

# Morisset OOSH & Vacation Care



## Welcome Pack

### **Morisset Public School**

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Facebook: [Care Activities OOSH Services](#)

## Acknowledgement of Country

Morisset OOSH & Vacation Care acknowledges and pays respect to the past, present and future traditional custodians and elders of the Awabakal nation on which we stand. We acknowledge and respect their spiritual relationship with their country, their cultural heritage, beliefs and relationships with the land and sea.

As part of our daily routine, we complete the following Acknowledgment of Country with our children. The directions in brackets are completed by our staff and children together.

We would like to acknowledge the traditional owners of the land we're on today, the Awabakal people.

Together, we touch the ground of the land (touch the ground),  
we reach for the sky that covers the land (hands in the air)  
and we touch our hearts to care for the land (hold hands to your chest).

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## Welcome to Morisset OOSH & Vacation Care

The Manager of OOSH Services, Nominated Supervisor and Staff of Morisset OOSH & Vacation Care extend a warm welcome to you and your family. Morisset OOSH & Vacation Care is a part of Care Activities, a not for profit child education and care provider committed to serving the Lake Macquarie area and surrounds.

Morisset OOSH & Vacation Care offers centre based care for school aged children for Before School Care (BSC), After School Care (ASC) and Vacation Care (VC). Morisset OOSH & Vacation Care is a small centre catering, for up to 30 students, and opened in February 2021. Although our location is new, Care Activities has been providing quality OOSH care for the Cardiff community since 2000 from its Cardiff site located at Cardiff Public School, Russell St.

Our goal is to create a safe and caring environment, allowing children to learn, grow and make friends at their own pace. Children choose from a wide variety of activities, with staff shaping the programming around each child's interests and abilities. We offer art, science, imaginative play, puzzles, reading, sport, dress ups, Lego, card games and much more. We have a focus on outdoor active play and look to instill a love of the outdoors through group games, sport, exploration of the natural world and gardening. Staff are committed to ensuring that each child feels welcomed into the service and believe that clear communication between staff and families is key to this. Please take a few minutes to read the enclosed information about our centre, policies and procedures. A copy of our unabridged policies, as well as laws and regulations are located in the centre for your viewing at any time.

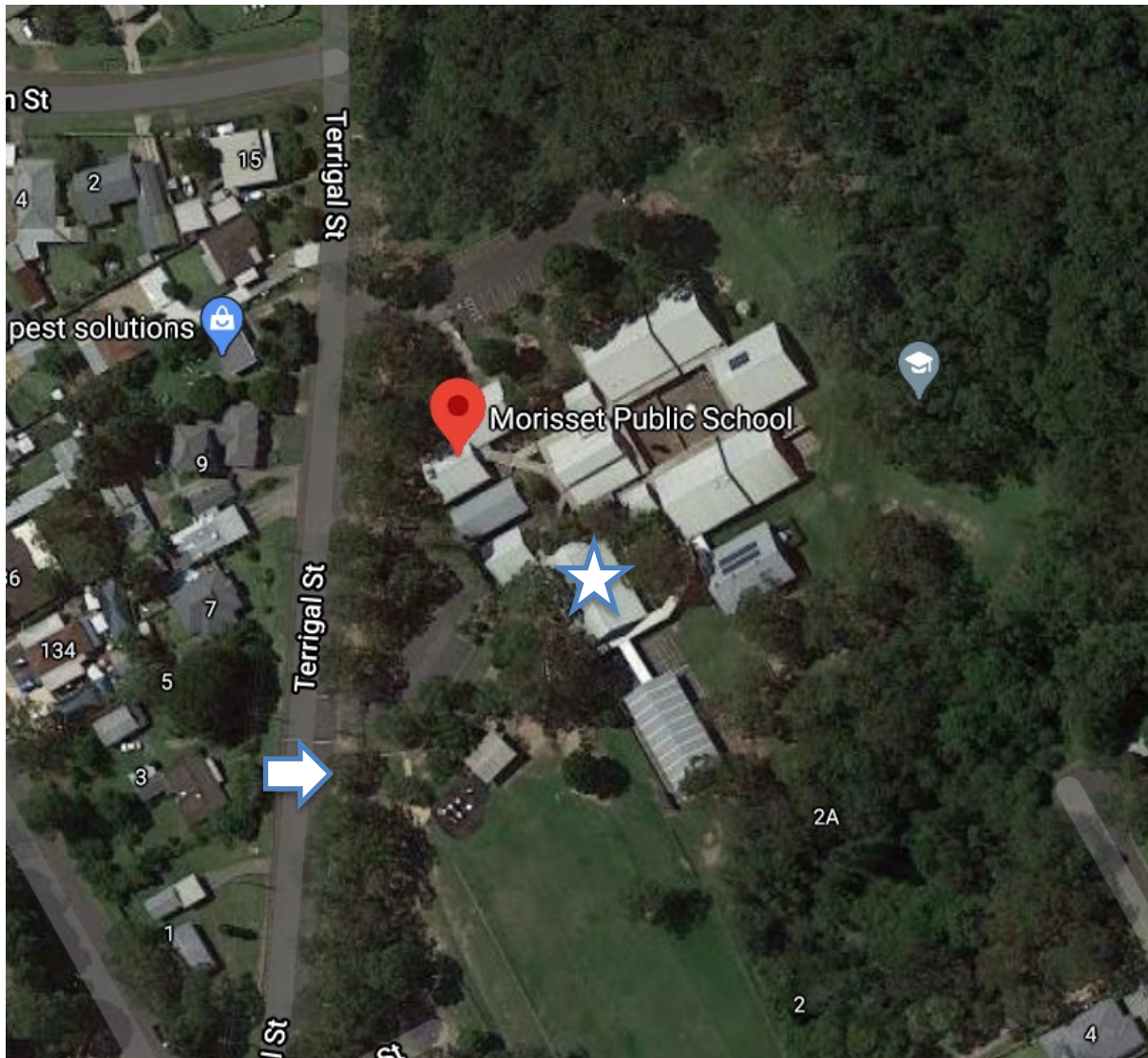
If you are interested in enrolling your child in our centre, please kick start your enrolling by registering your interest with our Supervisor or by visiting our online enrolment portal [here](#).

### Hours of Operation

**Before School Care:** 6.30am to 8.30am  
**After School Care:** 2.30pm to 6.00pm

Please note that due to the terms of our license, parents are unable to sign their children into the centre prior to 6.30am. We ask that all parents arrive by 5.55pm, to allow staff to close the centre precisely at 6.00pm. A late charge is applicable to parents arriving after 6.00pm.

Our office is closed on weekends. If we are closed or offsite and you need to contact us, please call 0460 002 150 and leave a message or email [morisset.oosh@careactivities.org.au](mailto:morisset.oosh@careactivities.org.au). If your call is an emergency, please contact our head office on 4950 3888.



## Location

Our centre is located in the school hall on the grounds of Morisset Public School. We are based out of the school hall and set up and pack up our resources each day. We use the school canteen for food preparation and use the rest of the school for active outdoor play, including the COLA, gardens and oval.

Entrance during OOSH hours is only via pedestrian Gate 5. We ask that for the safety of the students, families do not use the staff carpark and observe all posted no stopping and no parking signs.

**Is English your second language? We can help. Please call, email or visit the centre to arrange for translation services.**

¿El inglés es tu segundo idioma? Podemos ayudarte. Por favor llama, envía un correo electrónico o visítanos para coordinar los servicios de traducción.

ਕੀ ਅੰਗਰੇਜ਼ੀ ਤੁਹਾਡੀ ਦੂਜੀ ਭਾਸ਼ਾ ਹੈ? ਅਸੀਂ ਮਦਦ ਕਰ ਸਕਦੇ ਹਾਂ ਕਿਉਂਕਿ ਕਰਕੇ ਕਾਲ ਕਰੋ, ਈਮੇਲ ਕਰੋ ਜਾਂ ਅਨੁਵਾਦ ਸੇਵਾਵਾਂ ਦਾ ਪ੍ਰਬੰਧ ਕਰਨ ਸਾਡੇ ਕੋਲ ਆਉ।

英語が第二言語ですか？ 私たちにお任せください。翻訳サービスのご調整は、お電話やメールでお問い合わせいただくか、当社までご来社ください。

Дали англискиот е ваш втор јазик? Ние можеме да помогнеме. Ве молиме јавете се, испратете е-пошта или посетете не, за организирање на нашите преведувачки услуги.

