENT







#### **PROVIDING A CHILD SAFE ENVIRONMENT**

# Approval Date Reviewed

October 2011 October 2016

Children's safety is regarded with a high level of importance at Waterfall Gully Pre-School. We will ensure that a "Child Safe Environment" is provided, both indoors and outdoors at the Pre-School.

The indoor and outdoor environments will address the Education and Care Services National Regulations in relation to Indoor space requirements (116), Outdoor space requirements (117), ventilation and natural light (118), toilet and hygiene facilities (119), laundry and hygiene facilities (120), food & beverage storage and handling facilities (121), furniture materials and equipment (122) and fencing & security (123)

The premises, furniture and equipment at Waterfall Gully pre-School will be maintained in a condition which is safe, clean and in good repair.

The toilet and hygiene facilities provided will be developmentally and age-appropriate and maintained in a safe, clean and hygienic manner.

Dust pans and brooms will be easily accessible to both children and staff. Other cleaning supplies and equipment will be accessible to adults but not children.

The entrance door will be locked after the children have arrived at Pre-School to ensure that only people authorised by staff can enter the building.

Waterfall Gully Pre-School will ensure that children have the opportunity to explore and experience the natural environment, including trees, sand, natural vegetation and edible plants.

Adequate and quality shade will also be provided in the outdoor space.

Supervision plays a significant role in providing a child safe environment.

A minimum of two staff will be rostered on when the children are in attendance. Staff will ensure maximum supervision at all times, whilst ensuring they are always in a position to observe the children, respond to each child's individual needs and immediately intervene in the child's activity if necessary.

Staff acknowledge and understand that some activities may be considered high risk and will ensure close supervision in these situations.





### CHILD SAFE POLICY (FORMERLY CHILD PROTECTION)

APPROVAL DATE REVIEWED May 2013 October 2016

Waterfall Gully Preschool

- is committed to the rights of all children to feel safe, and be safe at all times, including:
  - o promoting the cultural safety of Aboriginal children
  - promoting the cultural safety of children from culturally and linguistically diverse backgrounds
  - o promoting the safety of children with a disability
- develops and maintain a culture in which children feel valued, respected and cared for
- fosters opportunities for each child to participate, express their views and to learn and develop
- always acts in the best interests of each child and has zero tolerance of child abuse
- takes all reasonable steps for each child's safety and wellbeing at all times
- actively manages the risks of abuse or harm to each child, including fulfilling our duty of care and legal obligations to protect children and prevent any reasonable, foreseeable risk of injury or harm
- continuously improves the way our service prevents child abuse, and encourages reporting and improved responses to allegations of abuse.

This policy applies to the Approved Provider, Nominated Supervisor, staff, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs and activities of Waterfall Gully Preschool, including during offsite excursions and activities.

Waterfall Gully Preschool has a moral and legal responsibility to ensure that all children are safe in their care, and will provide resources, information and guidance for providing a child safe environment for children enrolled in and attending the early childhood program.

Waterfall Gully Preschool supports the rights of the child and believes the protection of children is a shared responsibility between families, community, police, government and professionals working with children. The Approved Provider, Nominated Supervisor, staff, contractors and volunteers of Waterfall Gully Preschool—have legal and moral obligations to protect children under their supervision and care.

Any person who forms a reasonable belief, that a child is in need of protection may report their concerns to Child Protection.

Three criminal offences have been introduced in Victoria in the Crimes Amendment (Protection of Children) Act 2014 to protect children from child abuse:





•Failure to disclose: All adults (not just those working with children) have a legal duty to report information about child sexual abuse to Victoria Police. The offence applies to any adult who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16 and fails to report that information to the Victoria Police.

•Failure to protect: The offence applies to people within organisations who hold positions of authority within an education and care service, such as the Approved Provider or the Nominated Supervisor, and who know of the substantial risk another adult associated with the organisation may commit a sex offence and they have the power or responsibility to remove or reduce the risk but negligently fail to do so.

•Grooming offence: The offence targets predatory conduct by an adult with the intent of committing child sexual abuse. Conduct may include communication, including online communication, with a child under the age of 16 or their parents.

Under section 182 of the Children, Youth & Familes Act 2005, all early childhood teachers registered with the Victorian Institute of Teaching are classified as mandatory reporters. All mandatory reporters must make a report to Victoria Police and/or Child Protection as soon as practicable if, during the course of their roles and responsibilities they form a reasonable belief that:

• A child is likely to suffer, or has suffered, significant harm as a result of physical abuse and/or sexual abuse, and

• The child's parents have not protected, or are unlikely protect, the child from harm of that type.

