



RICHMOND SHIRE COUNCIL
AGENDA
FOR

ORDINARY MEETING
TUESDAY 15 AUGUST 2023
COMMENCING AT 8:00AM

Richmond Shire Council
Ordinary Meeting of Council 15 August 2023

AGENDA AND TIMETABLE FOR ORDINARY MEETING
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Commencement of Meeting
Signing of Attendance Book
Reading of Official Prayer
Leave of Absence
Confirmation of Minutes
Declarations of Interest
Business Arising from Previous Meetings

- | | |
|--------|---|
| Item 1 | Reports for Consideration – Works |
| Item 2 | Reports for Consideration – Office of the Chief Executive Officer |
| Item 3 | Reports for Consideration – Corporate Services |
| Item 4 | Reports for Consideration – Community Services |
| Item 5 | Reports for Consideration – Tourism and Marketing |
| Item 6 | General Business |
| Item 7 | Close of Meeting |

Attachment “A” Unconfirmed Minutes from the General Meeting held Monday 24 July 2023.
Attachment “B” Unconfirmed Minutes from the Special Budget Meeting held Monday 24 July 2023.

Richmond Shire Council
Ordinary Meeting of Council 15 August 2023

COMMENCEMENT OF MEETING

SIGNING OF ATTENDANCE BOOK

READING OF OFFICIAL PRAYER

LEAVE OF ABSENCE

CONFIRMATION OF MINUTES

- Unconfirmed 24 July 2023 Minutes
- Unconfirmed 24 July 2023 Special Budget Minutes

DECLARATIONS OF INTEREST

MATTERS ARISING FROM PREVIOUS MEETINGS

UNCONFIRMED MINUTES OF THE ORDINARY MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND
ON MONDAY 24 JULY 2023



RICHMOND SHIRE COUNCIL

UNCONFIRMED MINUTES

UNCONFIRMED MINUTES OF THE ORDINARY MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND
ON MONDAY 24 JULY 2023

CONTENTS

	Commencement of Meeting
	Signing of Attendance Book
	Reading of Official Prayer
	Leave of Absence
	Confirmation of Minutes
	Declarations of Interest
	Business arising from previous Meeting
Item 1	Reports for Consideration – Works
Item 2	Reports for Consideration – Office of the Chief Executive Officer
Item 3	Reports for Consideration – Corporate Services
Item 4	Reports for Consideration – Community Services
Item 5	Reports for Consideration – Tourism and Marketing
	Late Reports
	Confidential Reports
Item 6	General Business
Item 7	Close of Meeting

UNCONFIRMED MINUTES OF THE ORDINARY MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND
ON MONDAY 24 JULY 2023

PRESENT

Present when Mayor Wharton declared the meeting open at 10:34am were:

COUNCILLORS:

Cr Wharton, Cr Kuhl, Cr Fox, Cr Kennedy, Cr Buick

Cr Johnston via videoconference

STAFF:

Chief Executive Officer – Peter Bennett, Director of Community Services and Development – Angela Henry, Director of Corporate Services – Peta Mitchell, Director of Works – Syed Qadir and Minutes Secretary Tiana Grant.

PRAYER

Cr Wharton read the prayer

APOLOGIES

Nil

CONFIRMATION OF MINUTES

RESOLUTION 20230724.1

It was moved Cr Kuhl seconded Cr Fox and carried that the Minutes of the General Meeting of the Richmond Shire Council held in the Board Room, Richmond on Tuesday 20 June 2023 be adopted as presented.

DECLARATIONS OF INTEREST

Mayor Cr Wharton called for Declarations of Interest in matters listed on the Agenda:

Item 2.1 Request for Conversion to Freehold Lot 34 B157119 (A601)

I, Councillor Kennedy inform the meeting that I have declared an interest in relation to item 2.1 Request for Conversion to Freehold Lot 34 B157119 (A601), as a result that I am employed by the owners of the land in discussion.

Due to the nature of the item, I will leave the meeting when this item is discussed.

Item 2.2 Horse Paddock Policy

I, Councillor Wharton inform the meeting that I have declared an interest in relation to item 2.2 Horse Paddock Policy, as a result that I hire a horse paddock.

Due to the nature of the item, I will leave the meeting when this item is discussed.

BUSINESS ARISING

Nil

1. REPORTS FOR CONSIDERATION – WORKS

1.1 NEMA Funding – Coalbrook Road

EXECUTIVE SUMMARY

Richmond Shire Council applied for NEMA funding in 2019 to do 2 culverts on the Coalbrook Road, the pricing was not submitted correctly (\$301,620.00) for 2 culverts, but NEMA approved the project. It has been discussed with our regional QRA representative and discussed the options of spending it somewhere else.

OFFICER'S RECOMMENDATION

That Council: accept option two (2) to do multiple concrete pads on various flood ways on Coalbrook Road.

Council discussed the width of the concrete pads and noted they must be at least 8m wide.

RESOLUTION 20230724.2

It was moved Cr Kennedy seconded Cr Buick and carried that Council accept option two (2) to do multiple concrete pads on various flood ways on the Coalbrook Road.

REFERENCE DOCUMENT

- Nil

2. REPORTS FOR CONSIDERATION – OFFICE OF THE CHIEF EXECUTIVE OFFICER

2.1 Request for Conversion to Freehold Lot 34 B157119 (A601)

Attendance

Cr Kennedy declared an interest and left the room at 10:37am.

EXECUTIVE SUMMARY

An application for Conversion to Freehold on Lot 34 B157119 (A601) has been received. The proposed use of the land is grazing.

OFFICER'S RECOMMENDATION

That Council: accept the request for Conversion to Freehold on Lot 34 B157119 for grazing purposes.

RESOLUTION 20230724.3

It was moved Cr Kuhl seconded Cr Fox and carried that Council accept the request for Conversion to Freehold on Lot 34 B157119 for grazing purposes.

Attendance

Cr Kennedy re-entered the room at 10:38am.

REFERENCE DOCUMENT

- Nil

2. REPORTS FOR CONSIDERATION – OFFICE OF THE CHIEF EXECUTIVE OFFICER

2.2 Horse Paddock Policy

Attendance

Cr Wharton declared an interest and left the room at 10:39am.

Cr Kuhl took the chair.

EXECUTIVE SUMMARY

The Horse Paddock Policy was discussed and adopted at the June 2023 Council Meeting; however changes have been required as there were no written Policies regarding the large horse paddocks adjacent to the Racecourse.

OFFICER'S RECOMMENDATION

That Council: adopt the Horse Paddock Policy as presented.

RESOLUTION 20230724.4

It was moved Cr Buick seconded Cr Fox and carried that Council adopt the Horse Paddock Policy as presented.

Attendance

Cr Kennedy left the room at 10:39am.

REFERENCE DOCUMENT

- Policy

3. REPORTS FOR CONSIDERATION – CORPORATE SERVICES

Item 3.1 Monthly Financial Statements

Attendance

Cr Kennedy re-entered the meeting at 10:41am

Cr Wharton re-entered the meeting at 10:42am

Cr Wharton took back the chair

EXECUTIVE SUMMARY

Councils monthly financial report in relation to the 2022/23 adopted budget is presented for consideration, together with the Statement of Comprehensive Income, Statement of Financial Position and Statement of Cash Flow as at 30 June 2023.

OFFICER'S RECOMMENDATION

That Council: receive the monthly financial report presenting the progress made as at 30 June 2023 in relation to the 2022/23 budget and including the:

- ***Statement of Financial Position***
 - ***Statement of Comprehensive Income***
 - ***Statement of Cash Flows***
-

RESOLUTION 20230724.5

It was moved Cr Fox seconded Cr Kuhl and carried that Council receive the monthly financial report presenting the progress made as at 30 June 2023 in relation to the 2022/23 budget and including the:

- *Statement of Financial Position*
- *Statement of Comprehensive Income*
- *Statement of Cash Flows*

REFERENCE DOCUMENT

- Statement of Financial Position
- Statement of Comprehensive Income
- Statement of Cash Flows

3. REPORTS FOR CONSIDERATION – CORPORATE SERVICES

Item 3.2 Operational Plan 2022/2023 June Quarter

EXECUTIVE SUMMARY

As required by Section 174(3) of the *Local Government Regulation 2012*, a progress report on the implementation of Councils 2022/2023 Operational Plan at the end of the June quarter is tabled for Councils consideration.

OFFICER'S RECOMMENDATION

That Council: *receive and note the Quarter 4 progress report of RSC 2022/2023 Operational Plan for the June 2023 reporting period.*

RESOLUTION 20230724.6

It was moved Cr Kuhl seconded Cr Buick and carried that Council receive and note the Quarter 4 progress report of RSC 2022/2023 Operational Plan for the June 2023 reporting period.

REFERENCE DOCUMENT

- Operational Plan 2022/2023 June Quarter

3. REPORTS FOR CONSIDERATION – CORPORATE SERVICES

Item 3.3 Local Government Remuneration Commission

EXECUTIVE SUMMARY

The Local Government Remuneration Commission annual report for 2021-22 has determined the levels of remuneration for mayors, deputy mayors and councillors of Queensland local governments as required by section 177(c) of the *Local Government Act 2009* and Chapter 8, Division 1 of the *Local Government Regulation 2012*.

Richmond Shire Council is a Category 1 Council.

OFFICER'S RECOMMENDATION

That Council: *adopt the remuneration schedule for the Mayor, Deputy Mayor and Councillors as set in the Local Government Commission Report from 1 July 2023.*

RESOLUTION 20230724.7

It was moved Cr Buick seconded Cr Kuhl and carried that Council adopt the remuneration schedule for the Mayor, Deputy Mayor and Councillors as set in the Local Government Commission Report from 1 July 2023.

REFERENCE DOCUMENT

- Local Government Remuneration Commission Report 2022

Attendance

CEO Peter Bennett left the room at 10:47am.

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.1 Bushfire Policy

EXECUTIVE SUMMARY

Council to review and adopt the Bushfire Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Bushfire Policy as presented.

RESOLUTION 20230724.8

It was moved Cr Kuhl seconded Cr Fox and carried that Council adopt the Bushfire Policy as presented.

REFERENCE DOCUMENT

- Policy

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.2 Clothing Policy

EXECUTIVE SUMMARY

Council to review and adopt the Clothing Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Clothing Policy as presented.

RESOLUTION 20230724.9

It was moved Cr Buick seconded Cr Kuhl and carried that Council adopt the Clothing Policy as presented.

REFERENCE DOCUMENT

- Policy

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.3 Hand Washing Policy

EXECUTIVE SUMMARY

Council to review and adopt the Hand Washing Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Hand Washing Policy as presented.

RESOLUTION 20230724.10

It was moved Cr Fox seconded Cr Kuhl and carried that Council adopt the Hand Washing Policy as presented.

REFERENCE DOCUMENT

- Policy

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.4 Medical Conditions Policy

EXECUTIVE SUMMARY

Council to review and adopt the Medical Conditions Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Medical Conditions Policy as presented.

RESOLUTION 20230724.11

It was moved Cr Kennedy seconded Cr Fox and carried that Council adopt the Medical Conditions Policy as presented.

REFERENCE DOCUMENT

- Policy

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.5 Tobacco Drug and Alcohol Free Policy

EXECUTIVE SUMMARY

Council to review and adopt the Tobacco Drug and Alcohol Free Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Tobacco Drug and Alcohol Free Policy as presented.

RESOLUTION 20230724.12

It was moved Cr Buick seconded Cr Fox and carried that Council adopt the Tobacco Drug and Alcohol Free Policy as presented.

REFERENCE DOCUMENT

- Policy

4. REPORTS FOR CONSIDERATION – COMMUNITY SERVICES

4.6 Record Keeping and Retention Policy

EXECUTIVE SUMMARY

Council to review and adopt the Record Keeping and Retention Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Record Keeping and Retention Policy as presented.

RESOLUTION 20230724.13

It was moved Cr Kuhl seconded Cr Buick and carried that Council adopt the Record Keeping and Retention Policy as presented.

REFERENCE DOCUMENT

- Policy

GENERAL BUSINESS

Cr Johnston commended the work of the welcome sign on the Richmond-Croydon Road and requested the welcome sign on the eastern side of town in front of the Service Station be updated. Cr Kennedy suggested a moonrock wall as a statement piece.

DOW Syed Qadir, Cr Kuhl, Cr Johnston and Cr Fox to meet to discuss ideas and bring to a future Council Meeting.

Attendance

CEO Peter Bennett re-entered the room at 10:56am.

Cr Kuhl gave an update on the Director General Mike Kaiser's visit to Richmond last week.

Cr Kuhl gave an update on the Outback Hole-in-One Golf weekend. A very successful weekend, for the visitors and the town. The Richmond Golf Club did a great job of hosting the weekend and there were many compliments from the visitors for our town.

Cr Kennedy asked for an update on the Telstra upgrades to 5G. CEO Peter Bennett advised that the upgrades have now been pushed back to 2025.

Cr Fox advised that the Child Health Nurse will now be contracted until the end of 2023 to visit Richmond once a month for two and a half days.

CEO Peter Bennett and DCS Peta Mitchell gave an update on the road works that Richmond Shire Council were contracted to do by Cloncurry Shire Council. Council made a healthy profit from the job.

UNCONFIRMED MINUTES OF THE ORDINARY MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND
ON MONDAY 24 JULY 2023

CLOSE OF MEETING

RESOLUTION 20230724.14

It was moved Cr Fox, seconded Cr Kuhl, and carried that the information reports be received and noted.

Meeting closure

RESOLUTION 20230724.15

It was moved Cr Johnston, seconded Cr Kuhl and carried that the meeting close at 11:20am.

Next Ordinary Meeting

15 August 2023

I hereby confirm that this is a true and correct record of the minutes of the Richmond Shire Council Ordinary Meeting Monday 24 July 2023.

Mayor

UNCONFIRMED MINUTES OF THE SPECIAL BUDGET MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND ON
MONDAY 24 JULY 2023

PRESENT

Present when the Mayor Cr Wharton declared the meeting open at 11:20am were:

COUNCILLORS:

Cr Wharton, Cr Kuhl, Cr Fox, Cr Kennedy, Cr Buick

Cr Johnston via videoconference

STAFF:

Chief Executive Officer – Peter Bennett, Director of Community Services and Development – Angela Henry, Director of Corporate Services – Peta Mitchell, Director of Works – Syed Qadir and Minutes Secretary – Tiana Grant

APOLOGIES

Nil

MAYORS MESSAGE

I now propose the following Budget Report presented to the Richmond Shire Council at the Special Budget Council Meeting on Monday 24 of July 2023. This budget reflects the Council's core activities of improvements to the existing roads, water and sewerage network while preparing for future investment opportunities. The potential development of the agricultural, energy and mining industries within the Shire provides opportunity to deliver financial sustainability to the Council.

RATES AND CHARGES

Land valuations were completed by the Department of Natural Resources and came into effect on 1st July 2023. The Shire had an overall increase of 163% in valuations since the last valuation. The valuation increases were broken down as follows:

- Residential 22.9%
- Commercial 27.4%
- Industrial 49.4%
- Rural 167.7%

Council has taken the valuation increases into account when considering the increase of rates and charges. The rating categories have been reviewed and adjustments made to the cents in the dollar to offset the valuation increase. A 6% increase in general rates and charges has been adopted for the 2023/2024 budget.

Council has also adopted new water access and excess charges. Council has given all properties a generous water allocation to help with keeping the Shire looking green. A separate bill will be sent out for any excess water charges.

General rates contribute less than 5% to Council's operational budget and highlight an important need for Council to look at other opportunities to deliver financial sustainability.

ROADS AND INFRASTRUCTURE CAPITAL WORKS

Council has adopted a \$20M Road and Infrastructure capital budget. The highlights include:

- Airport – an upgrade to Richmond Airport with a completely new landing strip that would allow for larger planes. This would be fully funded between the State and Federal Government and would cost \$7.5M.

UNCONFIRMED MINUTES OF THE SPECIAL BUDGET MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND ON
MONDAY 24 JULY 2023

- Council has received 4 lots of funding through the Local Roads Community Infrastructure Program, and they include:
 - \$250,000 for the replacement of flood cameras around key roads in the Shire.
 - \$321,410 for rural roads upgrades
 - \$1.421M for stormwater upgrade in the Richmond township. This work will be completed by the end of November 2023.
- \$1M to continue the rehabilitation and guttering to Crawford Street.
- Flood damage work of \$5M from the 2022 flood damage. The 2023 flood damage has not yet been finalised but will be added to the budget once approved.
- A new catwalk to be installed at the Richmond Saleyards.
- \$11M contract from Department of Transport and Main Roads for the sealing of the Winton Road.

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES
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1.1 Advertising Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation an Advertising Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Advertising Policy as presented.

RESOLUTION 20230724.1

It was moved Cr Buick, Seconded Cr Kennedy and carried that Council adopt the Advertising Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES
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1.2 Debt Collection Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Debt Collection Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Debt Collection Policy as presented.

RESOLUTION 20230724.2

It was moved Cr Kuhl, Seconded Cr Fox and carried that Council adopt the Debt Collection Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.3 Revenue Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Revenue Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Revenue Policy as presented.

RESOLUTION 20230724.3

It was moved Cr Johnston, Seconded Cr Buick and carried that Council adopt the Revenue Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.4 Entertainment and Hospitality Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation an Entertainment and Hospitality Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Entertainment and Hospitality Policy as presented.

RESOLUTION 20230724.4

It was moved Cr Buick, Seconded Cr Johnston and carried that Council adopt the Entertainment and Hospitality Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.5 Procurement Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Procurement Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Procurement Policy as presented.

