## NORTHERN RIVERS OUTSIDE SCHOOL HOURS CARE

A division of NORTHERN RIVERS CHILDREN'S SERVICES LIMITED
A not-for-profit community service organisation operating since 1980

# Parent Information Booklet





# **Outside School Hours Care**

This Booklet is used in Conjunction with Northern Rivers Children's Services Ltd Policy Manual unless a specific source is referred to.

## NORTHERN RIVERS CHILDREN'S SERVICES LIMITED

A not-for-profit community service organisation operating since 1980

Office Hours: Monday to Friday

8:30am - 4:30pm

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Lismore Heights OSHC 0437 553 057

Northern Rivers Children's Services would like to respectfully acknowledge the people of the Bundjalung Nation, the traditional owners of the land that we live and work on.

We would like to extend this acknowledgement to all Australia's First Peoples and acknowledge the unique connection, knowledge and care of country and its waterways.

Northern Rivers Children's Services would like to pay our respects to Elders past, present and emerging.

As Early Childhood Educators, we value and nurture all children. We walk together to encourage and teach our children as they are our leaders of tomorrow.

## Northern Rivers Children's Services Limited is:

- An independent, non-profit Company which complies with all State & Commonwealth childcare service requirements
- Partially funded by the Commonwealth Government
- Licensed by the Department of Education
- Managed by a voluntary Board of Directors under its Constitution, comprised of Parents/Carers and Educators who are elected at the Annual General Meeting, and the Chief Executive Officer
- Coordinated and supervised by experienced staff qualified in Early Childhood Education and Care
- Approved under Family Assistance Law and responsible for satisfying obligations under both Commonwealth, State and Territory Laws to receive and pass on CCS to eligible families to reduce the cost of childcare

OSHC Services providing Before and/or After School and/or Vacation Care operates at the public primary schools in Bangalow, Bexhill, Clunes, Dunoon, and Lismore Heights.

One staff member is employed per a maximum of 15 children. As the majority of our services are at small schools, at most times there is only one Coordinator on duty. This situation poses additional responsibilities and potential difficulties for staff (see Behaviour Management section). We aim to employ staff with qualifications and experience in the care of children. Staff are also supported by NRCS management and senior staff.

# **MISSION STATEMENT**

#### In the pursuit of excellence, we aim to ensure that:

- The individual needs of each child are met
- The developmental needs of each child are met
- The dignity of families is respected
- Educators are provided with ongoing support and training
- Childcare environments are safe, nurturing, responsive and stimulating

# **Outside School Hours Care Service Philosophy**

Northern Rivers Children's Services is proud to be a community based, not for profit organisation that believes in the value and inclusion of each child and their family.

We acknowledge Aboriginal and Torres Strait Islanders as the original custodians of the land. We recognise their long and rich connection with this country and understand that this relationship is still as important to the Bundjalung people today as it has always been. We are committed to ensuring that we live out our philosophy in ways that weave understanding, knowledge and respect for the Bundjalung people and their culture into all that we do as we work together towards reconciliation.

We believe in a positive approach to our environment and encourage Educators and children to discover respect for the land, nature, and animals. We continue our journey towards a sustainable future for the wellbeing of all in the community and promote sustainability in our services.

We believe in creating a secure base in all of our service environments and homes. Where created spaces are warm, welcoming, and supportive that allow all children to feel safe and secure in their learning environment. We believe that the early childhood years are critical in promoting a young child's development, and in forming the attitudes and skills that will serve them throughout life.

We believe that every child should develop connections and relationships with their community and that everyone has a right to belong. Incorporating the development of close relationships with other services and agencies within the local and surrounding community promotes best outcomes for all children and their families. We value self-reflection and encourage our Educators to challenge each other's thinking to ensure the learning environment and opportunities are always in the best interest of the child.

Consistency and continuity will be the key elements of our service philosophy and operation, which we aim to promote through regular, familiar, and long-term staff, and through opportunities to develop social continuity and ongoing friendships in NRCS.

We believe in emotional security by empowering all children to make choices, supporting feelings of importance and respecting every child as collaborative owners of the environment.

We are committed to a play-based curriculum. We encourage a child initiated, Educator facilitated programme where all children are offered opportunities to develop dispositions which will be the foundations for lifelong learning. We will celebrate children's agency and plan for further opportunities for children to succeed. We support our children in their development of autonomy and independence and understanding that each child develops uniquely.

We recognise that the family is a child's first and greatest influence in any child's life. Creating an inclusive and open organisation helps ensure families and children experience belonging and connection within the service and the wider community. We believe all children have a voice which is respected and valued. We strive to build a sense of belonging within NRCS. We strive to give all children opportunity and pathways to develop open, reciprocal and respectful relationships that is vital in supporting their overall development.

**Booking Procedures –** all children must be enrolled at the OSHC service before they can attend. A one-off enrolment fee of \$10 will be charged.

# Before School Care and After School Care - Please see individual Service for hours of operation.

- Permanent bookings can be made at the beginning of the term. Bookings can be on a weekly or fortnightly roster.
- Casual bookings can be made on any day if the child has been previously enrolled. These bookings need to be made with the Coordinator. Children without an enrolment form cannot be accepted in the service for legal reasons.

#### Vacation Care (8:00am to 6:00pm)

- Programs will be made available in the weeks proceeding each holiday period and are available on our website - nrcs.org.au.
- Advance bookings are essential. If there are more bookings than available places, then priority will be given as per government guidelines (see next page).
- Once a permanent booking is made, fees will be charged for those days, including for any absences.
   One week notice of change of bookings is required.

