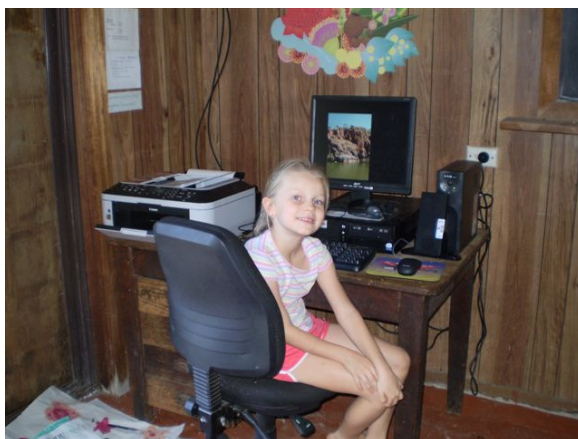




Frontier Services
serving remote Australia

Frontier Services In Home Care



Guidelines and Recommendations Booklet

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In Home Care

An In Home Care service is a network of individuals providing child care in the home of the child. In comparison, other forms of care are usually provided either in the home of the Educator (as in family day care) or the premises of the service (as in long day care).

Care in the child's home differs from other forms of care in the degree the Educator operates in 'loco parentis' and familiarity with the care environment. In premises operated by the Educator or the service provider, the environment is adapted for the purposes of care and is well known to and fairly predictable for the Educator. Care provided in the home of the child occurs in an environment less familiar to the Educator but well known to the child or children receiving care. Care is monitored by and supported by a co-ordination unit. The unit supports families, helps arrange the placement of Educators according to the needs of families and Educators, monitors the care provided and undertakes the necessary administrative responsibilities.

In Home Care is aimed primarily at children from birth to five years but can also assist school-aged children up to the age of 12 years (and beyond in special or emergency situations). It is a flexible service type, providing care according to families' needs. An Educator must not provide care at any one time for more than seven children, four of whom have not started school.

Philosophy

To support Educators registered with the Service to enable them to provide care for children in a safe, secure, caring and stimulating environment. The Service will be flexible and endeavour to meet the needs of the families regardless of geographical distance within the Service's boundaries, while at all times being sensitive to the values and responsibilities of parents.

Goals

To offer child care to meet developmental needs for children up to 12 years of age, and to meet the unique requirements of their families.

To provide access to and participation of children and families living in remote areas in child care services.

To develop and provide resources and referral networks, conducive to an optimum care and developmental environment

Specific Objectives:

In Relation To Children

- To provide care for children in their own environment and to strengthen family ties.
- To provide safe, hygienic, challenging and positive environments which meet the needs, interests and developmental levels of the children in care.
- To respect children as individuals and foster their unique abilities and cultural identities.
- To respond to children's behaviour positively, setting reasonable limits appropriate for their age and developmental level.
- To offer a well balanced range of experiences in the home environment that encourages self-sufficiency and stimulates interests and development.
- To be flexible to meet the needs of individual children.

In Relation To Parents

- To arrange care for families regardless of their income, cultural background, disability or geographic location.
- To understand and respect parent's perspectives in areas of cultural diversity, values and parenting beliefs.
- To promote and maintain ongoing open communication between parents, Educators and staff.
- To cultivate a comprehensive, quality service that is affordable and accessible to families.
- To encourage and include families in the service's decision making processes.
- To respect the privacy of and maintain confidentiality in relation to families.

In Relation To Staff/ Educators

- To recognise the vital role of the Educator.
- To promote awareness of safety issues that are relevant in the child care setting.
- To provide access to regular training and development exercises and encourage a philosophy of life-long learning.
- To provide support and advise in matters relating to the development of quality care provision.
- To provide access to resources additional to their own, that will support quality care provision.
- To maintain administrative structures which support the efficient running of the service.
- To establish a network of Educators in the service, maintaining the respect of individual ideas and beliefs.
- To respect the privacy of and maintain confidentiality in relation to staff and Educators.

In Relation To The Community

- To be responsive to the child care needs of groups within the service and community
- To promote a positive concept of In Home Care in the community and participate, where appropriate, in community events.
- To provide a service that is accessible to all members of the community in accordance with the government guidelines.

- To cooperate with other services in the community to provide a complimentary service.

Roles

The Sponsor

Uniting Church Frontier Services is the sponsor of Frontier Services In Home Care. The sponsor will ensure the provision of quality childcare, which is responsive to the needs of the community and will uphold the development and practice of procedures, which satisfy Australian government and state government standards and legislation.

Our Service Staff

The **National Coordinator** of this service is based in Brisbane, Qld. The National Coordinator is responsible for the management of the overall service, including policies and procedures, and provides support to the regional coordinators.

The **regional coordinators'** role is central to the proper functioning of the service as they are responsible for the administration and coordination of the service. It is the point of contact, registration, referral, monitoring and support for parents and for Educators.

Regional coordinators are responsible for the:

- Registration and assessment of applicants as self-employed Educators
- Support and additional resourcing of Educators including training
- Monitoring Educators as often as necessary to ensure that quality of care is maintained
- Matching families requiring care with the most appropriate available Educator
- Ongoing liaison with parents to ensure that their needs continue to be met.

The Resource officer provides administrative support to the service with particular responsibility in the areas of processing of attendance records and associated enquiries.

Support to Educators

Coordination Unit staff will support Educators at least fortnightly via telephone which will be supplemented by newsletters and home visits. For support to be successful, clear, open and honest communication is required. If Educators are having difficulties staff can help to identify and discuss possible solutions.

During support calls or visits, the following areas will be considered and discussed:

Monitoring the quality of care

- The state of hygiene and potential safety risks.
- The quality of adult/child interactions and behaviour management techniques, and the availability of stimulating experiences for children.

Supporting the Educator

- Ideas and resources for meeting the children's needs
- Support of the Educator's professional development
- Toys and equipment

Observing the children

- The children's development needs, and activities to extend learning will be discussed
- Behavioural issues and management techniques may be discussed

Maintaining Records

- Accident/incidents forms, medication authorisation forms, excursion forms, emergency drills and secure storage of these forms.
- Coordination Unit staff will write reports of each home visit/contact relating to the children in care, activities provided, safety and issues discussed.

Code of Conduct and Ethics

The Service is committed to ensuring a safe and supportive environment for children and young people who use our services. Staff are committed to their well being and will treat them with respect and understanding at all times and ensure they are kept free from harm. As part of registering Educators are also required to uphold the following code of conduct:

- Fostering mutual respect between staff, Educators, children and young people and their families;
- Demonstrating an understanding of children and young people, their ages, stages of development, special circumstances and special needs.
- Use of language which is age/stage of development appropriate, clear, non-bullying and non-sexual.
- Use of physical contact only when required.
- A willingness to listen to children and young people's concerns and issues.
- An openness to suggestions, feedback and complaints.

The Service endorses the ECA (Early Childhood Australia) Code of Ethics 2006 as follows:

I. In relation to children, I will:

- Act in the best interests of all children.
- Respect the rights of children as enshrined in the United Nations Convention on the Rights of the Child (1991) and commit to advocating for these rights.
- Recognise children as active citizens participating in different communities such as family, children's services and schools.
- Work with children to help them understand that they are global citizens with shared responsibilities to the environment and humanity.
- Respect the special relationship between children and their families and incorporate

this perspective in all my interactions with children.

- Create and maintain safe, healthy environments, spaces and places, which enhance children's learning, development, engagement, initiative, self-worth, dignity and show respect for their contributions.
- Work to ensure children and families with additional needs can exercise their rights.
- Acknowledge the uniqueness and potential of all children, in recognition that enjoying their childhood without undue pressure is important.
- Acknowledge the holistic nature of children's learning and the significance of children's cultural and linguistic identities.
- Work to ensure children are not discriminated against on the basis of gender, age, ability, economic status, family structure, lifestyle, ethnicity, religion, language, culture, or national origin.
- Acknowledge children as competent learners, and build active communities of engagement and inquiry.
- Honour children's right to play, as both a process and context for learning.

II. In relation to families, I will:

- Listen to and learn from families, in order to acknowledge and build upon their strengths and competencies, and support them in their role of nurturing children.
- Assist each family to develop a sense of belonging and inclusion.
- Develop positive relationships based on mutual trust and open communication.
- Develop partnerships with families and engage in shared decision making where appropriate.
- Acknowledge the rights of families to make decisions about their children.
- Respect the uniqueness of each family and strive to learn about their culture, structure, lifestyle, customs, language, beliefs and kinship systems.