The Child Safety and Wellbeing Act 2005 includes seven Child Safe Standards. They are as follows:

Standard 1: Strategies to embed an organisational culture of child safety, including through effective leadership arrangements

Standard 2: A child safe policy or statement of commitment to child safety

Standard 3: A code of conduct that establishes clear expectations for appropriate behaviour with children

Standard 4: Screening, supervision, training and other human resources practices that reduce the risk of child abuse by new and existing personnel

Standard 5: Processes for responding to and reporting suspected child abuse

Standard 6: Strategies to identify and reduce or remove risks of child abuse

Standard 7: Strategies to promote the participation and empowerment of children.





To ensure Waterfall Gully Preschool adheres to these standards at all times the PRESCHOOL following procedures will be implemented.

- Continuous improvement of practices is achieved through ongoing discussions and reviews of practices, procedures and policies surrounding child safety.
- Waterfall Gully Preschool will support the cultural identity of all children and families in attendance at the service.
- Any concerns regarding the ongoing safety and wellbeing of children in attendance at Waterfall Gully Preschool will be discussed between the staff and the Nominated Supervisor/Approved Provider. Further actions will be decided upon with consultation.
- Staff will be well informed of the policies and procedures surrounding Child Safety by the Nominated Supervisor/Approved Provider of the service
- All new staff will undertake an induction process which involves the communication of all policies and procedures, including the Child Safe Policy.
- All staff will undertake annual Child Protection awareness training.
- The Approved Provider/Nominated Supervisor will offer support to the child and their family, and to staff in response to concerns or reports relating to the health, safety and wellbeing of a child.
- Regular child safety reviews will be conducted by the Nominated Supervisor of the Preschool.
- The staff at Waterfall Gully Preschool are responsible for: Maintaining a professional role with children
- Ensuring all volunteers to the service are not left alone with a child at any time
- Undertaking annual training on child protection awareness
- Being aware of the signs and symptoms of abuse to a child
- · Reporting any concerns of suspected or discovered harm to a child
- Ensuring families are made aware of the support available to them
- Educating and empowering children to talk about events and situations that make them feel uncomfortable
- Ensuring that children at the service are not subjected to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
- Following the guidelines listed under 'Processes for responding to and reporting suspected child abuse'

## Processes for responding to and reporting suspected child abuse

The following requirements are observed at Waterfall Gully Preschool:

• Early childhood staff must act when they form a reasonable belief or have a suspicion that a child has been, or is at risk of being abused.





• The flowchart: Processes for responding to incidents, disclosures and suspicions of child abuse, outlines the steps which must be followed. For more detailed information see Early Childhood Guidance available at

http://www.education.vic.gov.au/about/programs/health/protect/Pages/default.aspx

• Staff must report a reasonable belief that a child has been, or is at risk of being abused to external and to internal authorities:

### **External authorities:**

In an emergency, where a child may have been sexually abused (including grooming) or where the suspected abuse is coming from within the service, the report must be made to the Victoria Police

Where the suspected abuse is from within the community and the child is in need of protection or the risk has had or is likely to have serious impact on the child's safety, stability or development, it is to be reported to DHHS Child Protection. Where sexual abuse or grooming is suspected, staff must also report to the Victoria Police.

### Internal authorities:

Suspected abuse must be reported to the Approved Provider

- The Approved Provider must report to DET.
- Staff must seek advice from the Approved Provider (or licensee) or DHHS Child Protection and/or Victoria Police if they are uncertain about whether they have sufficient grounds to form a reasonable belief.
- If staff hold a reasonable belief that a child has been or is at risk of being abused, regardless of the advice of the Approved Provider, they must still make a report to Child Protection and/or Victoria Police.
- Records are kept about any child safety concern or complaint. These records contain comprehensive description of incidents/ issues of concern and provide evidence for actions taken, including reports made to statutory authorities or professional bodies and follow-up actions to be completed. The records are stored in accordance with the service's Privacy and Confidentiality Policy.
- Privacy is maintained, and information is only disclosed on a need-to-know basis.
- •Permission is not required from parents/guardians of a child where abuse is suspected, and parents/guardians do not need to be notified that a report has been made.

### Strategies for managing a disclosure

It is very important to validate a child's disclosure, by listening to the child, taking them seriously and responding and acting on the disclosure by implementing the Waterfall Gully Preschool's reporting procedures.