## **Payment of Fees**

- The cost of care is set to cover operational costs and is related to the number of children using the service from year to year.
- Fees are charged at a per session rate (not per hour).
- Please ask the service Coordinator for the current permanent session rates.
- Casual days are charged at an additional \$2 for before school & \$3 for after school.
- Families are liable for the full fees of session costs. Your eligibility for Childcare Subsidy is a matter for you to establish. Parents/Guardians who do not have a Childcare Subsidy percentage must pay the full fee.
- Payment terms are strictly 7 days. Fees are to be paid weekly and must be kept up to date.
- Fees are paid via Direct Debit through our redPAY payment gateway. You will be required to complete the online **Direct Debit Request Form**. Every Thursday, any funds outstanding against the invoice issued for the previous week's childcare, will be debited from your nominated **bank** account or **debit/credit card account**.
- Invoices are issued weekly. A dated receipt will be provided for each payment.
- All records will be kept confidential and stored appropriately.
- <u>Incursion/excursion fees</u>: when applicable will be added to your weekly invoice. Incursion/excursion do not attract CCS. The written Parent/Guardian permission for the incursion/excursion is acceptance of the fee to be charged. Vacation care incursions/excursions costs are based on bookings. If your child is absent on the day of the incursion/ excursion, and the appropriate notice hasn't been provided, you will be charged the full excursion fee 7 days' notice incurs no charge, 24 hours' notice will incur half of the excursion cost (where applicable).
- When applicable items of clothing provided by the service and not returned in a clean condition will incur an appropriate charge.
- 7 days' notice is required for changes to permanent bookings or full payment will be due.
- Fees are not charged for permanent bookings falling on a public holiday or pupil free day unless care is provided.

#### Absences

- Fees are payable for all booked days, including absent days, i.e., sick days, and family holidays.
- A half fee will be charged for permanent booking absences if 24hours notice is given. Casual bookings will not incur a fee if cancellation is made more than 12 hours prior to booking. A full fee will apply for a same day cancellation.
- <u>Vacation Care</u> Absences will incur a full fee if no notice is given. 24hours notice will incur a half fee.
   7 days' notice is required for changes to bookings or charges will apply.
- Holiday absences if 7 days' notice is given a half fee is charged. If no notice is given the full fee
  will be due.

#### **Overdue Fees**

**After 1 week overdue:** The Coordinator will raise issue of payment with families. A reminder letter will be emailed to families.

After 2 weeks overdue: If no payment plan arrangements have been made to pay the fees, or the agreement made has not been kept, the child's place will be suspended. The Coordinator will not accept the child into care.

Debt recovery procedures will follow.

## **Childcare Subsidy (CCS)**

Families apply for CCS through Centrelink. Parents/Guardians are advised to apply for CCS prior to enrolling their child in care or in the week that care commences. Full fees will be charged until the application has been processed. You will be asked to confirm the enrolment in Centrelink for your specific OSHC when the enrolment is established. Failure to do so will mean your CCS is not applied to our service and full fees will apply.

CCS is generally paid to providers who pass it on to families as a fee reduction. Families must make a co-contribution by paying the gap fee. Providers must report fee information to the government.

Gap fees: Families who receive CCS are required to make a co-contribution to their child care fees under <u>Family Assistance Law</u>. They do this by paying the difference between the provider's fee and the CCS amount. This is known as the out-of-pocket or gap fee.

## **Priority of Access for ChildCare Places**

Our service will be available for:

- Children who currently attend primary school.
- No one will be discriminated against on the basis of his or her cultural background, religion, sex, disability, marital status or income.
- The service will support children with additional needs within its operational capacity.
- The service will follow the Commonwealth Government Priority of access guidelines.
- Children in a lower priority category may be required to vacate their childcare place or to reduce their hours to make room for a child in the higher priority categories. Two weeks notice will be given in the rare case that this is required.

First Priority: A child at risk of serious abuse or neglect.

Second Priority: A child whose parents/guardians are working or studying. As determined by

Centrelink (i.e., children eligible for 100 hours of care per Fortnight).

Third Priority: Any other child.

#### **Code of Conduct**

Educators, staff, and volunteers in all NRCS Services will conduct themselves in an ethical manner through clear processes in accordance with legislative and statutory guidelines.

The Code of Conduct outlines the standards for the way we work, as well as the actions, behaviours and conduct expected at NRCS.

All personnel will;

- Abide by the Education and Care Services National Law and Regulations combined with the Current Early Childhood Australia Code of Ethics
- Actively implement the organisations' philosophy, policies, and procedures

#### **Professional Standards**

In their relationships with children, Educators and Staff will demonstrate their commitment to high-quality education and care for children by:

- Being a positive role model
- Encouraging children to express themselves and their opinions

- Allowing children to undertake experiences that develop self-sufficiency and self-worth
- Maintaining a safe environment for children
- Respecting the rights of all children
- Contributing to a service environment that is free from discrimination, bullying and harassment
- Speaking to children in an encouraging and positive manner
- Listening actively to children and offering empathy and support
- Giving each child positive guidance and encouraging appropriate behaviour
- Regarding all children equally, and with respect and dignity
- Having regard to the cultural values, age, physical and intellectual development, and abilities of each child at the service
- Providing opportunities for children to interact and develop respectful and positive relationships with each other, and with other Educators and volunteers at the service
- Informing children if physical contact is required for any purpose, and asking them if they are comfortable with this interaction
- Encouraging and assisting children to undertake activities of a personal nature for themselves e.g., toileting and changing clothes
- Respecting the confidential nature of information gained about each child while participating in the program

In their relationships with parents/carers and families, Educators and Staff will demonstrate their commitment to collaboration by:

- Being respectful of, and courteous towards, parents/carers and families
- Considering the perspective of parents/carers and families when making decisions that impact on the education and care of their child
- Endeavouring to communicate with parents/carers and families in a timely and sensitive manner
- Responding to concerns expressed by parents/carer and families in a timely and appropriate manner
- Respecting the cultural context of each child and their family
- Working collaboratively with parents/carers and families
- Respecting the privacy of information provided by parents/carers and families, and keeping this information confidential, as required under the *Confidentiality Policy*