Ist Englisch Ihre 1. Fremdsprache? Wir können helfen. Für Übersetzungshilfe kontaktieren Sie uns per Telefon oder E-Mail oder besuchen Sie unser Gemeindezentrum.

هل الإنجليزية هي لغتك الثانية؟ نستطيع المساعدة. يرجى الاتصال بنا أو مراسلتنا عبر البريد الإلكتروني أو زيارتنا للترتيب لخدمات الترجمة.

英語並非您的母語嗎？我們可以幫到您。請致電、發電郵或親臨搵我們以安排為您提供各項翻譯服務。

英語是你的第二語言嗎？我們可以提供幫助。請致電、發送電子郵件或者造訪我們，以安排翻譯服務。

Είναι τα Αγγλικά η δεύτερή σας γλώσσα; Μπορούμε να βοηθήσουμε. Παρακαλούμε καλέστε μας στο τηλέφωνο, στείλτε μας email ή επισκεφθείτε μας για να κανονίσουμε σχετικά με υπηρεσίες μετάφρασης.

क्या अंग्रेजी आपकी द्वितीय भाषा है? हम मदद कर सकते हैं। कृपया अनुवाद सेवाओं की व्यवस्था करने के लिए हमें कॉल करें, ईमेल करें, या हमसे मिलें।

ඉංග්‍රීසි ඔබගේ දෙවන භාෂාවද? අපිට පුළුවන් උදව් කිරීම. පරිවර්තන සේවා සිදුකර ගැනීම සඳහා කරුණාකර අමතන්න, ඊමේල් කරන්න නැතහොත් අප වෙත පැමිණෙන්න.

Ingles ba ang pangalawa mong lengguwahe? Makakatulong kami. Mangyaring tumawag, mag-email o bisitahin kami upang isaayos ang mga serbisyo ng pagsasalin.

ஆங்கிலம் உங்கள் இரண்டாவது மொழியா? எங்களால் உதவ முடியும். மொழிபெயர்ப்புச் சேவைகளுக்கு ஏற்பாடு செய்ய, எங்களை அழைத்திடுங்கள், மின்னஞ்சல் செய்திடுங்கள் அல்லது எங்களை நேரில் காணுங்கள்.

Apakah bahasa Inggris merupakan bahasa kedua Anda? Kami dapat membantu. Harap hubungi kami melalui telepon, email atau kunjungi kami untuk mengatur layanan terjemahan.

## Communication

Staying in contact with our families is a vital part of our day. If you'd like to contact staff for any reason, you can do so by texting or calling us on 0460 002 150 or emailing us at [morisset.oosh@careactivities.org.au](mailto:morisset.oosh@careactivities.org.au).

Staff communicate with families in a variety of ways, including emails, phone calls, text messages and facebook posts. Feel free to chat to our supervisor if you have any preference for how staff communicate important information to you e.g. calling a work number instead of a mobile, texting instead of calling.

It is a condition of enrolment that families notify the centre if their children will be absent from the centre. Please note a \$10 No Show Fee applies where the centre is not notified of a child's absence. Families are also required to notify the centre in writing if their child has a contagious illness or if there are any changes to the information provided on the enrolment form (e.g. emergency contacts, medical diagnoses, parenting plans).

We encourage our families to keep in touch via our Facebook Page: [Care Activities OOSH Services](#). This page works as our 'family noticeboard', so you can find information about the centre and school, but also about education, behavior management, health and local community events.

## iParentPortal

iParentPortal is our online tool, allowing parents/guardians to update their details, make and remove bookings, submit absences, view invoices and pay accounts. iParentPortal also supports iEnrol, our digital enrolment tool. You'll be connected to iParentPortal as part of your enrolment process, please contact staff to receive our How To document, with step by step guides for how to use the portal.

## Family Involvement and Feedback

We believe that families are the best source of knowledge about their children and their learning and always seek feedback from parents on our programming. We welcome all suggestions about our educational program, menu, sporting activities, resources and our room set up. We invite parent feedback formally through regular surveys or by informal chat.

One of our greatest strengths is the diversity of our school community. We welcome any parents, grandparents and extended family members into our centre who would like to share a part of their culture, or a special skill, to contribute to our children's understanding of the world. This might include volunteering to run sports activities, teach cooking or a craft, running a game, talking about your job or bringing in special items to share.



## OOSH Philosophy

Care Activities Inc. strives to provide high quality Education and Care to children aged 5-12 years. Our aim is for families to feel safe knowing their child/ren are receiving the best possible care, where families will be respected and treated as valuable individuals.

Care Activities values and respects that each child is an individual with unique and diverse needs, strengths, and abilities. We aim to assist children to grow and learn, to develop positive self-esteem and independence.

We believe that all children should be provided with equal opportunity to explore play and learn regardless of their age, gender, or background. We aim to provide an inclusive environment for all children and families, to support children through these important development years.

Care Activities Inc. strives to provide a safe environment, to protect children from harm and support children's wellbeing.

### ***In relation to families & the community;***

We acknowledge that families are the most important people in their child's life and hold a high value of diversity and individual cultural beliefs. We value a supportive and inclusive environment for families, to ensure families feel welcomed and included within our services.

We strive to develop positive relationships with families, schools and the OOSH community, which is based on mutual trust and open communication. Our aim within our services is to establish and further develop our collaborative partnership with both families, our school communities, and the wider community.

### ***In relation to children;***

We acknowledge and recognise that all children are unique individuals with unique needs, interests, strengths, and abilities. We provide equal opportunities regardless of a child's gender, culture, ability, and socio-economic background.

We value children's input and voices within our services, using children's interests and ideas as our focus for our program and activities.

### ***In relation to the learning environment;***

We value and acknowledge the traditional owners and custodians of this land in which our children learn and play on, the Awabakal, and Worimi people.

We recognise the importance of providing a safe, clean, supportive, and secure environment for all children. Our play environments are welcoming, stimulating and create a sense of belonging for our families and staff.

We value the importance of providing spaces within the environment to support children's individual needs, with calm emotional regulating spaces, outdoor environments, messy play, craft, and

We acknowledge the importance of sustainable practice within our services and strive to embed practices that are environmentally focused to provide opportunities to deeply engage and simply exist within the natural environment.



***In relation to staff;***

We recognise and respect that every staff member of Care Activities Inc. is an individual with diverse needs, experience, skills, and knowledge. We aim to support our staff to work collaboratively by motivating and supporting each other, to build a workplace based off trust and respect.

We aim to ensure that all staff are committed to providing high quality care and are aware of the service expectations and duties. We strive to support our staff in their professional growth with appropriate professional development, staff mentoring and support by management.

***In relation to the program;***

We value that children's input and interest is central in developing and implementing the program at our services. Our programs provide play based learning activities, recognising the principles, practices and learning outcomes provided by My Time Our Place - School Aged Learning Framework.

We acknowledge and support the process of children's play, rather than focusing on the final product. Educators use a range of techniques to document and extend on children's learning, focusing on supporting further development with interest-based activities.

We aim to provide experiences where children can be kids, by supporting them to take risks, take chances, make mistakes, have fun, learn through play, and get messy.

## Philosophy Aims

The OOSH Centre:

- To provide a safe, clean and caring environment.
- To provide a friendly and welcoming environment.
- To provide high quality care.
- To provide a wide range of developmentally appropriate activities.
- To provide and encourage good nutrition through nutritious snacks and modelling healthy eating habits.
- To provide all stakeholders with relevant information and resources in response to family needs.