- Develop shared planning, monitoring and assessment practices for children's learning and communicate this in ways that families understand.
- Acknowledge that each family is affected by the community contexts in which they engage.
- Be sensitive to the vulnerabilities of children and families and respond in ways that empower and maintain the dignity of all children and families.
- Maintain confidentiality and respect the right of the family to privacy.

III. In relation to colleagues, I will:

- Encourage my colleagues to adopt and act in accordance with this Code, and take action in the presence of unethical behaviours.
- Build collaborative relationships based on trust, respect and honesty.
- Acknowledge and support the personal strengths, professional experience and diversity which my colleagues bring to their work.
- Make every effort to use constructive methods to manage differences of opinion in the spirit of collegiality.
- Share and build knowledge, experiences and resources with my colleagues.
- Collaborate with my colleagues to generate a culture of continual reflection and renewal of high-quality practices in early childhood.

IV. In relation to communities, I will:

- Learn about the communities that I work within and enact curriculum programs which are responsive to those contexts and community priorities.
- Connect with people, services and agencies within the communities that support children and families.
- Promote shared aspirations amongst communities in order to enhance children's health and wellbeing.
- Advocate for the development and implementation of laws and policies that

promote child-friendly communities and work to change those that work against child and family wellbeing.

- Utilise knowledge and research to advocate for universal access to a range of high-quality early childhood programs for all children.
- Work to promote community understanding of how children learn, in order that appropriate systems of assessment and reporting are used to benefit children.

V. In relation to students, I will:

- Afford professional opportunities and resources for students to demonstrate their competencies.
- Acknowledge and support the personal strengths, professional knowledge, diversity and experience which students bring to the learning environment.
- Model high-quality professional practices.
- Know the requirements of the students' individual institutions and communicate openly with the representatives of that institution.
- Provide ongoing constructive feedback and assessment that is fair and equitable.
- Implement strategies that will empower students to make positive contributions to the workplace.
- Maintain confidentiality in relation to students.

VI. In relation to my employer, I will:

- Support workplace policies, standards and practices that are fair, non-discriminatory and are in the best interests of children and families.
- Promote and support ongoing professional development within my work team.
- Adhere to lawful policies and procedures and, when there is conflict, attempt to effect change through constructive action within the organisation or seek change through appropriate procedures.

VII. In relation to myself as a professional, I will:

- Base my work on contemporary perspectives on research, theory, content knowledge, high-quality early childhood practices and my understandings of the children and families with whom I work.
- Regard myself as a learner who undertakes reflection, critical self-study, continuing professional development and engages with contemporary theory and practice.
- Seek and build collaborative professional relationships.
- Acknowledge the power dimensions within professional relationships.
- Act in ways that advance the interests and standing of my profession.
- Work within the limits of my professional role and avoid misrepresentation of my professional competence and qualifications.
- Mentor other early childhood professionals and students.
- Advocate in relation to issues that impact on my profession and on young children and their families.
- Encourage qualities and practices of leadership within the early childhood profession.

VIII. In relation to the conduct of research, I will:

- Recognise that research includes my routine documentation and investigations of children's learning and development, as well as more formal research projects undertaken with and by external bodies.
- Be responsive to children's participation in research, negotiating their involvement taking account of matters such as safety, fatigue, privacy and their interest.
- Support research to strengthen and expand the knowledge base of early childhood, and where possible, initiate, contribute to, facilitate and disseminate such research.
- Make every effort to understand the purpose and value of proposed research

projects and make informed decisions as to the participation of myself, colleagues, children, families and communities.

- Ensure research in which I am involved meets standard ethical procedures including informed consent, opportunity to withdraw and confidentiality.
- Ensure that images of children and other data are only collected with informed consent and are stored and utilised according to legislative and policy requirements.
- Represent the findings of all research accurately.

Enrolment and Access

The Service is committed to the principles of equity and justice for all people (children and adults) and to ensuring that all aspects of operation are free from discrimination.

The Service will wherever possible access appropriate training, resources and equipment to ensure that as far as possible no child is prevented from participating fully.

An enrolment form must be completed for each enrolled child and parents will be given a Parent Information Booklet, Guidelines and Recommendations booklet and copy of the Interim Standards for In Home Care.

All children must be enrolled with the Service and individual Educator registered before care can commence. Enrolment forms need to be updated annually or when a family's circumstances change, to ensure information is current and correct. As part of enrolling with this Service parents give permission for support visits by the Coordination Unit staff.

The Service is required to operate within the allocated places allotted by the funding body. In the event that demand for places provided by the Service exceeds those available, priority of access will be given based on guidelines as contained in the Australian government's Child Care Handbook.

Once agreement is reached for an Educator to commence with a given family, a Provision of Care Agreement will be signed by all parties.

Children who are not enrolled will only be present whilst In Home Care is being provided on a temporary basis, and under the direct supervision of their parent/guardian or other responsible adult.

Educators need to be aware of the state/territory child protection legislative requirements and ensure compliance. In WA and Queensland any person over 18, other than the children's immediate family, who is accompanying the Educator whilst care is taking place whether at home, in an emergency or on an excursion must hold a current Working with Children card.

Wait List

If no Educators are available or considered suitable by the family, or there are no further allocated places available, the family will be put on a waiting list.

Families are encouraged to actively seek Educators themselves who can then go through the registration process with the Service. Should an Educator become available, families on the waiting list will be contacted.

Families are encouraged to keep in contact with the regional coordinator to notify of their wish to remain on the Wait List. If there is no such contact for a period of 6 months the regional coordinator will endeavour to contact the family and if still no contact, the family will be removed from the Wait List.

Court Orders

Educators are required to comply with any court orders regarding access and guardianship of children.

Court orders need to be sighted by the Educator and regional coordinator and in need, fresh enrolment forms completed. In the absence of such an order, the children will be released to either parent listed on the enrolment form.

Authorised persons

The names and contact numbers of all persons authorised to sign the Attendance Sheet as evidence of commencement and cessation of care by the Educator, is included on the enrolment form.

Any changes to these authorities are to be advised to the Educator and confirmed in writing to the regional coordinator as soon as possible.

If parents arrange for an authorised person to assume responsibility of the children at the cessation of care, they must advise the Educator of this arrangement.

If the authorised person is unknown to the Educator, the parent should provide a description of the person concerned, who will also be required to provide proof of their identity, preferably with photo ID.

Commencement and Cessation of Care

The regional coordinator will advise parents and Educators of when everything has been processed so care provision can commence. Contract dates and hours of care are part of the negotiation between the Educator and the parent and will be recorded in the Provision of Care Agreement.

Attendance sheets are the official record of transfer of responsibility for children from the parent to the Educator and vice versa. The Attendance sheets form part of the requirements for claiming Child Care Benefit and no payment will be made if the forms are not received or are incomplete. The forms are to be faxed through to the Coordination unit you are registered with every Monday.

Registration of Educators

Educators become very special people in the lives of the children as well as the family. Many In Home Care families identify their own Educator for registration. The Coordination Unit follows a comprehensive registration and induction process in an effort to ensure the best possible care experience for the Educator and the family.

Educator's requirements.....

- Must be 18 years of age
- Must be willing to undertake induction training (this may require travel to the regional coordinator's office) and ongoing training on topics relating to child care
- Hold a "Working with Children" card.
- Have a recent Federal police check (no more than 3 months since issue)
- Have a current driver's licence
- Have a current Senior First Aid certificate
- Have public liability insurance
- Obtain an ABN Number. Educators are 'contracted for services' by the parents and as such are deemed self employed.
- Are advised to seek information from your accountant about what records need to be kept for tax purposes.
- Make own arrangements for superannuation.
- Have some knowledge and understanding of children's developmental needs, hygiene procedures, nutrition, behaviour management, first aid and safety
- Have a commitment to the children they care for and to the In Home Care service
- Receive re-approval each year, after successful assessment including self assessment, feedback from parents, and the regional coordinator, to continue as an endorsed Educator with the service.

What type of paperwork is needed?