In their relationships with colleagues, Educators and Staff will demonstrate dependability by:

- Developing relationships based on mutual respect, equity, and fairness
- Working in partnership in a courteous, respectful, and encouraging manner
- Valuing the input of their peers
- Sharing expertise and knowledge in appropriate forums, and in a considerate manner
- Respecting the rights of others as individuals
- Giving encouraging and constructive feedback and respecting the value of different professional approaches
- Respecting cultural context of co-workers

# Parent/Carer Obligations

- Notify your Coordinator before the booked starting time if your child will be late, early, or absent. If you
  are booked in for casual care, please telephone the Coordinator first to ensure the space is available
  for that day
- Ensure that you, or the person taking and picking up the children, use the services electronic attendance record using electronic signature technology. Failure to sign electronically may delay Childcare Subsidy (CCS) payments. The Personal Identification Number (PIN/electronic signature)



issued to you verifies your identity and should never be shared with anyone else. This also applies to all other authorised contacts who receive a PIN.

- If parents/carers are dissatisfied with any aspect of their childcare, they should raise the matter with their Coordinator or the OSHC Supervisor as soon as possible
- Immediately notify the Coordinator of **changes** to your address, phone numbers, persons allowed to pick up your child, any new or updated health management plans or updated Immunisation History Statement, or Court Orders that relate to your child
- Please provide your child with the following each day he or she is in care:
  - Sufficient food and drink for the care period including fruit/vegetables for afternoon tea
  - ➤ A well-balanced nutritious lunch
  - Adequate and appropriate clothing, including warm and cool items if the day changes, swimmers for water play (children must wear underwear at all times), a hat and sunscreen (if necessary). Ensure clothing provides effective coverage from the sun
- Children who are suffering from a communicable disease will be excluded from care
- Be prepared to accept some responsibility for extraordinary damage to toys and furniture caused by your child whilst in care

## **Educator and Parent/Carer Partnership**

The Educators are encouraged to discuss with parents/carers all aspects (positive and negative) of the child's day in care. Parents/carers should let the Educator's know if any new situation is occurring in the child's life which might affect the child's needs or behaviour. It is hoped that parents/carers will show respect to the Educator's, who has a special role in caring for their child.

Remember that a partnership is based on:

- Mutual trust and respect
- Sensitivity
- Open two-way communication
- Agreed common goals for the child
- Equality
- Recognition of the partner
- Shared decision making

"Learning Outcomes are most likely to be achieved, when early childhood Educators work in partnership with families" (MTOP)

# Picking up your Child

- Please make sure your child is collected by 6pm, as extra charges apply after that time. Please call
  your Coordinator if there is going to be a late pickup.
- Only those persons nominated on the child's enrolment form, or a parent/carer of the child, are allowed to collect the child from childcare. Parents/carers are required at enrolment to nominate those persons permitted to collect the child from the care situation and keep those details current
- Parents/carers or their authorised delegates must PIN an electronic record (timesheet) when children are left in care and again when they are collected from care. This is a regulation requirement
- When a person unfamiliar to the Coordinator and who is not listed on the enrolment form is to collect the child, notification in writing is to be made to the OSHC service by the parent/carer.
- Where there is a Contact and Residency Order in place, a copy is to be provided to the Scheme and the OSHC service. This must also remain current. Verbal requests by one parent that the other parent is not to collect their child cannot be adhered to without a corresponding Court Order. Legally, we cannot prevent a parent from having access to his/her children unless we have a copy of a current Court Order restricting access
- If a Case Worker from Community Services arrives to pick up a child, the Coordinator will ask for identification and contact the Coordination unit for further advice. An afterhours number will be supplied on the office voicemail

- If a child remains in care after the agreed collection time, the Coordinator endeavours to locate the
  parent/carer by telephone, failing that, the emergency contact numbers are called. Where this
  procedure is unsuccessful the Coordinator notifies the CEO or OSHC Supervisor
- Where the child remains at the OSHC service four hours after the agreed collection time, the Coordinator can notify the Department of Communities and Justice (DCJ) and/or the local police.
- Parents/carers attempting to collect children whilst intoxicated will be encouraged not to drive, and if
  possible to return after sobering up, or with a responsible sober adult
- It is an Educator's duty of care to notify the police if a parent/carer is known to be driving a child whilst intoxicated. Provide police with vehicle license plate and other relevant details

  Refer to Arrival and Departure Policy for more information.

### **News Bulletin / Emails**

Periodic Bulletins or emails are published/sent for parents/guardians. These are aimed at keeping you informed and up-to-date on relevant topics such as child health, safety, nutrition and development. In addition, administrative and policy changes are routinely relayed. Information can also be found on our website nrcs.org.au and go to the OSHC section.

### **Food & Nutrition**

Children are expected to bring their own nutritious snacks and lunch. Food may also be prepared and served as part of an activity. Drinking water is provided at all times. Food sensitivities, allergies, religious and cultural considerations and health needs of the child must be discussed between the staff and the parent. A written plan may be needed. Religious and cultural festivals offer the opportunity for experiencing diversity through the sharing of food. Children are encouraged to accept and value differences.

We promote respect for our environment and share in our sustainability policy by packing foods into reusable containers. By buying foods in bulk (e.g., 1 kg tubs of yoghurt) and decanting into small containers during the week, you save money and reduce waste.

# **Excursions and Outings**

Excursions during vacation care are an integral part of the OSHC program. In planning excursions, primary consideration is given to safety. Where excursions involve proximity to any body of water, staff must ensure that the adult/child ratio is one adult for each 5 children. A first aid kit, emergency numbers and mobile phone are required on all excursions. All Excursions must be approved in writing by a parent by signing a completed Excursion Risk Management Form.