The Children:

- For children to be provided with a place to play and socialise with friends.
- For children to feel safe in a friendly and welcoming environment and to develop a sense of trust in all staff.
- For children to feel accepted regardless of cultural, socio-economic or developmental backgrounds.
- For children to have input in the planning, implementation and evaluation of activities offered at the centre.
- For children to achieve and maintain positive relationships and communication between themselves and all staff.
- For children to appreciate and care for each other and their environment

The Staff:

- For staff to be committed to providing high quality child care.
- For staff to be committed to their own professional growth.
- For staff to attend appropriate in-service training.
- For staff to feel supported by their team in their workplace.
- For staff to feel supported by the management of CALM.
- For staff to be aware of all expectations and duties.

#### The Families:

- To develop positive relationships between families based on mutual trust and open communication.
- To invite families to participate in the daily routines and contribute their individual knowledge and skills.
- To attend, where possible, family meetings or other happenings at the centre.
- To openly communicate ideas, needs or wishes to staff and management.
- To foster the cultural diversity of families.

#### The Environment/Community:

- To develop and maintain positive relationships with local schools, council and the wider community.
- To provide for and evaluate the changing needs of the community.
- To ensure the cultural diversity of our community is valued and respected.
- To maintain open communication with all venue users and be sensitive to the needs of residents around the centre in relation to parking, noise and other considerations.
- To keep up to date with any current issues in the community.
- To participate, where possible, in the community events.

## Our Educators

Our educators have varied backgrounds, experiences, qualifications and interests, but share a passion for quality child care. As a small centre (capacity of 30), at present we have a Nominated Supervisor, a Program Assistant and a team of casual educators. Our policy indicates that there must be a minimum of 2 adults on shift at any time when children are present. National staff to child ratios are 1 adult : 15 children, so with 2 staff on shift at all times often we are working well above the required ratios.

The **Nominated Supervisor, Tara Collins** is responsible for the overall conduct of the program and is the main contact for parents and guardians. All employees are overseen by the **Manager of OOSH Services**.

On occasion, we may have volunteers working at the centre. This may include tertiary students or secondary students on work experience. Volunteers will undertake comprehensive orientation procedures and will be supervised at all times.

All educators have current Working with Children's checks and Child Protection training. All permanent staff have current Apply First Aid and CPR qualifications. All supervising staff have Child Protection and Asthma and Anaphylaxis qualifications.

## Our Programming

Our hands on program is planned from staff observations of children's interests, children's suggestions and relevant local community celebrations. We offer a wide variety of experiences, both unstructured and structured, to support children's social, emotional, cognitive and physical development. Our weekly program is displayed in the centre and evaluated by staff daily.

The implementation of our program is governed by My Time Our Place: Framework for School Aged Care in Australia. The framework aims to provide for a wide range of learning experiences, allowing children to grow into inquisitive, self-sufficient and confident learners. The framework consists of five outcomes:

1. Children have a strong sense of identity.
2. Children are connected with and contribute to their world.
3. Children have a strong sense of wellbeing.
4. Children are confident and involved learners.
5. Children are effective communicators.

Morisset OOSH & Vacation Care follows the National Quality Framework, as developed by the Australian Children's Education & Care Authority. These standards provide guidelines for service delivery including staff ratios, food safety, educational opportunities etc. and aim to raise quality and consistency in education and care services.

There are seven quality areas:

1. Educational program and practice
2. Children's health and safety
3. Physical environment
4. Staffing arrangements
5. Relationships with children
6. Collaborative partnerships with families and communities
7. Leadership and service management

Each centre receives a rating, indicating to what extent they are meeting the requirements of the National Quality Framework. A centre can be assessed as Working Towards, Meeting, or Exceeding Quality Standards. As our centre is newly established, we have not yet undergone Assessment and Rating, and therefore having a provisional rating of 'Not Yet Assessed'. National Regulations require the each centre keep a Quality Improvement Plan (QIP), showing their dedication to service quality and improvement. Please see staff if you have any questions about this process.

## Enrolment and Orientation

A child must be fully enrolled before they can attend the service. Enrolment is through our iEnrol digital enrolment tool, please contact staff to be linked to this service. After completing online enrolment, parents/guardians must also sign and

return our authorisations form, which provides authorisation and permission for first aid, sunscreen administration etc.

The following documentation must also be submitted, if relevant to your child:

- Management plan for any medical conditions (e.g. asthma, anaphylaxis, allergy, allergic rhinitis, eczema etc.)
- Any additional information about relevant medical conditions
- Medication Administration Form
- Any Custody Arrangement, Access Order or Agreement and subsequent alterations registered by the court

The Nominated Supervisor will check the enrolment information for each family prior to care commencing, to ensure all details have been completed and to ask for any additional information that may be required. A risk management plan and communication plan will be completed by the Nominated Supervisor and family to assist in management of any long term medical condition e.g. asthma, allergies, diabetes. Any difficulties with completing the enrolment form may be raised with the Nominated Supervisor. Translation services are available where necessary.

### **Re-enrolment in the following OOSH year**

Families are required to re-enrol each school year. Permanent families will be given preference for the following year. Bookings must be made via iParentPortal and a new authorisations form must be returned to the centre prior to the advertised date. At this time, any available places will be opened up to new families or those on the waiting list. A \$20 annual levy is payable at the time of re-enrolment. Enrolments for the following year will be held in Term 4 and families notified at this time.

### **Registration for Vacation Care**

Registration for Vacation Care is separate to registration for OOSH and bookings do not carry over. Our program for the upcoming holidays is released 3-4 weeks before the school holiday period and registrations accepted after this time via iParentPortal. All Vacation Care bookings are considered permanent and cannot be swapped or cancelled.

### **Orientation**

It is the aim of our OOSH Services to ensure a smooth transition for children and families into the service. It is normal for children to feel insecure in a new environment and some can feel anxious about separation from their family. We aim to make this transition as stress-free as possible.

To this end, families are encouraged to bring the child to visit the centre before commencement of care. Staff will provide a tour of the venue with families and children and discuss our daily routines and programs. This allows the child to meet the staff, view the rooms and outdoor spaces and meet some of the children in a lower pressure environment.

We recognise that separation may be an adjustment for both children and families. We encourage all families, but particularly those of new enrolling children, to ring the service during OOSH times to check how their child is settling in. Staff are happy to provide details of their day, and we've found this can go a long way to settling nerves for both parents and children.

Families are requested to greet staff and say "goodbye" to the children on departure in the morning, or to tell them the time they will collect them in the afternoon. Staff will comfort the children if necessary when saying goodbye to their parents.

## **Fees and Payments**

### **Fees Payable**

We aim to provide a quality service that is affordable, with fee levels reviewed annually. Families will be given a minimum of two week's notice of any changes to the fees structure.

OOSH fees are required to be paid in advance and must be kept up to date. For Vacation Care, all fees, including excursion costs, are to be paid in full prior to each Vacation Care block commencing.

Session costs are as below:

- Before School Care: \$22 per session / Casual fee \$26 per session
- After School Care: \$26 per session / Casual fee \$29 per session
- Vacation Care: \$70 per day (+ any applicable excursion/incursion costs)

As Morisset OOSH is a Child Care Subsidy (CCS) approved provider, this may reduce your out of pocket expenses significantly. The vast majority of families are entitled to at least some assistance, so we encourage all families to contact Centrelink to see if you might be eligible. You can find more information on the Department of Human Services website by searching 'Child Care Subsidy'. The process involves an eligibility test, followed by confirmation of enrolments. All enrolments will need to be confirmed before CCS can be claimed.

### **Absences**

Families are required to notify the service directly of any absences for both permanent and casual bookings. If children are unexpectedly absent from the centre, staff will contact the families to locate the child. Please note a No Show fee of \$10 applies for each session where a child is absent without notification to the centre.

Permanent bookings are required to pay the calculated fee regardless of attendance. This includes sick days and school excursion days. This does not include Public Holidays. To cancel a permanent booking without incurring the calculated fee, parents are required cancel the booking using iParentPortal a minimum of two weeks prior to the booking.

Failure to notify of absence for a casual booking will still incur the calculated fee. To cancel a booking without incurring the calculated fee, the centre must be informed of absences before the following times:

- OOSH Before School Care: no later than 6.00am on the day of care.
- OOSH After School Care: no later than 2.00pm on the day of care.