Strategies include:

· Let the child talk about their concerns in their own time and in their own words

• Give them your full attention, the time and a quiet space in which to do this and be a supportive and reassuring listener

- Remain calm and use a neutral non-judgmental tone
- · Comfort the child if they are distressed
- Record the child's disclosure using the child's words.
- Tell the child that telling you is the right thing to do and that what has happened is not their fault

• Let them know that you will act on this information and that you will need to let other people know so that they can help the child

- AVOID asking investigative or invasive questions which may cause the child to withdraw and may interfere with an investigation
- · AVOID going over information repeatedly

• Follow the process outlined in the flowchart: Processes for responding to incidents, disclosures and suspicions.

#### Indicators of abuse

Below are some of the indicators of harm or abuse. This is not a comprehensive list and if in doubt staff must always seek advice.

• Physical signs of abuse or neglect may include, but are not limited to, bruises, burns, sprains, bites, cuts, fractures, frequent hunger, malnutrition, poor hygiene and inappropriate clothing.

• Behavioural signs of abuse (physical, sexual and emotional) or neglect may include, but are not limited to, wariness or distrust of adults, fear of parents/guardians and of going home, fear when other children cry/shout, excessive friendliness to strangers, being very passive and/or compliant, having/claiming to have headaches and/or stomach pains, displaying sexual behaviour that is unusual for the child's age, frequent rocking, sucking and biting, having difficulty sleeping, being withdrawn, aggressive and/or demanding behaviour, being highly anxious, having delayed speech, acting like a much younger child, and often being tired and falling asleep.





• Other indicators are family violence, parental substance abuse, psychiatric ill ness or intellectual disability which is impacting on the child's safety, stability or development.

### **Reporting to external authorities**

• If a child is in immediate danger ensure their safety and call emergency services on 000 for urgent medical and/or police assistance

• If there is a suspicion of sexual abuse of a child (including grooming) contact Victoria Police

• If there is an allegation of abuse by a proprietor, staff member, contractor, volunteer, student or visitor within the service, the matter must be immediately reported directly to Victoria Police

• To report concerns about the immediate safety of a child within their family or the community, call the nearest DHHS office in your region during business hours or after hours the Child Protection Crisis Line on 13 12 78 (24 hours, 7 days a week and toll free within Victoria). Note: this is an emergency service for weekends and after hours only, and cases reported to the Child Protection Crisis Line will be referred to the relevant DHS office on the following working day

Provide the following information:

- the child's name, age and address
- the reason for believing that the injury or behaviour is the result of abuse or neglect
- an assessment of immediate danger to the child/ren (the person making the report may be questioned regarding knowledge of the current location of the alleged abuser/s)
- a description of the injury or behaviour observed
- the current location of the child
- knowledge of other services that support or are involved with the family
- any other information about the family
- any specific details that will help the child, such as cultural background, need for an interpreter or disability support requirements

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

There are two types of notifications to be made in relation to significant concerns for the safety or wellbeing of a child: a referral to Child FIRST (Family Services) or a report to Child Protection (see below).





# Reporting to internal authorities

• Staff must notify the Approved Provider of all incidents, suspicions and disclosures of child abuse

• The Approved Provider must notify DET http://www.acecqa.gov.au/national-qualityagenda-it-system of any circumstance arising at the service that poses a risk to the health, safety or wellbeing of a child or children attending the service (Regulation 175 (2) (c) including:

- occurrences of sexualised play between children
- where children are being or may be at risk of being subjected to physical, emotional or sexual abuse including instances where children are observed displaying concerning behaviour that may indicate they are being subject to abuse.

## Making a referral to Child FIRST

A referral to Child FIRST should be considered if, after taking into account the available information, the Approved Provider/staff member has significant concerns for a child's wellbeing and the child is not in immediate need of protection. This may include circumstances when there are:

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

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

### Making a report to Child Protection

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

- the harm or risk of harm has a serious impact on the child's immediate safety, stability and/or development
- the harm or risk of harm is persistent and entrenched, and is likely to have a serious impact on the child's safety, stability and/or development





the child's parents/guardians are unwilling or unable to protect the child or young person from harm.

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

When reporting concerns of child abuse and/or neglect, it is important to remember that:

• a failure to notify the Department of Health and Human Services is an offence under section 182 of the Children, Youth and Families Act 2005

Child Protection must be notified as soon as practicable

• it is not necessary to prove that abuse has taken place, only to provide reasonable grounds (refer to Definitions) for the belief

• permission from parents/guardians or caregivers is not required to make a notification, nor do they need to be informed that a notification is being or has been made

• if a notification is made in good faith, the notifier cannot be held legally liable for any consequences, regardless of the outcome of the notification

• the identity of the notifier will remain confidential unless the notifier chooses to inform the child and/or family, or if the notifier consents in writing to the disclosure of their identity, or if the court decides that this information must be disclosed

•the notifier may have an ongoing role, including:

- acting as a support person in interviews with the child or young person
- attending a case conference
- participating in case-planning meetings
- continuing to monitor the child's behaviour and their interactions with others
- observing/monitoring the conditions of a protective court order that may relate to access or contact with a parent/guardian and following Hewlett-Packard Company's procedures where the conditions are breached
- liaising with other professionals and child protection officers in relation to a child or young person's wellbeing
- providing written reports for case-planning meetings or court proceedings in relation to the child's wellbeing or progress.