RESOLUTION 20230724.5

It was moved Cr Kuhl, Seconded Cr Fox and carried that Council adopt the Procurement Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.6 Investment Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation an Investment Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Investment Policy as presented.

RESOLUTION 20230724.6

It was moved Cr Kennedy, Seconded Cr Johnston and carried that Council adopt the Investment Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.7 Grants to Community Organisations Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Grants to Community Organisations Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Grants to Community Organisations Policy as presented.

RESOLUTION 20230724.7

It was moved Cr Fox, Seconded Cr Kuhl and carried that Council adopt the Grants to Community Organisations Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.8 Water Usage Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Water Usage Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Water Usage Policy as presented.

RESOLUTION 20230724.8

It was moved Cr Buick, Seconded Cr Kennedy and carried that Council adopt the Water Usage Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.9 Debt Policy

EXECUTIVE SUMMARY

In accordance with the Local Government Act 2009 section 104 Council can include into its budget documentation a Debt Policy.

OFFICER'S RECOMMENDATION

That Council: accept the Debt Policy as presented.

RESOLUTION 20230724.9

It was moved Cr Fox, Seconded Cr Kuhl and carried that Council adopt the Debt Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.10 Hardship Policy

EXECUTIVE SUMMARY

The Queensland Audit Office has recommended that Council publish a hardship policy to assist ratepayers to seek a concession for hardship as allowed by section 120(1) (c) of the *Local Government Regulation 2012*.

This policy is a new policy for Council.

OFFICER'S RECOMMENDATION

That Council: accept the Hardship Policy as presented.

RESOLUTION 20230724.10

It was moved Cr Johnston, Seconded Cr Kuhl and carried that Council adopt the Hardship Policy as presented.

REFERENCE DOCUMENT

- Policy

1. REPORTS FOR CONSIDERATION – FINANCIAL POLICIES

1.11 Revenue Statement

EXECUTIVE SUMMARY

In accordance with the *Local Government Act 2009* section 104 the budget for Council must include a Revenue Statement.

OFFICER'S RECOMMENDATION

That Council: accept the Revenue Statement as presented.

RESOLUTION 20230724.11

It was moved Cr Fox, Seconded Cr Kuhl and carried that Council adopt the Revenue Statement as presented.

REFERENCE DOCUMENT

- Policy

ITEM 2.0 REPORTS FOR CONSIDERATION – FINANCIAL REPORTS

2.1 Budgeted Financial Statements

EXECUTIVE SUMMARY

In accordance with the Local Government Regulation 2012, Council's Budget must be prepared on an accrual basis and be adopted after 31 May but before 01 August for every financial year.

OFFICER'S RECOMMENDATION

***That Council: accept the proposed Budget for 2023/2024 as presented incorporating:
Statement of Comprehensive Income
Statement of Financial Position
Statement of Cash Flows
Statement of Changes in Equity
Operational Revenue and Expenditure Statement***

RESOLUTION 20230724.12

*It was moved Cr Kuhl, Seconded Cr Buick and carried that Council accept the proposed Budget for 2023/2024 as presented incorporating:
Statement of Comprehensive Income
Statement of Financial Position
Statement of Cash Flows
Statement of Changes in Equity
Operational Revenue and Expenditure Statement*

Cr Kuhl requested Council look into the level of services provided, such as frequency of mowing, rubbish removal, etc. and their impact on Council's operational costs.

Cr Fox requested also requested a breakdown of services provided to the Racecourse.

UNCONFIRMED MINUTES OF THE SPECIAL BUDGET MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND ON
MONDAY 24 JULY 2023

It was noted that the Me & My Mum Hub are using Council internet without being charged. Council to look into their Agreement and charge accordingly moving forward.

Attendance

Cr Johnston left the room at 11:53am

Cr Johnston re-entered the room at 11:55am

REFERENCE DOCUMENT

- Statements

ITEM 2.0 REPORTS FOR CONSIDERATION – FINANCIAL REPORTS

2.2 Long Term Financial Forecast

EXECUTIVE SUMMARY

In accordance with the Local Government Regulation 2012, Council's Budget must be prepared on an accrual basis and be adopted after 31 May but before 01 August for every financial year.

OFFICER'S RECOMMENDATION

That Council: accept the proposed Long Term Financial Forecast as presented.

RESOLUTION 20230724.13

It was moved Cr Kennedy, Seconded Cr Buick and carried that Council accept the proposed Long Term Financial Forecast as presented.

REFERENCE DOCUMENT

- Forecast

ITEM 2.0 REPORTS FOR CONSIDERATION – FINANCIAL REPORTS

2.3 Capital Works Budget

EXECUTIVE SUMMARY

In accordance with the Local Government Regulation 2012, Council's Budget must be prepared on an accrual basis and be adopted after 31 May but before 01 August for every financial year.

OFFICER'S RECOMMENDATION

That Council: accept the proposed Capital Works Budget for 2023/2024 as presented.

RESOLUTION 20230724.14

It was moved Cr Kuhl, Seconded Cr Fox and carried that Council accept the proposed Capital Works Budget for 2023/2024 as presented.

REFERENCE DOCUMENT

- 2023/2024 Capital Budget

ITEM 3.0 REPORTS FOR CONSIDERATION – OPERATIONAL PLAN 2023/2024

3.1 Operational Plan

EXECUTIVE SUMMARY

In accordance with section 174(1) of the *Local Government Regulations 2012* Council must adopt an Operational Plan. Section 175 of the *Local Government Regulations 2012* requires that the Operational Plan be consistent with the Council's budget. The proposed 2023/2024 Operational Plan complies with the Regulation's requirements.

OFFICER'S RECOMMENDATION

That Council: accept the proposed Operational Plan for 2023/2024 as presented.

RESOLUTION 20230724.15

It was moved Cr Johnston, Seconded Cr Kennedy and carried that Council accept the proposed Operational Plan for 2023/2024 as presented.

REFERENCE DOCUMENT

- Operational Plan

ITEM 4.0 REPORTS FOR CONSIDERATION – FEES AND CHARGES 2023/2024

4.1 Fees and Charges

EXECUTIVE SUMMARY

In accordance with Section 97 of the Local Government Act 2009 Council may fix a cost recovery fee under a Local Law or by resolution.

OFFICER'S RECOMMENDATION

That Council: accept the proposed Fees and Charges for the 2023-2024 financial year, as presented.

RESOLUTION 20230724.16

It was moved Cr Kuhl, Seconded Cr Fox and carried that Council accept the proposed Fees and Charges for 2023/2024 as presented.

REFERENCE DOCUMENT

- Fees and Charges

General Business

CEO Peter Bennett requested a sub committee be created to discuss councils financial sustainability. It was agreed that CEO Peter Bennett, DCS Peta Mitchell, Cr Wharton and Cr Kuhl would attend all of the meetings and DCSD Angela Henry, DOW Syed Qadir, and the remaining Councillors would attend subcommittee meetings relevant to their portfolio.

UNCONFIRMED MINUTES OF THE SPECIAL BUDGET MEETING
OF THE RICHMOND SHIRE COUNCIL HELD IN THE BOARD ROOM, RICHMOND ON
MONDAY 24 JULY 2023

CLOSE OF MEETING

RESOLUTION 20230724.17

It was moved Cr Fox, seconded Cr Kennedy and carried that the reports be noted.

RESOLUTION 20230724.18

It was moved Cr Fox, seconded Cr Kuhl and carried that the meeting close at 12:19pm.

I hereby confirm that this is a true and correct record of the minutes of the Richmond Shire Council Special Budget Meeting Monday 24 July 2023.

Mayor

Item 1. Reports for Consideration – Works

Item 1.1 Proposal to Close the Traffic Entrance to Lake Fred Tritton Park

EXECUTIVE SUMMARY

It is proposed that Council close the traffic entrance to Lake Fred Tritton Park so vehicles do not enter the area, making it safe for the public and reducing the multiple tracks formed by vehicles coming in from all directions.

OFFICER'S RECOMMENDATION

That Council: provide further comment.

Budget & Resource Implications

N/A

Background

See below plans.



Consultation (Internal/External)

Nil

Attachments

Nil

Report prepared by **Syed Qadir (Director of Works)**

Item 1.2 National Animal Desexing Month – Request to Provide a Subsidy

EXECUTIVE SUMMARY

National Desexing Network are running a campaign to provide a discount on animal desexing and have requested Richmond Shire Council to add a further subsidy.

OFFICER'S RECOMMENDATION

That Council: decide on a percentage of subsidy that Council can provide, if any.

Budget & Resource Implications

Council to decide.

Background

National Desexing Network are running a campaign to provide a discount on animal desexing, and they have requested that the Council can add a further subsidy to their campaign.

Councils Local Laws Officer believes it would be of great help to further subsidise as the animals around town that are not desexed are owned by people who are under some kind of financial stress.

The expected numbers are up to 10 in the Richmond Shire.

Spaying: \$300.00 excluding a discount provided by the company of \$50.

Neutering: \$110.00 excluding a discount provided by the company of \$50.

Consultation (Internal/External)

Internal: Local Laws Officer – Phillip Kennedy

Attachments

Nil

Report prepared by **Syed Qadir (Director of Works)**

Item 1.3 Proposal – Town Entrance Upgrade on Eastern Side of Richmond

EXECUTIVE SUMMARY

The attached upgrade proposal will include a new “Richmond” sign and adding Moonrocks and new plantation behind the signage.

The size and type of sign agreed on will determine the price of the project. Multiple quotations will be provided at the September Council Meeting.

OFFICER’S RECOMMENDATION

That Council: provide further instructions.

Budget & Resource Implications

Approx \$20,000.00

Background



Consultation (Internal/External)

Internal: Richmond Shire Council Councillors and Staff.

Attachments

Nil

Report prepared by **Syed Qadir (Director of Works)**

Item 2. Reports for Consideration – Office of the Chief Executive Officer

Item 2.1 Rural Fence Subsidy Policy

EXECUTIVE SUMMARY

The Rural Fence Subsidy Policy is due to be reviewed for 2023.

OFFICER'S RECOMMENDATION

That Council: adopt the Rural Fence Subsidy Policy as presented.

Budget & Resource Implications

N/A

Background

The Rural Fence Subsidy Policy has had one minor change under Procedure, section 12. The word “residential” has been added in.

Consultation (Internal/External)

Internal: Director of Corporate Services – Peta Mitchell

Attachments

Attachment C - Policy

Report prepared by **Tiana Grant (Executive Assistant)**



COUNCIL POLICY

POLICY TITLE:	RURAL FENCE SUBSIDY SCHEME
POLICY NUMBER:	018
INFOPERT REF:	56154
DATE OF ADOPTION:	26 April 2006
TIME PERIOD OF REVIEW:	Annual
DATE OF NEXT REVIEW:	July 2023

OBJECTIVES:

To encourage rural property owners that adjoin town commons/crown reserves/designated road reserves, for which Council is trustee, to fence the boundary line.

RELEVANT LEGISLATION:

Local Government Act 2009
Neighbourhood Disputes Resolution Act 2011
Land Act 1994

ASSOCIATED POLICIES / FORMS:

- Grid Application
- 082 – Gates and Grids Policy

DEFINITIONS:

Adjoining owner	means the registered owner, lessee or trustee of rural land adjoining a crown reserve for which Council is the trustee.
Adjoining lands	refers any land adjoining a town common/crown reserve/designated road reserves for which Council is the trustee.
Dividing fence	means a fence separating the adjoining lands of different owners
Fence	means a structure of posts and rails, galvanised iron, metal, or wire, or a combination of any of these, enclosing or bounding land.

PROCEDURE:

1. An adjoining owner may apply in writing to the Council for a fence subsidy for the erection of new fencing along the boundary line adjoining a town common or crown reserve or enclosing a designated road reserve for which Council is the trustee. The application must specify the location of the fence and length. The claim may be for all or part of fencing along the boundary line.
2. The adjoining owner will be responsible for the removal or burial of any old fencing materials.
3. Upon satisfactory inspection Council will contribute a fence subsidy of \$1,000.00 per kilometre (inclusive of GST).
4. Council will grant approval of an application received where a road corridor is being fully fenced and grid removal on a local road by Council. This will only be backdated to 01 July 2018. This is only accepted on the below roads:
 - Richmond-Croydon Road
5. Council will approve up to 100km of fence subsidy per financial year within the Shire.
6. Specifications required:
 - A minimum of three barb fencing only, no more than 12mm spacings and there must not have been a fence before
 - Will be assessed by the Rural Lands Officer on completion for approval
 - Will need to meet Department of Transport and Main Roads standards
 - Needs to be 30m from the centre line of the road
 - The fence must be new and constructed from 2018 onwards. (Any fence prior to 2018 is not eligible)
7. Enclosing Road Corridor
 - Where the road is fenced on both sides of the road
 - Council will only pay for one side if it adjoins a property border
 - Where the road goes through the middle of a property Council will pay the subsidy on both sides of the road
8. Maintenance of the fencing will be of the landowner
9. If a landowner fences both sides of a road the grids within these sections will be removed by Council
10. Council may refuse payment of the subsidy if the site is not to Council's satisfaction.
11. An adjoining owner may not apply for the fence subsidy scheme where a claim for that part of fencing has already been made.
12. This subsidy is not available to residential and urban landholders.

IMPLEMENTATION:

This Policy will commence from the Approval Date. This Policy replaces all other Rural Fence Subsidy Policies of Richmond Shire Council (whether written or not).

This Policy will be made available to all corporate staff on Council's Records Management System, and to all outdoor staff at the Depot and via their supervisor/coordinator. Council reserves the right to vary, replace or terminate this Policy from time to time. This Policy will typically be reviewed when a review has been deemed appropriate by organisational processes (e.g. audit recommendations), or when legislative requirements change.

APPROVAL:

Policy Reviewed: General Council Meeting 19 April 2023
Resolution Number: 20230419.2

Policy Authorised: Peter Bennett
Chief Executive Officer

Item 2.2 Uniform Policy

EXECUTIVE SUMMARY

Council have requested that the Uniform Policy be added to the Agenda for discussion.

OFFICER'S RECOMMENDATION

That Council: adopt the Uniform Policy with changes.

Budget & Resource Implications

N/A

Background

Nil

Consultation (Internal/External)

Nil

Attachments

Attachment D - Policy

Report prepared by **Tiana Grant (Executive Assistant)**



COUNCIL POLICY

POLICY TITLE:	UNIFORM POLICY
POLICY NUMBER:	010
INFOXPRT REF:	76293
DATE OF ADOPTION:	27 June 2016
TIME PERIOD OF REVIEW	1 Year
DATE OF NEXT REVIEW:	June 2024

1. OBJECTIVE

To provide a corporate uniform including personal protective equipment that clearly identifies staff as Richmond Shire Council employees.

2. SCOPE

This policy will apply to all employees (including casuals) of the Richmond Shire Council.

A full uniform allowance will be supplied after a successful three (3) month probation period. Uniforms may be supplied in advance provided that the form from Stores is completed by the staff member undertaking to reimburse Council, by way of payroll deduction, for the cost of the uniforms in the event that their position is terminated for any reason.

For the outside workforce Council will supply three Richmond Shire Council shirts with the logo which will then come out of their annual allowance. If the Employee leaves before the probation period, Council will invoice the individual.

Employees who leave the employment of Council should hand in all PPE and all uniforms supplied.

It is a requirement that all employees (including casuals) uniforms are presentable at all times, ironed and not stained.

3. OUTDOOR WORKFORCE

PROTECTIVE CLOTHING

Personal Protective Equipment (PPE) includes clothing and/or equipment designed to be worn by a person and to protect the person from risks of injury or illness. Hazards of a general nature are those hazards that could normally be expected to occur at a workplace in the building and construction industry and may or may not be related to the performance of any particular task or activity.

In order that Council meets its WH&S Obligations in this regard the following Protective Clothing Policy applies to employees in, or associated with the Works & Services Department:

Skin Protection

Council shall make an initial issue to non-probationary employees:

- five (5) high visibility, UV protective, long sleeve orange work shirts per annum with council logo;
- one (1) high visibility hoodie jumper with council logo, replaceable as no more than 1 per year;
- one (1) high visibility cold weather coat every three years with council logo;
- one (1) pair of sunglasses;
- five (5) pair of long work trousers to the value of \$228.00 – (may substitute for 5 pair of jeans to the same value as the long trousers) per annum with council logo **or**
- five (5) pair of work shorts per annum to the value of \$198.00 - with council logo
- one (1) broad brim orange hat per annum with council logo
- one (1) water bottle
- Sunscreen - Orders to be placed with the Store person.

***Please note that rugby shorts, board shorts or tracksuit pants are not suitable work wear and as such are not to be worn on Council work sites. If you wish to wear jeans, they must not be cut off shorter than below the knee.**

Employees must consider their exposure to UV radiation when performing work tasks and are strongly advised to wear broad brimmed hats. Any hat deemed as not providing adequate UV protection by Council will not be permitted on Council work sites.

When working on Main Roads, Council employees will be required to wear long sleeve shirts and bucket hats.

All employees who do not have an orange shirt must wear a high visibility Safety Vest when exposed to traffic or construction work areas.

Council supplies shirts as Protective Clothing, not a free wardrobe. Council work shirts are **NOT** to be worn on non-workdays, nor are they to be worn when performing outside work in other workplaces.

How to order trousers

Council's Stores carry trousers, if the correct trousers are not on hand, then the Stores will raise the order on their behalf. If jeans are substituted for the long pants, they will need to have the council logo embroidered onto the pants.

Replacement

Council will replace shirts upon production of old shirt to the Store person. The cold weather coat must be retained for a minimum of three years before replacement will be considered. Lost shirts or coats must be replaced at the employee's own expense. It is at Council discretion for replacement on uniforms due to excessive wear in certain positions.