Child Care Subsidy is paid for absent days, with up to 42 days allowable absences per session per year. Beyond this, full price will be charged as per Departmental policy. Please note that Child Care Subsidy is not payable on any absences that occur before a child's first attendance or after their last attendance before the end of an enrolment period, and full fees will be applied for these bookings.

## **Payments**

All fees must be paid two weeks in advance. An invoice is provided each Tuesday identifying costs. Fees can be paid via iParentPortal, either by making a one-off payment or by setting up a direct deposit payment schedule.

## **Overdue Fees**

Bookings for the following term or Vacation Care will not be accepted for families with outstanding debts at the beginning of the following term. Overdue fees of more than two weeks (or greater than \$20) will incur an Administration Fee of \$25 for every letter of request to pay fees. If payment is not received by the due date nominated on the overdue letter, bookings may be cancelled without notice and the recovery of outstanding OOSH or Vacation Care fees may be placed in the hands of a Debt Collection Agency. Payment of fees charged by the Debt Collection Agency will be the responsibility of the family with the outstanding debt.

## **Our Routines**

### **Before School Care**

6.30am	OOSH opens, indoor activities
8.00am	Outdoor activities (weather permitting)
8.20am	Pack up room

8.25am	Group time
8.30am	Children leave for school. In term 1, OOSH staff escort kindergarteners to their classroom.

### **After School Care**

3.00pm	Bell rings, children directed by school staff to meet OOSH staff outside the school Hall. OOSH staff collect kindergarteners from their classroom.
3.10pm	Brief group time, where staff share information about the afternoon.
3.15pm	Free inside/outside play, programmed activities
3.30pm	Light afternoon tea offered
4.00pm	Free indoor/outdoor play
5.45pm	Inside play, quiet time
6.00pm	OOSH closes

## **Late and Non-Collection of Children**

Collection of children after 6.00pm is considered serious, as operation outside of the hours of 6.30am and 6.00pm is considered a breach of our licensing agreement.

When a child is picked up after 6.00pm, the staff will note the time of arrival and inform the family that a late charge will be applied. The charge structure is as follows:

- 1-5 minutes late = \$15.00
- 6-10 minutes late = \$25.00
- 11-15 minutes late = \$35.00
- 16-30 minutes late = \$45.00 + \$5.00 per minute thereafter for 30 minutes

If a parent, guardian or nominated person does not collect their child from the centre by 6.00pm the Nominated Supervisor will attempt to contact the parents/guardians. If they cannot be reached, the Nominated Supervisor will contact all emergency contacts. If the child has not been collected by 7.00pm (an hour after closing time) the OOSH Nominated Supervisor will notify police to collect the child.

Families who are late more than three times may be asked to meet with the Manager of OOSH Services. As the parent is in breach of their enrolment contract, possible termination of their child's enrolment may occur.



## Drop Off and Pick Up

Signing children into and out of care is a legal requirement and an important part of our record and attendance keeping. This is conducted through the application iCheckIn, run through the service iPad. Parents/guardians/authorised adults use their mobile phone number to sign in. This process takes a few minutes to set up, so please arrive with plenty of time and ensure you have your mobile with you for your first sign in. Each authorised adult must use their own mobile number to sign in, and logins may not be shared.

For Before School Care, all children must be signed into the centre by an authorised person. For After School Care, all children must be signed out by an authorised person. We ask that all parents arrive by 5.55pm, to allow staff time to close the centre fully at 6.00pm.

The only individuals able to sign your child out of the centre are the parents/guardians as nominated on your enrolment form, as well as those contacts nominated as emergency contacts on the enrolment form. All individuals, including parents, will be asked to provide photo ID as proof of identity when picking up children until staff are familiar with them.

If someone other than the individuals noted on your enrolment form will be collecting your child, please notify staff in writing in advance.

To remove an individual from your pick up list or add additional authorised individuals, please contact the centre.

## Behaviour Guidance

Morisset OOSH & Vacation Care is a safe space for children to explore, take risks and learn. Effective behaviour management is an important part of this process, to ensure the safety and happiness of all individuals involved. The centre has well developed policies and procedures that guide staff in how to manage behaviours, based on current best practice and research.

All behaviours are viewed as part of the learning process. When behaviours are dangerous or socially inappropriate, it may be necessary for children to be asked to sit and reflect on their behaviour for a short period of time of no longer than 5 minutes. Staff will then discuss the behaviour with the child, and assist them in identifying what choices they could have made differently.

If a child causes physical harm to other children, staff, volunteers, parents or others whilst in care, this will be viewed as serious, the child will be removed from the area and the family will receive a written notice.

Parents are expected to encourage children to follow centre guidelines and rules. Any significant breach of these guidelines will be discussed with parents/guardians so that they may work together with staff to find solutions for any arising issues.

## Afternoon Tea at OOSH

As part of our afternoon routine, we provide a late afternoon tea each day at approximately 3.30pm. Afternoon tea consists of a small snack with a serving of fruit. Menus for each term are displayed in centre and day to day on our program board. We always welcome suggestions from families for new and innovative nutritious snacks, with families especially encouraged to share family and cultural traditions. Examples of afternoon tea items include frozen yoghurt, Saos with tomato and cheese, salad wraps, raisin toast, sandwiches, veggie sticks and more.

We also invite children to snack on any healthy foods that they might have left in their lunchbox. If your child is often hungry at the end of the day, we encourage families to pack some extra food for them to have as a late afternoon tea. We are a nut aware centre, and ask that children do not have any foods that contain nuts or traces of nuts.

Dietary requirements, including cultural and religious restrictions, can be catered for and must be noted on each child's enrolment form. Any updates to dietary requirements should be communicated with staff in writing.

Drinking water is accessible at all times and children are encouraged to stay hydrated.

## Sun Protection

Care Activities Inc. OOSH Services aim to balance the risk of skin cancer from too much sun exposure with maintaining adequate vitamin D levels in our children. We aim to take a sensible approach to sun protection in our service that empowers children to take responsibility for their own health and wellbeing.

Children are required to wear sun safe clothing when engaging in outside play. Children will be encouraged to wear sun safe hats that protect the face, neck and ears when outside. Recommended hats are bucket hats and broad brimmed hats. Baseball caps and visors are not recommended. Children are welcome to bring a spare hat to keep at the centre, if they frequently forget or misplace their school hat. Children must also be wearing a sun safe shirt, with covered shoulders and, if possible, a collar. When the UV rating is Level 3 or above, children without hats or without appropriate sun safe clothing will be required to play under cover or inside.

All children are encouraged to apply SPF 50+ Broad Spectrum sunscreen each afternoon upon arrival at the centre. Children with sensitive skin or allergies may provide their own sunscreen for use at the centre.

Our staff are passionate about sun safety and work as role models. Staff will apply sunscreen alongside the children and wear appropriate hats and protective clothing including sunglasses and collared shirts.

## Administration of Medication

Morisset OOSH & Vacation Care seeks to ensure the safety and wellbeing of all children, and as such follows strict guidelines for the administration of medication. All medications must be in their original box with prescription sticker, containing the child's full name, dosage and times of administration. Staff are legally unable to administer any medication that does not meet these labelling requirements. An 'Administration of Medication' form must be filled out, with a 'Medication Registry' entry completed each day the child is expected to take the medication. All medication must be provided to the Nominated Supervisor and not left in the child's bag. We are unable to store large quantities of medication and ask that families take home remaining medication wherever practicable.

Where children may require medication for emergencies or for the occasional treatment of a medical condition, such as an asthma puffer, EpiPen or antihistamines, these must be provided to the service prior to enrolment.

For all long-term medical conditions, staff will work with families to develop a 'Risk Minimisation Plan' to be stored in the families file. For a full copy of our Medical Conditions Policy, please see Appendix C.

## Allergies

Care Activities Inc. aims to provide the safe care of children by ensuring that staff are fully aware of reactions to, and management of, any child or staff allergies. The service staff are trained in recognition, prevention and necessary treatment of allergies and anaphylaxis in children under their care.