Legislation and documents relevant to this policy may include but is not limited to:

- \* The Children, Youth & Family Act 2005
- The Crimes Amendment Act 2014 (formerly Protection of Children Act 2014)

The Child Safety & Wellbeing Act 2005

Education and Care Services National Law Act 2010

- \* Education and Care Services National Regulations
- \* Early Childhood Australia's Code of Ethics
- \* http://www.education.vic.gov.au/school/principals/spag/safety/Pages/childprotection.aspx

http://www.education.vic.gov.au/about/programs/health/protect/Pages/default.aspx





# INCLUSION AND EXCLUSION POLICY

# APPROVAL DATE REVIEWED

September 2016 September 2016

#### INCLUSION

Waterfall Gully Preschool staff ensure the inclusion of all children in their programs. Teachers will ensure that the abilities of all children are considered when planning the experiences on offer and the environment will be arranged in a manner to cater for all abilities.

Staff will undertake applications for Kindergarten Inclusion Support, if a child's needs are deemed to be high and extra staff support is needed.

Staff will ensure all children feel safe, secure and supported within the kindergarten environment, regardless of their abilities.

#### EXCLUSION

Under certain circumstances it may be necessary to exclude a child from the Preschool. This decision will not be taken lightly and all alternative options will be considered, with exclusion as the last resort.

Under these circumstances the decision to exclude a child will be undertaken by the Executive Committee of Management.





# INCIDENT, INJURY, TRAUMA AND ILLNESS PROCEDURES







# ACCIDENT AND EMERGENCY CARE

<b>APPROVAL</b>	DATE
REVIEWED	

October 1998 September 2016

If a child is injured, becomes ill, or suffers a physical or emotional trauma within the Pre-School program, the following procedure constitutes the action policy of Waterfall Gully Pre-School.

It is the policy of Waterfall Gully Pre-School that all staff members are First Aid trained , to ensure the safety and well-being of the children in our care.

#### PROCEDURE:

Comfort the child; administer necessary emergency First Aid.

Parent/Guardian will be notified as soon as reasonably practicable in the event of an incident, injury, illness or trauma concerning their child while participating in the Pre-School program.

Parent/Guardian will be notified as soon as practicable if the injury involves:

- A blow to any part of the head
- Lack of movement ability in the injured area
- Trauma to the child as a consequence of the incident
- Inability to stop the bleeding of the injured area

Parents/Guardians will be asked on enrolment of their child to authorise the calling of any emergency services should the need arise while in the care of the Pre-School – a signed statement can be found on the enrolment form.

Any treatment given by staff of the Pre-School to a child will be entered into the "Accident, Injury, Trauma and Illness Record", and the parent will be presented with the details and asked to sign and date the entry, as per *Education and Care Services National Regulations, Regulation 98.* 





The incident, injury, trauma and illness record must include:

- a) details of any serious incident in relation to a child or injury received by a child or trauma to which a child has been subjected while participating in the Pre-School program, including:
  - i). the name and age of the child; and
  - ii). the circumstances leading to the incident, injury or trauma; and
  - iii). any products or structures involved; and
  - iv).the time and date the incident occurred, the injury was received or the child was subjected to the trauma;
- b) details of any illness which becomes apparent while participating in the Pre-School program including:
  - i). the name of the child; and
  - ii). the relevant circumstances surrounding the child becoming ill and any apparent symptoms; and
  - iii). the time and date of the apparent onset of the illness;
- c) details of the action taken by any member of Waterfall Gully Pre-School in relation to any incident, injury, trauma or illness which a child has suffered while participating in the Pre-School program, including:
  - i). any medication administered or first aid provided; and
  - ii). any medical personnel contacted;
- d) details of any person who witnessed the incident;
- e) the name of any person:
  - i). whom Waterfall Gully Pre-School notified or attempted to notify, of any incident, injury, trauma or illness which a child has suffered while participating in the Pre-School program; and
  - ii). the time and date of the notifications or attempted notifications;
- f) the name and signature of the person making an entry in the record, and the time and date that the entry was made.