Extra clothing

Employees may order additional uniforms at their own expense. Orders to be placed with the Store person.

Foot Protection

All outdoor employees are required to supply and wear safety boots that comply with AS 2210.2, Type 1, at all times. Boots that are worn or damaged and can no longer comply with the above Standard are to be replaced by the employee.

After completing the three (3) month probation period, employees will be eligible for reimbursement of their boots up to the value of \$220.00 (inc GST).

Council shall supply Safety Gum Boots (steel cap) to employees as required.

4. ADMINISTRATION/LIBRARY – CORPORATE WARDROBE

Council has chosen to adopt the industry wide Corporate Uniform developed for Local Government and registered by Local Buy with the Australian Taxation Office.

This allows administration and library staff to claim uniform expenses as a tax deduction, both for purchase and laundry. Employees should refer to the applicable taxation legislation for current details and/or amounts for deduction.

The wardrobe

Council will enter into arrangements with Local Buy to act on Council's behalf for registration of corporate apparel with the Textile Clothing and Footwear Development Authority.

Corporate Wardrobe catalogues and order forms are available from the Director of Corporate Services.

The wardrobe should consist of office attire including navy or black trousers (including ½ pants) or skirts with plain or printed blouses and a blazer or cardigan for winter.

Footwear will be of a smart/casual nature, and preferably enclosed for safety purposes.

Thong type shoes are not acceptable footwear.

Employees will be eligible to order uniforms after a three (3) month probationary period. Employees on a maximum term contract will be able to order uniforms if the contract is 12 months or more.

During the probationary period, new staff members are expected to dress in a smart/casual manner, appropriate to the office environment.

Friday's are for casual wear which is the "You'll Dig Richmond" T-Shirt supplied and jeans, corporate pants or skirts. The cost of the "You'll Dig Richmond" T-Shirt will be deducted from the allowance.

The wardrobe subsidy

For the financial year, Council will pay the first \$635.16 (inclusive of GST) per annum for corporate uniform purchases for full time employees, pro rata for part time employment, with the balance being paid by the employee. Council's contribution may be revised each financial year and increased by CCI (2023 CCI – 6.9%).

5. CLEANING STAFF

Are eligible for supply of:

- Five (5) shirts;
- Any personal protective equipment required to complete their duties
- Enclosed shoes are required for safety purposes and reimbursement of the cost will be provided in accordance with Council's boot allowance in the Certified Collective Workplace Agreement.

6. OUTSIDE SCHOOL HOURS CARE

Council will contribute to a fun and vibrant uniform for OSHC staff by way of reimbursement of up to \$400.00 per annum.

One (1) winter jacket every five (5) years embroidered with Richmond Shire Council logo.

Enclosed shoes are required for safety purposes and reimbursement of the cost will be provided in accordance with Council's boot allowance in the Certified Collective Workplace Agreement.

7. RICHMOND AGED CARE SERVICE

Council will supply five (5) polo shirts with RAC logo and five (5) black shorts/pants with Richmond Shire Council logo to all RAC staff (including casuals).

One (1) winter jacket every five (5) years embroidered with Richmond Shire Council logo.

Enclosed shoes are required for safety purposes and reimbursement of the cost will be provided in accordance with Council's boot allowance in the Certified Collective Workplace Agreement. The shoes will be required to encase the entire foot, including the upper section of the foot; the shoe is to have a stout sole and firm uppers; and, the shoe is to have sturdy low heels with slip resistant soles

Shoes specific for wet areas will also be supplied by the Richmond Aged Care Service as required.

Safety equipment will also be provided to the Richmond Aged Care Service employees as determined by the RAC Co-ordinator.

8. ORDERING/REIMBURSEMENT

Council will pay all invoices for uniforms with orders in excess of the yearly allocation per employee billed through Council's Debtors System to the respective employee, at the conclusion of each financial year.

Orders for all uniforms will be co-ordinated by the Store person for outdoor staff and all other orders by the Director of Corporate Services.

Reimbursement will be co-ordinated through creditors and will be subject to the production of an original tax invoice from a registered business.

9. REFERENCES

Workplace Health & Safety Act 2011
Workplace Health & Safety Regulations 2011

To be read in conjunction with:

Richmond Shire Council's Signed Certified Agreement 2018 (EBA).

10. IMPLEMENTATION

This Policy will commence from the Approval Date (see Section 11). This Policy replaces all other Policies and Procedures of Richmond Shire Council (whether written or not).

This Policy will be made available to all corporate staff on Council's intranet site/network, and to all outdoor staff at the Depot and via their supervisor/coordinator. Council reserves the right to vary, replace or terminate this Policy from time to time. This Policy will typically be reviewed when a review has been deemed appropriate by organisational processes (e.g. audit recommendations), or when legislative requirements change.

11. APPROVAL

Policy Reviewed: General Council Meeting 20 June 2023
Resolution Number: 20230620.7

Policy Authorised: Peter Bennett
Chief Executive Officer

Item 3 Reports for Consideration – Corporate Services

Item 3.1 Monthly Financial Statements

EXECUTIVE SUMMARY

Council's monthly financial report in relation to the 2023/24 adopted budget is presented for consideration, together with the Statement of Comprehensive Income, Statement of Financial Position and Statement of Cash Flow as at 31 July 2023.

OFFICER'S RECOMMENDATION

That Council: receive the monthly financial report presenting the progress made as at 31 July 2023 in relation to the 2023/24 budget and including the:

- **Statement of Financial Position**
- **Statement of Comprehensive Income**
- **Statement of Cash Flows**

Budget & Resource Implications

N/A

Background

This report provides information on actual versus amended budget performance, including a rates and charges revenue overview, and an update on Council cash, investments, and borrowings.

See attached Statements for more information.

Consultation (Internal/External)

Nil

Attachments

Attachment E –

- Statement of Financial Position
- Statement of Comprehensive Income
- Statement of Cash Flows

Report prepared by **Peta Mitchell (Director of Corporate Services)**

Richmond Shire Council
Statement of Comprehensive Income
as at 31 July 2023

	2024 Actuals \$	2024 Budget \$	2023 Actuals \$	Budget Variance %
Income				
Revenue				
Recurrent revenue				
Rates, levies and charges	(84)	2,049,395	-	0.00%
Fees and charges	113,143	1,070,250	78,217	10.57%
Sales revenue	818,455	11,678,651	28,095	7.01%
Grants, subsidies, contributions and donations	201,132	8,859,300	94,626	2.27%
	<u>1,132,646</u>	<u>23,657,596</u>	<u>200,938</u>	<u>4.79%</u>
Capital revenue				
Grants, subsidies, contributions and donations	412,000	19,979,690	333,870	2.06%
Total capital revenue	<u>412,000</u>	<u>19,979,690</u>	<u>333,870</u>	<u>2.06%</u>
Rental income	11,925	172,800	13,662	6.90%
Interest received	1,842	175,000	6,206	1.05%
Other income	1,446	361,271	10,763	0.40%
	<u>15,214</u>	<u>709,071</u>	<u>30,631</u>	<u>2.15%</u>
Total income	<u>1,559,859</u>	<u>44,346,357</u>	<u>565,438</u>	<u>3.52%</u>
Expenses				
Recurrent expenses				
Employee benefits	(444,094)	(8,705,297)	(510,665)	5.10%
Materials and services	(673,678)	(10,710,064)	(2,315,153)	6.29%
Finance costs	(716)	(651,100)	(2,003)	0.11%
Depreciation and amortisation				
Property, Plant and Equipment	-	(5,190,100)	(421,115)	0.00%
	<u>(1,118,488)</u>	<u>(25,256,561)</u>	<u>(3,248,936)</u>	<u>4.43%</u>
Capital expenses				
Loss on disposal of non-current assets	619,001	619,000	200	
Write off of flood damaged roads			-	
	<u>619,001</u>	<u>619,000</u>	<u>200</u>	<u>100.00%</u>
Total expenses	<u>(499,487)</u>	<u>(24,637,561)</u>	<u>(3,248,736)</u>	<u>2.03%</u>
Net result	<u>1,060,372</u>	<u>19,708,796</u>	<u>(2,683,298)</u>	<u>5.38%</u>
Other comprehensive income				
Items that will not be reclassified to net result				
Increase in asset revaluation surplus			-	0.00%
Total other comprehensive income for the year	<u>-</u>	<u>-</u>	<u>-</u>	<u>0.00%</u>
Total comprehensive income for the year	<u>1,060,372</u>	<u>19,708,796</u>	<u>(2,683,298)</u>	<u>5.38%</u>

Richmond Shire Council
Statement of Financial Position
as at 31 July 2023

	2024 Actuals	2024 Budget	2023 Actuals	Budget Variance
	\$	\$	\$	%
Current assets				
Cash and cash equivalents	9,793,662	11,864,346	8,100,155	82.55%
Trade and other receivables	1,461,391	1,624,500	2,340,266	89.96%
Inventories	381,572	450,000	371,299	84.79%
Land for Resale	126,000	126,000	126,000	100.00%
Contract assets	1,192,593	1,500,000	-	79.51%
Other assets	168,065	155,000	34,760	108.43%
Total current assets	13,123,283	15,719,846	10,972,479	83.48%
Non-current assets				
Property, plant and equipment	229,049,678	272,752,146	209,333,940	83.98%
Intangible assets	-	-	112,619	0.00%
Capital Work in Progress	9,906,315	-	3,999,758	0.00%
Total non-current assets	238,955,993	272,752,146	213,446,317	87.61%
Total assets	252,079,275	288,471,992	224,418,796	87.38%
Current liabilities				
Trade and other payables	684,527	1,161,000	1,807,260	58.96%
Contract liabilities	1,939,232	1,750,000	-	110.81%
Borrowings	579,634	636,000	4,031	91.14%
Provisions	1,381,668	1,520,000	1,353,731	90.90%
Total current liabilities	4,585,061	5,067,000	3,165,021	90.49%
Non-current liabilities				
Provisions	237,602	305,000	201,108	77.90%
Borrowings	1,676,680	1,640,313	2,813,854	102.22%
Total non-current liabilities	1,914,282	1,945,313	3,014,962	98.40%
Total liabilities	6,499,343	7,012,313	6,179,983	92.68%
Net community assets	245,579,932	281,459,679	218,238,814	87.25%
Community equity				
Asset revaluation surplus	126,221,696	142,551,479	103,428,227	88.54%
Operating surplus	1,060,372	19,708,796	(2,683,298)	5.38%
Retained surplus	118,297,865	119,199,404	117,493,884	99.24%
Total community equity	245,579,932	281,459,679	218,238,814	87.25%

**Richmond Shire Council
Statement of Cash Flows
as at 31 July 2023**

	2024 Actuals	2024 Budget	2023 Actuals	Budget Variance
	\$	\$	\$	%
Cash flows from operating activities				
Receipts from customers	1,029,591	15,159,567	117,075	6.79%
Payments to suppliers and employees	(2,093,827)	(20,953,606)	(2,243,490)	9.99%
	(1,064,237)	(5,794,039)	(2,126,415)	18.37%
Interest received	1,842	175,000	6,206	1.05%
Rental income	11,925	172,800	13,662	6.90%
Grants, subsidies, contributions and donations - non-capital	201,132	8,859,300	94,626	2.27%
Finance/Borrowing costs	(716)	(651,100)	(2,003)	0.11%
Net cash inflow (outflow) from operating activities	(850,054)	2,761,961	(2,013,924)	-30.78%
Cash flows from investing activities				
Payments for property, plant and equipment	(71,082)	(20,059,340)	(326,524)	0.35%
Net movement in loans and advances	-	-	-	0.00%
Proceeds from sale of property plant and equipment	619,001	619,000	-	100.00%
Grants, subsidies, contributions and donations - capital	412,000	19,979,690	333,870	2.06%
Net cash inflow (outflow) from investing activities	959,919	539,350	7,345	177.98%
Cash flows from financing activities				
Proceeds from borrowings	-	-	-	0.00%
Repayment of borrowings	-	(636,965)	-	0.00%
Net cash (outflow) from financing activities	-	(636,965)	-	0.00%
Net increase in cash and cash equivalent held	109,865	2,664,346	(2,006,579)	4.12%
Cash and cash equivalents at the beginning of the financial year	9,683,797	9,200,000	10,106,734	105.26%
Cash and cash equivalents at end of the financial year	9,793,662	11,864,346	8,100,155	82.55%

Item 4. Reports for Consideration – Community Services

Item 4.1 Regional Arts Development Fund

EXECUTIVE SUMMARY

The 2023/2024 Regional Arts Development Funding is to be discussed.

OFFICER'S RECOMMENDATION

That Council: approves an allocation of \$12,000.00 for Branches in 2024 and allocates the balance of the RADF Fund for Storyboard and display options for Stage 3 of the Cambridge Shed showcasing the Industries that built the Shire.

Budget & Resource Implications

\$1,700.00.

Background

Surplus funds from previous years rolled over for use in 2023-24: \$18,033.66.

Applications under RADF have been dwindling in recent years. Branches Performing Arts is the only "Local" facilitator to regularly access the funding.

It has been a number of years since Council has facilitated a Council Strategic Initiative. I would like to see Council access the balance of RADF Funding to start the process of Storyboards for Stage 3 of the Cambridge Heritage Display Precinct.

Council is expecting \$17,000.00 from Arts Qld for the 2023/24 allocation with a co-contribution of \$1,700.00 required from Council making the total fund valued at \$36,733.66.

It is anticipated that Branches Performing Arts will request \$12,000 for Dance in 2024.

Consultation (Internal/External)

Nil

Attachments

Nil

Report prepared by **Angela Henry (Director of Community Services and Development)**

Item 4.2 Sport and Recreation Minor Infrastructure Grant

EXECUTIVE SUMMARY

Request for Council to discuss the Sport and Recreation Minor Infrastructure Grant Round 2.

OFFICER'S RECOMMENDATION

That Council: provide a co-contribution of 20% of the application (Approx. \$25,000.00)

Budget & Resource Implications

Approx \$25,000.00.

Background

Sport and Rec are opening Round 2 in September (four months early). Council will be required to contribute 20% of the funding application for the Lighting Upgrade.

Consultation (Internal/External)

Nil

Attachments

Nil

Report prepared by **Angela Henry (Director of Community Services and Development)**

Item 4.3 Anaphylaxis Management Policy

EXECUTIVE SUMMARY

Council to review and adopt the Anaphylaxis Management Policy with changes.

OFFICER'S RECOMMENDATION

That Council: adopt the Anaphylaxis Management Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment F - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

ANAPHYLAXIS MANAGEMENT POLICY

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions including anaphylaxis. Anaphylaxis is a severe and sometimes sudden allergic reaction which is potentially life threatening. It can occur when a person is exposed to an allergen (such as food or an insect sting). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis should always be treated as a medical emergency, requiring immediate treatment. Most cases of anaphylaxis occur after a person is exposed to the allergen to which they are allergic, usually a food, insect sting or medication. Any anaphylactic reaction always requires an emergency response.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents

92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
173(2)(h)	Prescribed information to be displayed- a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Enrolment Policy Family Communication Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Privacy and Confidentiality Policy Supervision Policy
--	--

PURPOSE

We aim to minimise the risk of an anaphylactic reaction occurring at our Out of School Hours Care (OSHC) Service by following our *Anaphylaxis Management Policy* and implementing risk minimisation strategies. We ensure all staff members are adequately trained to respond appropriately and competently to an anaphylactic reaction.

SCOPE

This policy applies to children, families, staff, management, the approved provider, nominated supervisor, students and visitors of the OSHC Service.

DUTY OF CARE

Our Service has a legal responsibility to take reasonable steps to provide

- a. a safe environment for children free of foreseeable harm and
- b. adequate Supervision of children

Our focus is keeping children safe and promoting the health, safety and wellbeing of children attending our OSHC Service. Staff members including relief staff need to be aware of children at the OSHC Service who suffer from allergies that may cause an anaphylactic reaction. Management will ensure all staff are aware of the location of children's **Australasian Society of Clinical Immunology and Allergy (ASCI) Action Plans**, risk minimisation plan and required medication.

BACKGROUND

Anaphylaxis is a severe, rapidly progressing allergic reaction that is potentially life threatening.

The most common allergens in children are:

- Peanuts
- Eggs
- Tree nuts (e.g., cashews)
- Cow's milk
- Fish and shellfish
- Wheat
- Soy
- Sesame
- Certain insect stings (particularly bee stings)

Signs of anaphylaxis (severe allergic reaction) include any 1 of the following:

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking/and or a hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- pale and floppy (young children)
- abdominal pain and/or vomiting (signs of a severe allergic reaction to insects)

The key to the prevention of anaphylaxis and response to anaphylaxis within the Out of School Hours Care Service is awareness and knowledge of those children who have been diagnosed as at risk, awareness of allergens, and the implementation of preventative measures to minimise the risk of exposure to those allergens. It is important to note however, that despite implementing these measures, the possibility of exposure cannot be completely eliminated. Communication between the OSHC Service and families is vital in understanding the risks and helping children avoid exposure.

Adrenaline given through an adrenaline autoinjector (such as an EpiPen® or Anapen®) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Children at risk of anaphylaxis will not be enrolled into the OSHC Service until the child's personal ASCIA Action Plan is completed and signed by their medical practitioner. A risk minimisation and communication plan must be developed with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

The [ASCIA Action Plans](#) meet the requirements of regulation 90 as a medical management plan. It is imperative that all educators and volunteers at the Service follow a child's [ASCIA Action Plan](#) in the event of an incident related to a child's specific health care need, allergy, or medical condition.

The OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs, including having families provide written permission to display the child's [ASCIA Action Plan](#) in prominent positions within the Service.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL ENSURE:

- that as part of the enrolment process, all parents/guardians are asked whether their child has been diagnosed as being at risk of anaphylaxis or has severe allergies and clearly document this information on the child's enrolment record
- if the answer is yes, the parents/guardians are required to provide an [ASCIA Action Plan](#) signed by a registered medical practitioner prior to their child's commencement at the Service
- parents/guardians of an enrolled child who is diagnosed with anaphylaxis are provided with a copy of the *Anaphylaxis Management Policy, Medical Conditions Policy and Administration of Medication Policy*

- that all staff members have completed ACECQA approved first aid training at least every 3 years and this is recorded with each staff member's certificate held on the Service's premises
- at least one educator or nominated supervisor with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA) is in attendance at all times education and care is provided by the Service
- that staff are provided with ASCIA anaphylaxis e-training (every two years) to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis including training in the administration of the adrenaline auto-injection device (not mandated, but recommended as best practice)
- all staff have undertaken training in administration of the adrenaline auto injection device and cardiopulmonary resuscitation (CPR) at least every 12 months
- staff responsible for preparing, serving and supervising food for children with food allergies should undertake the National Allergy Strategy All about Allergens for CEC online food allergen management training/ or similar
- that all staff members are aware of
 - any child at risk of anaphylaxis enrolled in the service
 - the child's individual ASCIA Action Plan
 - symptoms and recommended immediate action for anaphylaxis and allergic reactions and,
 - the location of their EpiPen® / Anapen® device
- that a copy of this policy is provided and reviewed during each new staff member's induction process
- that updated information, resources, and support for managing allergies and anaphylaxis are regularly provided for families
- anaphylaxis risk management plans are developed prior to any excursion or incursion consistent with Regulation 101
- ensure that at least one general use adrenaline injector is available at the Service in case of an emergency- Regulation 89. First Aid Kits [National Allergy Strategy best practice]

MANAGEMENT STRATEGIES WHERE A SCHOOL AGED CHILD IS DIAGNOSED AT RISK OF ANAPHYLAXIS. THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- meet with the parents/guardians to begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until an ASCIA Action Plan is provided by the family and signed by a medical practitioner is provided

- develop and document a risk minimisation plan in collaboration with parents/guardian, by assessing the potential for accidental exposure to allergens while the child at risk of anaphylaxis is in the care of the Service (particular attention should be given to mealtimes as this is a significant risk for children with food allergies)
- ensure the ASCIA Action Plan includes:
 - specific details of the child’s diagnosed medical condition
 - supporting documentation (if required)
 - a recent photo of the child
 - triggers for the allergy/anaphylaxis (signs and symptoms)
 - first aid/emergency action that will be required
 - administration of adrenaline autoinjectors
 - contact details and signature of the registered medical practitioner
 - date the plan should be reviewed
- ensure that a child who has been prescribed an adrenaline auto-injection device is **not** permitted to attend the OSHC Service without a complete auto-injection device kit (which must contain a copy the child’s anaphylaxis medical management plan)
- ensure that all staff in the Service know the location of the auto-injection device kit
- collaborate with parents/guardians to develop and implement a communication plan and encourage ongoing communication regarding the status of the child’s allergies, this policy, and its implementation
- request parental permission to display a child’s ASCIA Action Plan in key locations at the OSHC Service, for example, in the main area of the OSHC service, near the kitchen, and / or near the medication cabinet
- ensure action plans are easily accessible to educators and other staff if privacy is a concern
- display ASCIA First Aid Plan for Anaphylaxis (ORANGE) in key locations in the OSHC Service
- ensure that all staff responsible for the preparation of food are trained in managing the provision of meals for a child with allergies, including high levels of care in preventing cross contamination during storage, handling, preparation, and serving of food. Training will also be given in planning appropriate menus including identifying written and hidden sources of food allergens on food labels
- ensure supervision s managed consistently across mealtimes to maintain effective risk minimisation strategies
- ensure that a notice is displayed prominently in the main entrance of the OSHC Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and providing details of the allergen/s (Regulation 173(2)(f))

- ensure that all relief staff members in the OSHC Service have completed training in anaphylaxis management including the administration of an adrenaline auto-injection device, awareness of the symptoms of an anaphylactic reaction and awareness of any child at risk of anaphylaxis, the child's allergies, the individual anaphylaxis medical management action plan and the location of the auto-injection device kit
- display an emergency contact card by the telephone
- ensure risk assessments for excursions consider the risk of anaphylaxis
- ensure that a staff member accompanying children outside the OSHC Service carries a copy of the anaphylaxis medical management action plan with the auto-injection device kit
- ensure an up-to-date copy of the medical management plan and/or ASCIA action plan is provided whenever any changes have occurred to the child's diagnosis or treatment.

CHILDREN WHO CARRY THEIR OWN ADRENALINE AUTOINJECTOR IN OUTSIDE OF SCHOOL HOURS CARE SERVICES

In some cases, children over preschool age attending an Out of School Hours Care Service as part of a before/after school or vacation care program might carry their own adrenaline auto-injector. Children at risk of anaphylaxis usually only carry their own adrenaline auto-injector once they travel independently to and from school. This often coincides with high school or the latter years of primary school. To ensure compliance with the National Quality Framework an authorisation for a child over preschool age to self-administer medication is required (Regulation 96).

Where a child **over preschool age** carries their own adrenaline auto-injector it is advisable that the OSHC Service requests the child's parent to provide a second adrenaline auto-injector to be kept on the Service premises in a secure location, as it should not be relied upon that the auto-injector is always being carried on their person.

If a child does carry an auto-injector device, the exact location should be easily identifiable by OSHC staff. Hazards such as identical school bags in before and after school care should be considered. Where an auto-injector device is carried on their person, a copy of the child's medical management plan should also be carried.

EDUCATORS WILL:

- read and comply with the *Anaphylaxis Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*

- ensure that a complete auto-injection device kit (which must contain a copy the child's ASCIA Action Plan signed by the child's registered medical practitioner) is provided by the parent/guardian for the child while at the OSHC Service
- ensure a copy of the child's ASCIA Action Plan is visible and known to staff, visitors, and students in the OSHC Service
- always follow the child's ASCIA Action Plan in the event of an allergic reaction, which may progress to anaphylaxis
- practice the administration procedures of the adrenaline auto-injection device using an auto-injection device trainer and 'anaphylaxis scenarios' on a regular basis, preferably quarterly
- ensure the child at risk of anaphylaxis only eats food that has been prepared according to the parents' or guardians' instructions
- always check a meal before it is given to a child with anaphylaxis
- ensure tables and bench tops are washed down effectively after eating
- ensure all children wash their hands upon arrival at the OSHC Service and before and after eating
- increase supervision of a child at risk of anaphylaxis on special occasions such as excursions, incursions, parties and family days
- ensure that the auto-injection device kit is:
 - stored in a location that is known to all staff, including relief staff
 - NOT locked in a cupboard
 - easily accessible to adults but inaccessible to children
 - stored in a cool dark place at room temperature
 - NOT refrigerated
 - contains a copy of the child's medical management plan
- ensure that the auto-injection device kit containing a copy of the ASCIA Action Plan for each child at risk of anaphylaxis is carried by a staff member accompanying the child when the child is removed from the OSHC Service e.g., on excursions that this child attends or during an emergency evacuation
- regularly check and record the adrenaline auto-injection device expiry date. (The manufacturer will only guarantee the effectiveness of the adrenaline auto-injection device to the end of the nominated expiry month)
- provide information to the OSHC Service community about resources and support for managing allergies and anaphylaxis.

FAMILIES WILL:

- inform staff at the OSHC Service, either on enrolment or on diagnosis, of their child's allergies

- provide staff with an **ASCIA Action Plan** anaphylaxis medical management plan giving written consent to use the auto-injection device in line with this action plan and signed by the registered medical practitioner
- develop an anaphylaxis risk minimisation plan in collaboration with the Nominated Supervisor and other Service staff
- develop a communication plan in collaboration with the Nominated Supervisor/Responsible Person and lead educators
- provide staff with a complete auto-injection device kit each day their child attends the OSHC Service
- **comply with the Service's policy that a child who has been prescribed an adrenaline auto-injection device is not permitted to attend the Service or its programs without that device**
- maintain a record of the adrenaline auto-injection device expiry date to ensure it is replaced prior to expiry
- assist staff by offering information and answering any questions regarding their child's allergies
- communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child
- notify the OSHC Service if their child has had a severe allergic reaction while not at the service- either at home or at another location
- comply with the OSHC Service's policy that a child who has been prescribed an adrenaline auto-injection device is not permitted to attend the OSHC Service or its programs without that device
- read and be familiar with this policy
- identify and liaise with the nominated staff member primarily caring for their child
- notify staff of any changes to their child's allergy status and provide a new ASCIA Action Plan in accordance with these changes

If a child suffers from an anaphylactic reaction the Service and staff will:

- Follow the child's **ASCIA Action Plan** - administer an adrenaline injector
- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Record the time of administration of adrenaline autoinjector
- If after 5 minutes there is no response, a second adrenaline autoinjector should be administered to the child if available
- Ensure the child experiencing anaphylaxis is lying down or sitting with legs out flat and is not upright
- Do not allow the child to stand or walk (even if they appear well)
- Contact the parent/guardian when practicable

- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours

In the event where a child who has **not been diagnosed as at risk of anaphylaxis, but who appears to be having an anaphylactic reaction:**

- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Administer an adrenaline autoinjector
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours.

REPORTING PROCEDURES

Any anaphylactic incident is considered a serious incident (Regulation 12).

- staff members involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record*, which will be countersigned by the Nominated Supervisor of the Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- if necessary, a copy of the completed form will be sent to the insurance company
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's file
- the Nominated Supervisor will inform the OSHC Service management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours through the [NQA IT System](#) (as per regulations)
- staff will be debriefed after each anaphylaxis incident and the child's individual anaphylaxis medical Action Plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- staff will discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

EDUCATING CHILDREN ABOUT ALLERGIES AND ANAPHYLAXIS

Allergy awareness is regarded as an essential part of managing allergies in childcare services. Our Service will:

- talk to children about foods that are safe and unsafe for the anaphylactic child. They will use terms such as *'this food will make _____ sick'*, *'this food is not good for _____'*, and *'_____ is allergic to that food'*.
- help children understand the seriousness of allergies and the importance of knowing the signs and symptoms of allergic reactions (e.g., itchy, furry, or scratchy throat, itchy or puffy skin, hot, feeling funny)
- with older children, staff will talk about strategies to avoid exposure to unsafe foods, such as taking their own plate and utensils, having the first serve from commercially safe foods, and not eating food that is share
- encourage empathy, acceptance and inclusion of the allergic child.

CONTACT DETAILS FOR RESOURCES AND SUPPORT

[Allergy Aware- A hub for allergy awareness resources](#) A project developing national Best Practice Guidelines and supporting resources for the prevention and management of anaphylaxis in schools and children's education and care services (April 2022)

[Australasian Society of Clinical Immunology and Allergy \(ASCIA\)](#) provide information on allergies. The ASCIA Action Plans for Anaphylaxis are device-specific and must be completed by a medical practitioner.

<https://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis>

Current ASCIA Action Plans are the 2023 versions, however previous versions (2022 and 2021) are still valid for use throughout 2023. There are two three types of ASCIA Action Plans for Anaphylaxis and a First Aid Plan. The 2023 plans have been reformatted for the first time in 20 years.

- ASCIA Action Plan (RED) are for children or adults with medically confirmed allergies, who have been prescribed adrenaline autoinjectors (Plans are available for EpiPen® or Anapen®)
- ASCIA Action Plan for Drug (Medication) Allergy (DARK GREEN) for children or adults with medically confirmed drug (medication) allergies, who have NOT been prescribed adrenaline injectors.
- ASCIA Action Plan for Allergic Reactions (GREEN) is for children or adults with medically confirmed food or insect allergies who have not been prescribed adrenaline autoinjectors and
- ASCIA First Aid Plan for Anaphylaxis (ORANGE)

[Allergy & Anaphylaxis Australia](#) is a non-profit support organisation for families with food anaphylactic children. Items such as storybooks, tapes, auto-injection device trainers and other resources are available for sale from the Product Catalogue on this site.

Allergy & Anaphylaxis Australia also provides a telephone support line for information and support to help manage anaphylaxis: Telephone 1300 728 000.

[Royal Children’s Hospital Anaphylaxis Advisory Support Line](#) provides information and support about anaphylaxis to school and licensed children’s services staff and parents. Telephone 1300 725 911 or Email: anaphylaxisadviceline@rch.org.au

[NSW Department of Education](#) provides information related to anaphylaxis, including frequently asked questions related to anaphylaxis training.

ADDITIONAL INFORMATION

QUEENSLAND (QLD)
Health Support Needs- Education- Anaphylaxis management Queensland Government- Anaphylaxis

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Anaphylaxis Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

Australian Children’s Education & Care Quality Authority. (2021).). [Dealing with Medical Conditions in Children Policy Guidelines](#)

ASCIA Action Plans, Treatment Plans, & Checklists for Anaphylaxis and Allergic Reactions: <https://www.allergy.org.au/hp/ascia-plans-action-and-treatment>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2023).

[Education and Care Services National Regulations](#). (Amended 2023).

Guide to the National Quality Standard. (Amended 2023).

National Allergy Strategy. (2021). [Best practice guidelines for anaphylaxis prevention and management in schools and children’s education and care \(CEC\) services](#) (Guidelines).

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d).

New South Wales Department of Education and Communities. (2014). *Anaphylaxis Guidelines for Early Childhood Education and Care Services*.

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JULY 2023	NEXT REVIEW DATE	JULY 2024
VERSION NUMBER	V10.07.23		
MODIFICATIONS	<ul style="list-style-type: none"> Annual policy maintenance Reference to medical management plan as: ASCIA Action Plans ASCIA Action Plans information updated for 2023 versions Links checked and repaired where required continuous improvement/reflection section added 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY 2022	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required hyperlinks edited to the name of the document where possible 	JULY 2023	
OCTOBER 2021	Additional information re: best practice from National Allergy Strategy- October 2021	JULY 2022	
JULY 2021	<p>(Please check new version of this policy and adjust as required for your service)</p> <ul style="list-style-type: none"> rearranged content within policy and deletion of repetitive statements in all sections consistent wording to align with related Medical Conditions policies (asthma, epilepsy, diabetes) policy review includes ACECQA policy guidelines/components (June 2021) links added for suggested education program for children ASCIA action plans updated for 2021 communication plan information added <p>links to state/territory information checked and edited where required</p>	JULY 2022	
JULY 2020	<p>Additions to content of policy</p> <p>Additional regulations added</p> <p>Additions to emergency first aid requirements rearranged some points under Educators to Nominated Supervisor</p> <p>Storage of autoinjector updated</p> <p>Updated 2020 ASCIA Action Plans</p> <p>All State/Territory contacts checked for currency</p> <p>Additional links for some states added</p>	JULY 2021	

JULY 2019	Grammar, punctuation and spelling edited. Additional information added to points. Contact information updated (email address) Sources corrected & alphabetised. Regulation 136 added.	JULY 2020
JULY 2018	Changed the reference of 'services' to 'Out of School Hours Care. Included ASCIA updates to their Anaphylaxis Action Plan – see details and link within the policy.	JULY 2019
NOVEMBER 2017	Updated the references to comply with revised National Quality Standard and Regulations	JULY 2018

Item 4.4 Asthma Management Policy

EXECUTIVE SUMMARY

Council to review and adopt the Asthma Management s Policy with changes.

OFFICER'S RECOMMENDATION

That Council: Adopt the Asthma Management Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment G - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

ASTHMA MANAGEMENT POLICY

Asthma is a chronic health condition affecting approximately 15% of children. It is one of the most common reasons for childhood admission to hospital. Community education and correct asthma management will assist to minimise the impact of asthma. It is generally accepted that children under the age of six do not have the skills or ability to recognise and manage their own asthma effectively. Our Out of School Hours Care (OSHC) Service recognises the need to educate its staff and families about asthma and to implement responsible asthma management strategies.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents

92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Enrolment Policy Family Communication Policy Handwashing Policy	Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Privacy and Confidentiality Policy Supervision Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including asthma management. We aim to provide a safe and healthy environment for all children enrolled at the Out of School Hours Care (OSHC) Service. We believe in providing children with asthma the ability to participate in the programmed learning activities and experiences ensuring an inclusive environment is upheld. We ensure all staff, educators and volunteers follow our *Asthma Management Policy* and procedures and children’s medical management plans.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, students and visitors of the OSHC Service.

DUTY OF CARE

We are committed to be an Asthma Friendly Service as outlined by Asthma Australia. This means:

- the majority of staff have current training in Asthma First Aid and routine Asthma management
- at least one staff member is on duty at all times children are in attendance at the Service who holds a current ACECQA-approved Emergency Asthma Management certificate
- Asthma Emergency Kits (AEKs) are accessible to staff and include in-date reliever medication
- Asthma First Aid posters are on display and information is available for staff and parents
- policies are Asthma Friendly

Source: Australian Children's Education & Care Quality Authority (acecqa.gov.au)

Our Out of School Hours Care (OSHC) Service has a legal responsibility to take reasonable steps to ensure the health needs of children enrolled in the service are met. This includes our responsibility to provide

- a. a safe environment free from foreseeable harm and
- b. adequate Supervision for children.