Families are required to inform the service of any allergies their child may have at the time of enrolment. This information will be recorded on the child's annual enrolment form. If a child's allergy status changes during the enrolled year the family must provide the service with details.

Where a child has an allergy the family will be asked to supply an Action Plan. Staff will develop a Risk Minimisation and Communication Plan for the child. In the event the child has symptoms that suggest they are having an allergic reaction this plan must be followed. If medication or an Epi-Pen is required in the case of exposure, families must provide this medication in the original box. A form providing permission to administer medication will also be completed.

For food allergies, a list of foods that the child cannot eat along with alternatives will be recorded. The service will exclude products such as all nuts including tree nuts, walnuts, hazelnuts, cashew nuts, almonds, pecans, macadamias, pistachios.

## Health and Hygiene

Morisset OOSH & Vacation Care promotes the development of healthy habits and self-care through practices embedded in our daily practices.

Children will:

- Wash their hands with soap and water before eating, to remove germs and dirt
- Wash their hands with soap and water after eating, to prevent the spread of allergens
- Be supported to blow their own noses hygienically
- Be encouraged to sneeze and cough into their elbow to prevent the spread of particles
- Be supported to use alcohol-based hand sanitiser to prevent the spread of infection
- Follow Cancer Council recommendations for sun safe play

It is departmental policy that all children must be up to date with the Mandated Immunisation Schedule before enrolment in care can occur. This information is gathered on our enrolment pack, with the required Immunisation Schedule attached as an appendix to this document. For more information, please visit [health.gov.au/immunisation](http://health.gov.au/immunisation) or call 1300 066 055.

The centre follows NSW Health recommendations for minimum exclusion periods of infectious diseases. Please notify the Nominated Supervisor if you have any doubts about your child's illness. If there is an outbreak of infectious disease, each family will be notified within 24 hours under ordinary circumstances. Under NSW Health guidelines, children who are not immunised may be asked to stay away from the centre until any infectious disease outbreak has resolved.

The centre is not able to provide the equipment, space or staffing to care for ill children, and ask that sick children are not brought to the centre. The care needs of an unwell child cannot be met without dramatically reducing the general level of supervision of the other children. Where a child becomes unwell while at the service, all care will be taken to comfort the child and minimise risk of infection until the child can be collected by the parent or emergency contact.

Permanent staff hold current First Aid and CPR qualifications. Supervising staff hold Asthma and Anaphylaxis qualifications.

In the case that first aid is required, an incident report will be completed by staff to be sighted and signed by the collecting adult. In the case where emergency medical care is required, the service will first contact emergency medical services. Parents/guardians will be contacted as soon as is practical. Parents/guardians are responsible for all medical and ambulance costs incurred.

Smoking is prohibited in the centre and on surrounding school grounds.

## Physical Activity

Physical play is a vital part of childhood development, as children learn to navigate the world around them, improve their fitness and co-ordination, and have fun. Apart from health benefits such as reducing the risk of type 2 diabetes, building strong bones and promoting healthy growth, there are emotional benefits as children improve their self-esteem and concentration. Physical activity also has social benefits, as children develop co-operation and teamwork skills, find opportunities for fun with their friends and show a reduction of anti-social behaviour such as aggressiveness. We value physical activity and include active games on our program each day, encouraging participation at each child's own skill level. Australia's Physical Activity and Sedentary Behaviour Guidelines recommend children ages 5 to 12 spend at least 60 minutes per day participating in moderately to vigorously intense physical activity. More information found at [www.health.gov.au](http://www.health.gov.au)

## Sleep and Rest

We believe that being well rested is vitally important to a child's ability to play and learn and understand that each child's needs and routines are different. Some struggle to wake in the morning and others start to feel tired towards the end of the afternoon. We appreciate parents sharing any details about their children's routines with us so OOSH staff can support children in making informed decisions about when they should rest and when they will play. We respect each child's need to relax, rest and sleep in their own time. In centre we supply a quiet space, allowing children to have some quiet time whenever they need it. Staff actively encourage all children to listen to their bodies need for rest. This area is well stocked with cushions and blankets, to ensure a cosy and safe environment that children enjoy spending time in. Staff will only wake a sleeping child for health and safety reasons (i.e. in the event of an emergency) or if it is time for the children to depart the centre in the morning. Sleeping children will be monitored by staff at regular intervals who will ensure their faces remain uncovered, reflecting safe resting principles.

## Emergency Procedures

We take emergency preparedness seriously and, while we hope we never have to use these skills in real life, believe that equipping children with the skills to cope in an emergency makes our centre safer, as well as leading to confident and self-assured young learners. We practice evacuation and lockdown drills at least once per term. Our emergency procedures can be viewed on the noticeboard and have been carefully formulated to closely resemble that of the school so that children are receiving consistent messages across the board. A map of our evacuation routes is also displayed near the front door of the service. We may sometimes be practicing an evacuation or lockdown when families arrive to drop off or pick up children. We thank you for your patience in allowing us to complete these drills fully before signing your child in or out, as they usually take only a few minutes. In the case of a real evacuation or lock down, staff will keep in contact with our families through SMS, so please ensure your contact details remain up to date.

## Clothing

We respect each child's individual clothing needs and preferences and aim to support children to make their own decisions about what they will wear, in line with our health and hygiene policies. Morisset OOSH & Vacation Care is a sun safe centre and requires children to wear hats and sun safe clothing when in the sun at any time when the UV factor is above 3. If a child does not wish to wear a hat, OOSH staff will provide alternate activities in an undercover area. Children are permitted to remove their shoes indoors, and when participating in water play outdoors. Enclosed shoes must be worn at all other times. Paint shirts are provided for use during art and messy play, families are also invited to pack spare clothes if they would prefer their child to change before engaging in messy play.

## Sustainability

Morisset OOSH & Vacation Care is an environmentally focused centre and takes pride in instilling a love of the outdoors. Environmental education is embedded in our program through unstructured and structured experiences, as children learn to be a responsible member of the global community.

We love to use recycled items in our art and are always accepting clean donations of any kind. This includes newspaper, cardboard boxes (large and small), plastic cups, plastic bottles, lids, caps etc. We are also seeking scrap paper for use in art and would gratefully accept any donations.

## Technology

We are a modern centre and understand that technology can play a role as an important educational opportunity for our children. We offer limited use of our service iPads, supporting children to access a range of educational and creative games. Children's own devices must remain in a child's bag during OOSH hours. Children are welcome to use the OOSH phone to contact home if required.

## Child Protection

Morisset OOSH & Vacation Care has an obligation to defend the welfare of all children and defend the child's right to safety. All staff are Mandatory Reporters under law and have a responsibility to take action if they have any reasonable suspicion that children may be being abused or neglected. This involves following procedures outlined by the NSW Department of Family and Community Services and the Commission for Children and Young People. All staff have current Working with Children Checks and undertake regular Child Protection Training.

## Diversity and Inclusion

We are committed to inclusion, equal opportunity and supporting diversity both in our centre and in the wider community. All children and families have the right to be treated with fairness and be accepted as valued members of the

community. We aim to foster respect, empathy and appreciation for the diverse ways in which other people live. We offer opportunities for exposure to different cultures through food, games and art. We are inclusive of children and families with additional needs and are linked with an Inclusion Support Agency to facilitate full participation in our program. We may be able to access funding to facilitate inclusion and encourage parents of children with additional needs to discuss this with our Nominated Supervisor to identify options for your family.

## Personal Items

Staff understand that receiving a new toy can be a very exciting moment for a child and is something they may like to share with their friends. If children have brought a special item to school, we do permit children to play with these during OOSH time, with the understanding that they must stay in their bag throughout the school day. We encourage children to take care with their belongings, but understand that sometimes things may get lost or broken and encourage children to not bring anything to OOSH if they would be upset if it was damaged. All personal items remain the sole responsibility of the child.

## Homework

If requested, staff may encourage children to complete their homework during OOSH hours. We provide a quiet, well-resourced area for children to work through any required homework in their own time. Staff are unable to guarantee one on one homework assistance but may be able to accommodate some requests e.g. guided reading.

If your child's class is currently working on a topic they are enjoying (e.g. bugs, animals, occupations) please let OOSH staff know, so we can incorporate this into our programming.