This information must be included in the incident, injury, trauma and illness record as soon as practicable, but not later than 24 hours after the incident, injury or trauma, or the onset of the illness.





In the event that the child is involved in a serious incident, as defined by *Education and Care Services National Regulations, Regulation 96*, a written report will need to be forwarded to the Department of Education and Training (DET), outlining the procedure followed and details of the incident as per the *Education and Care Services National Law Act 2010, section 174*.

This report must be provided as soon as practicable but within 24 hours of the incident or the time that the person becomes aware of the incident.





# UNPROTECTED FRACTURE

APPROVAL DATE REVIEWED July 2015 September 2016

From time to time, there will be incidences when children may come to Pre-School with a fracture to some part of their body.

This provides implications for the child's wellbeing whilst they are playing at Pre-School.

It is the policy of Waterfall Gully Pre-School that children with unprotected fractures, (those not immobilised by plaster, such as a collarbone), will need to have a parent or guardian present whilst they are at kinder. Alternatively, the child will remain at home until their fracture is fully healed and a Doctor's clearance is obtained and provided





# SUSTAINABILITY







# SUSTAINABILITY



July 2015 June 2016

#### AIM/ GOALS

Our service aims to help children learn about and implement sustainable practices and foster respect and care for the living and non-living environment. Children's awareness of the environment will be promoted through daily practices, resources and interactions. Sustainable practices will be encouraged within the education and care service. Educators, children and families will be encouraged to become advocates for a sustainable future.

#### STRATEGIES - How it will be done?

- Waterfall Gully Pre-School will make sustainable practices a part of the daily routine. These include:
  - Recycling recycling containers will be provided throughout the service.
  - Gardening children are involved in growing, harvesting and cooking vegetables and herbs.
  - $\circ$  ~ Composting appropriate food scraps are used in the worm farm or fed to the animals.
  - Energy conservation educators to model conservation practice by turning off lighting, heating, equipment and air conditioning when not required.
  - Water conservation role model practices such as ensuring taps are turned off and emptying water play containers onto garden areas; ensuring leaks are fixed; and harvesting rainwater in tanks.
  - Concept of 'reduce, reuse and recycle' modelled help children build lifelong attitudes towards sustainable practices.
  - Make sustainable equipment purchases where possible and economically viable e.g. recycled paper, wood as opposed to plastic, second hand where appropriate, materials made of natural fibres.
- Waterfall Gully Preschool will run a Sustainability Sub-committee each year. The Committee will be made up of parents and teachers. Members will be nominated at the AGM each November.
- Where possible application of best environmental practice (considering energy and water conservation and embedded energy costs) in any future design, construction and operation of buildings and facilities.
- Encouraging families to support sustainable practices e.g. assisting with gardening, modelling behaviour, information provided (sustainability section included on centre noticeboard), nude food days.
- Including in the curriculum activities which engage the children with the natural world and promote environmental awareness e.g. nature walks, bug hunts in the garden, events like Clean Up Australia Day or World Environment Week.
- Where possible use green cleaning options and reduce the use of chemicals.
- Conduct yearly energy and water usage audit.

This document works in conjunction with the service's. Five Year Sustainability Plan. The Sustainability Plan is a working document that is constantly being updated.

Acknowledgements: Community Childcare Co-operative (NSW)





# DEALING WITH COMPLAINTS







## **COMPLAINTS AND GRIEVANCES PROCEDURE**

# APPROVAL DATE REVIEWED

August 2013 November 2016

Waterfall Gully Pre-School will ensure all complaints and grievances are addressed, investigated fairly and documented in a timely manner. Complaints or grievances may be received from anyone who comes in contact with Waterfall Gully Pre-School including Parents/Guardians, volunteers, students, members of the local community and other agencies.

#### PROCEDURE:

The Committee of Management shall appoint a Grievances Sub-Committee at their first meeting. This Sub-Committee should consist of the President and two (2) other members. Their role is to handle minor grievances as soon as they are brought to their attention, to review serious grievances immediately and to seek advice from the General Committee, Department of Education and Training DET) and Early Learning Association Australia (ELAA) where deemed necessary. They should then follow these matters through to a satisfactory conclusion.

The names of all Committee of Management Members and Sub-Committee members can be found on the noticeboard.

Any complaints or grievances should be put in writing addressed to The Grievances Sub-Committee, and placed in the mail box in your child's Pre-School room.

In most cases, dealing with complaints and grievances will be the responsibility of the Approved Provider. All complaints and grievances, when lodged, need to be initially assessed to determine whether they are a general or a notifiable complaint (refer to Definitions). When a complaint or grievance has been assessed as 'notifiable', the Approved Provider must notify Department of Education and Training (DET) of the complaint or grievance.