Parents/Guardians are provided with a completed and approved Risk Assessment where written authorisation is sought by parent. Risk Assessments are required for all excursions, including routine outings. Risk Assessments detail the proposed activity, potential hazards, how risks will be eliminated or minimised, and an evaluation after the Activity. No excursion or outing is permitted unless a Risk Assessment has been completed and approved by the OSHC Supervisor.

#### **Sun Protection**

OSHC has a "have hat will play" policy. However, since OSHC occurs in early mornings & late afternoons, many outdoor areas pose a low UV risk, especially during non-summer months. Coordinators will assess the need for protective clothing throughout the year.

 OSHC will ensure that children have access to shaded play areas whilst attending OSHC. Activities are set up in shady areas where possible.



- Staff will encourage children to wear hats which protect the face, and preferably the neck and ears when outdoor play poses a significant UV exposure risk.
- Parents/Guardians should provide hats and shirts with collars and sleeves during Vacation Care.

- Children are encouraged to cover exposed skin with sunscreen as required.
- Co-ordinators will discourage children from playing in the sun during peak UV times, between 11am and 3pm, without a hat, protective clothing and sunscreen.
- Staff will model sun safe practices to children by wearing hats, sleeved tops, applying sunscreen when in the sun and providing ongoing sun safe education for children.

## **Programming**

Programming and planning makes the day flow more easily for Educators and children. The process enables parents/carers to see and understand how their children spend their time in care. Planning and recording children's activities and experiences is one of the most important indicators of quality childcare, as opposed to "just babysitting". **NQS: QA1 National Regulation: 73-76, 118, National Law: 168** 

Programming enables the Educator's to provide stimulating experiences that enhance children's learning and development. OSHC services have their program available to parents/carers and we encourage families to participate in the program.

The 'My Time Our Place' (MTOP) the Framework for school aged care, is part of the Council of Australian Government's (COAG) reform agenda for early childhood education and care. It is the key component of the Australian Government's National Quality Framework for Early Childhood Education and Care. The Framework describes the principles, practice, and outcomes essential to support and enhance young children's learning. As well as their transition to school and early school years. The Framework has a strong emphasis on play-based learning as play is the best vehicle for young children's learning providing the most appropriate stimulus for brain development. NRCS service philosophy states that "'We believe that within every child, every family and in every culture, the experience of childhood is a unique journey. We commit ourselves to this adventure by responding to the child's needs and creating play-based learning environments which promotes a sense of belonging'.

An ongoing cycle of planning, documenting, and evaluating children's learning underpins the program and involves Educators in critically thinking about what is offered and why to the children. A holistic approach will be embarked upon, focusing upon each child's developmental stages, individuality, interest's strengths, and needs. Planning of experiences is initiated collaboratively between children, families, Educators, and staff, emphasising children's sense of identity, wellbeing, autonomy, confidence, strengths, and emerging competence. Coordinators will work closely with Educators in collaboration with the Educational Leader, to assist them to provide a stimulating learning program for children in care.

NRCS has, as one of its principal goals, the provision of high-quality childcare. Consequently, it is our aim that all our OSHC services will be providing children's experiences, learning and development at a High-Quality level as defined in the School Age Care Framework 'My Time Our Place' and the National Quality Standards.



#### My Time Our Place

My Time, Our Place (MTOP) provides information and documents relating to the Framework for School Age Care. It supports Educators working with school age children in outside school hours care, long day care, and family daycare settings. This site is also home to a lively and supportive.

This Framework builds on the Early Years Learning Framework and extends the principles, practice and outcomes to accommodate the contexts and age range of the children and young people who attend school age care settings. The Framework ensures that

children in school age care have opportunities to engage in leisure and play-based experiences which contribute fully to their ongoing development. Links:

http://www.mytimeourplace.com.au/

https://docs.education.gov.au/system/files/doc/other/my\_time\_our\_place\_framework\_for\_school\_age\_ca re\_in\_australia\_0.pdf

To view this document in multiple languages:

https://www.education.gov.au/my-time-our-place-framework-school-age-care-australia

## **Discipline Policy**

Because the OSHC Coordinator is often the only adult present, children's behaviour must be cooperative if safety is to be maintained. These following behaviours are considered <u>unacceptable.</u>

- Punching, kicking or any other physical violence
- Bullying/intimidating behaviour (name calling and teasing etc)
- Deliberately damaging property or equipment
- Swearing or continued arguing with staff
- Abusing staff and children verbally
- Refusal to comply with staff requests

Staff will endeavour to create an atmosphere of respect and cooperation through positive and caring interactions with all children and providing each child with a range and choice of interesting activities. Each child will be given an opportunity to express their views and have input into the daily routine and OSHC rules. If after appropriate discussion and negotiation, a child's behaviour is unacceptable, the Coordinator will discipline the child by excluding them from activities. Parents/Guardians will be informed on the day of the incident. If the behaviour continues, then parents/guardians may be asked to remove the child from OSHC. Strategies and plans will be required to be discussed and implemented for any ongoing unacceptable behavioural issues. Unacceptable behaviours may result in care being suspended.

# **Health and Safety**

Northern Rivers Children's Services OSHC observes health and hygiene practices that reflect best-practice standards, and are in accordance with relevant government guidelines, in order to minimise risks to children, and encourage children to learn these practices. OSHC Coordinators cannot care for a child unless he/she is in good health and free from any medical condition or dependency on medication that may affect the child's capacity to participate in the program without a risk to other children or adults.

# Illness, accident and emergency treatment

NRCS cannot enrol a child unless a parent/carer has given written authorisation for the scheme/educator to seek urgent medical, dental or hospital treatment or ambulance service, in the event that such action appears to be necessary because the child has been injured or is seriously ill during care. Where possible, treatment will be carried out by the preferred doctor nominated by the parent/carer.