## Complaints and Grievances

Care Activities Inc. believe families have an important role in the centre and we value their comments. We aim to ensure families feel free to communicate any concerns they have in relation to the centre, staff, management, programs or policies. Our priority is to do everything possible to improve the quality of our service. We support families' right to complain and will help them to make their complaints clear and try to resolve them. A complaint can be formal or informal. It can be anything which a family thinks is unfair or which makes them unhappy or unsatisfied with the service.

We encourage families wishing to make a complaint or comment about the service to talk to the Nominated Supervisor who will arrange a time to discuss their concern and come to a resolution to address the issue. We also welcome comments in writing. Comments may also be made directly to the Manager OOSH Services Meghan Barry ([manager@careactivities.org.au](mailto:manager@careactivities.org.au), 0419 179 114) or to our CEO, Sheena Harvey ([sheenah@calm.org.au](mailto:sheenah@calm.org.au), 4950 3888).



If any complaint cannot be resolved internally, external options will be offered such as an unbiased third party. All confidential conversations with families will take place in a quiet place away from children, other families or staff not involved.

## Have more questions?

Please do not hesitate to contact our team:

### Tara Collins

Nominated Supervisor

0460 002 150

[morisset.oosh@careactivities.org.au](mailto:morisset.oosh@careactivities.org.au)

Manager OOSH Services

0419 079 114

[manager@careactivities.org.au](mailto:manager@careactivities.org.au)

### Sheena Harvey

CEO

4950 3888

[sheenah@calm.org.au](mailto:sheenah@calm.org.au)

## Appendix A: Community Services and Resources

At Care Activities Inc. we understand parenting can be challenging. The Lake Macquarie community has a wide variety of resources able to assist families in day to day life. *(Note: With the exception of Community Activities Lake Macquarie, Morisset OOSH & Vacation Care is not affiliated with these organisations in any way).*

**The Canopy <http://thecanopy.org.au>:** Family support and parenting programs based in Cardiff.

**Community Activities Lake Macquarie [www.calm.org.au](http://www.calm.org.au)** Family Support, parenting programs and youth programs supporting children, families and young people across Lake Macquarie.

**Survivors R Us Incorporated <https://www.survivorsrusincorporated.com>**  
Domestic violence, unemployment and homelessness support. Free counselling services, free and low cost food.

**Library Workshops [library.lakemac.com.au/events](http://library.lakemac.com.au/events):** Frequent workshops and information sessions about child development and learning, as well as literary groups. Workshops at all Library branches including Cardiff and Charlestown.

**The Place <http://www.theplacecharlestown.org.au>:** Community facility in Charlestown Square hosts a variety of groups including the Young Parents Group for parents in their teens and twenties, Fridays 11.45am - 2.15pm during school terms.

**North Lake Macquarie Multicultural Playtime <https://www.facebook.com/MulticulturalPlaytime/>:** Playgroup open to all, with resources for culturally and linguistically diverse families and activities that build cultural awareness. Located in Warners Bay.

**PCYC Lake Macquarie <https://www.pycnsw.org.au/lake-macquarie/>:** Not for profit community facility offering activities for all ages including parkour, Kindygyim, judo, gymnastics, archery, aikido and more, at affordable prices.

**Mum's Cottage Holmesville <http://www.mumscottage.org.au>:** Support based in Holmesville, including access to mentors, disability services, legal guidance, financial guidance, health care, parenting programs and adult education.

**Muloobinba Aboriginal Corporation 02 4969 5299:** Culturally appropriate and sensitive support for Aboriginal people including advocacy, budgeting, home visiting, parenting programs, emergency relief and court support, based in Wickham

**Home-Start National <http://www.homestartaustralia.org>:** Home visiting service supporting families by delivering programs on healthy lifestyles, early literacy, supported playgrounds and parenting seminars.

**Interrelate Family Centre <https://www.interrelate.org.au/programs-services/families>:** Programs for parents, families, grandparents, men, couples,

indigenous families, culturally and linguistically diverse families and people with disabilities

**Hunter Community Legal Centre** <http://www.hunterclc.com.au/>: Free legal advice by via Monday, Wednesday and Friday on matters related to domestic violence, AVOs, separation, divorce and parenting matters.

**Staying Home Leaving Violence** [www.efss.org.au](http://www.efss.org.au) ; Assisting victims of domestic violence and those who face homelessness. Located in Gateshead.

**Headspace Newcastle** [headspacenewcastle@hunterprimarycare.com.au](mailto:headspacenewcastle@hunterprimarycare.com.au): Information and support young people when times are tough including counselling, mental health support, GP's, work & study services, and alcohol & drug services.

**Samaritan's Brighter Futures** [www.samaritans.org.au/service/brighterfutures](http://www.samaritans.org.au/service/brighterfutures): Support service to promote healthy childhood development and strengthen resilience, for children aged under 9.

**The Raising Children Network** <http://raisingchildren.net.au>: Tips and tools for everyday parenting

**My Time** <https://www.mytime.net.au>: Support for parents and carers of children with a disability or chronic medical condition.

**My Child** [mychild.gov.au](http://mychild.gov.au): Information for families about early learning and wellbeing, child care types and searchable database of child care services.

**Department of Education** <http://www.dec.nsw.gov.au>: Regulatory authority for NSW education and care services, families are able to register complaints and access information about available services.

**Department of Health and Ageing** <http://www.health.gov.au>: Guidelines for health, hygiene, disease prevention and immunisation guidelines.

**Department of Human Services** <https://www.humanservices.gov.au>: Financial support, including information about Child Care Packages as of July 2nd 2018

**Cancer Council Australia** <https://www.cancercouncil.com.au>: Advises policies to help prevent, detect and treat cancer. Information about the SunSmart Schools Program and Eat it to Beat it healthy eating program.

**Secretariat of National Aboriginal and Islander Child Care**  
<http://www.snaicc.org.au>: Representing the interests of Aboriginal and Torres Strait Islander children and families

**Lifeline 13 11 14**: 24 hour crisis support and suicide prevention services

**1800 RESPECT**: Telephone and online counselling for sexual violence or family violence

**Kids Help Line 1800 55 180:** Telephone and online counselling specifically for young people ages 5 to 25

## Appendix B: National Immunisation Program Schedule

### National Immunisation Program Schedule From 1 July 2018



Age	Disease	Vaccine Brand
Childhood vaccination (also see influenza vaccine)		
Birth	Hepatitis B (usually offered in hospital) <sup>a</sup>	H-B-Vax® II Paediatric or Engerix B® Paediatric
2 months Can be given from 6 weeks of age	Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib) Pneumococcal Rotavirus <sup>b</sup>	Infanrix® hexa Prevenar 13® Rotarix®
4 months	Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib) Pneumococcal Rotavirus <sup>b</sup>	Infanrix® hexa Prevenar 13® Rotarix®
6 months	Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)	Infanrix® hexa
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA) and medically at-risk children <sup>c</sup>	Pneumococcal	Prevenar 13®
12 months	Meningococcal ACWY Measles, mumps, rubella Pneumococcal	Nimenrix® M-M-R® II or Priorix® Prevenar 13®
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	Hepatitis A	Vaqa® Paediatric
18 months	<i>Haemophilus influenzae</i> type b (Hib) Measles, mumps, rubella, varicella (chickenpox) Diphtheria, tetanus, pertussis (whooping cough)	ActHIB® Priorix-Tetra® or ProQuad® Infanrix® or Tripacel®
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	Hepatitis A	Vaqa® Paediatric
4 years	Diphtheria, tetanus, pertussis (whooping cough), polio	Infanrix® IPV or Quadracel®

Age	Disease	Vaccine Brand
Additional vaccines for medically at-risk children <sup>c</sup>	Pneumococcal	Pneumovax 23®