The Approved Provider will investigate the complaint or grievance and take any actions deemed necessary, in addition to responding to requests from and assisting with any investigation by DET.

There may be occasions when the complainant reports the complaint or grievance directly to DET. If DET then notifies the Approved Provider about a complaint they have received, the Approved Provider will still have responsibility for investigating and dealing with the complaint or grievance as outlined in this policy, in addition to co-operating with any investigation by DET. DET will investigate all complaints and grievances it receives about a service, where it is alleged that the health, safety or wellbeing of any child within the service may have been compromised, or that there may have been a contravention of the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations 2011.

#### **DEFINITIONS:**





**Complaint:** (In relation to this policy) a complaint is defined as an issue of a minor nature that can be resolved promptly or within 24 hours, and does not require a detailed investigation. Complaints include an expression of displeasure, such as poor service, and any verbal or written complaint directly related to the service (including general and notifiable complaints.

Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless related to the safety of the children) and issues related to the legal business entity.

**Grievances Sub-Committee**: Persons appointed annually by the Waterfall Gully Pre School Committee of Management to record and investigate complaints and grievances.

**Complaints and Grievances Register:** (In relation to this policy) records information about complaints and grievances received at the service, together with a record of the outcomes. This register must be kept in a secure file, accessible only to educators and Responsible Persons at the service. The register can provide valuable information to the Approved Provider on meeting the needs of children and families at the service.

**General complaint:** A general complaint may address any aspect of the service e.g. a lost clothing item or the service's fees. Services do not have to inform DET, but the complaint must be dealt with as soon as is practicable to avoid escalation of the issue.

**Grievance:** A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature e.g. the service is in breach of a policy or the service did not meet the care expectations of a family.

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

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

Written notification of complaints must be submitted using the appropriate <u>forms</u>, which can be found on the ACECQA website: <u>www.acecqa.gov.au</u>

**Serious incident:** An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the Regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an Incident, Injury, Trauma and Illness Record (sample form





available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DET) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

#### The Approved Provider is responsible for:

- being familiar with the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations 2011, service policies and constitution, and complaints and grievances policy and procedures
- identifying, preventing and addressing potential concerns before they become formal complaints/grievances
- ensuring that the name and telephone number of the Responsible Person to whom complaints and grievances may be addressed are displayed prominently at the main entrance of the service (Regulation 173(2)b))
- ensuring that the address and telephone number of the Authorised Officer at the DET regional office are displayed prominently at the main entrance of the service (Regulation 173(2)(e))
- advising parents/guardians and any other new members of Waterfall Gully Pre School of the complaints and grievances policy and procedures upon enrolment or employment
- ensuring that this policy is available for inspection at the service at all times (Regulation 171)
- being aware of, and committed to, the principles of communicating and sharing information with service employees, members and volunteers
- responding to all complaints and grievances in the most appropriate manner and at the earliest opportunity
- treating all complainants fairly and equitably
- providing a Complaints and Grievances Register (refer to Definitions) and ensuring that complaints and grievances are recorded along with outcomes
- maintaining confidentiality at all times
- establishing a Grievances Subcommittee (refer to Attachment 1 Sample terms of reference for a Grievances Subcommittee)
- referring notifiable complaints (refer to Definitions), grievances (refer to Definitions) or complaints that are unable to be resolved appropriately and in a timely manner to the Grievances Subcommittee.
- informing DET in writing within 24 hours of receiving a notifiable complaint (refer to Definitions) (Act 174(4), Regulation 176(2)(b))
- receiving recommendations from the Grievances Subcommittee and taking appropriate action.

# The Nominated Supervisor, Certified Supervisors, Educators and other staff are responsible for:

- responding to and resolving issues as they arise where practicable
- maintaining professionalism and integrity at all times
- discussing minor complaints directly with the party involved as a first step towards resolution (the parties are encouraged to discuss the matter professionally and openly work together to achieve a desired outcome)





- informing complainants of the service's Complaints and Grievances Policy
- recording all complaints and grievances in the Complaints and Grievances Register (refer to Definitions)
- notifying the Approved Provider if the complaint escalates and becomes a grievance (refer to Definitions), is a notifiable complaint (refer to Definitions) or is unable to be resolved appropriately in a timely manner
- providing information as requested by the Approved Provider e.g. written reports relating to the grievance
- maintaining confidentiality at all times (Regulations 181, 183)
- working co-operatively with the Approved Provider and DET in any investigations related to grievances about Waterfall Gully Pre School, it's programs or staff.