Staff members, including relief staff, need to be aware of children at the OSHC Service who suffer from allergies, including asthma and know enough about asthma reactions to ensure the safety and wellbeing of the children. Management will ensure all staff are aware of children's medical management plans and risk management plans.

BACKGROUND

Asthma is clinically defined as a chronic lung disease, which can be controlled but not cured. In clinical practice, asthma is defined by the presence of both excessive variation in lung function, i.e., variation in expiratory airflow that is greater than that seen in healthy children ('variable airflow limitation'), and respiratory symptoms (e.g., wheeze, shortness of breath, cough, chest tightness) that vary over time and may be present or absent at any point in time (National Asthma Council Australia, 2015, p.4).

Asthma affects approximately one in 10 Australian children and adults. It is the most common reason for childhood admission to hospital. However, with correct asthma management people with asthma need not restrict their daily activities. Community education assists in generating a better understanding of asthma within the community and minimising its impact.

Symptoms of asthma include wheezing, coughing (particularly at night), chest tightness, difficulty in breathing and shortness of breath, and symptoms may vary between children. It is generally accepted

that children under six years of age do not have the skills and ability to recognise and manage their own asthma without adult assistance. Our OSHC Service recognises the need to educate the staff and parents/guardians about asthma and to promote responsible asthma management strategies.

Asthma causes three main changes to the airways inside the lungs, and all of these can happen together:

- the thin layer of muscle within the wall of an airway can contract to make it tighter and narrower – reliever medicines work by relaxing these muscles in the airways
- the inside walls of the airways can become swollen, leaving less space inside – preventer medicines work by reducing the inflammation that causes the swelling
- mucus can block the inside of the airways – preventer medicines also reduce mucus.

Legislation that governs the operation of approved children’s services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. Our OSHC Service will ensure that there is at least one educator on duty at all times who has current approved emergency asthma management training in accordance with the Education and Care Services National Regulations.

ASTHMA AND COVID-19

There is no specific data as yet to suggest people with asthma are at greater risk of contracting COVID-19 however as this is a serious respiratory illness, anyone with asthma should implement strict hygiene measures to protect themselves and others.

Health practitioners have encouraged parents of children with asthma to:

- update their child’s asthma medical management/action plan with their general practitioner
- ensure their child uses their reliever and preventer medicines (if required) as prescribed
- ensure their child continues taking medication to keep their asthma well controlled
- practice good hygiene and other measures to reduce contact with people who may be infected
- have their child tested for COVID-19 if they develop any symptoms (cough, fever, shortness of breath, sore throat)

(Asthma Australia, June 2020)

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our OSHC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs. It is imperative that all educators and volunteers at our OSHC Service follow each individual child’s Medical Management Plan in the event of an incident related to a child’s specific health care need, allergy or medical condition.

MANAGEMENT AND NOMINATED SUPERVISOR WILL ENSURE:

- that as part of the enrolment process, **all** parents/guardians are asked whether their child has a medical condition and clearly document this information on the child's enrolment record
- if the answer is *yes*, the parents/guardians are required to provide a medical management plan and signed by a registered medical practitioner **prior** to their child's commencement at the Service [see section below- *In Services where a child is diagnosed with asthma*]
- parents are provided with a copy of the Service's *Medical Conditions Policy, Asthma Management Policy* and *Administration of Medication Policy* upon enrolment of their child
- written consent is requested from families on the enrolment form to administer emergency asthma medication or treatment if required
- at least one educator or nominated supervisor with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA) is in attendance at all times education and care is provided by the Service as per Regulation 136(c)
- all staff members have completed ACECQA approved first aid training at least every 3 years and this is recorded with each staff member's certificate held on the Service's premises
- **all educators have completed anaphylaxis management training and emergency asthma management training every two years [not mandated, but recommended as best practice]**
- that all staff members are aware of
 - any child identified with asthma enrolled in the service
 - the child's individual medical management plan/action plan
 - symptoms and recommended first aid procedure for asthma and
 - the location of the child's asthma medication
- all staff members are able to identify and minimise asthma triggers for children attending the Service where possible
- upon employment at the OSHC Service all staff will read and be aware of all medical condition policies and procedures, maintaining awareness of asthma management strategies
- children with asthma are not discriminated against in any way
- children with asthma can participate in all activities safely and to their full potential
- *Asthma Australia's Asthma First Aid* for posters are displayed in key locations at the Service
- that medication is administered in accordance with the *Administration of Medication Policy*
- that in the event of a serious incident such as a severe asthma attack, notification to the regulatory authority is made **within 24 hours of the incident**

- communication between management, educators, staff and parents/guardians regarding the Service's *Asthma Management Policy* and strategies are reviewed and discussed regularly to ensure compliance and best practice
- that updated information, resources, and support for managing asthma is regularly provided for families.

IN SERVICES WHERE A CHILD DIAGNOSED WITH ASTHMA IS ENROLLED, THE NOMINATED SUPERVISOR/RESPONSIBLE PERSON WILL:

- meet with the parents/guardians to begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until a medical management plan developed in consultation with parents and the child's medical practitioner is provided
- develop and document a risk minimisation plan in collaboration with parents/guardian [see *Risk Minimisation Plan section*]
- discuss with the requirements for completing an *Administration of Medication Record* for their child
- discuss authorisation for children to self-administer asthma medication if applicable. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the OSHC Service, parents/guardian and the child's medical management team
- ensure the medical management plan includes:
 - specific details of the child's diagnosed medical condition
 - supporting documentation (if required)
 - a recent photo of the child
 - triggers for asthma (signs and symptoms)
 - list of usual asthma medicines including doses and self-medication (if applicable)
 - response for an asthma emergency including medication to be administered
 - contact details and signature of the registered medical practitioner
 - date the plan should be reviewed
- keep a copy of the child's asthma medical management plan and risk minimisation plan in the enrolment record
- ensure families provide reliever medication and a spacer whilst their child attends the OSHC Service
- collaborate with parents/guardians to develop and implement a communication plan and communicate any concerns with parents/guardians regarding the management of their child's asthma whilst at the Service [see *Communication Plan section*]

- ensure that a staff member accompanying children outside the Service carries a copy of each child's individual asthma medical management action plan and required medication
- ensure an *Administration of Medication Record* is kept for each child to whom medication is to be administered by the Service
- ensure families update their child's asthma medical management/action plan regularly or whenever a change to the child's management of asthma occurs
- regularly check the expiry date of reliever medication and ensure that spacers and facemasks are cleaned after every use
- discussions occur regarding authorisation for children to self-administer asthma medication if applicable. Any authorisations for self-administration must be documented in the child's Medical Management Plan and approved by the OSHC Service, parents/guardian and the child's medical management team

EDUCATORS WILL:

- ensure they are aware of the *Service's Asthma Management Policy* and asthma first aid procedure (ensuring that they can identify children displaying the symptoms of an asthma attack and locate their personal medication, and Asthma medical management/action plans)
- **maintain qualifications for approved emergency asthma management training [recommended as best practice]**
- be able to identify and, where possible, minimise asthma triggers as outlined in the child's Asthma medical management plan and risk minimisation plan
- ensure the first aid kit, children's personal asthma medication and Asthma medical management/action plans are taken on excursions or other offsite events, including emergency evacuations and drills
- administer prescribed asthma medication in accordance with the child's Asthma Action Plan and the *Service's Administration of Medication Policy*
- ensure any asthma attacks are clearly documented in the *Incident, Injury, Trauma or Illness Record* and advise parents as a matter of priority, when practicable
- consult with the parents/guardians of children with asthma in relation to the health and safety of their child, and the supervised management of the child's asthma
- communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- ensure that children with asthma are not discriminated against in any way

- ensure that children with asthma can participate in all activities safely and to their full potential, ensuring an inclusive program.

FAMILIES WILL:

- inform staff, either on enrolment or on initial diagnosis, that their child has asthma
- read and be familiar with the Service's *Asthma Management Policy*
- provide a copy of their child's Asthma medical management/action plan to the Service ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- provide written authorisation to the OSHC Service for their child to self-administer medication (if applicable)
- develop a risk minimisation plan in collaboration with the Nominated Supervisor/Responsible Person and other service staff
- ensure all details on their child's enrolment form and medication record are completed prior to commencement at the Out of School Hours Care Service
- provide an adequate supply of appropriate asthma medication and equipment for their child
- provide an updated plan at **least annually** or whenever medication or management of their child's asthma changes
- communicate regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma
- encourage their child to learn about their asthma, and to communicate with Service staff if they are unwell or experiencing asthma symptoms

If a child suffers from an asthma emergency the Service and staff will:

- Follow the child's asthma medical management/action plan
- If the child does not respond to steps within the Asthma medical management/action plan call an ambulance immediately by dialling 000
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the regulatory authority within 24 hours

REPORTING PROCEDURES

Any incident involving serious illness of a child while the child is being educated and cared for by the

Service for which the child attended, or ought reasonably to have attended a hospital e.g., severe asthma attack is considered a serious incident (Regulation 12).

- staff members involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the Nominated Supervisor of the Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- place a copy of the record in the child's file
- the Nominated Supervisor will inform the Service management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours through the [NQA IT System](#) (as per regulations)
- staff will be debriefed after each serious incident and the child's individual medical management plan/action plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- staff will discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

RISK MINIMISATION PLAN FOR A CHILD WITH DIAGNOSED ASTHMA

The staff, together with the parents/guardians of a child with asthma, will discuss and agree on a risk minimisation plan for the emergency management of an asthma attack based on the child's asthma medical management/action plan. This plan will be included as part of, or attached to, the child's asthma medical management/action plan and enrolment record.

The plan will assess and minimise risks relating to the child's diagnosed health care need including any known allergens. Strategies for minimising the risk are developed and implemented.

The risk minimisation plan is to be updated whenever the child's medical management plan is changed or updated.

Common asthma triggers include:

- viral infections- such as colds, flu and respiratory conditions
- cigarette smoke
- physical exercise
- allergens- mould, pollens, pets
- irritants in the environment- dust, pollution, wood/bush fire smoke
- weather- changes in air temperature or thunderstorms

- chemicals and strong smells- perfumes, cleaning products
- stress or high emotions (including laughter or crying)

Betterhealth.vic.gov

COMMUNICATION PLAN

A communication plan will be created in accordance with our *Medical Conditions Policy*. The communication plan will be developed in collaboration with parents/guardians. It will detail the negotiated and documented manner to communicate any changes to the child's medical management plan and risk management plan for the child with relevant staff, educators, and volunteers.

Any changes to a child's medical management plan and risk minimisation plans will be documented in the communication plan.

RESOURCES

[Asthma First Aid A4 Poster](#)

[Asthma Action Plan](#)

[FIRST AID FOR ASTHMA CHILDREN UNDER 12](#)

[Aiming for Asthma Improvement in Children](#)

[Supporting the Continuity of Asthma Care \(for patients with severe asthma during Coronavirus \(COVID-19\) pandemic\)](#)

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Asthma Management Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

Asthma Australia <https://asthma.org.au>

Australian Children's Education & Care Quality Authority. (2021). [Dealing with Medical Conditions in Children Policy Guidelines](#)

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2023).

[Education and Care Services National Regulations](#). (Amended 2023).

Guide to the National Quality Framework (2017). (Amended 2023).

National Asthma Council Australia. (2015). *Australian asthma handbook: Quick reference guide*.

<https://www.asthmahandbook.org.au/>

National Asthma Council Australia. (2019). *My asthma guide*. <https://www.nationalasthma.org.au/living-with-asthma/resources/patients-carers/brochures/my-asthma-guide>

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JULY 2023	NEXT REVIEW DATE	JULY 2024
VERSION NUMBER	V9.7.23		
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • minor formatting edits within text • continuous improvement/reflection section added 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY/SEPTEMBER 2022	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required (updated in September) 	JULY 2023	
JULY 2021	<ul style="list-style-type: none"> • Major changes/rearrangement of policy for consistency with related medical conditions policies (anaphylaxis, diabetes, epilepsy) • deletion of repetitive statements in all sections • new sections added- 'In services where a child is diagnosed with asthma' and 'Reporting procedures' • Policy review includes ACECQA policy guidelines/components (June 2021) 	JULY 2022	
JULY 2020	<ul style="list-style-type: none"> • minor formatting changes • Additional regulations added • Additional related policies added • Additional resources added • COVID-19 recommendations • Communication Plan information included • Asthma emergency procedure included • sources checked for currency 	JULY 2021	
JULY 2019	<ul style="list-style-type: none"> • Grammar and punctuation edited. • Additional information added to points. • Sources checked for currency. • Sources corrected & alphabetised. • New source added to represent referenced work. • Regulation 136 added. 	JULY 2020	

<p>JULY 2018</p>	<ul style="list-style-type: none"> Added 'related policies' and updated the reference of 'services' to 'Out of School Hours Care'. Amended sections of the policy to more closely align with Asthma Australia protocols. 	<p>JULY 2019</p>
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Item 4.5 Head Lice Policy

EXECUTIVE SUMMARY

Council to review and adopt the Head Lice Policy with changes.

OFFICER'S RECOMMENDATION

That Council: Adopt the Head Lice Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment H - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

HEAD LICE POLICY

Head lice continue to cause concern and frustration for families, educators and children. Although head lice are not considered a health hazard, and do not spread disease, infestations can cause anxiety for all stakeholders. Head lice affect all socioeconomic groups and are not a sign of poor hygiene. They have no preference for ethnic background, hair colour, hair type or age. This policy is intended to outline roles, responsibilities and expectations of the Out of School Hours Care (OSHC) Service to assist with early identification, treatment and control of head lice in a consistent and coordinated manner.

Whilst families have the primary responsibility for the detection and treatment of head lice our OSHC Service will work in a cooperative and collaborative manner to assist all families to manage head lice effectively.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
88	Infectious Diseases
168	Education and care service must have policies and procedures

RELATED POLICIES

Family Communication Policy Health and Safety Policy Privacy and Confidentiality Policy	Respect for Children Work Health and Safety Policy
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PURPOSE

To ensure parents, staff and educators are well informed about the early identification of head lice and managing infestations through effective treatment and communication with families.

OUR OSHC SERVICE AIMS TO:

- outline the roles and responsibilities of families, educators and management who are involved in detection, treatment and control of head lice
- document effective treatment and management strategies and
- provide information and support for families.

SCOPE

This policy applies to children, families, staff, management, the approved provider, nominated supervisor, students and visitors of the OSHC Service.

HEAD LICE

Pediculus Capitis or head lice are insects that live in hair and suck blood from the scalp, usually causing itching of the scalp. Female head lice lay their eggs and glue them to the base of hair shafts. The eggs are pale cream to yellowish brown in colour and hatch after 7–10 days. The immature lice grow into adults over 6–10 days and start biting the scalp to feed on blood. Adult lice mate, the females lay more eggs, and the cycle continues.

People get head lice from direct head-to-head contact with another person who has head lice. This can happen when people play, cuddle or work closely together. Head lice do not have wings or jumping legs so they cannot fly or jump from head-to-head. They can only crawl.

Head lice do not live or breed on animals, bedding, furniture, carpets, clothes or soft toys. They are rarely spread by sharing hats.

While head lice are not known to carry disease, they are a nuisance for parents and children. The social stigma associated with head lice infestation can affect children's comfort and confidence.

Head lice can be controlled through a consistent, systematic community approach.

FINDING HEAD LICE

Head lice do not necessarily cause an itch, and may be difficult to observe. Look for eggs by shining a

strong light on the hair near the scalp, or by using the conditioner and combing technique. (See Treatment section below).

Head lice are found on the hair shaft itself and move to the scalp to feed. They can be brown or grey in colour. Head lice have six legs, which end in a claw, and they rarely fall from the head. Louse eggs (also called nits) are laid within 1.5cm of the scalp and are firmly attached to the hair. They resemble dandruff, but can't be brushed off.

IMPLEMENTATION

RESPONSIBILITIES OF MANAGEMENT, RESPONSIBLE PERSON AND EDUCATORS

If one child at the OSHC Service has head lice, it is likely that several others also have them. To help prevent the spread of head lice, our Service will:

- remind parents to be vigilant in checking for head lice weekly
- confidentially notify the parent/caregiver of a child who is suspected of having live head lice and request that the child is treated before returning to the Service the following day
- keep families informed if there is someone at the OSHC Service with head lice, ensuring confidentiality is not breached by disclosing the child's name who has head lice.
- reduce head-to-head contact between all children when the Service is aware that someone has head lice
- support parents and children who have head lice by providing factual information, reducing parental anxiety and not singling out individual children with head lice
- ensure that the child or children with head lice are not isolated or excluded from learning
- provide families with suggestions of effective treatment for head lice
- encourage parents to tie back children's hair when attending the Service
- record all cases confidentially so an outbreak can be avoided or minimised
- encourage children to learn about head lice so as to help them understand the issue and how to prevent further outbreaks- e.g.: avoid sharing hairbrushes and hats

RESPONSIBILITIES OF FAMILIES:

- check your child's head once a week for head lice
- notify the Service immediately if head lice are found on your child's head
- ensure you check all members of your family if one person has head lice (there is no need to treat the whole family, unless they also have head lice)

- ensure your child does not attend the Service with untreated head lice. If you find any live lice or eggs, begin treatment immediately and notify the OSHC Service if your child is affected so the service can monitor the number of cases and act responsibly.
- check for effectiveness of the treatment every 2 days until no live lice are found for 10 consecutive days. Remove eggs (nits) from your child's hair using the conditioner method and head lice comb.
- once treatment has started, your child can attend the service
- if your child has long hair, ensure this is tied back
- families will only use safe and recommended practices to treat head lice.
- families will maintain a sympathetic attitude and avoid defaming/blaming families who are experiencing difficulty with control measures.