A copy of all the following must be submitted for processing before care can commence:

- A copy of their resume
- Educator Application form
- Medical certificate
- Public Liability certificate of currency
- Copy of their "Working With Children" card
- Federal police check
- Their ABN
- Superannuation details
- Copy of their Senior First Aid Certificate, and
- Two references
- Copy of drivers licence and vehicle registration (if applicable)

Educators will not be processed until all the relevant forms are returned and in Queensland the Working with Children check must be finalised. Once the application has been approved a Certificate of Registration and an Educator Agreement will be signed in which the Educator agrees to abide by the Service's guidelines and recommendations. Then a Provision of Care agreement will be signed by all parties which outline the child care arrangements.

Fees, Hours and Child Care Benefit (CCB)

As Educators are '**establishing an enterprise**', they are required to look after their own tax, holiday pay, sick pay, superannuation and income protection cover.

Fees for care provision are negotiated between the Educator and the family. Issues such as accommodation and board, number of children in care, hours of care, qualifications and experience of Educator need to be taken into account. Agreement needs to be reached for 'overtime', weekends, overnights and public holidays. The agreed fee structure is documented in the Provision of Care

Agreement and is entered in the software we use to interface with the Family Assistance Office.

The value of the accommodation and board will depend on whether it is shared accommodation, under the roof of the family home, what arrangements are negotiated for food, utilities, and amenities and so on.

For Child Care Benefit (CCB) purposes standard hours are between 8am and 6pm for 10 continuous hours each day from Monday to Friday. It is not acceptable for Educators to work more than 6 days in a row. If an Educator is required to work on weekends, public holidays or overnight they will be paid at the applicable rate as negotiated between Educator and IHC family.

Educators are entitled to take annual leave each year at a time mutually suitable to the Educator and the In Home Care family. Advance notice of at least 4 weeks should be given, so families can make alternative care arrangements in need. If the Educator is sick, they should ring and advise the family and give as much notice as possible. As a general rule of thumb, 20 working days for annual leave and 10 working days for illness/personal leave per year is considered a reasonable entitlement.

There is a service levy charged of \$3 per week per child. This is part of the child care fee and is reviewed annually. The levy is deducted as part of the CCB payment process.

Child care fees are not subject to GST.

Recommended Base Frontier Services IHC Fees Schedule

Base Weekly Fee:

For families with 2 children or less: \$650.00

For families with 3 children or more: \$750.00

This fee applies where some care is given each week day (Monday to Friday between the hours of 8am and 6pm) and board and lodging are supplied. The fee includes care up to 50 hours per week only.

Base Overnight Care: \$120 per night

Base Weekend Care: \$20 per hour

Educators who are experienced and/or qualified can expect to earn more than these base fees.

Under this schedule, an overtime hourly rate for any time in excess of 10 hours per day or over 50 hours per week (Monday – Friday) should be agreed to before care commences and be documented in the Care Provision Agreement.

(Last reviewed Oct 08)

How do Educators get paid?

As Educators are “**establishing an enterprise**” and thus self employed they are required to look after their own tax, holiday pay, sick pay, superannuation and income protection cover.

Parents are required to register with the Families Assistance Office. Parents and the Service are notified of the percentage of CCB and hours allowable to the family via an Income Assessment Notice. This is a tiered system of relief based on the family income. Correctly completed Educator Attendance Records are required as part of the CCB claim process and are to be faxed to the Coordination Unit you are registered with every Monday. Originals are to be sighted during home support visits.

The data from the educator attendance records are remitted electronically through to the FAO who calculate the CCB entitlement and remit the total monies owing to our Service. The Coordination Unit passes on the CCB component of the family fee fortnightly, direct into the Educator’s designated bank account. The families pay the remainder of the negotiated fee. Educators are faxed payment advice forms each fortnight detailing the amount of CCB component and the amounts to be paid by to them by the families.

Families are to make arrangements with the Educators about how they will pay them the difference between the total fee and the CCB component. It is the Educator’s responsibility to follow up any outstanding ‘balance of payment’ directly with the families.

CCB is not paid when the Educator is not available with the exception of public holidays. Therefore if an Educator is unavailable for care due to sickness themselves or holidays, the parents would not pay any fee. However if an Educator is available and a parent indicates they do not require care, then fees will apply.

Under Family Assistance law, services must submit their educator attendance records no later than 2 weeks after the end of the week in which the care was provided. If attendance records are not received no data is remitted to the Family Assistance Office and no CCB is received. CCB is only paid by the Family Assistance Office after attendance information is received through CCMS.

A delay in lodging attendance records is likely to mean no ‘pay’ for that fortnight as pays are processed fortnightly on a Monday.

Absences from Care

Families receiving CCB are able to claim the benefit for 42 absence days per child per financial year. These can be for any reason including public holidays and will not require proof. Additional absence days are available for specific reasons only and require documentation to support the absence.

It is the parent's responsibility to inform the Educator, where possible the night before, if care is not required. Full fees apply for sick and absent days.

If the Educator is sick or absent, then no fee applies. Parents are to be advised where possible the night before by the Educator.

When a child is absent from care, it is the responsibility of the service to check the count of absences for the child. If the count of absences for the child is 42 days, or greater, then evidence must be provided by the family if the absence is to be paid. Where evidence is required to support a reason for an additional absence, the evidence must be held by our service before an additional absence can be claimed as we are subject to compliance checks.

Further details on additional absences are available from the Coordination Unit.

Parents wishing to exercise the clause of 'payment in lieu of notice' on the Provision of Care Agreement will be liable for the total fee for the 2 week period, as there will be no completed attendance sheets to submit as part of the CCB claim process.

If the Educator terminates a care provision contract due to outstanding fees, that families' place with the Service will be jeopardised. Unless exceptional circumstances exist, families who have not finalised their fees will not be able to have another Educator allocated until all outstanding monies have been paid to the previous Educator.

Privacy and Confidentiality

Confidentiality is the process by which the right to privacy is protected.

Given the nature of child care, all parties should maintain a high level of confidentiality. This is not about secrecy. It is an assurance that information provided verbally or in writing by families and Educators relating to the children in care and their families is protected from being shared with unauthorised persons, or used for a purpose other than for what it was collected.

Personal information held by the Coordination Unit about families and Educators will be kept strictly confidential in accordance with the following:

Written information concerning the child or the child's family, and the Educator or the Educator's family will be accessible only to the parent or Educator to whom the records relate, the Co-ordination Unit staff, the Sponsor, the relevant State and Australian government departments. Access to information is only for the purposes of service delivery and associated accountability requirements, and where we are required or authorised by law to do so. Before information on families/children is shared with any other person's, parental permission will be obtained.

All written documents on which the parent or Educator gives confidential information has the following statement at the bottom the page:

"Frontier Services recognises the trust you put in us when you supply us with your personal information. Be assured that Frontier Services complies with the National Privacy Principles as set out in the Privacy Act. Should you require a copy of our Privacy Policy please contact the provider for this information."

All personal information held by the Coordination Unit is kept in a secure manner to protect it from unauthorised access. Families and Educators are entitled to access

personal information kept by the Coordination Unit on request, and may ask for inaccurate information to be up-dated or corrected.

Educators

Educators are required to store any records held by them in a secure and confidential manner.

Family personal details should not be discussed with anyone other than Coordination Unit staff, directly or indirectly, unless permission has been given, preferably in writing.

Breaches of confidentiality will be treated seriously and investigated.

Parents

Personal details of Educators should not be discussed with anyone other than Coordination Unit staff, directly or indirectly, unless permission has expressly been given.

Photos

Educators may take photos as part of demonstrating quality care or for activities. These photos will not be used for any other purpose without the written permission of the parent.

Should the Service require photos or wish to use Educator's photos for promotional purposes, written permission will be obtained.

Record Keeping

The following table summarises the main forms used in the course of providing child care.