#### Parents/guardians are responsible for:

- raising a complaint directly with the person involved, in an attempt to resolve the matter without recourse to the complaints and grievances procedures
- communicating (preferably in writing) any concerns relating to the management or operation of the service as soon as is practicable
- raising any unresolved issues or serious concerns directly with the Approved Provider, via the Nominated Supervisor/educator or Grievances Subcommittee
- maintaining complete confidentiality at all times
- co-operating with requests to meet with the Grievances Subcommittee and/or provide relevant information when requested in relation to complaints and grievances.

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

#### **Relevant Legislation:**

Education and Care Services National Law Act 2010: Section 174(2)(b)

Education and Care Services National Regulations 2011: Regulations 168(2)(o) and 176(@)(b)

National Quality Standard, Quality Area 7: Leadership and Service Management Standard 7.3: Administrative systems enable the effective management of a quality service. Element 7.3.4: Processes are in place to ensure all grievances and complaints are addressed, investigated fairly and documented in a timely manner.





## Department of Education and Training (DET) *Quality Assessment and Regulation Division*

Location Address: Postal Address:	165-169 Thomas Street, Dandenong, VIC 3175 PO BOX 5 Dandenong, VIC, 3175
Duty Line:	8765 5787
FAX:	8786 5786
Email:	smr.gar@edumail.vic.gov.au

## The Department of Human Services can be contacted at:

280 Thomas Street Dandenong VIC 3175

PO Box 692 Dandenong VIC 3175

Ph: 9213 2111

## Early Learning Association Australia (ELAA):

Level 3, 145 Smith Street Fitzroy, VIC 3065

PO Box 1246, Collingwood, VIC 3066

Ph: 9489 3500 or 1300 730 119.





# Sample terms of reference for a Grievances Subcommittee

#### PURPOSE:

A Grievances Sub Committee has been established by the Approved Provider of Waterfall Gully Pre School to investigate and resolve grievances lodged with Waterfall Gully Pre School.

#### **MEMBERSHIP:**

Three people are nominated by the Approved Provider, and membership must include a minimum of one Responsible Person (refer to Definitions).

#### TIME PERIOD NOMINATED:

The Grievances Subcommittee shall be appointed for one year.

#### **MEETING REQUIREMENTS:**

The Grievances Subcommittee convenor is responsible for organising meetings as soon as is practicable after receiving a complaint or grievance.

#### **DECISION-MAKING AUTHORITY:**

The Grievances Subcommittee is required to fulfil only those tasks and functions as outlined in these terms of reference. The Approved Provider may decide to alter the decision-making authority of the Grievances Subcommittee at any time.

#### BUDGET ALLOCATION:

All expenditure to be incurred by the Grievances Subcommittee must be approved by the Approved Provider. A request in writing must be submitted by the Grievances Subcommittee.

#### **REPORTING REQUIREMENTS OF THE COMMITTEE:**

The Grievances Subcommittee is required to keep minutes of all meetings held. These are to be kept in a secure file.

The convenor is required to present a written report to the Approved Provider about the grievance, ensuring that privacy and confidentiality are maintained.





# TASKS AND FUNCTIONS OF THE GRIEVANCES SUBCOMMITTEE

- Responding to complaints in a timely manner
- Investigating all complaints received in a discreet and responsible manner
- Implementing the procedures outlined in Attachment 2 Dealing with complaints and grievances
- Acting fairly and equitably, and maintaining confidentiality at all times
- Informing the Approved Provider if a complaint is assessed as notifiable
- Keeping the Approved Provider informed about complaints that have been received and the outcomes of investigations
- Providing the Approved Provider with recommendations for action
- Ensuring decisions are based on the evidence that has been gathered
- Reviewing the terms of reference of the Grievances Subcommittee at commencement and on completion of their term. Suggestions for alterations are to be presented to and approved by the Approved Provider





# ATTACHMENT 2

# **Dealing with Complaints and Grievances**

# DEALING WITH A COMPLAINT

When a complaint is received, the person to whom the complaint is addressed will:

- inform the complainant of the service's Complaints and Grievances Policy
- encourage the complainant to resolve the complaint with the person directly, or to submit their complaint in writing to the Grievances Sub-Committee
- enter the complaint in the Complaints and Grievances Register (refer to Definitions) together with the outcome
- maintain confidentiality with regard to all meetings/discussions in relation to a complaint
- inform the Approved Provider if the complaint escalates and becomes a grievance (refer to Definitions), a notifiable complaint (refer to Definitions) or is unable to be resolved appropriately in a timely manner.