TREATMENT

The two most common methods used for the treatment of head lice are the conditioner/combing technique and chemical treatments.

Conditioner and Combing Technique

Conditioner stuns lice and blocks their breathing pores. This, together with the slippery effect of the conditioner, makes it easier to mechanically remove the lice.

1. Untangle dry hair with an ordinary comb.
2. Apply hair conditioner to dry hair (white conditioner makes it easier to see the eggs). Use enough conditioner to cover the whole scalp and all the hair from roots to tips.
3. Use an ordinary comb to evenly distribute the conditioner, and divide the hair into four or more sections using hair clips.
4. Starting with a section at the back of the head, place the teeth of a head lice comb flat against the scalp. Comb the hair from the roots through to the tips.
5. Wipe the comb clean on a tissue after each stroke and check for head lice or eggs on the tissue.
6. Comb each section twice until you have combed the whole head. If the comb becomes clogged, use an old toothbrush, dental floss or a safety pin to remove the head lice or eggs.
7. Wash out the conditioner.
8. Clean the comb using hot soapy water and rinse off with hot water.
9. Repeat the conditioner and combing method after seven days to ensure that any immature head lice that have hatched are removed before they can lay more eggs.

Chemical treatments

There are four main categories of head lice products available in Australia which may include an active compound which kills head lice and some eggs (nits). Any head lice treatment product used should carry an Australian Registered (AUST R) number on the outer packaging indicating the product is accepted by the Therapeutic Goods Administration for supply in Australia. No treatment kills all eggs so the hair must be retreated after 7 to 10 days to kill any head lice that may have hatched or survived the first treatment.

There are many different chemical products available to use for children aged over six months- check with a pharmacist to help choose a product. No single chemical treatment will work for everyone and lice can develop resistance to the chemicals.

QUEENSLAND (QLD)

Education Queensland

<https://education.qld.gov.au/students/student-health-safety-wellbeing/student-health/head-lice>

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Head Lice Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Better Health Channel. (2019). Head lice (nits) [Fact Sheet].

<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/head-lice-nits?viewAsPdf=true>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2023).

[Education and Care Services National Regulations](#). (Amended 2023).

Guide to the National Quality Standard. (Amended 2023).

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Privacy Act 1988.

Revised National Quality Standard. (2018).

SA Health. (2019). Head lice, management guidelines for schools:

United Nations Convention on the Rights of the Child

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JULY 2023	NEXT REVIEW DATE	JULY 2024
VERSION NUMBER	V7.7.23		
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required continuous improvement/reflection section added 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY 2022	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 	JULY 2023	
JULY 2021	Minor formatting edits sources checked for currency	JULY 2022	
JULY 2020	Regulations added for compliance reordering of wording in 'Implementation' section small changes to family responsibility section links checked and modifications made where indicated further information added to treatment section additional source added	JULY 2021	
JULY 2019	<ul style="list-style-type: none"> Grammar and punctuation edited. Additional information added to points. Sources checked for currency. New sources added. Sources corrected & alphabetised. 	JULY 2020	
July 2018	<ul style="list-style-type: none"> Minor adjustments made to terminology plus included the 'related policies' list. 	July 2019	

Item 4.6 Health and Safety Policy

EXECUTIVE SUMMARY

Council to review and adopt the Health and Safety Policy with changes.

OFFICER'S RECOMMENDATION

That Council: Adopt the Health and Safety Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment I - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

HEALTH AND SAFETY POLICY

Our Out of School Hours Care (OSHC) Service has a responsibility of providing a healthy and safe environment for children so that they can explore, discover and learn. We are committed to maintaining a safe and healthy environment through comprehensive policies and procedures and managing risks and hazards appropriately and effectively.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
82	Tobacco, drug and alcohol-free environment
86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises

102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing and security
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements—indoor
108	Space requirements—outdoor space
109	Toilet and hygiene facilities
110	Ventilation and natural light
111	Administrative space
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision
156	Relationships in groups
158	Children’s attendance records to be kept by approved provider
168	Policies and procedures are required in relation to enrolment and orientation
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of Medication Policy Child Protection Policy Clothing Policy Dealing with Infectious Diseases Policy Delivery of, and collection from Education and Care Service Premises Emergency Evacuation Policy Governance Policy Hand Washing Policy Incident, Injury, Trauma and Illness Policy	Orientation of Families Policy Physical Environment Policy Rest Time Policy Safe Storage of Hazardous Chemicals Policy Safe Transportation Policy Sick Children Policy Supervision Policy Sun Safety Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place to ensure the health, safety and wellbeing of children, staff and families. We aim to protect the health, safety and welfare of children, educators, families, and

visitors of the Service by complying with current health and safety laws and legislation as outlined in this policy.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, students and visitors of the OSHC Service.

IMPLEMENTATION

The National Quality Framework establishes the standards and learning frameworks to provide high quality inclusive education and care in early and middle childhood settings, which can only occur in a safe and healthy work environment. The NQF makes few references to work, health and safety legislation as it underpins this framework. *Quality Area 2.... reinforces children’s right to experience quality education and care in an environment that provides for their health and safety.”* p: 138, 2020.

Thorough work health and safety policies, procedures and practices ensure that:

- coordinators and Nominated supervisors fulfil their responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees;
- employees meet their health and safety obligations and are safe in the workplace; and
- the work environment supports quality education and care.

We are dedicated to ensuring that all health and safety needs are met through the implementation of a high standard of hygiene practices to control the spread of infectious diseases, the prevention and management of injuries and illness, and to provide a safe and secure physical environment for children. In any occurrences where children show any signs of illness, accident, injury or trauma, educators will refer to the *Incident, Injury, Trauma and Illness Policy*.

The importance of children’s nutritional and physical health needs will be promoted by educating children about a healthy lifestyle which will be reinforced through the everyday routine and experiences. Information on health, hygiene, safe food, and dental care principles and practices will be displayed at the Service to provide families with further information.

We believe in quality education and care in an environment that provides for all children’s protection through adequate supervision, safe experiences and environments, and vigilance to potential risks. Educators at the OSHC Service are dedicated to understanding their legal and ethical responsibility to

protect the children enrolled at the Service. Our *Work Health and Safety Policy* provides further detail about Hazard Reduction and Risk Minimisation.

CHOOSING APPROPRIATE RESOURCES AND EQUIPMENT

- The OSHC Service will maintain an up-to-date **register of equipment at the OSHC Service**.
- The Approved Provider will be ultimately responsible for any purchases of equipment.
- Educators will document any equipment that needs maintenance on a prioritised basis in the **maintenance register**
- Resources and equipment will be chosen to reflect the cultural diversity of the service's community and the cultural diversity of contemporary Australia.
- The OSHC Service will actively pursue the contribution of families regarding toys and equipment at the service.
- All new equipment will be checked against Australian Safety Standards.
- Children will be introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Equipment that should only be used under supervision will be stored in a safe place out of children's reach.
- **The use of pools and toys or equipment, which involves the use of water, will be used under the direct supervision of educators. All equipment will be emptied of water when not in use and stored in such a manner that it cannot collect water.**
- Equipment will be checked regularly by the educators to ensure it is in a clean and safe condition which will be recorded on the appropriate indoor and outdoor safety checklist.
- The Approved Provider will advise educators and parents about the purchase of new equipment and ensure a risk assessment has been conducted.

THE CHILDREN'S LEARNING ENVIRONMENT

- The OSHC Service will keep a **record of any changes** that is made to the physical environment of the Service, such as rearranging of rooms etc. to show continuous improvement.
- The OSHC Service will document the links between the arrangements and choice of resources and equipment and the children's learning in the program.

ON-GOING MAINTENANCE

- The OSHC Service will reflect on the environment and establish a plan ensuring that the environment continuously complies with our philosophy of providing a safe and secure environment, that is stimulating and engaging for all who interact with it.

- The Approved Provider/Nominated Supervisor will also ensure that the OSHC Service and its grounds comply with Local Government regulations, and regulations regarding fire protection, ventilation, natural and artificial lighting and safety glass.
- Should the OSHC Service undertake major renovations, management plans will be put in place to ensure that the safety of educators, children, families and others at the service is not compromised.

SAFETY CHECKS

Prior to children arriving at the OSHC Service, a daily inspection of the premises will be undertaken which will include the:

- Service Perimeters
- Fences/Fence Line
- Gates
- Paths
- Buildings
- All rooms accessible by children
- Fixed equipment
- Sand Pit

This must be done in order to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals.

In the event of a sharp object being found (for example a syringe) educators will follow the *Safe Disposal of Sharps Procedure*, wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council.

Similarly, trees in the grounds must be checked regularly for overhanging, dead or dangerous looking branches as well as checked for any infestations or nests.

Non-fixed play equipment in the OSHC Service grounds can be no more than 1500mm high and must be supervised at all times by an educator. (AS 4685)

The Service will have regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any findings from the pest control check will be carried out in line with the recommendation of the pest control company.

The *Indoor and Outdoor Daily Safety Checklists* will be used as the procedure to conduct these safety checks. A record of these will be kept by the Service. Any required maintenance will immediately be reported to the Approved Provider/Nominated Supervisor who will make the appropriate arrangements to have repairs carried out.

The following can be used as a guideline to produce Checklists for the service's individual needs.

CHECKLIST: OUTDOORS

- Building maintenance** – regularly maintain and check for hazards, check building is in a safe, clean and hygienic condition. Records of any damages and subsequent repairs are kept.
- Doors** – have finger jam protectors.
- Fences** - securely and effectively fence all sides of outdoor play areas from roads, water hazards, and driveways and are of appropriate height. *Childproof self-locking devices are installed on gates.*
- Maintain fences to ensure they have the correct height. *Note: Fencing regulations do not apply to services that only care for school-age children.*
- Garbage** – safe and prompt disposal. Use lidded secure bins that prevent child access and maintain in a clean and safe condition. Encourage recycling.
- Garden** and renovation debris removed. Regularly trim branches and bushes.
- Garages and sheds** - keep locked.
- Heating, cooling, ventilation, lighting** – comfortable, safe, maintained, guarded and are kept out of reach of children.
- Non-slip** stairs, steps, and ground surfaces.
- Renovation** dangers e.g., lead, asbestos, holes and excavations – reduce risks.
- Pesticide** residue - dangerous chemicals should not be used to remove vermin.
- Safety glass** is installed according to the Australian Standards on all glass doors and windows accessible to children, and safety decals on both sliding doors and plate glass doors at child and adult eye level.
- Security** - minimising unauthorised access with appropriate fencing and locks.
- Under Service access** (including buildings on stilts and footings) – lock or block access.
- Window fly screens** securely fitted, maintained and permanent.
- Hazards and driveways** Maintain fences, have correct height (as applicable in the regulations), install childproof self- locking devices on gates.
- Bikes**– it is recommended that correctly fitted helmets be worn every time children use 'bikes'
- Car park** – ensure family members are aware of pedestrian safety rules such as holding their child's hand and alighting children from the safety door. Encourage families to always supervise their children in the car park to prevent accidents and injuries, which could occur as a result of reversing vehicles.
- CPR chart**- ensure chart is prominently displayed in outdoor area
- Finger entrapment** – all holes or openings in playground equipment must be between 8-25 mm.

- First aid kit is approved**-maintained, and accessible throughout outdoor play.
- Hazardous Plants** – identify and remove or make inaccessible to children.
- Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tools or machinery are stored securely and are inaccessible to children.
- Pet and animal droppings cleared** or inaccessible to children in outdoor areas, exclude dogs from children’s play areas, finger proof pet enclosures, supervise pet interactions with children.
- Pool safety, fencing and gate** compliance, paddling pools emptied immediately after use, turn upside down, disinfected if soiled.
- Safe play rules and adequate safe play areas** - talk with children about how to play safely. Maintain safe layouts for outdoor play areas to avoid collisions between children.
- Sandpits** - cover when not in use, regularly clean, rake, and remove sand soiled by faeces or blood. Hose sandpits at end of day after removing contaminated sand and material.
- Soft fall** - appropriate ground cover under outdoor climbing and play equipment, meets standards.
- Sun protection clothing, hats, and sunscreen, for unshaded areas** - minimise play at peak sun exposure times. Install a sunshade over sandpits and play areas.
- Ensure children are visible and supervised at all times** High-risk areas and climbing and other outdoor play equipment. Make hazardous equipment, machinery, chemicals, and any other materials inaccessible to children.
- Water hazards** are supervised directly at all times
- Water troughs** or containers will only be filled to a safe level and emptied immediately after use. Water troughs are supervised at all times.
- Play equipment** that is higher than **60cm** must have soft fall installed underneath at least 25cm in depth under and 1.9m from the perimeter of the equipment. Place outdoor play equipment away from paths and solid garden edging. **[AS 4685:2012 Playground equipment]**
- Surfacing** used underneath and around equipment complies with Australian Standard **AS/NZS 4422** and is maintained regularly; materials may need to be raked, redistributed and checked weekly for spiders, sharp objects or animal litter.

CHECKLIST: INDOORS

- Access for children and adults with disability** - ensure safe access into, within and out of the Service, security, toilet and washing facilities, and check for hazards for wheelchairs and people with impaired sight, hearing or mobility.
- Children at risk** – maintain extra security and supervision for children at special risk.
- Decorations and children’s artwork** – do not place near ceiling fans, air conditioners or heaters. Avoid use of tacks, pins, and staples.

- Emergency evacuation** – develop an evacuation plan and emergency contact numbers display, inform families, and practice evacuation procedures. Ensure exit pathways are kept clear at all times.
- Fire** – fire blanket, extinguisher, fire exits, smoke detectors, electrical safety switch are easily accessible and regularly serviced.
- First aid kit** with approved contents is maintained and accessible. Ensure First Aid certificates are current for relevant educators.
- Furniture** - stable, maintained and meets Australian safety standards.
- Guard and make inaccessible to children:** heaters, coolers, fireplaces, stoves, microwaves, power points, and office equipment.
- Hazardous indoor and outdoor plants** identify, remove or make inaccessible to children.
- Heaters** – ensure that children cannot come in contact with hot surfaces. It is preferable to use heating where combustion products are ducted outside. If gas heating is used ensure there is adequate ventilation while the heater is operating.
- Hot water** - ensure the hot water supply is regulated so as to keep it below the temperature at which a child can be scalded (the current KidSafe recommendation is below 50°C).
- Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tool or machinery are stored securely and are inaccessible to children.
- Noise** – reduce excessive exposure.
- Non-slip, non-porous** floors, stairs.
- Spills** – clean away as they occur.
- Pets and animals** – inform families of pets being kept on premises and plans to obtain new pets. Ensure pets are vaccinated, wormed, don't have fleas, and are clean, and healthy. Keep pet accessories such as pet food, litter boxes, pet toys away from children. Exclude dogs from children's play areas. Keep children-pet interactions minimal and supervise interaction times.
- Record details** and notify parents of any child accident.
- Safe play rules and adequate play spaces:** discourage running indoors and safe furniture layout to avoid collisions.
- Safety glass used and installed** according to Australian Standards, and Australian Building Codes on all glass doors and windows accessible to children, safety decals on sliding doors and plate glass doors at child and adult eye level.
- Security** – ensure all entry doors are locked at all times and place bells on doors.
- Smoke and drug free environment** in all areas at all times

- ❑ **Educator's personal items** – ensure educator's personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children.
- ❑ **Stairways**, ramps, corridors, hallway, external balcony must be enclosed to prevent a child falling.
- ❑ **Store in locked cabinet** any unsafe items, e.g., chemicals, medicines, razors, knives and electrical equipment.
- ❑ **Supervision and visibility of children** – ensure children are visible and supervised at all times.
- ❑ **Toys** – meet safety standards, age appropriate, maintained, and non-toxic.

CLEANING OF BUILDINGS, PREMISES, FURNITURE AND EQUIPMENT

GENERAL CLEANING

- The OSHC Service will use structured **cleaning schedules** to ensure that all cleaning is carried out regularly and thoroughly.
- To minimise our staff and children's exposure to infectious diseases or viruses such as coronavirus (COVID-19) our Service will adhere to all recommended guidelines from the Australian Health Protection Principal Committee (AHPPC) and the National Health and Medical Research Council (NHMRC)
- high touch surfaces will be cleaned and disinfected at least twice daily
- cleaning contractors will hygienically clean the Service to ensure risk of contamination is removed as per [Environmental Cleaning and Disinfection Principles for COVID-19](#)
- **Educators will clean the OSHC Service at the end of each day and throughout the day as needed (Vacation Care)**
- Accidents and spills will be cleaned up as quickly as possible to ensure that the Service always maintains a high level of cleanliness, hygiene, and safety.

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

- adhere at all times to manufacturer's advice and instructions when using products to clean furniture and equipment at the OSHC Service
- store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times.
- ensure any substance found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where appropriate will not be used under any circumstances.

- ensure containers should be disposed of correctly following local council guidelines, and not reused under any circumstances.
- ensure all dangerous chemicals, substances and equipment is stored in a locked place or facility which is labelled, secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges and toiletries.
- follow the instructions of manufacturers, particularly of any product which may need to be stored in a refrigerated environment.
- refrigerate any substance that must be stored in a labelled, child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children
- ensure all hazardous chemicals must be supplied with a Safety Data Sheet (SDS) formerly called a Material Data Safety Sheet. Our OSHC Service will adhere to the manufacturer's instructions for use, storage, and first aid instructions recorded on the SDS
- ensure there is a **register of all hazardous chemicals**, substances and equipment used at the Service. Information recorded should include where they are stored, their use, any risks, and first aid instructions and the current SDS. The register will be readily accessible.
- ensure appropriate personal protective clothing should be worn in accordance to the manufacturer's instructions when using and disposing of hazardous substances or equipment
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on 13 11 26, or call an Ambulance on 000.
- ensure emergency medical and first aid procedures are carried out, with relevant notification given to the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- In any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard, call the emergency services, dial 000 and notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- the **Poison Safety Checklist** will be used in order to ensure we are consistently meeting requirements.