If a child has an accident or becomes ill during care, the child will be kept under adult supervision until the child recovers or until a parent/carer of the child or some other responsible person takes charge of the child. If the child requires urgent medical treatment, immediate steps are taken to secure that treatment. The child will be returned as soon as practicable to the care of their parent/carer.

If any medication or medical, hospital or dental treatment or ambulance services are obtained for a child, the parent/carer will be notified as soon as practically possible of the accident or illness and the treatment arranged. If any other matter concerning the child's health arises during care, the parent/carer will be notified.

If safe, the Coordinator will first attempt to call a parent before arranging emergency medical care. Otherwise, a parent will be contacted immediately after emergency medical care has been arranged. Any associated medical or transportation costs will be paid by the child's parent.

#### **Medication in OSHC**

A Medication Permission Authority must be signed by the parent prior to a Coordinator administrating any medication required by a child in care. This applies to prescription and non-prescription medications (including herbal remedies).

The information to be recorded on the medication form must include:

- Name of child
- · Name of medication
- Reason medication is to be given (symptoms)
- Time and amount of last dose given <u>before</u> coming to care
- Time and dosages of medication required while in care

All prescription medications are to be in the original container and correctly labeled, indicating the name of child the medication is for the dose pertinent to child, frequency of the dose, and the expiry date. Non-prescription medications are only administered in accordance with the manufacturers recommended dosages for the appropriate symptoms.

Herbal remedies (including tonics & vitamin supplements) are not administered in OSHC unless there are manufacturer's instructions similar to those found on non-prescription medications, or if the remedy has been prescribed by a registered practitioner who provides written details as discussed above, including contents. Educators should not administer herbal remedies unless they are for the specific treatment of an illness or its symptoms. This policy is based on a conclusion that in non-essential circumstances, parents/carers should administer medications to their own child.

Any medication given to relieve general discomfort i.e., Paracetamol (Panadol), inhalants, skin creams or any other non-prescription medication must be recorded on the medication form by the Coordinator at the time of administration and signed by the parent/carer at the end of the day.

Paracetamol is not given to a child who develops - abdominal pain, headache or earaches until they have been assessed by a doctor. Paracetamol is also not given to a child to relieve pain from an injury. This is because the pain may be due to a more serious condition which should not be masked by pain relief. Parents/carers will be asked to collect their child and should seek medical advice if the pain persists, and a medical certificate is sought, before returning the child to OSHC. (Full Administering Medications & First Aid policy available on request)

#### **Medical Conditions**

Medical conditions include, but are not limited to asthma, epilepsy, diabetes, post-operative care and diagnosed risk of anaphylaxis. In many cases these conditions can be life threatening. NRCS is committed to a planned approach to the management of medical conditions for the safety and well-being of all children and Educators at our services.

To minimise the risks associated with children's medical conditions NRCS will:

- When relevant, require parents/carers at enrolment to complete a Health Management, Communication and Risk Minimisation Plan (HM,C&RMP) that provides staff and Educators with adequate health information for the effective management of their child's medical conditions. This includes an appropriate Action Plan
- Create HM,C&RMP templates which will provide Educators and staff with the information and practices required to minimise the risks of the specific medical condition, identify warning signs and triggers to a medical incident, and what to do in the event of an incident relating to the medical condition
- Inform parents/carers of the necessity to complete or update HM,C&RMP, and their responsibility to other children with HM,C&RMP, through enrolment information, handbooks, bulletins, and conversations
- Have procedures in place for Educators to identify and be informed about the care for any children with a HM,C&RMP.
- Have procedures in place for Educators to provide information regarding a child's HM,C&RMP to third parties (such as other parents/carers using the same service, visitors, and volunteers), in consultation with the family of the child with the medical condition and with the parents' permission, on a need-to-know basis, to protect confidentiality

- Have procedures in place for Educators to ensure all children with diagnosed life-threatening medical conditions have a HM,C&RMP that is accessible to all Educators at the service
- Have procedures in place to ensure that all Educators only permit children with a HM,C&RMP to attend a service or participate in an excursion if they have their prescribed medication and a current HM,C&RMP

#### Responsibilities of parents/carers or authorised persons:

- To inform the service, staff, or Coordinator on enrolment, or as soon as the child is diagnosed, of their child's medical condition
- To provide the service with a current Health Management, Communication & Risk Management Plan and relevant Action Plan signed by a registered medical practitioner. This document clearly outlines the procedures to be followed by Educators to prevent a medical episode and/or in the event of an incident relating to the child's specific health care need.
- To sign in place of the medical practitioner if the parent/carer is unable or unwilling to have the HM,C&RMP signed by the medical practitioner.
- Be responsible for informing the Educator/s of any changes to their child's condition and or the HM,C&RMP.
- To ensure that at all times, the child in care at the service has medication or injections necessary to carry out the HM,C&RMP during care hours.
- To ensure that the medication has a current expiry date, and in the case of an adrenaline autoinjection device that it is in functioning condition i.e., not heat affected, is in original packaging and has the child's name written on it.
- To, where relevant, give written authorisation for a school age child to self-administer their own medication under the direct supervision of a staff member or Educator. (See Administering Medication Policy 7.14 for self-administration procedure).
- To provide a medical clearance certifying fitness for childcare following any surgical procedure or medical emergency.
- To accurately inform the Coordinator of their child's medical condition at the commencement of care each day, including the child's medical condition and medication received since last being in care.
- To keep their child out of care if their current health condition may lead to a medical emergency (e.g., heightened temperature, chest infection, recent exposure to allergens or new foods or medications).