Form	Purpose	Completed By	Action	Time frame	Retention Period
Accident/Incident form See Illnesses and Accidents	Record of any accident or incident which required first aid or medical treatment.	Educator	Faxed to regional coordinator. Recommended that Educators keep copy for their own records.	Same day	Until child reaches 25 years old
Attendance sheets See Enrolment and Access	Record of transfer of care to and from Educator. Mandatory for claiming CCB.	Educator and parent	Faxed to Brisbane Office by Monday noon EST with originals to be posted.	Before Monday noon	3 years
Child Safety Incident Report See Child Protection – Suspected Abuse	Report of incident involving suspicion of abuse/neglect	Educator or parent	Faxed to regional coordinator. Person completing form should keep copy for their own records.	Within 24 hours	Until child reaches 25 years old
Hazard Identification checklist See Occupational Health and Safety	Record of daily/weekly checks	Educator	Educators to keep and make available on home visit.		1 year
Medication Authorisation See Health and Hygiene	Record of permission to administer prescribed medication and record of administration of medication (This form may also be completed as part of enrolment procedure)	Educator and parent	Record of permission is to be faxed to regional coordinator. Original of record of administration of medication is to be posted to the regional coordinator. Recommended that Educators keep copy for their own records.	Before Medication is dispensed (record of permission) and after cessation of administering medication (record of administration of medication).	Until child reaches 25 years old

Form	Purpose	Completed By	Action	Time frame	Retention Period
Out of Ordinary Excursion Permission Form See Occupational Health and Safety	Record of permission to take children on a non-routine excursion.	Educator and parent	Faxed to regional coordinator. Recommended that Educators keep copy for their own records.	Before Excursion takes place	3 months unless an incident is involved in which case until child reaches 25 years old
Routine Excursions Permission Form See Occupational Health and Safety	Record of permission for routine excursions. This form may be completed as part of the enrolment process.	Educator and parent	Faxed to regional coordinator. Recommended that Educators keep copy for their own records.	At commencement of care provision.	Until child reaches 25 years old

The following are plans/procedures that need to be developed by the Educator in consultation with the parent as appropriate:

Plans/procedures	Refer to section in Guidelines	Retention Periods
Child safety risk management tool	Occupational Health and Safety	1 year after cessation of care
Excursion Plan	Occupational Health and Safety	3 months unless an incident is involved in which case until child reaches 25 years old
Emergency procedures and evacuation plan to be sighted by regional coordinator on home visit. May be completed as part of the induction process.	Occupational Health and Safety	Record of drills – 1 year
Asthma Action plan if required with a copy faxed to regional coordinator. Maybe completed as part of the enrolment process.	Illness and Accident	Until child reaches 25 years old
Allergic Reaction plan if required with copy faxed to regional coordinator. May be completed as part of the enrolment process.	Illness and Accident	Until child reaches 25 years old
Daily plans and observations records/evaluations	Programming	3 months

Any agreed procedure outside of those listed above, that is to be implemented in a given care situation, should be documented and signed off by both Educator and parent with a copy faxed to the regional coordinator. The regional coordinator has the right to veto any procedure that contravenes the Guidelines and Recommendations, jeopardises the funding of the Service, or in the opinion of the regional coordinator puts the children or the Educator at risk.

Communication and Participation

Open communication between all parties is vital for quality care of children to take place. The Service encourages communication with and participation by parents. Parents are welcome to phone the regional coordinator to voice any concerns in a way that will assist us to provide a better service.

Information relating to children and families will be treated as confidential.

Parent and Educators are encouraged to set aside regular time to discuss the children's care, their development and any other associated issues.

Parents and Educators are encouraged to keep in contact with their regional coordinator concerning the child care needs of their respective families and the children in care.

Conversations regarding care provision should be conducted wherever possible, in a quiet area, away from other children and adults.

Information for parents and Educators will be communicated through various means including telephone calls, emails and newsletters. Written information provided includes:

- Educator Agreement
- Provision of Care Agreement
- This document
- Information booklets
- Resource Information

Where policy areas are open to negotiation, the Coordination Unit will offer the opportunity for all parties involved, including parents and Educators, to communicate their views. This may be via meetings, phone calls or written questionnaires.

The Coordination Unit will ensure that all new information and directions from Australian government and State bodies affecting In Home Care will be made available as soon as practicable to parents and Educators.

Complaints or Concerns

To protect the privacy of all concerned, complaints should be made at a time and place away from interruptions.

All complaints or concerns should first be addressed and discussed between the parties concerned e.g. Educator and parent.

Any concern should be raised promptly and with the spirit of seeking clarification and/or compromise.

Heated discussions should never take place in the presence of children.

Both parents and staff should respect each other's roles and concerns.

If it seems a placement is not working and that a child's needs are not being met, the regional coordinator will work together with the Educator, child and parents for the best outcome for the child/ren.

Grievance Procedure

When there is disagreement between the parent and the Educator or between the Educator and the Service over any matter arising out of the Service's Guidelines and Recommendations either party may initiate the grievance process as outlined below.

Every effort will be made to assist parents, Educators, and other stakeholders, who raise concerns about the quality of care provided, the coordination of the service, or any other issue relevant to In Home Care within this Service, to resolve those concerns through negotiation and discussion.

This will be done with an awareness of any legality affecting the particular concern, and with attention to the rights and responsibilities of the parties involved.

1. The parties immediately involved are required to try and resolve the issue between each other.
2. If the issue cannot be resolved in this way, approach the regional coordinator who will liaise and assist where possible. A written complaint may be requested and will be

handled by the regional coordinator unless it is a matter of policy, which will be referred to the National In Home Care Coordinator.

3. If an appeal against the regional coordinator's decision is made, it will be referred to the National In Home Care Coordinator who will consider all information available and will be the final arbiter.
4. If an appeal against the National In Home Care Coordinator's decision on a matter of policy is made, it will be referred to the Sponsor who will consider all information available and will be the final arbiter.

The Coordination Unit staff will document all concerns raised as well as any steps taken to resolve these concerns. Outside mediation may be recommended, and if agreed to, any costs will be borne equally by the parties involved.

Any grievance against Coordination Unit staff is to be made in writing to the National In Home Care Coordinator.

Where there is disagreement between the parent and the Educator not covered by the Service's Guidelines and Recommendations the parties may refer the matter to a mutually agreed arbiter, however where there is no mutual agreement the arbiter shall be appointed by the Service. Such arbitration shall be binding on both the parent and the Educator. Any cost involved with such arbitration shall be borne equally between the parent and the Educator.

Programming

Educators should plan and provide for children to freely experience and explore a variety of materials, equipment and activities taking into account the children's stage of development and individual needs. A supportive learning environment, with opportunities for imaginative play, self-expression and creative thought, is fundamental to the development of young children.

Family routines form a part of assisting children's learning and development in the areas such as self-help and independence. Equipment and toys should be set out in such a way as to encourage and enable children to use them in a variety of ways.

There needs to be a balance of both indoor and outdoor play and quiet/active times.

Educators should consider safety, lighting, sound, temperature and ventilation in planning rest times.

Educators are to develop written weekly plans sufficiently comprehensive to aid in the development of each child's social, emotional, physical, intellectual, language and creative abilities.

The plans should be, as a minimum, shared with the parents and preferably displayed.

Educators are expected to have sufficient evidence to inform parents of their children's planned experiences, such as communication book/journal, photographs, samples of children's work, or a folder or scrapbook for each child. Educators are expected to evaluate the planned learning experiences/activities.

Guiding Children's Behaviour

The Service expects Educators to provide a secure, loving and stimulating environment, which encourages children to co-operate, consider others, enhances their self-esteem and fosters their ability to interact with others.

The behaviour management policy of the Service recognises that cultural and religious factors may affect children's behaviour and accepts that there are differences between cultures in what is considered appropriate. The Service acknowledges the individuality of all children including those with special needs and seeks to apply behaviour management guidelines in a non-discriminatory manner.

There should be open communication between the parents and the Educator on a daily basis. With the help of parents, the Educator should develop a broad understanding of the child's developmental level, the child's family, the parent's feelings, and any events which may be influencing the child's behaviour. In turn, the Educator should ensure that the parent is aware of the highs and lows of the child's day. Discussions with parents/Coordination Unit staff in respect of a child's unacceptable behaviour will not take place in the presence of children.

Educators are expected to use a guidance approach that teaches children appropriate behaviour and how to manage their emotions and employs acknowledgement, which provides authentic feedback about a skill or a quality that children have exercised. By acknowledging children's positive actions and teaching them when their behaviour interferes with others, the child's self esteem is safeguarded and the need to be in command of themselves honoured.

Encouragement and appreciation should be freely given as recognition of appropriate behaviour. A few clear rules should be explained and consistently applied. Positive instructions will be given e.g. Speak nicely instead of stop whining. Physical, verbal and emotional punishment is unacceptable and

will not be permitted or justified as a child management technique.

No child shall at any time receive any form of corporate punishment, be smacked or placed in isolation, made immobile, frightened or humiliated in any way or have food or drink withheld as a form of punishment.