HAND WASHING

Effective handwashing is the best way to prevent the transmission of infectious diseases. Our Service will ensure [signs and posters](#) remind employees and visitors of the importance of handwashing to help stop

the spread of COVID-19 and other infectious diseases. Adults and children should wash their hands thoroughly with soap and water and/or alcohol-based sanitiser:

- upon arrival at the Service
- when hands are visibly dirty
- when coming inside from being outside
- before eating
- before putting on disposable gloves
- before preparing food items
- after touching raw meats such as chicken or beef
- before and after toileting children and coming into contact with any body fluids such as blood, urine or vomit
- after touching animals or pets
- after blowing your nose or sneezing and after assisting a child to blow their nose
- after meals
- after going to the toilet
- before and after administering first aid
- before and after administering medication
- before and after preparing children's bottles
- after removing protective gloves
- after using any chemical or cleaning fluid

MINIMISING POTENTIALLY DANGEROUS SUBSTANCES

Our OSHC Service minimises the use of potentially dangerous substances. Ordinary detergents will be used to help remove dirt from surfaces. Colour-coded sponges (e.g., pink for the kitchen, yellow for the bathroom) will be used in order to eliminate cross contamination. Different rubber gloves will also be used in each room then hung out to air-dry. Before returning to the children educators will wash and dry hands.

DISINFECTANTS

Disinfectants are usually unnecessary as very few germs can survive exposure to fresh air and natural light. In an outbreak situation, such as gastroenteritis or other infectious virus (COVID-19), the Public Health Unit or SafeWork Australia, may specify the use of a particular disinfectant and increased frequency of cleaning. In this situation, for the disinfectant to work effectively, there still needs to be thorough cleaning using a detergent beforehand.

Essentially, there is no ideal disinfectant. Disinfectants cannot kill germs if the surface is not clean. It is more important to ensure that surfaces have been cleaned with detergent and warm water than to use a disinfectant.

In the event of an outbreak of gastroenteritis, a disinfectant such as bleach solution may be used following the manufacturer's directions- e.g.: White King Bleach (sodium hypochlorite 42g/L) diluted part bleach (25mL) in 40 parts water (1L) to make 0.1% solution. Gloves must be worn at all times when handling and preparing bleach.

To kill germs, any disinfectant needs:

- A clean surface to be able to penetrate the germ.
- To be able to act against those particular germs.
- To be of the right concentrate.
- Enough time to kill the germs, which is generally at least 10 minutes.

DETERGENTS

To work in accordance with *Staying healthy: Preventing infectious diseases in early childhood education and care services*, proper cleaning with detergent and warm water, followed by rinsing and air-drying kills most germs from surfaces as they are unable to multiply in a clean environment. Cleaning equipment should be stored and taken care of so it can dry between uses and not allow germs to multiply.

ARRANGEMENTS FOR LAUNDERING OF SOILED ITEMS

Soiled clothing will be returned to a child's home for laundering. Educators will remove soiled content prior to placing clothing into a plastic bag and securely storing these items in a sealed container, not placed in the child's bag.

CLOTHING

- Educator's clothing should be washed daily.
- Educators should also have a change of clothes available in case of accidents.
- Dress-up and play clothes should be washed once a week.

EQUIPMENT AND TOY CLEANING

Educators are required to clean the children's equipment and toys on a regular basis in order to minimise cross contamination and the spread of illnesses. Educators will wash a toy or piece of equipment

immediately if it has been sneezed on and/or soiled or if it has been discarded after play by a child who has been unwell. The Service will have washable toys for the younger children. Toys and equipment must be cleaned more often in the event of an infectious disease or virus is present in the service or community- (COVID-19).

Educators will be required to keep a cleaning register documenting when toys and equipment have been cleaned.

RECOMMENDED CLEANING MATERIALS:

- Most toys can be washed with normal dishwashing liquid and rinsed with clean water.
- Get into corners with a toothbrush and allow to air dry (if possible, in the natural sunlight).
- Leaving items such as LEGO and construction blocks to drain on a clean tea-towel overnight is ideal.

PLAY DOUGH

Our OSHC Service will reduce the risk of the spread of disease when playing with play dough by:

- encouraging hand washing before and after using play dough
- storing the play dough in a sealed container in the refrigerator between uses
- making a new batch of play dough each week, and
- if there is an outbreak of vomiting and/or diarrhoea, discarding the playdough at the end of each day during the outbreak.

PUZZLES AND GAMES

- Wooden puzzles – wipe over with a damp cloth- do not immerse in water as this can destroy the equipment.
- Cardboard should be wiped over with a slightly damp cloth.

SUN PROTECTION

Our OSHC Service will work in compliance with the **NSW** SunSmart Program to ensure children's health and safety is maintained at all times whilst at the OSHC



Service. SunSmart recommends that all early childhood education and care services have a SunSmart Policy to reduce UV damage to those in care, including educators. **Our Sun Safety Policy has been accepted and approved by SunSmart.**

1. OUTDOOR ACTIVITIES

Sun protection is required when UV levels reach level 3 or above. Our OSHC Service will monitor UV levels daily through one of the following methods:

- using smart phone SunSmart app
- viewing Bureau of Meteorology website www.bom.gov.au
- visiting www.myuv.com.au

The OSHC Service will use a combination of sun protection measures whenever **UV Index levels reach 3 and above.**

- Care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.
- Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.
- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions and incursions.
- educators will check the temperature of surfaces and playground equipment to determine if it is safe for children to play. (Daily Playground Surface Temperature Check)

2. SHADE

The OSHC Service will provide and maintain adequate shade for outdoor play. Shade options can include a combination of portable, natural and built shade. Regular shade assessments should be conducted to monitor existing shade structures and assist in planning for additional shade.

3. HATS

Educators and children are required to wear sun safe hats that protect their face, neck and ears. A sun safe hat is:

- legionnaire hat
- bucket hat with a deep crown and angled brim that is size at least 5cm (adults 6cm) and must shade the face, neck and ears
- broad brimmed hat with a brim size of at least 6cm (adults 7.5cm)
- approved school hat from the child's school.

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not recommended. Children without a sun safe hat will be asked to play in an area protected from the sun (e.g., under shade, veranda or indoors) or can be provided with a spare hat.

4. CLOTHING

When outdoors, educators and children who are not wearing school uniforms will wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- Loose fitting shirts and dresses with sleeves and collars or covered neckline.
- Longer style skirts, shorts and trousers.
- Children who are not wearing sun safe clothing can be provided with spare clothing.

Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended.

5. SUNSCREEN

As per Cancer Council Australia recommendations: All educators and children will apply SPF30 or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours (during vacation care). Sunscreen is stored in a cool, dry place and the use-by-date monitored.

6. ROLE MODELLING

Educators will act as role models and demonstrate sun safe behaviour by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF30 or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- wearing sunglasses that meet the Australian Standard 1067 (optional)
- Families and visitors are encouraged to role model positive sun safe behaviour.

DELIVERY AND COLLECTION OF CHILDREN

The following procedure must be adhered to at all times to ensure the safety of the children. (See *Delivery of, and collection from Education and Care Service Premises Policy*, [Safe Transportation Policy](#))

ARRIVAL

- All children must be signed in by their parent or person who delivers the child to our OSHC Service
- An educator is to check the sign in sheet ensuring families have signed their child in. If families have not signed the child in, the educator or nominated supervisor will sign the child in, complying with Regulation 158.
- An educator will greet and receive each child to ensure the child is cared for at all times.

- A locker or shelf space will be made available to children and their families. A sign is posted above the lockers nominating a symbol for each child.

DELIVERY TO SCHOOL

- Children will be signed out of the OSHC Service, driven/walked to the school, and escorted to the designated before-school play area where the teacher on playground duty will be advised of their arrival.
- When children are being taken to several different schools, a second staff member/educator will supervise children remaining in the vehicle whilst the first staff member/educator escorts children into the school grounds.
- All Kindergarten children and children with additional needs (as required) will be escorted to their classroom and supported as required to put their bags away and prepare for the day (lunches, homework etc. in the designated place).
- Children will not be left at the school until a teacher is on playground duty.

COLLECTION FROM SCHOOL

- An educator will collect all Kindergarten children and children with additional needs (as required) from their classroom and advise the classroom teacher/s that they have been collected, before escorting them to the designated meeting area to meet older children.
- Children in first to sixth grade will make their way to the designated meeting area and be met by a staff member/educator.
- When children are being collected from several different schools, a second staff member/educator will supervise children remaining in the vehicle whilst the first staff member/educator collects children from the school grounds.
- Upon the return to the OSHC Service, an educator will sign all children into the Service.

TRANSPORT TO AND FROM SCHOOL

- All staff/educators will carry a current and appropriate license for the class of vehicle they are driving.
- Any vehicle used for delivery and collection of children must be registered, roadworthy, and appropriately insured.
- Any vehicle used for delivery and collection of children will be fitted with approved child restraints suitable to the age and size of the children being transported.
- Where possible, child passengers will only exit and enter the vehicle from the rear left-hand side passenger door (closest to the curb).

- All staff/ educators delivering and/or collecting children from school will carry a mobile phone and a copy of the children's emergency contact details.
- Children will not be left unattended in the vehicle at any time.
- All vehicles used to transport children will have a fully stocked travel First Aid kit available
- Educators and staff will strictly adhere to the *Safe Transportation Policy* and procedure.
- The *Transport Pick Up/Drop off Checklist* is completed each time transportation is provided to children
- A *Transport Attendance Record* is provided to the designated educator prior to leaving the OSHC service and completed to record how each child was accounted for as they embark and disembark the vehicle
- once all children have exited the vehicle/bus a final check is conducted, including the interior of the vehicle to ensure no child has been left behind
- Children's attendance is checked against an accurate attendance record and checked by the supervising educator/staff before departure from the OSHC service

ABSENT OR MISSING CHILDREN

- Parents must advise OSHC Service staff as early as possible of their child/children's absence.
- If a child has not arrived at the Service and the parent has not contacted the Service to advise of absence **15 minutes** prior to children being escorted to school, an educator will contact the parent to clarify and confirm the situation.
- If a child is collected from the school early due to illness or other reasons the parent must notify the Service, using the Service's telephone message bank if the OSHC Service is unattended.
- If a child does not arrive at the designated collection point at the expected time an educator will:
 - ask children in the school playground if they have seen the child or know where he/she is (phone parents to confirm if children say the child left school early).
 - ask the child's teacher and/or office staff if they know of the child's whereabouts.
 - ring the child's parent/s to enquire if they know of their child's whereabouts.
 - if parents believe the child should be at school, search the school classrooms and premises with assistance of teachers, and permission of classroom teachers and any available persons.
 - the educator will immediately contact the school principal or delegate.
 - if the child cannot be found during this search, the child must be considered missing.
 - *if the parents have been contacted and the child is subsequently found, the educator must immediately contact the parents to let them know.*

MISSING CHILDREN

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling **000**.
- Contact the child's parents.
- Contact the school to inform them of the missing child.
- Ensure that other children remain appropriately supervised.

DEPARTURE FROM SERVICE

- All children must be signed out by their parent or person who collects the child from our OSHC Service. If the parent or other person forgets to sign the child out, they will be signed out by the nominated supervisor or an educator.
- Children can only be collected by a parent, an authorised nominee named on their enrolment record, or a person authorised by a parent or authorised nominee to collect the child. Children may leave the premises if a parent or authorised nominee provides written authorisation for the child to leave the premises.
- Photo identification must be sighted by a Primary Contact educator before the child is released. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- Children will not be released into the care of a person not authorised to collect the child e.g., court orders concerning custody and access. If an unauthorised person is not willing to leave the premises without the child, the educator will call the police.
- Nominated Supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date.
- Nominated Supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow anyone **under the age of 18** to collect children.
- No child will be released into the care of anyone not known to educators. Parents must give prior notice where:
 - the person collecting the child is someone other than those mentioned on the enrolment form (e.g., in an emergency) or
 - there is a variation in the persons picking up the child, including where the child is collected by an authorised nominee who is unknown to educators.

- If educators do not know the person by appearance, the person must be able to produce some photo identification. If educators cannot verify the person's identity, they may be unable to release the child into that person's care.
- If the person collecting the child appears to be intoxicated, or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
 - discuss their concerns with the person, if possible, without the child being present
 - suggest they contact another parent or authorised nominee to collect the child.
 - if the person insists on taking the child, Educators will inform the police of the circumstances, the person's name and vehicle registration number.
 - Educators cannot prevent an incapacitated parent from collecting a child but must consider their obligations under the relevant child protection laws.
- At the end of each day educators will check the premises including outdoors and indoors to ensure that no child remains on the premises after the OSHC Service closes.
- Children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy*.
- Details of absences during the day will be recorded.

DELIVERY AND COLLECTION OF CHILDREN DURING VACATION CARE

During periods of vacation care, policies and procedures will be followed as per *Arrival at Service*, and *Departure from Service*.

VISITORS

To ensure we can meet Work Health and Safety requirements and ensure the safety of our children, individuals visiting our OSHC Service must sign in when they arrive at the Service and sign out when they leave. Refer to our *Delivery of, and collection from Education and Care Service Premises* and procedure for more detailed information. **Visitors are not to be left alone with children at any time whilst at the service. Working With Children Checks will be recorded and verified for any visitor who is not fully supervised at the service. Visitors to the service are expected to comply with service policies and procedures, including health and safety policies whilst at the service and report any health and safety issues to management.**

WATER SAFETY

- at all times children near water are closely supervised. A child will never be left unattended near any water

- ensure that all water containers are made inaccessible to children and also make sure children's play areas are safely fenced off from water hazards such as rivers, dams, creeks, lakes, irrigation channels, wells etc.
- immediately empty all wading pools/water troughs etc. after every use, storage should prevent the collection of water e.g. upright/inverted, also check grounds after rain or watering and empty water that has collected in holes or containers
- Ensure wading/water trough are hygienically cleaned, disinfected and chlorinated appropriately:
 - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant
 - wash away disinfectant before filling trough

KITCHENS

- Children must not gain access to any harmful substance, equipment or amenity.
- The kitchen has a barrier to prevent unsupervised entry by younger children into the kitchen.

MONITORING AND REVIEWING HAZARDS

Risk management is an ongoing process. Risks must be systematically monitored, and management strategies reviewed to ensure that they continue to be effective and contribute to a safe and healthy work environment. New hazards can emerge over time resulting in control strategies becoming ineffective and therefore may require updating.

Hazard identification, Risk Management and Hazard Reduction is specifically addressed within our *Work Health and Safety Policy*.

BACK CARE AND MANUAL HANDLING

- Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.
- Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee.
- Manual handling injuries also include overuse injuries or, as a result of falling during manual handling, bruising or laceration.

(See our *Work Health and Safety Policy* for further information and recommendations for back care and manual handling).

FURTHER RESOURCES

ACT: WorkSafe ACT provides information for work health and safety

<https://www.worksafe.act.gov.au>

Northern Territory: NTWorkSafe assists businesses and workers understand their obligations under work health and safety. <https://worksafe.nt.gov.au/home>

NSW: SafeWork NSW administers the Work Health and Safety legislation, and has several codes of practice on specific work safety issues which are available online at <https://www.safework.nsw.gov.au/>

Queensland: Workplace Health and Safety Queensland oversees the Queensland Work Health and Safety Act 2011 <https://www.worksafe.qld.gov.au/>

South Australia: SafeWork SA provides work health and safety services across South Australia <https://www.safework.sa.gov.au/>

Tasmania: WorkSafe Tasmania is the state’s health and safety regulator: <https://worksafe.tas.gov.au/home>

Victoria: WorkSafe Victoria is the state’s health and safety regulator see: <https://www.worksafe.vic.gov.au/early-childhood-education-and-care-safety-basics>

Western Australia: WorkSafe Western Australia regulates and promotes occupational safety and health regulations in the workplace <https://www.commerce.wa.gov.au/worksafe>

For further information see: <https://www.safeworkaustralia.gov.au/>

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Health and Safety Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

CHILDCARE CENTRE DESKTOP- RELATED RESOURCES

Car Park Safety Management Guide	Outdoor Cleaning Safety Checklist
Car Park Safety Checklist	Transportation Attendance Record
Daily Playground Surface Temperature Check	Vehicle/bus transportation procedure
	Work Health and Safety Manual

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education (2022). [My Time, Our Place- Framework for School Age Care in Australia.V2.0](#)

Cancer Council NSW. Early childhood and care sun protection policy: <http://www.sunsmartnsw.com.au/wp-content/uploads/2015/11/Childcare-policy1.pdf>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2023).

Education and Care Services National Regulations. (Amended 2023)

Guide to the National Quality Standard. (Amended 2023)

KidSafe Australia: <https://kidsafe.com.au>

National Health and Medical Research Council. (2012) (updated June 2013). Staying healthy: Preventing infectious diseases in early childhood education and care services.