## National Immunisation Program Schedule

### From 1 July 2018



Age	Disease	Vaccine brand
<b>Adolescent vaccination (also see influenza vaccine)</b>		
10-<15 years (School programs <sup>d</sup> )	Human papillomavirus (HPV) <sup>e</sup> Diphtheria, tetanus, pertussis (whooping cough)	Gardasil®9 Boostrix®
<b>Adult vaccination (also see influenza vaccine)</b>		
15 – 49 years Aboriginal and Torres Strait Islander people with medical risk factors <sup>c</sup>	Pneumococcal	Pneumovax 23®
50 years and over Aboriginal and Torres Strait Islander people	Pneumococcal	Pneumovax 23®
65 years and over	Pneumococcal	Pneumovax 23®
70–79 years <sup>f</sup>	Shingles (herpes zoster)	Zostavax®
Pregnant women	Pertussis (whooping cough) <sup>g</sup> Influenza <sup>h</sup>	Boostrix® or Adacel®

#### Funded annual influenza vaccination<sup>h</sup>

6 months and over with certain medical risk factors<sup>b</sup>

Aboriginal and Torres Strait Islander children 6 months to less than 5 years

Aboriginal and Torres Strait Islander people 15 years and over

65 years and over

Pregnant women

a Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.

b Rotavirus vaccine: First dose must be given by 14 weeks of age, the second dose by 24 weeks of age.

c Refer to the current edition of *The Australian Immunisation Handbook* for all medical risk factors.

d Contact your state or territory health service for school grades eligible for vaccination.

e Observe Gardasil®9 dosing schedules by age and at-risk conditions. 2 doses: 9 to <15 years - 6 months minimum interval. 3 doses: ≥15 years and/or have certain medical conditions - 0, 2 and 6 month schedule. Only 2 doses funded on the NIP unless 12-13 year old has certain medical risk factors.

All people aged 70 years old, with a five year catch-up program for people aged 71-79 years old until 31 October 2021.

g Single dose recommended each pregnancy, ideally between 28-32 weeks, but may be given up until delivery.

h Refer to annual influenza information for recommended vaccine brand for age.

Contact your State and Territory Health Department for further information on any additional immunisation programs specific to your State or Territory.

All people aged less than 20 years are eligible for free catch up vaccines.

Adult refugees and humanitarian entrants are eligible for free catch up vaccines.

# Appendix C: Medical Conditions of Children Policy

## CA 24- Medical Conditions of Children

### POLICY STATEMENT

Care Activities Inc. aims to ensure the proper care and attention for all children by following specific guidelines on all medical conditions and medications given to children. We will support children with medical conditions to participate fully in the program to promote their sense of wellbeing, connectedness and belonging to the service. Our Educators will be fully aware of the nature and management of any child's medical condition and will respect the child and the family's confidentiality. Medication will be administered to children in accordance with National Law & Regulations.

### PROCEDURE

#### Medical Conditions

- At time of enrolment, families are asked to inform the service of any medical conditions the child may have. The information will be recorded on the child's enrolment form. Any new information provided after enrolment will be included with the child's file.
- We will provide the family with a copy of the Medical Conditions Policy, in accordance with regulation 91.
- Specific or long term medical conditions will require the completion of a Medical Management Plan in conjunction with the child's family and doctor, before the child is booked into any care sessions.

The following is required for the different medical conditions:

- **Asthma:** Asthma Care Plan for Education and Care Services completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation, medication as prescribed in Asthma Plan
- **Allergies:** ASCIA Allergy Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation (if required), medication as prescribed in Allergy Plan (if required)
- **Anaphylaxis:** ASCIA Anaphylaxis Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation, medication as prescribed in Anaphylaxis Plan
- **Allergic Rhinitis (hay fever):** ASCIA Allergic Rhinitis Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation (if required), medication and prescribed in Allergic Rhinitis Plan (if required)
- **Eczema:** ASCIA Eczema Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation and medication as prescribed in Eczema Plan (if required)
- **Diabetes:** Injection Action Plan and Management Plan **or** Pump Action Plan and Management Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation, medication as prescribed in Action Plan
- **Epilepsy:** Epilepsy Management Plan completed by a doctor, Risk Minimisation and Communication Plan, Medical Authorisation and medication as prescribed in Epilepsy Plan (if required)
- **Intolerances** (dairy, gluten etc): Risk Minimisation and Communication Plan
- If the family is unable to provide the correct documentation regarding the child's condition, and is unable to provide medication that is clearly labelled with the child's name and dosage, care will be refused until this is provided by the family.

- The Medical Management Plan will be followed in the event of any incident relating to the child's specific health care need, allergy, or relevant medical condition. It is a requirement of the service that a Risk Minimisation Plan and Communication Plan is developed in consultation with the child's family. Content of the Risk Minimisation Plan may include:
  - Assessment/identification of any risks to the child or others by attendance at the service.
  - Identification of any practices or procedures that require adjustment at the service to minimise risk
  - If relevant, the development and implementation of practices and procedures in relation to the safe handling, preparation, consumption and service of food
  - If relevant, the development and implementation of practices to ensure that the child does not attend the service without medication prescribed by the child's Medical Practitioner
  - The process and timeline for orientation or training requirements of Educators
  - Methods for communicating between the family and Educators if there are any changes to the child's Medical Management Plan
- For any child with a medical condition requiring a Risk Minimisation Plan, a communication plan will be developed to ensure that relevant staff and volunteers are informed about the medical conditions policy and the Medical Management Plan and Risk Minimisation Plan for that child. The communication plan will ensure that the child's parents can communicate any changes to the Medical Management Plan or Risk Minimisation Plan for that child. The communication plan will set out how communication can occur. This will be stored with the child's Risk Minimisation Plan.
- All Educators including volunteers and relief staff will be informed of any specific medical conditions affecting children and will be oriented regarding the necessary management. In some cases, training will be provided to Educators to ensure that they are able to effectively implement the Medical Management Plan.
- All medical conditions including food allergies will be displayed in an area visible to staff, out of sight of general visitors and children. It is deemed the responsibility of every educator at the service to regularly read and refer to the list.

### **Administration of Medication**

- Medication will be administered with the parent/ guardian's written permission only, or with the approval of a Medical Practitioner in the case of an emergency.
- Educators will only administer medication during services operating hours.
- Permission for a child to self-medicate will be administered with the families written permission only, or with the verbal approval of a Medical Practitioner or parent in the case of an emergency.
- In the event that an emergency requires verbal consent to approve the administration of medication, the service will provide written notice to the family as soon as practical after administration of the medication.
- Authorisation is not required in the event of an asthma or anaphylaxis emergency however the authorisation must be sought as soon as possible after the parent & emergency services are notified.
- Families who wish medication to be administered to their child at the service will complete the medication form providing the following information:
  - Name of child
  - Name of medication
  - Date and time last administered
  - Date and time next dose to be administered
  - Exact dosage to be administered



- Authorised carer's signature
- Families and staff are to ensure the details on the form are clear and clarify any questions.
- Medication must be given directly to the Supervisor and not left in the child's bag. Educators will store the medication in a designated secure & clearly labelled place.
- Staff will ensure that medication is kept out of reach of children at all times.
- An exception to the procedure is applied for asthma medication for severe asthmatics in which case the child may carry their own medication on their person with parental permission. Where a child carries their own asthma medication, they should be encouraged to report to an educator their use of the puffer as soon as possible after administering. The service should maintain a record of this medication administration including time, which educator was advised of the administration and if the symptoms were relieved.
- Medication will only be administered from its original packaging and by authorised staff member.
- Prescription medication will be administered only to the child for whom it is prescribed, from the original container bearing the prescription label including child's name and a current use by date.
- Non-prescription medication will not be administered at the service.
- Authorisation from anyone other than the parent/guardian cannot be accepted.
- If anyone other than the parent/guardian/authorised person is bringing the child to the service, a written permission note from the parent/guardian, must accompany the medication.
- Before medication is given to a child the authorised staff member (usually the Supervisor) who is administering the medication will verify the correct dosage with another staff member.
- A second staff member is to witness the administration of the medication.
- After the medication is given, the authorised staff member will record the details on the medication form. Name of medication, date, time, dosage, name of person who administered the medication and name of the person who verified and witnessed.
- Where a Medical Practitioner's approval is given staff will complete the medication form and write the name of the Medical Practitioner and means obtained (i.e. phone, email) for the authorisation.
- Where medication for treatment of long term conditions such as asthma, epilepsy, or ADHD is required, the service will require a letter from the child's Medical Practitioner or specialist detailing the medical condition, correct dosage as prescribed and how the condition is to be managed.
- If children are receiving medication at home or school but not at the service families should inform the service of any side effects it may have for the child so that staff can properly care for the child.
- Families are to ensure medication is taken home and not stored long term at the centre.