Educators and Service staff will demonstrate acceptable behaviours during the course of their interactions with all children, other Educators, staff, parents and other persons while conducting the business of In Home Care. This role modelling will encourage appropriate and responsible behaviour within the areas of:

- socially accepted behaviour
- interaction with peers
- maintaining a safe and caring environment

Anticipating problems, diverting children to more appropriate activities, demonstrating appreciation for appropriate behaviour and acknowledging and building on each individual's strengths and achievements will encourage appropriate behaviour. The Educator may within acceptable limits raise and lower the voice in order to use intonation to emphasize points being made, but never in a frightening or negative way.

Children will be taught to settle disagreements in a peaceful manner. Biting and hitting are a natural part of child development, particularly for children under 3, often caused by inability to verbally communicate. A child should be assisted in solving conflicts verbally. The verbal skills will empower the child and help the child to cope with difficult situations, which require negotiation and problem solving. When attempting to solve problems, it is important for the Educator to be at the child's level and to establish eye contact in a non-threatening way. Using the inescapable logic of natural consequences is an effective way to solve problems.

Two methods will be taught to children in managing high emotions:

- gaining emotional support from someone close to them
- engaging in an activity that soothes the nervous system

Accept the feelings of the child but not the action and encourage them to calm down. Do not attempt to reason while the child is being unreasonable. Wait until they have calmed down. Circumstances at the time will determine which method to employ.

Parents, who discipline their own child whilst the child is still signed into care, shall not use any form of physical punishment or use inappropriate language.

Time away is only to be used as last resort and never as a punishment. The Educator may suggest to the child they might like to have some time by themselves until they feel more sociable. Or the Educator may ask the child to sit and watch for no longer than 2 minutes. The child should be encouraged to rejoin the group with no further punishment given. Educators will not withdraw emotional support from the child who is watching.

If Educators are following the guidelines and recommendations of the Service and if children nevertheless continue to consistently display unacceptable behaviour parents will be consulted and requested to work with the Service to ensure strategies to change behaviour are clear and consistent. The regional coordinator will ensure that:

- Strategies and expectations are realistic and consistent with the child's level of development
- The child understands the limits
- There is no conflict between home and Service expectations
- The child's needs are being met
- The child has no impediments, which may be the cause of the unacceptable behaviour
- The child is not copying observed behaviour

- Events have not encouraged the behaviour
- Consequences of the behaviour do not encourage it to persist (i.e. extra attention)
- All caregivers in contact with the child consistently follow strategies.

Regional coordinators are available to discuss and assist Educators and parents with concerns they have in respect of a child's behaviour or participation in the group of children.

Suggested reading: Louise Porter; *Children are People Too*

Occupational Health and Safety

It is the families' responsibility to ensure the environment provided is in a safe and clean condition and complies with all Workplace Health and Safety requirements. The Educator is responsible for ensuring the childcare environment poses minimal risks to children, self and other persons.

Duty of care

The Educator's duty of care to a child should be the equivalent as that exercised by a reasonable careful parent.

If an Educator fails to exercise reasonable care towards a child and the child is harmed or injured due to their negligence, then they have not complied with their duty of care. If an Educator were proven to be negligent in their "Duty of Care", then they would have to compensate the child for the damaged caused.

The legal definition of negligence required that there be:

- (1) Duty of care owed
- (2) Breach of that duty
- (3) Damage

In order for compensation to be awarded by the court, there must be proof of some harm or injury to the child. It is difficult to find the balance between "meticulous supervision of children every moment of the day" and "trying to encourage the sturdy independence of children as they grow up". As a registered Educator the level of supervision is to be of the highest standard. As a professional child care worker the duty of care to children will entail protecting them from harm or injury.

A Child Safety Risk Management tool is provided as part of the Induction Kit for use by Educators in assessing risks from others and the environment.

Educator responsibility for the children begins when the authorised person signs in the child. Responsibility ends when the authorised person signs out the child.

The Educator also has a responsibility to employ safe working practices themselves.

Points to Consider

Educators need to be familiar with and practice safe manual handling techniques. Any task that requires twisting of the back should be redesigned to eliminate the need for twisting.

Educators are to provide supervision that is within line of sight or hearing at all times. Whilst the children are signed into care, no other adult (including parents) should be allowed to take the children out of the Educator's line of sight. If the child is out of the Educator's direct supervision, and in the care of the parent/s while still on the premises or another part of the property the child must be signed out of care.

When a child is sleeping the child is to be visually monitored and checked to ensure they are breathing normally. Children less than 15 months should be checked every 15 minutes. Educators should follow the recommendations put out by the National SIDS Council of Australia. (Information is provided in the Induction Kit. Further information is available at www.sidsandkids.org.au)

The Coordination Unit will provide parents with a safety checklist which they can use to assess their property as a child care work environment prior to care commencing. The Educator is to routinely monitor the environment using safety checklists at the commencement of each day.

Children can be harmed both inside and outside with many injuries occurring in the backyard. Other areas of risk include small objects that could cause a child to choke, electricity, fire, medications and chemicals.

Furniture and equipment including cots, high chairs, car seats, prams and strollers should meet Australian standards and not be used for any reason other than their manufactured purpose.

Parents and/or Educators who become aware of faulty or broken equipment are required to remove this equipment from use/access by children and parents will arrange replacement or repair as required.

All equipment is to be securely fixed in place or is stable and unable to be dislodged by children, to prevent a child being trapped, pinched or crushed.

Facilities

Smoke/fire detectors are to be installed in the care environment, tested monthly and batteries replaced annually.

All bench tops, floors and tables should be cleaned after each activity by the Educator.

Hot water taps to which a child has access, should be thermostatically controlled at less than 42°C or be fitted with a device which prevents the operation of the tap by a child.

Household electrical appliances are to be located out of children's reach.

The premises should be regularly treated for the control of pests.

All waste disposals are to be covered and emptied daily.

The parent and Educator need to ensure that poisons, disinfectants, corrosive substances and other dangerous items are marked in their original containers, kept out of reach of children and/or placed in a child proof storage facility.

Hazardous substances and potentially dangerous equipment should always be stored out of reach of children. These include cigarettes, matches, lighters, medicines, cleaners, plastic bags, polystyrene, scissors, razor blades and sharp knives, aerosol sprays, pills and medicines.

No bar radiators are to be used on the floor when children are in care. No kerosene heaters are to be used. All other heating appliances should be kept out of reach of children or placed behind a fixed fireguard.

Free standing fans are not to be used in play areas. Any free standing fan should be located so that children are adequately protected from inadvertent physical contact with the blades.

Age appropriate barriers are to be in place at the top and bottom of stairs.

Beanbags should not be permitted to be within reach of children in care. Polystyrene beads can be inhaled and cause suffocation.

Baby walkers are considered a safety hazard and are not permitted to be used by Educators registered with this Service.

Power point protector caps are to be fitted to all exposed electrical outlets. Piggy backing of adaptors in power points and the use of frayed or damaged cords are not acceptable. Loose cords are to be stored out of children's reach.

Firearms are to be dismantled with ammunition stored separately in a locked container.

Outside areas

There should be fences preventing access to swimming pools, busy roads, railway lines and other hazards. In Home Care homes are required to have safe outdoor play areas. Fences should have no foot holds.

The outside play area should be free of poisonous plants. Thorny plants and shrubs such as cactus and bougainvillea should be sensibly pruned or allowed to grow in an area of the garden inaccessible to the children.

Play equipment is to be free from rust and sharp or rough edges smoothed and/or covered.

Sandpits are to be raked prior to use to check for any animal faeces and any potentially dangerous objects. They should also have suitable covers to protect against contamination by animals when not in use. If a trampoline is provided it is only be used under the following conditions:

- The trampoline has safety pads covering the springs
- The trampoline is only used when constantly supervised by the Educator
- The trampoline is used by only one child at a time
- Children are shown how to bounce safely and dismount safely.
- The trampoline is stored when not in use

Care is to be taken with children riding bikes. Children riding 2-wheeled bikes are to wear correctly fitting helmets. If skateboards are used, appropriate safety helmet, knee and wrist guards are to be worn.

Shed and garage doors should be kept locked. Machinery, tools and gardening equipment need to be secured in a locked shed.

Water Safety

If there is a swimming pool, the fencing must be constructed to comply with Local Council and Australian Safety Standards.

The following adult/child ratios should be observed for swimming, that is one (1) adult for every one (1) child up to three years; one (1) adult to two (2) children for children over 3 years but not eligible for school and school age children who cannot swim at least 50 metres; and one (1) adult to seven (7) children of school age who can swim 50 metres.

The supervising adult must have a current resuscitation certificate and the knowledge and ability to implement safety procedures.