(Full policy available on request)

#### **Exclusion of children from OSHC due to illness**

Exclusion of infectious children significantly reduces the risk of the spread of diseases to other healthy children and childcare staff. Exclusion periods are recommended by the National Health and Medical Research Council (NHMRC), based on the time a child is infectious to others. Contacts of certain infectious diseases may at the discretion of the local Public Health Unit, be excluded for their own safety. There are circumstances where a child is too ill to attend childcare and needs to stay home for treatment and recovery. There are a number of diseases that are 'notifiable', under the Public Health Act, to the local Public Health Unit.

There are however times when a child may have a common illness such as a cold or earache but is still assessed as requiring exclusion from care. That may be because they require constant one to one care, are not able to participate at all in the normal program or need the love and comfort of a parent/carer. Where a child is mildly sick with no indication of vomiting, diarrhoea, fever, or rash, where there is no perceived risk to any others and where the child is coping with care, the Coordinator will advise the parent/carer of the child's condition and indicate that the child can remain in care. Due to NSW Health guidelines, Coordinators cannot accept into care a child who is suffering from vomiting, diarrhoea, high fever, a rash of unknown or contagious origin or who presents obviously unwell at the commencement of the care.

The OSHC Coordinator and/or the NRCS office reserves the right to exclude a child who is obviously too unwell and cannot be adequately cared for in the OSHC environment.

NRCS has a COVID-19 Safety Plan, and we are committed to keeping children and Educators safe. A COVID -19 policy that details what procedures to minimise the risk of COVID-19 is available upon

request. If a case of COVID-19 is reported, we will follow the appropriate health and safety procedures set by the NSW Government department.

National Health and Medical Research Council (NHMRC) Staying healthy – Preventing infectious diseases in early childhood education and care services provides a list of the recommended minimum exclusion periods. You can view this resource at <a href="www.nhmrc.gov.au/guidelines/publications/ch55">www.nhmrc.gov.au/guidelines/publications/ch55</a>. These are minimum exclusion periods; however, a child may need to stay home for longer until he/she is well enough to return to the service.

A medical certificate is required for a child who has contracted diphtheria, hepatitis A, polio, tuberculosis, typhoid, and paratyphoid before they can return to care.

Also, in the interests of the child, and their ability to cope with childcare, it may be considered necessary to request a medical certificate in cases of severe or prolonged illnesses, after surgery or injury, i.e., broken limbs, unexplained rashes.

Condition	Evolution of Cases	Evolution of Contact
Condition	Exclusion of Cases	<b>Exclusion of Contact</b>
Campylobacter	Exclude until there has not been a loose bowel motion for 24 hours.	Not excluded.
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalavirus (CMV) infection	Not excluded	Not excluded
Chicken Pox (Varicella)	Exclude until all blisters have dried – this is usually at least 5 days after the rash first appears in non-immunised children, and less in immunized children.	Any child with an immune deficiency (for example, leukemia) or receiving chemotherapy should be excluded for their own protection otherwise not excluded.
Conjunctivitis	Exclude until discharge from eyes has ceased unless a doctor has diagnosed noninfectious conjunctivitis.	Not excluded
Covid-19	If your child tests positive, they will need to isolate and be excluded until negative test result.	Anyone who has been in close contact must quarantine.
Croup	The child should stay at home until they are feeling well.	Not excluded
Cryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Cytomegalovirus Infection	Not excluded	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Fungal infections of the skin or nails (E.g., ringworm, tinea).	Exclude until the day after starting appropriate anti- fungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Glandular fever (mononucleosis, Epstein Barr virus (EBV) infection).	Not excluded	Not excluded
Haemophilus influenza type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days.	Not excluded – contact a public health unit for specialist advice
Hand, Foot, and Mouth disease	Exclude until all blisters have dried.	Not excluded
Heavy colds	Exclude if the child is not able to participate in the regular FDC program.	Not excluded
Head Lice (pediculosis)	Not excluded if effective begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected.	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice.	Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group.
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes Simplex (Cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimize the risk of transmission. If the person cannot comply with these practices (E.g., if they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing where possible	Not excluded
Human immunodeficiency virus infection (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses.	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate treatment has commenced. Sores on exposed surfaces must be covered with a watertight dressing.	Not excluded

Condition	Exclusion of Cases	<b>Exclusion of Contact</b>
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	Immunised and immune contacts not excluded. For non-immunised contacts, contact a public health unit for specialist advice. All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case.
Meningitis (bacterial)	Exclude until person is well.	Not excluded
Meningococcal Infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case.
Molloscum contagiosium	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner).	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48hours	Not excluded
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics
Rashes	Exclude until medical certificate provided indicates the rash is non-infectious.	Not excluded
Roseola	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours	Not excluded
Ross River virus	Not excluded	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion or vomiting for 48hours	Not excluded
Scabies	Exclude until the day after starting appropriate treatment.	Not excluded
Shingellosis	Exclude until there has not been a loose bowel motion or vomiting for 48hours.	Not excluded
Temperatures of unknown origin	If a child has a temperature the parent/carer is to be contacted, the approved medication administered, and the child is to be tepid sponged.	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well.	Not excluded
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis	Exclude until a medical certificate is produced from an appropriate health authority.	Not excluded. Contact a public health unit for specialist advice about screening, antibiotics, or specialist TB clinics.
Vomiting of unknown origin	Exclude until symptoms clear.	Not excluded
Viral gastroenteritis (Viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Worms	Exclude if diarrhea present.	Not excluded

**Confidentiality:** NRCS operates within a diverse number of small communities. These communities, by their very nature have the potential to undermine the rights to confidentiality of its members.