### **Management of Asthma**

- Asthma is a chronic lung disease which inflames and narrows the airways, resulting in difficulty breathing.
- Common triggers for asthma include:
  - Dust and air pollution
  - Inhaled allergens e.g. mold, pollen, pet hair
  - Changes in temperature and weather, smoke from fires, heaters and air conditioning
  - Emotional changes, including laughing and stress
  - Activity and exercise
- We will ensure that each child with asthma has a current asthma action plan prepared specifically for that child by an appropriate medical professional. This must be obtained prior to enrolment.

- A Risk Minimisation Plan will be completed for any child diagnosed with asthma, which will detail steps and processes taken by the service to minimise the risk of exposure to triggers.
  - The service will keep on file, accessible to all staff, a generic paediatric asthma response plan.
  - An asthma attack can become life threatening if not properly treated. If a child is displaying asthma symptoms, staff will:
    - Ensure a first aid trained educator immediately attends to the child
    - Follow the child's Medical Management Plan
  - If the procedures outlined in the child's Medical Management Plan do not alleviate asthma symptoms, call emergency assistance 000
  - If the child does not have a Medical Management Plan, the educator will provide appropriate first aid, following the steps outlined by Asthma Australia as follows:
    - Give 4 puffs of blue reliever puffer medication
    - Use a spacer if there is one
    - Shake puffer
    - Put 1 puff into spacer
    - Take 4 breaths from spacer
- ☒☒If there is still no improvement, call emergency assistance 000 (or 112 from mobiles) ☒
- Contact the parent/guardian or any emergency contacts as soon as possible
  - The service will ensure that appropriate Asthma first aid supplies, including blue reliever puffers and disposable spacers, will be stored in a location known to all staff, including relief staff. This will be adequately labelled, stored in an unlocked location away from direct sources of heat and moisture.
  - Service puffers will be adequately cleaned after each use to prevent cross contamination. Staff will remove the canister from the puffer and wash the device (not the canister) in warm soapy water, then allow to air dry. When dry, staff will re-assembled the puffer and ensure it is working correctly.

### **Management of Allergies and Anaphylaxis**

- Anaphylaxis is a severe allergic reaction to a substance and can be life threatening. Severe allergic reactions may occur without a documented history of previous reactions. Allergens are specific to individuals and it is possible to have an allergy to any foreign substance.
- Services must ensure that each child at risk of anaphylaxis has a current Medical Management Plan prepared specifically for that child by an appropriate medical professional. This must be obtained by the centre at or prior to enrolment.
- A Risk Minimisation Plan will be completed for any child at risk of anaphylaxis, which will detail steps and processes taken by the service to minimise the risk of exposure to allergens.
- Many common allergens leading to anaphylaxis are food products, including peanuts, seafood, nuts, eggs and cow's milk.
- Risk Minimisation Plans for children diagnosed at risk of anaphylaxis for a food product may include the following practices:
  - Children will not trade food, utensils or food containers. Families will be supported to label all bottles, drinks and lunchboxes with their child's name to allow staff to more easily prevent accidental or intentional trading of utensils.
  - Staff will prepare, store and serve food according with a child's Medical Management Plan and family recommendations.
  - Staff/volunteers involved in food preparation will be educated about food safety and the measures necessary to prevent cross contamination between foods during the handling, preparation and serving of food, including cleaning of food preparation services and utensils.
  - Staff will use non-food rewards with all children i.e. use stickers instead of lollies as reward.

- Staff will evaluate the use of food products in craft, science experiences and cooking classes, to ensure that children with food allergies are able to participate.
- Staff will supervise children at meal times to ensure that all food stays in specified eating areas and is not spread throughout play areas.
- Children will be supported to wash their hands thoroughly with soap and water before eating, and encouraged to do so after eating.
- Allergic reactions and anaphylaxis are also commonly caused by:
  - All types of animals, insects, spider and reptiles (including dander and fur)
  - All drugs and medications, including antibiotics and vaccines
  - Many species of plants, especially those with thorns and stings
  - Latex and rubber products
  - Band-aid and products containing rubber based adhesives
- The service will keep on file, accessible to all staff, an ASCIA generic Action Plan for Anaphylaxis.
- Educators will be aware of the signs of allergic reactions and anaphylaxis and will act rapidly if they do occur. If a child is displaying symptoms of an anaphylactic reaction, staff will:
  - Ensure a first aid trained educator immediately attends to the child
  - Call an ambulance by contacting 000 (or 112 from mobiles)
  - Provide appropriate first aid, which following the instructions of 000, may include the injection of an auto immune device (EpiPen) in line with the steps outlined by the Australian Society of Clinical Immunology and Allergy and/or CPR
  - Contact the parent/guardian or any emergency contacts as soon as possible
- The service will ensure that the location of any auto-injector device is clearly labelled and that this information is known to staff and families. Auto-injector devices will be stored out of reach of children, in an unlocked location, away from direct sources of heat.
- Where a child has been diagnosed at risk of anaphylaxis, a notice stating this must be displayed at the service so it is clearly visible from the main entrance. The privacy and confidentiality of the child will be maintained at all times and the public notice will not name the child.

### **Management of Diabetes**

- Diabetes is a chronic illness where the levels of glucose in the blood are too high. Glucose levels are regulated by the hormone insulin. The two main types of diabetes are type 1 (insulin dependent) and type 2 (non-insulin dependent). Symptoms can be controlled with medication, diet and exercise. If untreated or poorly managed, high blood glucose levels can result in serious complications including kidney damage and nerve damage.
- Services must ensure that each child with diabetes has a current diabetes management plan prepared specifically for that child by their diabetes medical specialist team, at or prior to enrolment, and must implement strategies to assist children with type 1 diabetes. A child's diabetes management plan provides staff with all required information about that child's diabetes care needs.
- A Risk Minimisation Plan will be completed for any child diagnosed with diabetes, which will detail steps and processes taken by the service to minimise the risks of adverse effects while at the service.
- Information about the child's diet, including the types and quantities of appropriate foods, will be included in the child's Medical Management Plan.
- Staff may undertake additional training, to ensure they have adequate knowledge in the use of insulin injection devices (including syringes, pens and pumps) used by children at the service.
- Management of hypoglycaemia, which occurs when blood sugar levels are too low, will form part of the risk minimisation and Medical Management Plans. Causes of hypoglycaemia include:

- Delayed or missed meals
- Meals with too little carbohydrate
- Extra strenuous or unplanned physical activity
- Too much insulin or medication
- Vomiting
- If a child shows signs of a hypoglycaemia, staff will:
  - Ensure the first aid trained educator immediately attends to the child
  - Follow the child's Medical Management Plan, which may include giving the child quick acting and easily consumed carbohydrate
  - Call an ambulance by dialling 000 (or 112 from a mobile) if the child does not respond to the steps outlined in their Medical Management Plan
  - If necessary, provide CPR
  - Contact the parent/guardian or any emergency contacts as soon as possible

#### **POLICY CONSIDERATIONS**

- Policies: CA 4 Allergies, CA 14 First Aid, CA 19 Incident, Injury & Trauma, CA 20 Infectious Diseases.
- NQF Standards 2.1, 6.2, 6.3
- National Regulation r90-91, 92-96, 161, 162, 168(2)(b), 168(2)(c), 168(2)(d), 178, 181-184
- Network of Community Activities 'Guidelines for Administering Medication'- April 2007
- Disability Discrimination Act 1975
- NSW Anti-discrimination Act 1977
- Work Health and Safety Act 2011
- Australasian Society of Clinical Immunology and Allergy website – June 2020
- As1diabetes website – June 2020
- Epilepsy Foundation website – June 2020