Adult-child ratios do not apply to water play, wading pools or other water which is below the smallest child's knees providing the Educator is present at all times. If a wading pool is used, it must be emptied as soon as swimming is over and put away.

Spas should be inaccessible to children, either by fencing or locked lid. Fishponds should have adequate safety covering or be completely inaccessible to children.

Buckets and bowls etc should be stored in a manner that water cannot collect in them, or emptied before children have access to them. Any buckets that store liquids are to have securely fitting lids (e.g. nappy buckets).

Transport

Any vehicles used to transport children are to be maintained in a safe and road worthy manner, registered in accordance with state licensing requirements and have a communication system available in the event of an emergency. Educators must follow state and territory legal requirements for passenger transport. Educators should make themselves familiar with what alternative arrangements are available in the event of a breakdown.

Children will use correctly fitted child car restraints or seatbelts.

At no time will children be left unattended in a vehicle.

Kidsafe Western Australia recommends that children under the age of 10 do not sit in the front seat of a vehicle. Children under 3 should always travel in the back seat, and younger children have precedence over older children when being seated in the rear of a vehicle.

A well stocked first aid kit is to be kept in the vehicle at all times and drinking water is to be available for passengers at all times. An emergency contact book should also be kept in the vehicle with details of the children and Educator in case of an emergency. This is to be updated regularly.

If Educators are using their own vehicle they should ensure their insurance covers use for work purposes.

Animals

The children's safety should not be put at risk by any animals kept at the home.

Children should be taught:

- Not to disturb a dog or cat that is eating or sleeping
- To pat dogs and cats gently and calmly
- Not to approach strange dogs or cats
- Not to put their faces close to animals
- Not to touch faeces
- Always wash their hands after touching any animals
- Dangers of snakes and reptiles
- Not to provoke or handle a snake or reptile
- To stay away from insect nests.

When in bush settings, children should wear enclosed protective footwear and avoid walking through long grass.

Excursions

Excursions provide enjoyment, stimulation, challenge and new experiences and are a valuable part of quality child care.

Maximum safety precautions need to be maintained and children's age, interests and abilities need to be considered in planning excursions. A first aid kit and some form of communication (mobile phone/CB radio) are essential for all excursions. For all excursions the Educator must carry their personal identification, service contact details, list of children's names and emergency contact details. Children need to be supervised at all times including toilets and change rooms. In the event of a late return to the home, every effort should be made to notify the parents. An Excursion Plan is included in the Induction Kit to assist in the planning process.

An Out of Ordinary Excursion Permission form is required from parents before children can be taken on any outing, which is defined as non-routine, special, or unusual, which may not be within reasonable proximity of the home and is likely to involve the use of

transport. These forms are provided in the Educator's Induction Kit and completed forms are to be faxed to the regional coordinator prior to the excursion. The only exception is in an emergency and in particular to ensure the well being and safety of the children.

A Routine Excursions Form is also included in the Induction kit and should be included for any routine activities that take place away from the immediate vicinity of the family home, particularly if it involves transportation. This may be completed either as part of the enrolment process or at any stage during provision when an activity becomes routine, in which case, a copy is to be faxed to the regional coordinator.

The Educator has the final say in whether a particular excursion/activity will take place or not whilst children are signed into their care, taking into account safety considerations and whether they are confident in being able to provide adequate supervision. The Educator is responsible for the children in care at all times, whether or not accompanied by parent/s on an excursion while the child/ren is signed into care.

Emergency / Evacuation

Educators should consult with the parents in working out an effective evacuation plan and procedures to follow in the event of fire or other emergency. The purpose is to be prepared for any emergency which would require the safe, orderly and efficient evacuation of all occupants from the building using all exits that are available and to enable the Educator to react rationally when confronted with fire or other emergency whilst providing care. Priority must be given to the safe evacuation of all children present.

The plan should include simple sketches of the layout of the house indicating alternative methods of escape via the available exits, depending on the supposed locations of the children and possible starting points of, for example, a fire. It should also identify an assembly area outdoors and as far away from the house as possible, where a second count of children should be made (and an alternative area in the event the first area

becomes unsafe); also for homes in a bush environment, a possible place of outside refuge in the event that there was a raging bush fire (e.g. a roadway culvert).

The plan should be clearly displayed at the entrance and exit of the house. All exits need to be kept clear and unlocked to enable a quick departure. Emergency telephone numbers and basic process should be clearly displayed.

An evacuation plan could be used in a number of emergency situations, which as well as fire, may include severe storm damage, electrical problems, intruders, bomb threats and gas leaks.

In conjunction with the evacuation plan, the Educator should determine a safe place inside the house, such as under the kitchen table, to keep children together, for example, during a cyclone when it would not be wise to move outside.

If the building is already evacuated, the building should not be re-entered to use the telephone to call the fire service or any other emergency services. Locate and use another telephone.

If the fire is very small and the Educator has been trained and is confident in the use of fire extinguishers, they may attempt to put the fire out as long as they are in no immediate danger.

Evacuation drills should be held at least twice a year and a record of all drills should be maintained by the Educator. When conducting evacuation drills, alternative exits should be used.

Late/Non Return of Parent

Parents are expected to keep to contracted hours of care. Should parents be unavoidably detained they should notify the Educator as soon as possible.

Should the parent be unable to sign the children out of care at the contracted time or within 10 minutes of the contracted time, they should arrange for another responsible adult to assume care of the child. The parent

needs to advise the Educator of this person and if possible provide information in writing to the Educator prior to the responsible adult assuming care responsibilities.

If the parents have not advised of a delay and 30 minutes has elapsed since the contracted time of cessation of care, the Educator should contact the parents and if no answer, the emergency contact person. If the emergency contact person is unavailable or uncontactable, the Educator will contact the regional coordinator to advise them of the situation and consult on what action to take. Action may include contacting the police to find out if the parent has been involved in an accident.

Any extra time worked should be paid at the rate specified in the Provision of Care Agreement. Educators may agree to accumulate time off in lieu of payment, to be taken at a time of their choosing.

Under no circumstances are children to be left unsupervised.

Health and Hygiene

Educators are required to be fit and capable to perform their duties as well as modelling desirable behaviour and hygiene practices. Educators will adhere to universal hand washing practices to reduce the spread of infections and germs. Educators will ensure that children in care learn the skills they need to follow these practices.

Educators are also required to hold and keep current a first aid certificate, which includes resuscitation techniques (CPR).

The home will strive to provide a clean, healthy environment where hygienic procedures are practiced at all times to minimise the risk of cross-infection. All practices dealing with infectious diseases will respect the rights of individual privacy. The guidelines for preventative measures as outlined in the National Health and Medical Research Council's publication *Staying healthy in child care* 4th edition are the basis for the practice as outlined below.

An Educator who requires regular medication will hold a medical certificate that confirms their ability to care for children.

Parents are encouraged to immunise their child against all diseases appropriate to the age of the child. Educators are encouraged to be immunised as per the recommendations in the *Staying Healthy in Child Care* publication.

Hand Washing

Educators and children should wash and dry their hands thoroughly:

- before handling, preparing and eating food
- before and after nappy changing,
- after toileting or cleaning up bodily fluids (blood, mucus, vomit, urine, faeces etc)
- after playing outside or touching animals
- before and after giving first aid.

Children who have not developed skills such as washing their hands will be physically assisted to do so and encouraged verbally to do so.

Baby wipes or antibacterial gel should be used when no hand washing facilities are available.

Handling Blood and Other Body Substances

Educators should avoid direct contact with blood or other substance and wear gloves whenever possible.

If possible, children should be removed from the area of blood or body fluid spill.

Children with diarrhoea and/or vomiting may need to be isolated from other children and/or excluded from the Educator's care. This needs to be agreed between the parent and the Educator.

Any first aid treatment occurs as a priority with any spills dealt with as soon as possible. Rubber gloves should be worn and using a paper towel remove as much of the spill as possible. In large wet areas such as the bathroom or toilet, it may be possible to wash the spill directly into the sewage system. The Educator should dispose of paper towel and gloves in a plastic bag and place in the bin. Using fresh gloves clean the surface with warm water and detergent and allow to dry. Wash hands thoroughly with soap and warm water.

Children should be encouraged to wipe their own noses and prompted to wash their hands afterwards. A bin should be provided that is easily accessible for children to dispose of tissues independently. With children too young to wipe their own noses, the Educator should wash their hands in warm soapy water after every nose wipe. When this is not possible, disposable gloves should be used.