It is imperative therefore that all associated with NRCS recognise their responsibility to adhere to strict guidelines:

- Educators, parents/carers, staff, and Board Members undertake an agreement to protect privacy and confidentiality of personal information
- Personal information is distributed on a need-to-know basis only
- Parents/carers respect and protect the privacy of Educators and their families
- Educator's respect and protect the privacy of their clients and ensure that records pertaining to families are secured from unauthorised access at all times
- The co-ordination unit ensures that staff are aware of the principles of confidentiality, that records are securely held, and that procedures are in place to restrict unauthorised access
- The Board of Directors operates in strict confidence at all times

**Anti-bias:** NRCS will uphold the principles of Anti-bias throughout all aspects of its operation, including;

- Access to childcare.
- Selection of Educators.
- Recruitment of staff.
- Treatment of children whilst in care.

**Source**: The Anti-Bias Approach in Early Childhood Education, Ed. Dan E. 2001: ECA Code of Ethics



**Complaints:** Parents/carer dissatisfied with an aspect of a childcare service should, whenever possible, raise the grievance with their Educator when it arises. Alternatively, parents/carers can contact the relevant Coordinator either by phone or by appointment to discuss their concerns and seek information about our policies. Parents/carers may also contact either the CEO or OSHC Supervisor for assistance. Where the complaint is considered by the parent/carer as serious, it must be submitted in writing and forwarded directly to the CEO.

Upon receipt of a written complaint the CEO or delegate will:

- Contact the parent/carer by phone if possible, to confirm receipt of complaint and advise them of action to be taken with regard to Scheme policies.
- Ask the complainant whether they wish to remain anonymous. If yes, the parent/carer will be advised that their anonymity may restrict the investigation and implementation of possible remedies.
- Conduct relevant investigations which may include examining Coordinator records, discussion with appropriate staff members, visiting the Educator in question etc.
- Advise the parent/carer of the outcome of investigations and intended follow-up.
- Establish whether the response is acceptable to the parent/carer. If not, any alternative resolutions will be considered at that point.
- The CEO or delegate will document all complaints, related discussions, and investigations.
- If the action decided is not dealt with by the agreed date, the complainant is to be given a progress report by the CEO or delegate which outlines what steps have been taken to resolve the dispute.
- Where the complaint has been resolved to the satisfaction of the complainant, the CEO or delegate will record the outcomes and place in the service's confidential file.
- If the complainant is not satisfied with the action taken, or the way in which the complaint was dealt
  with, the complainant is invited to send a written complaint to the Chair of the NRCS Board of
  Directors.
- The Board will consider the complaint and decide to either respond to the complainant in writing or will meet with the CEO and the complainant to discuss the complaint and previous action taken. A new plan of action will be developed, and the Board will instruct the CEO to implement that action.
- In cases where the complaint is being made regarding gross misconduct or negligence of the CEO, then it should be directed in writing to the NRCS Ltd Chair of the Board.
  - o In this event, the Board of Directors will conduct the investigation in a manner similar to the above procedures, and in accordance with the principles of natural justice.

• If the complainant is not satisfied that the complaint has been dealt with adequately through the informal and formal complaints procedures, the complainant can pursue the matter further through alternative external avenues, including the Early Childhood Education and Care Directorate, Northern Team.

**Interactions with children:** NRCS aims for interactions with children to be positive responsive, respectful and promote children's sense of security and belonging, wellbeing and development. Interactions with children will occur in a culturally relevant way that ensures that the children:

- are encouraged to express themselves and their opinions
- feel supported to feel secure, confident, and included
- are given the opportunity to become self-reliant and to develop a positive self-esteem
- are able to independently choose age-appropriate play and learning activities
- are supported and encouraged to manage their own behaviour (age appropriate), to respond appropriately to the behaviour of others and to communicate effectively to resolve conflicts
- are responded to sensitively when attempts are made to initiate interactions and conversations
- are not required to perform inappropriate duties with regard to each child's family and cultural values, age, and physical and intellectual development

Interacting in these ways gives children the opportunity to talk about things that are important to them and to think about how to organise their ideas. It also provides an opportunity for Educators to model how to listen carefully, to help children to learn to listen to each other.

In line with our philosophy Northern Rivers Children's Services Ltd will promote the dignity and rights of each child in care.

OSHC Services are to provide an education and care environment that is reflective of, and responsive to, all the developmental needs of all children enrolled in their service. Educators will respect and support the cultural and ethnic diversity of our community, seek information about individual needs and differences and endeavour to meet each family's needs and preferences wherever possible within operational, legal and Government limitations.

It is the responsibility of the Coordinator to remain aware, and be accepting of, current best practice in Early Childhood, including anti-bias principles, and confidentiality.

#### **Children with Additional Needs:**

NRCS believes children with additional needs should be integrated into mainstream care. Additional needs may be intellectual, emotional, or physical. The degree of additional need has the potential to affect each individual child's physical, emotional and social development.

OSHC Services are encouraged and supported to care for children with additional needs. Services can receive additional Commonwealth payments depending on a child's care needs, under the Inclusion Support Programme (ISP) funding.



Educators and staff work with support services and resources to integrate children with additional needs into NRCS. Additional support services may be available to both services and parents/carers where the child has extra needs. Staff, Educators, and parents/carers are offered information and training on caring, supporting, and educating a child with additional needs.

## **Keep Them Safe - Child Protection:**

**Aim**: To ensure and promote an environment where effective care and protection provides for the safety, welfare, and wellbeing of children in care and to prevent and reduce the risk or incidence of abuse and neglect of children.

Protection of children from abuse and neglect is of social and ethical importance. Children should be able to grow up in an environment, which enables them to develop physically, intellectually, emotionally, and socially in conditions of freedom and dignity.

Children have the right to:

- Be safe and secure
- To grow and develop fully
- To be loved and feel worthwhile
- To be listened to and responded to appropriately by adults
- To express their feelings and have a sense of acceptance

Rationale: The Child Protection and Community Services Act 1998, states that: "All childcare workers are mandatory reporters of suspected child abuse or neglect". NRCS is therefore required to notify the Department of Communities and Justice (DCJ) of any case of suspected significant risk of harm which can be emotional, physical, verbal or sexual in nature.