# DEALING WITH A GRIEVANCE

When a formal complaint or grievance is lodged with the service:

- the staff member receiving the formal complaint or grievance will record all relevant details regarding the grievance in the Complaints and Grievances Register (refer to Definitions) and immediately inform the Approved Provider
- the Approved Provider must inform the service's Grievances Subcommittee, or
- appoint an investigator(s) to investigate the grievance
- the Grievances Subcommittee will assess the grievance to determine if it is a notifiable grievance (refer to Definitions)
- if the grievance is notifiable, the Approved Provider will be responsible for notifying DET. This must be in writing within 24 hours of receiving the complaint (Regulation 176(2)(b))
- the written report to DET needs to be submitted using the appropriate forms from ACECQA and will include:
  - $\circ$   $\Box$  details of the event or incident
  - $\circ$   $\Box$  the name of the person who initially made the complaint
  - □ if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
  - $\circ$   $\Box$  contact details of a nominated member of the Grievances Subcommittee
  - $\circ$   $\Box$  any other relevant information

□ if the Approved Provider is unsure if the complaint is a notifiable complaint, it is good practice to contact DET for confirmation.





## GRIEVANCES SUBCOMMITTEE RESPONSIBILITIES AND PROCEDURES

In the event of a grievance being lodged, the Grievances Subcommittee will:

- convene as soon as possible to deal with the grievance in a timely manner
- disclose any conflict of interest relating to any member of the subcommittee/panel of investigators. Such members must stand aside from the investigation and subsequent processes
- consider the nature and the details of the grievance
- identify which service policies (if any) the grievance involves
- inform the Approved Provider if their involvement is required under any other service policies
- if the grievance is a notifiable complaint (refer to Definitions), inform the complainant of the requirements to notify DET of the grievance and explain the role that DET may take in investigating the complaint
- maintain appropriate records of the information and data collected, including minutes of meetings, incident reports and copies of relevant documentation relating to the grievance
- respect the confidential nature of information relating to the grievance. The Approved Provider and the subcommittee/investigator must handle any grievance in a discreet and professional manner
- store all written information relating to grievances securely

# INVESTIGATING THE GRIEVANCE AND GATHERING RELEVANT INFORMATION

When investigating the grievance and gathering relevant information, the Grievances Subcommittee will:

- meet with individual witnesses, and give right of reply to the person against whom the allegations are made in relation to any accusation or information relating to an alleged incident
- offer the complainant the opportunity of meeting with the subcommittee to discuss the complaint and provide additional information where relevant
- nominate a subcommittee member to inform the complainant of the procedures for dealing with the grievance if the complainant does not take up the opportunity to attend a meeting
- document the time, date and detail of meetings/discussions, and follow this up with a letter to the complainant outlining the information discussed
- be available to meet with DET staff, if required, and provide additional information as requested
- review relevant information and documents
- obtain any other relevant information or documentation that will assist in resolving the grievance
- seek advice, where appropriate, from individuals and organisations that may be able to assist in resolving the grievance (any cost in seeking advice will require prior approval by the Approved Provider).





# FOLLOWING THE INVESTIGATION

Once the investigation of the grievance is complete, the Grievances Subcommittee will:

- endeavour to resolve the grievance by mutual agreement of the parties involved
- meet to discuss the information gathered and determine further action, including generating recommendations to be presented to the Approved Provider
- ensure that any recommendations or actions are in accordance with relevant legislation and funding requirements including, but not limited to:
  - □ Education and Care Services National Law Act 2010
  - □ Education and Care Services National Regulations 2011
  - □ Victorian kindergarten policy, procedures and funding criteria
- report outcomes that may include relevant information gained in investigations and consultations to the Approved Provider and, where required, provide any recommendations for consideration by the Approved Provider
- inform the Approved Provider on the involvement of DET and the outcomes of any investigation by DET. The Approved Provider will review the report and any subcommittee/investigator recommendations and will be responsible for making decisions on the action to be taken (if any), including relevant review mechanisms
- advise the complainant and other relevant parties of any decisions made by the Approved Provider in relation to the grievance
- follow up to ensure the parties involved are satisfied with the outcome and monitor progress on any actions taken by the Approved Provider.





# **APPENDICES**







# APPENDICES

**Error! Bookmark not defined.** Committee of Management Roles and Responsibilities

Error! Bookmark not defined. Emergency Management Plan

**Error! Bookmark not defined.** Fee policy & schedule 4 year old kinder Fee policy and schedule 3 year old kinder

**Error! Bookmark not defined.** Minimum period of exclusion for infectious diseases, cases and contacts

13 Emergency & evacuation floor plan