Nappies

Children should have their nappies changed regularly to ensure health hygiene and comforts are maintained. Educators should use nappy changing as an opportunity to talk and interact. Educators should inform/ask toddlers before checking/changing the nappy, explaining why a change of nappy is needed.

Nappy changing should only occur in a designated area or on a change mat that can be easily cleaned after each use.

The change area should be stocked with nappies and other items required.

When changing nappies, disposable gloves should be worn and the gloves disposed of in a hygienic manner.

If cloth nappies are used, a nappy bucket with close fitting lid is to be used to put the soiled nappies until the laundry is done.

Toileting

Educators should ensure that children are reminded and encouraged to use the toilet, flush the toilet after use, and wash their hands. Educators should explain that washing their hands will stop germs that might make them sick.

If using a potty chair, empty the contents into the toilet and wash the potty with detergent and a scrubbing brush. Do not wash it in a sink used for washing hands.

To encourage independence for those who are able to use the toilet, toilets should always be freely accessible by children without barriers or gates.

The use of surgical-type gloves is recommended when dealing with bodily fluids including blood, vomit, urine and faeces.

Smoking, Drugs and Alcohol

Educator providers will not smoke, consume alcohol or other drugs or be affected by them during the hours children are in their care. At other times the Educator should not personally smoke in the presence of children.

Parents and visitors should refrain from being under the influence of alcohol or other drugs in the environment where child care is being provided.

There will be a smoke free environment for the Educators and children. Smoking is not permitted in the presence of the children or when food is being prepared. This applies to

family members and all visitors, including parents. The Educator should ensure that the children remain in a smoke-free environment on outings and excursions.

To ensure that this policy is adhered to ashtrays, cigarette packets and smoke odours should not be evident. Cigarette butts are extremely toxic to children and should be carefully disposed of out of reach of children.

Sun Safety

Children will wear hats and appropriate clothing when outside and have adequate shade provided by trees, shelter sheds or shade cloth. In untanned skin, exposure to the summer sun between 10 am and 2.30 pm for just thirteen minutes produces mild sunburn.

Educators are required to:

- Increase the amounts of shade where possible, and or ensure that outdoor activities take place before 10am and after 3pm. Children under 12 months will always remain in the dense shade when outdoors.
- Apply sunscreen SPF 30+ broad-spectrum water resistant sunscreen 20 minutes prior to outdoor activity in winter and summer, and reapply after two hours. Check labels on sun screen carefully as most are not recommended for use on children under 12 months. Sunscreen is to be applied in a manner that will minimize cross infection. This can be achieved by the Educator using individual disposable gloves to apply sunscreen or applying sunscreen using individual tissues and allowing older children to apply sunscreen themselves with guidance.

Sun Protection needs to be a specific consideration for excursions.

Parents are encouraged to provide a well fitting hat for use in all outdoor activities. The Queensland Cancer Fund recommends the following hats: 8-10cm broad brim hat or legionnaire style. Ensure children not wearing hats play in shaded areas.

Parents are encouraged to ensure clothing provides adequate protection from UV rays.

The Queensland Cancer Fund recommends dark coloured, closely woven fabric with natural fibres.

Provide ample, easily accessed drinking water for children to prevent dehydration easily when playing outside.

Educators and parents should act as role models by wearing appropriate clothing and hats when outside, using sunscreen, seeking shade when possible.

Dental Health

This Service believes that it is important to establish and reinforce good dental health practices for each child.

Key principles are:

- Baby feeding bottles should not contain sweet drinks.
- Baby feeding bottles should not be used to settle children at rest times.
- Children should not be allowed to wander drinking from bottles as this can cause damage to developing teeth and gums
- Children over 12 months will be encouraged and assisted to drink from cups rather than bottles.
- Sugary snacks and drinks are not encouraged or provided on a daily basis.
- Advice for parents on healthy meals, snacks, and drinks should be available.
- Children should not get sweet foods as rewards for good behaviour.
- Teeth brushing should be encouraged after meals.
- Toothbrushes should never be used by more than one person.

The Educator will liaise with the parents to establish dental health practices that are to be followed whilst the child is in care. The Educator and parents should model the agreed dental health practices.

Children should be encouraged to at least rinse their mouth with water to remove food debris after every meal or snack.

Suggested website:

www.healthinsite.gov.au/topics/Dental_Health_for_Children

Nutrition

Meal and snack times provide opportunities for encouraging positive learning experiences where good nutritional foods and habits are developed.

Allergies and intolerances will be ascertained during the enrolment process. The parents will assist the Educator to learn individual children's likes and dislikes, and any cultural and religious aspects that need to be followed.

In consultation with the parents, the Educator will provide children with balanced meals, and will encourage, but not force, children to:

- Eat plenty of vegetables, legumes and fruits
- Eat plenty of cereals, preferably whole grain
- Include lean meat, fish, poultry and/or alternatives
- Include milk, yogurts, cheeses and/or alternatives
- Choose water as a drink
- Try new tastes and textures

Suggested website:

www.nutritionaustralia.org

Provision of Food

Meal and snack times provide opportunities for children to develop appropriate eating skills and behaviours. The Service supports the parent's choice to provide breast milk for their child and children will be encouraged to drink water as the beverage of choice.

Children will be reminded to follow hygiene practices and wash their hands before any meal or snack.

Children are encouraged to help with the setting of the table, clearing away of their own dishes afterwards and encouraged to serve themselves. Educators will encourage independence at meal and snack times by respecting the child's right to feed themselves.

Meal and snack times will be provided in a relaxed unhurried social environment where interesting conversation is encouraged.

Educators will model and encourage children to follow good meal time behaviour i.e. sitting while eating and drinking, and good hygiene practices when serving food i.e. washing hands, not using utensils that have dropped on the ground etc

Educators are consistent in ensuring children do not share dummies and cutlery used by other children or that have been dropped on the ground. Children will be educated about the necessity of not eating food that has been on the ground.

Food Handling, Preparation and Storage

The practice of safe food handling, safe food storage and good personal hygiene are essential to preventing cross infections and contamination. Children are especially prone to food borne illness, and food poisoning can have very serious outcomes.

Universal hygiene procedures are followed at all times, but especially during the preparation and serving of food.

Key points to observe are:

- Wash and dry hands before commencing.
- Raw and cooked foods should be kept separate and separate utensils should be used for raw and cooked foods.
- Keep food hot (over 60C) or cold (5C or less)
- Heat food only once. Ensure food is cooled before giving to children to eat.
- Rapid heating and cooling is required to prevent bacteria multiplying. Hot food should be placed in the fridge to cool once it has stopped steaming.
- Breast milk shall be stored and used according to the guidelines in the publication Staying Healthy in Child Care.

Suggested websites:

www.foodstandards.gov.au
www.betterhealth.vic.gov.au
www.nhmrc.gov.au

Infectious diseases

Infectious diseases are those that the National Health and Medical Research Council (NHMRC) have identified in the publication Staying Healthy in Child Care.

Details of each child's immunisation status are to be collected at enrolment. Parents may elect not to have their children immunised but it is necessary to have a written record so Educators can take appropriate action, in the event of an outbreak of mumps, rubella, measles, polio, diphtheria, whooping cough etc.

Parents are to inform the Educator of any infectious disease that their child may be suffering. Educators must ensure regional coordinators are informed as the Coordination Unit is responsible for maintaining records in regard to infectious disease. These records include the child's name, age, symptoms, date and time illness was first noticed and any action taken.

Educators are to inform both parents and regional coordinator if they have contracted any infectious disease themselves such as

conjunctivitis, chicken pox, diarrhoea or mumps. Educators should not work during any exclusion period i.e. need to take sick leave.

The parent should care for any children who are suffering from infectious diseases for the recommended exclusion period as per NHMRC guidelines.

Coordination Unit staff and Educators are encouraged to adhere to the immunisation recommendations as outlined in Staying Healthy in Child Care.

A copy of the publication Staying Healthy in Child Care is held by each regional coordinator and can also be accessed on the internet at:

www.nhmrc.gov.au/publications/synopses/ch43syn.htm

Illness and Accidents

In the event of an illness or injury to a child while in care at the home, the Educator can administer first aid. A well-equipped first-aid kit will be maintained for this purpose with emergency phone numbers on hand. Educators will not administer non-prescribed oral medications to any child nor injections. Strict procedures will be adhered to regarding prescribed medication.