All Educators, Staff and volunteers working with children have a current Working with Children Check clearance certificate.

A notification does not have to be based on proof that a child has been abused or is in danger. Where an Educator has concerns about the safety, welfare or wellbeing of a child, notification will be made. The reasons for suspected child abuse will be recorded noting any details of injuries, other signs of abuse or behaviour change. All Educators and staff are provided with child protection training (Keep them Safe).

**Notifications against an Educator or Staff Member:** Where it is alleged that an Educator or Staff member has abused a child, discussion should take place between the parent/carer and CEO before making formal notification. The law provides that the notification carries certain safeguards for the person reporting the alleged abuse. The actions of the reporting person cannot be held to constitute a breach of ethics, proper conduct or confidentiality, and there can be no liability for defamation.

As far as possible the anonymity of the notifying person is respected by the Department of Communities and Justice. The options open to a parent/carer making an allegation against an Educator or staff member include referral of the allegation to the police, to DCJ, or the Scheme Approved Provider. The Scheme Approved Provider and Nominated Supervisor must at this time make a decision as to whether the staff member is to continue normal duties pending the results of the investigation. Factors to consider are the seriousness and nature of the allegation and contacts with children.

**Notifications against a Parent/Carer**: Where the concern is about the parent/carer having abused the child, the Educator informs their Coordinator before formal notification to the DCJ is made. The Scheme CEO, or delegate, will offer support to the Educator so as to help reduce the emotional burden on the Educator. The Educator will also be advised of what records they may be required to produce for any subsequent investigation. As far as possible the anonymity of the notifying person is respected by the DCJ.

The CEO or Nominated Supervisor is not required to inform the parents/carer that a notification has been made against them. Depending on the circumstances the parents/carer will be contacted by the DCJ or the police.

Under no circumstances should Educators divulge details of parents/carers or children who are the subject of a notification (other than to the CEO or OSHC Supervisor). This information should be kept strictly confidential.

It is the role of the DCJ and police to investigate incidents of child abuse. Under no circumstances should investigations of alleged child abuse be undertaken by the Approved Provider (Board of Directors), staff, Educators, or parents/carers.

**Smoke, Drug and Alcohol-Free Environment**: A smoke, drug and alcohol-free environment is provided for children whilst in OSHC

Educators and other persons in the presence of children in care are not permitted to smoke, consume alcohol or drugs, excepting medically prescribed drugs for short-term use

**Referral to other agencies:** OSHC staff and Educators are required to monitor the development of each child in care. If there are any concerns about a child's physical, intellectual, and emotional or language development the parent/carer is contacted and referred to an appropriate service for added support

**Visitors/Volunteers**: The service may occasionally have visitors or volunteers in attendance, and the children may be in the presence of these visitors/volunteers. Direct supervision will always be provided by the Educator.

### Northern Rivers Children's Services Limited operates the following services:

**Northern Rivers Family Day Care**. One of the largest Family Day Care schemes in NSW, spanning from Tweed Heads to the South of Lismore. The service also covers the townships of Murwillumbah, Alstonville, Ballina, Bexhill, Woodburn, Evans Head, Nimbin, Casino, Kingscliff, Kyogle, Pottsville, Coraki and surrounding areas.

**Nimbin Early Learning Centre**. An innovative service offering low child to adult ratios for ages 6 weeks to school age and is located on the community grounds of the old Nimbin public school.



Northern Rivers In Home Care. This service spans the area from Gold Coast/Tweed Heads to south of Lismore, including the coastal areas of Byron and Ballina Shires. In Home Care provides regulated and monitored childcare in the child's home. The service is primarily targeted at children in rural or isolated circumstances where no other formal care is available, for families with an adult or child with a disability, multiple children under school age, or childcare needs which cannot be provided by mainstream services.

Communities

for Children

YWCA

**Outside School Hours Care (OSHC).** School-based services providing Before & After School Care and Vacation Care. The service operates at varies public primary schools in the Northern Rivers including Bangalow, Bexhill, Clunes, Dunoon and Lismore Heights.

**Ready Set Go Program (RSG)**. A Child Development and Parent Support Program. Ready Set Go is a relationship based, therapeutic early child development and parent/carer support program for families in the Lismore and Goonellabah areas. Ready Set Go is funded to support families with children 0 – 5 years who have developmental needs and live in Lismore or Goonellabah. Priority is given for families who:

- Are experiencing complex family stressors
- Have long term financial hardship or disadvantage
- Are Aboriginal or Torres Strait Islander

RSG is committed to working in partnership with parents/carers and Early Childhood Services to support children to develop towards their unique potential. The RSG program encompasses therapeutic child and parent play, parent/carer support and education, speech pathology, occupational therapy, subsidised fees, and transport for eligible families. RSG also provides co-ordination between services to collaboratively improve the health, development, and well-being of children. Ready Set Go is a Communities for Children Project. Communities for Children in Lismore is funded by the Australian Government and facilitated by YWCA Australia.

**Gingerbread House.** An Occasional Childcare Centre that is located in Lismore catering for children aged 6 weeks to school age, allowing for permanent or occasional bookings.

## **Helpful Contacts**

Poisons Information: 13 11 26 Immunisation information: 1800 671 811 Lismore Base Hospital: 6621 8000 Community Services Helpline: 132 111 Child & Family Health: Community Services Lismore: 6625 0111 6623 4900 Family Support Network:6621 2489 Kids Help Line: 1800 551 800 6621 4366 Parent Line: 1300 130 052 Aboriginal Health: Oral Health: 1300 651 625 Mandatory Reporting: 132 111 State Emergency Services: Centrelink: 136 150 132 500 Wires (snake remover): 1300 094 737

In the event of an emergency evacuation – parents/guardians will be contacted and notified of pick up area.