First-aid

All Educators must hold a current first-aid certificate and ensure their CPR qualifications are current. In Queensland, this means undertaking CPR refresher training annually.

A fully maintained and equipped first aid kit, of adequate size for the number of children that are being cared for, will be kept on the premises, assessable to the Educator but not to children. A current first aid manual will also be kept with the first aid kit.

A cold pack and ice will be kept in the freezer ready for use in the administering of first aid.

Disposable gloves will be worn when necessary when administering first aid.

An accident/incident record form must be filled out noting: -

- Child's name
- Date and time of accident
- Specific details of the accident or ailment
- Parents contacted
- Treatment and outcome of accident
- Whether first aid kit was used
- Educator signature and witness signature
- Parent's signature confirming knowledge of accident

The completed form is faxed to the regional coordinator and placed on file. The Service is required to keep these forms until the child turns 25 years of age.

Medication

Where a child requires medication, a Medication Authorisation form will first be obtained from the parent/guardian. This form is to be faxed to the regional coordinator.

Only medicines prescribed by a doctor and directed by the doctor to be administered may be given. It is recommended that where possible medication is administered by parents.

All medication will be stored in a safe place. Storage should prevent unsupervised access and damage to medicines e.g. some medicines may require refrigeration.

Medication will only be administered by the Educator if:

- it is a prescribed oral medication
- it is accompanied by written instructions from a medical practitioner stating the time it is to be administered (this can be a pharmacist's label.)
- it is in its original package with a pharmacist's label which clearly states the child's name, dosage, frequency of administration, date of dispensing and expiry date

- the Medication Administration section of form is countersigned by the parent

Once course of medication has been completed, the original of the completed Medication Authorisation form is to be sent by post to the regional coordinator. The Services is required to keep these forms until the child turns 25 years of age in case there are complications arising from the administration of medication.

For children with asthma, parents and Educators are to develop an Asthma Management plan so it is clear what needs to be done during an attack. A copy of the plan is to be faxed to the regional coordinator and placed on file.

For children with known allergies, parents and Educators are to develop an Allergic Reaction Action Plan so it is clear what needs to be done. A copy of the plan is to be faxed to the regional coordinator and placed on file.

Accidents

Where a child is injured:

- First aid procedures are performed where necessary.
- An ambulance is called if necessary.
- A parent is notified as soon as possible.
- Medical treatment is sought if necessary.
- The regional coordinator is notified.
- An Accident/Incident form is completed faxed to the regional coordinator. The Service is required to keep these forms until the child turns 25 years of age.

If the accident or injury necessitates the admission of the child to hospital, the CEO of the appropriate state authority must be notified no later than the next working day of that fact and the circumstance of the injury by the regional coordinator. The regional coordinator is also required to notify the National In Home Care Coordinator immediately and it is the National Coordinator's responsibility to notify the Sponsor.

Parents give permission for the Educator to obtain medical attention if required on the enrolment form. All costs incurred in obtaining medical attention for a child will be met by the parents.

Death

If the tragedy of a child should occur while the child is in care, or of an Educator while the Educator is at the families home, the Coordination Unit will offer support and referral to appropriate agencies to all parties directly involved.

The Educator will:

- Contact the parents
- Contact the police
- Contact the regional coordinator
- Complete an incident form and fax to the regional coordinator

The family will:

- Contact the police
- Contact the regional coordinator

The regional coordinator will ensure the CEO of the appropriate state authority is notified no later than the next working day of the fact and circumstances. The regional coordinator will also inform the National In Home Care Coordinator who will notify the Sponsor and the nearest regional office of the Department of Families, Housing, Community Services and Indigenous Affairs no later than the next working day.

Child Protection – Suspected Abuse

As part of this Service's commitment to protect the security and safety of In Home Care children at all times and in affirmation of the dignity and rights of the child, active measures are in place to prevent the occurrence of child abuse or neglect.

Where abuse or neglect has occurred or is suspected to have occurred, the Coordination Unit will respond to all cases in a manner, which will keep children safe. The Coordination Unit will handle each suspicion and allegation of child abuse or neglect in a confidential manner and support will be offered to all parties involved including the person making the disclosure, the alleged victim and the alleged perpetrator, as appropriate.

Every action relating to a case of suspected child abuse will have the well being of the child as its main concern.

Child Safety is a whole community responsibility. Everyone has a role to play in keeping children and young people safe. Although mandated notifiers have a legal responsibility to notify, everyone has a moral responsibility to report suspected child abuse and neglect. This is the process by which children can be protected from further harm.

Reporting a Disclosure:

Before taking action of any kind, the person must satisfy themselves that they are acting on reasonable grounds and that their motives are genuine.

It is not the role of parents, Educators or the Coordination Unit to investigate allegations beyond confirming the need to report the matter appropriately.

If an Educator is concerned that a child is being abused he/she should firstly discuss their concerns with the regional coordinator who will support them through further action.

The following may be courses of action to be taken:

- Notify the parent/s if applicable
- Notify the relevant State or Territory police service if the disclosure or suspicion involves an offence against a child.
- Notify the relevant State or Territory Department if the disclosure or suspicion indicates that the harm may have been caused by a family member or where parents are not acting to protect their child from harm.
- The Educator is to complete a Child Safety Incident Report form and fax it to the regional coordinator. This form is to be kept confidential, secured appropriately and only accessed on a 'need to know' basis.

Should the alleged perpetrator be the Educator, parents are requested to contact the regional coordinator to advise them of their suspicions and what action if any they have taken. The regional coordinator will provide support as appropriate.

Parents/Educators should contact the Coordination Unit as soon as possible if they have any concerns so there can be a quick response. This should take place at a time of mutual convenience and not within the hearing of other parties or children/young people.

Receiving a Disclosure:

On receiving a disclosure of harm or when there are reasonable grounds for suspicion of harm, the regional coordinator will:

- Make sure the child is safe
- Receive any information in a calm and supportive manner
- Make written notes of any disclosure or suspicion to ensure an accurate record is available for any subsequent action or investigation.

- Ensure the Educator completes a Child Safety Incident Report form and faxes it to the regional coordinator. Recommend the parent completes this form as it will assist any subsequent investigation.

Regional coordinators will notify the National In Home Care Coordinator within 24 hours of receiving any disclosure.

The National In Home Care Coordinator will ensure the Sponsor is kept informed of developments and advise the nearest regional office of the Department of Families, Housing, Community Services and Indigenous Affairs.

All documentation will be kept strictly confidential and any access would be on a 'need to know' basis.

**State offices for Department of Education, Employment and Workplace Relations
Office of Early Childhood (DEEWR)**

Darwin (Territory Office)

2nd and 3rd Floor Jacana House, 39-41 Woods Street, DARWIN NT 0800
PO Box 9880 Darwin NT 0801
Phone: 1-DEEWR (133 397)

Brisbane (State Office)

9th Floor, 215 Adelaide St, BRISBANE QLD 4000
Phone 1-DEEWR (133 397)

Perth (State Office)

12th Floor, QV1 Building, 250 St. Georges Terrace, PERTH WA 6000
Phone: 1-DEEWR (133 397)

State and Territory Departments and Contact Numbers

NT Department of Health and Community Services	1800 700 250
QLD Department of Child Safety	1800 811 810
(After Hours)	1800 177 135
WA Department for Child Protection	1800 622 258
(After Hours)	1800 199 000

State and Territory child protection legislation

QLD	- Child Protection Act 1999
NT	- Community Welfare Act 1983
WA	- Children and Community Services Act 2004

Frontier Services In Home Care Contacts

Coordination Units

Charleville and Districts

PO Box 369 Charleville QLD 4470
Ph (07) 4654 7348
Fax (07) 4654 3570
Mobile 0417 597 991
Email chfdcc@frontierservices.org

North Queensland Remote

PO Box 256
HUGHENDEN QLD 4821
Free call 1800 687 769
Ph (07) 4741 1999
Fax (07) 4741 1335
Mobile 0427 687 769
Email remote.ihc@frontierservices.org

Northern Territory and Western Australia

PO Box 8434
Perth Business Centre WA 6849
Ph (08) 9355 9177
Fax (08) 9355 9179
Mobile 0448 996 195
Email inhomecareperth@frontierservices.org

National In Home Care Coordinator

GPO Box 674 Brisbane, Queensland, 4001
Ph: (07) 3217 7105 Fax: (07) 3871 3460
Email nat.ihc@frontierservices.org