Standards Australia. AS 1851-2005 (incorporating Amendment No. 1). Maintenance of fire protection systems and equipment: [https://www.saiglobal.com/PDFTemp/Previews/OSH/as/as1000/1800/1851-2005\(+A1\).pdf](https://www.saiglobal.com/PDFTemp/Previews/OSH/as/as1000/1800/1851-2005(+A1).pdf)

[Western Australian Education and Care Services National Regulations](#)

Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED BY:	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JULY 2023	NEXT REVIEW DATE	July 2024
VERSION NUMBER	v9.7.23		
MODIFICATIONS	<ul style="list-style-type: none"> Sources checked for currency Minor edits throughout policy Additional information relating to Safe Transportation of Children Additional information relating to visitors not being left alone added Additional section added for Continuous Improvement/Related Resources 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY 2022	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 	JULY 2023	
JULY 2021	<ul style="list-style-type: none"> minor edits to policy as highlighted minor formatting changes references and sources checked for currency 	JULY 2022	
JULY 2020	<ul style="list-style-type: none"> COVID-19 information added to cleaning/ handwashing sections Removal of Hazard Identification, Risk Management, Hazard Reduction and Hazardous Materials sections, Maintenance of Fire Equipment and Back care and Manual Handling (moved to Work Health and Safety Policy) additional related policies 	JULY 2021	
MARCH 2020	<ul style="list-style-type: none"> Regulations checked and some additions Amendments to Sun Safety policy inclusion Hazard Identification area added 	JULY 2020	

	<ul style="list-style-type: none"> • Additional information added re: fire extinguisher testing • Specific state/territory contacts added 	
JULY 2019	<ul style="list-style-type: none"> • New section added – ‘Visitors’. • Heading added – ‘Further resources’ • Additional information added to points. • Rearranged the order of points for better flow. • References checked & corrected. • Related Policies alphabetised. • Sources corrected & alphabetised. 	JULY 2020
JULY 2018	Minor adjustments made to terminology plus included the ‘related policies’ list.	JULY 2019

Item 4.7 Nutrition and Food Safety Policy

EXECUTIVE SUMMARY

Council to review and adopt the Nutrition and Food Safety Policy with changes.

OFFICER'S RECOMMENDATION

That Council: Adopt the Nutrition and Food Safety Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment J - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

NUTRITION AND FOOD SAFETY POLICY

As per Education and *Care Services National Law and Regulations*, our service has a nutritional and food safety policy and procedures in place to ensure quality practices relating to nutrition, food and beverages and dietary requirements are followed at all times.

Our Outside School Hours Care (OSHC) Service recognises the importance of safe food handling and healthy eating to the growth and development of young children and is committed to implementing the healthy eating key messages outlined in the Australian Dietary Guidelines for primary school aged children.

Our OSHC Service recognises the important role educators have in teaching healthy lifestyles through everyday experiences and routines and physical activity. Our educators support families by providing information about healthy food and drink for their children when visiting our service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented
2.1.3	Healthy lifestyles	Healthy eating and physical activity are promoted and appropriate for each child

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
79	Service providing food and beverages
80	Weekly menu
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
160	Child enrolment records to be kept by approved provider and family day care educator
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures

170	Policies and Procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Administration of First Aid Policy Child Safe Environment Policy Dealing with Infectious Diseases Policy Enrolment Policy Excursions / Incursions Policy	Family Communication Policy Governance Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Multicultural Policy
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PURPOSE

Out of School Hours Care Services are required by legislation within the National Quality Standard to ensure the provision of healthy foods and drinks that meet the requirements for children according to the *Australian Dietary Guidelines*. It is essential that our OSHC Service partners with families to provide education about nutrition and promote healthy eating habits for children to positively influence their health and wellbeing. Dietary and healthy eating habits formed in the early years are shown to continue into adulthood and can reduce the risk factors associated with chronic adult conditions such as obesity, type 2 diabetes and cardiovascular disease.

Our OSHC Service recognises the importance of healthy eating for the growth, development, and wellbeing of children and is committed to promoting and supporting healthy food and drink choices for children in our care. This policy affirms our position on the provision of healthy food and drink while children are in our care and the promotion and education of healthy choices for optimum nutrition.

We believe in providing a positive eating environment that reflects dietary requirements, cultural and family values, and promotes lifelong learning for children, as we commit to implementing and embedding the healthy eating key messages outlined the *Australian Guide to Healthy Eating*.

Our OSHC Service is also committed to ensuring consistently high standards of food preparation and food storage and transportation are adhered to.

SCOPE

This policy applies to children, families, staff, visitors, approved provider, nominated supervisor and management of the OSHC Service.

IMPLEMENTATION

Our OSHC Service has a responsibility to help children to develop good food practices and approaches, by working with families and educators.

Mealtimes reflect a relaxed and pleasant environment where educators engage in meaningful conversations with children. This assists in creating a positive and enjoyable eating environment.

Food will be prepared in accordance with the Food Safety Program. All kitchens and food preparation areas will comply with Food Standards Australia and New Zealand (FSANZ) and any relevant local jurisdictional requirements (i.e., local council registrations and inspections). All staff involved in the stages of food handling have the skills and knowledge to ensure food safety is a priority.

From Friday 8 December 2023, Early Education and Care Services who prepare food, including ready to eat food or meals that have brought into the service by families, must adhere to requirements relating to food safety outlined within the Food Standards Code and Food Act 2003 (Standard 3.2.2A). The revised requirements involve the appointment of a Food Safety Supervisor who must be available to supervise food handlers at the service. It is a requirement that both the Food Safety Supervisor and all food handlers attend food safety training. Additionally, records must be maintained relating to receiving, storage, processing, displaying and transportation of food. These records must be retained for a period of 3 months.

NUTRITION

Promote healthy food and drinks based on the Australian Guide to Healthy Eating and the Dietary Guidelines for Children and Adolescents.

OUR OSHC SERVICE WILL:

WHERE FOOD IS PROVIDED BY THE OSHC SERVICE:

- provide children with a wide variety of healthy and nutritious foods for meals and snacks including fruit and vegetables, wholegrain cereal products, dairy products, lean meats, and high protein alternatives
- plan and display the OSHC Service menu (at least two weeks at a time) that is based on sound menu planning principles and meets 50% of the daily nutritional needs of children
- plan healthy snacks on the menu to complement what is served at mealtimes and ensure the snacks are substantial enough to meet the energy and nutrient needs of children.
- vary the meals and snacks on the menu to keep children interested and to introduce children to a range of healthy food ideas
- regularly review the menu to ensure it meets best practice guidelines

- develop the menu in consultation with children, educators and families
- consult with health professionals to support the menu development including Dietitians for children with special dietary requirements such as vegetarian and vegans
- celebrate diversity by valuing and including foods of different cultures
- respect and accommodate children's cultural or religious dietary practices as requested by families

Where food is brought from home:

- provide information to families on the types of foods and drinks recommended for children and that are suitable for children's lunchboxes and after school snacks
- provide information to families on how to read the *Nutritional Information Panel* on food and drink labels
- encourage children to eat the more nutritious foods provided such as sandwiches, fruit, cheese and yoghurt, before eating any less nutritious food provided
- strongly discourage the provision of highly processed snack foods high in fat, salt, and/or sugar, and low in essential nutrients in children's lunchboxes. Examples of these foods include sweet biscuits, some muesli bars, breakfast bars and fruit filled bars, and chips.
- food items that should not be brought to the OSHC service include confectionary (lollies, sweets, chocolate, jelly), deep fried foods (chicken nuggets, fish fingers) and sugary drinks (cordial, energy drinks).

THE APPROVED PROVIDER/ MANAGEMENT/ NOMINATED SUPERVISOR WILL:

- ensure educators and staff are aware of their responsibilities and obligations under the Education and Care Services National Law and National Regulations in relation to this policy and relevant procedures to ensure awareness of safe food handling practices while promoting healthy eating
- ensure new staff and educators are aware of food practices and procedures as outlined in this policy during induction and orientation
- ensure water is readily available for children to drink
- ensure enrolment forms include information relating to child's food preferences, allergies, intolerances, cultural or religious considerations or medical conditions which involve food or food practices
- consult with families on enrolment to develop individual management plans, including completing Risk Minimisation Plans for children with medical conditions involving food allergies, food intolerances and special dietary requirements as per *Medical Conditions Policy*
- ensure children's individual dietary requirements as per enrolment information or medical condition plans are communicated to all staff and food handlers

- ensure any changes to children’s individual dietary requirements are recorded and communicated to all staff and food handlers
- appoint a Food Safety Supervisor to oversee food handlers (mandatory for all services who prepare food, including food brought from home)
- ensure the Food Safety Supervisor and all staff and food handlers attend basic safe food handling training, including an appropriate Food Safety and Food Hygiene Certificate
- keep an up-to-date *Food Safety Certificate Register* to provide evidence of safe food handling training for all food handlers
- keep records relating to receiving, storage, processing, displaying and transportation of food. These records must be kept for a period of 3 months
- ensure the weekly menu is displayed in an accessible and prominent area for parents to view
- ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure the service menu is reviewed on a regular basis, every 6 months. Amendments made to the service menu will be recorded.
- encourage and provide opportunities for staff and educators to undertake regular professional development to maintain and enhance their knowledge about childhood nutrition and food safety practices

EDUCATORS/ FOOD HANDLERS WILL:

- ensure children remain seated while eating and drinking
- be aware of children with food allergies, food intolerances, and special dietary requirements and consult with families and management to ensure individual management plans are developed and implemented, including completing Risk Minimisation Plans for children with medical conditions involving food as per *Medical Conditions Policy*
- supervise children whilst eating and drinking
- participate in regular professional development to maintain and enhance knowledge about childhood nutrition and food safety practices
- participate in safe food handling training on a regular basis, every 12 months, including the completion of an appropriate Food Safety and Food Hygiene Certificate
- keep records relating to the safe handling of food, where required
- consult with children, families, educators and dietitians regarding the review of the service menu
- follow the guidelines for serving different types of food and the serving sizes in the guidelines
- use the Australian Government “eat for health” calculator- www.eatforhealth.gov.au

- display nutritional information for families and keep them regularly updated
- ensure the weekly menu is displayed in an accessible and prominent area for parents to view
- ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure food is presented attractively
- not allow food to be used as a form of punishment or to be used as a reward or bribe
- establish healthy eating habits in the children by incorporating nutritional information into our program
- encourage parents to the best of our ability to continue our healthy eating message in their homes
- encourage children to brush their teeth after breakfast at the OSHC Service, if possible, to promote good dental health
- ensure pets or animals are not present within the kitchen or food preparation areas

FOOD HYGIENE

Food poisoning is caused by bacteria, viruses, or other toxins being present in food and can cause extremely unpleasant symptoms such as diarrhoea, vomiting, stomach cramps, and fevers.

(Foodsafety.gov, 2019). Our OSHC Service will strictly adhere to food hygiene standards to prevent the risk of food poisoning.

BUYING AND TRANSPORTING FOOD

OUR OSHC SERVICE WILL:

- ensure food supplies have been ordered in a timely manner
- always check labels for the 'use by' and 'best before' dates, understanding that 'use by' dates apply to perishable foods that could potentially cause food poisoning if out of date, whilst 'best before' dates refer to food items with long shelf life, but quality could be compromised
- avoid buying food items in damaged, swollen, leaking or dented packaging
- always check eggs within cartons: Never buy dirty or cracked eggs
- never buy any food item if unsure about its quality
- record temperatures of foods upon delivery (*See Food Delivery Register*)
- ensure fresh meat, chicken, or fish products cannot leak on to other food items
- ensure chilled, frozen, and hot food items are kept out of the 'danger zone' (5 °C to 60 °C) on the trip back to the Service by:
 - not getting chilled frozen, or hot food items until the end of the shopping.
 - placing these items in an insulated shopping bag or cooler
 - immediately unpacking and storing these items upon the return to the Service

- Immediately unpacking and storing these items upon the return to the Service.

STORING FOOD

OUR OSHC SERVICE WILL:

- ensure the refrigerator and freezer has a thermometer and that the refrigerator is maintained at 5 °C or below and the freezer is maintained at -17 °C or below
- ensure fridge and freezer temperatures are checked and recorded daily (See *Refrigeration Temperature Control Register*)
- store raw foods below cooked foods in the refrigerator to avoid cross contamination by foods dripping onto other foods
- ensure fresh meat is not stored in the fridge for more than 3 days
- ensure that all foods stored in the refrigerator are stored in strong food-safe containers with either a tight-fitting lid, or tightly applied plastic wrap or foil
- ensure that all foods not stored in their original packaging are labelled with:
 - the name of the food
 - the 'use by' date
 - the date the food was opened
 - details of any allergens present in the food
- transfer the contents of opened cans into appropriate containers
- ensure all bottles and jars are refrigerated after opening
- place 'left-over' hot food in an appropriate sealed container in the refrigerator as soon as the steam has stopped rising. Food can be cooled quickly to this point by placing in smaller quantities in shallow containers, reducing the amount of time sitting in the 'danger zone'
- not reuse disposable containers (e.g., Chinese food containers)
- store dry foods in labelled and sealed, air-tight containers if not in original packaging.
- store dry foods in cupboards or if in a walk-in pantry, on shelving no lower than 30cm from the floor
- not place anything on the floor of a walk-in pantry (as containers of any type create easy access to shelves for mice and rats)
- store bulk dry foods only in food-safe and airtight containers
- use the FIFO (first in, first out) rule for all foods (dry, chilled, and frozen) to ensure rotation of stock so that older stock is used first
- store cleaning supplies and chemicals separate to food items

PREPARING AND SERVING FOOD

OUR OSHC SERVICE WILL:

- ensure that all cooked food is cooked through and reaches 75 °C
- document periodic recordings of food (See *Cooking, Cooling & Reheating Register*)
- ensure that cooked food is served promptly, or
- use a thermometer to ensure that hot food is maintained at above 60 °C until ready to serve.
- ensure that prepared cold food is stored in the refrigerator maintained at below 5 °C until ready to serve
- discard any cooked food that has been left in the 'danger zone' for two or more hours. Do not reheat.
- reheat cooked food (if required, for example for a child who was sleeping at lunch time) to a temperature of 70 °C (but only ever reheat **once**. Discard if the food is not eaten after being reheated).
- keep cooked and ready-to-eat foods separate from raw foods
- ensure foods are defrosted in the fridge or microwave
- wash fruit and vegetables thoroughly under clean running water before preparation
- ensure unused washed fruit or vegetables are thoroughly dry before returning to storage
- ensure food that has been dropped on the floor is immediately discarded
- thoroughly clean kitchen utensils and equipment between using with different foods and/or between different tasks
- avoid cross-contamination by ensuring that separate knives and utensils are used for different foods
- avoid cross-contamination by ensuring that colour-coded cutting boards are used (note that it doesn't matter which colour you use for which food providing signs are displayed to alert all staff).

Common colours are:

- Blue: raw fish/seafood
- Green: fruit and vegetables
- Red: raw meat
- Brown: cooked meat
- Yellow: raw poultry
- White: bakery and dairy
- ensure that gloves are changed between handling different foods or changing tasks
- ensure that staff preparing food for children with food allergies or intolerances are proficient at reading ingredient labels
- ensure that food allergies and intolerances are catered for by using separate easily identifiable cutting boards, utensils, and kitchen equipment (e.g., using a colour code, or food-safe permanent marker)

- ensure that children with food allergies and/or intolerances are served their meals and snacks individually on an easily identifiable plate (e.g. different colour), and that food is securely covered with plastic wrap until received by the child to prevent possible cross-contamination
- ensure all educators and staff are aware of children who have severe allergic reactions to certain foods as per ASCIA Action Plans
- ensure that unwell staff do not handle food
- ensure left-over food is stored immediately in the fridge or thrown away

CLEANING

OUR OSHC SERVICE WILL:

- ensure that food preparation areas and surfaces are cleaned both before, after, and during any food preparation
- record cleaning and sanitising of food contact surfaces (See *Kitchen Cleaning Checklist*)
- ensure that all cooking and serving utensils are cleaned and sanitised before use
- ensure that all dishwashing sponges, brushes, and scourers are cleaned after each use and allowed to air dry or placed in the dishwasher
- ensure the food storage area is clean, ventilated, dry, pest free, and not in direct sunlight
- ensure refrigerators and freezers are cleaned regularly and door seals checked and replaced if not in good repair
- prevent pest infestations by cleaning spills as quickly as possible and ensuring rubbish and food scraps are disposed of frequently
- ensure that floor mops are thoroughly cleaned and air dried after each use
- replace any cleaning equipment that shows signs of wear or permanent soiling.

PERSONAL HYGIENE FOR FOOD HANDLERS

OUR OSHC SERVICE WILL:

- clean clothing is worn by food handlers (such as an apron or appropriate jacket)
- long hair is tied back or covered with a net (hairspray may be used for fringes to secure hair).
- hand and wrist jewellery are not worn while preparing food (e.g. rings and bracelets)
- nails are kept short and clean and no nail polish is worn (as it can chip into food and hide dirt under the nails)
- strict hand-washing hygiene is adhered to, including washing hands each time they return to the kitchen before continuing with food preparation duties

- wounds or cuts are covered with a brightly coloured, waterproof dressing (that will easily be seen if it falls off), and gloves will be worn over any dressings
- staff who are not well will not prepare or handle food.

ALL STAFF HANDLING FOOD WILL:

- ensure children and staff wash and dry their hands (using soap, running water, and single use disposable towels or individual hand towels) before handling food or eating meals and snacks
- ensure gloves (and food tongs) are used by all staff handling 'ready to eat' foods.
- ensure food is stored and served at safe temperatures (below 5°C or above 60°C), with consideration to the safe eating temperature requirements of children
- ensure separate cutting boards are used for raw meat and chicken, fruit and vegetables, and utensils and hands are washed before touching other foods
- discourage children from handling other children's food and utensils
- ensure food-handling staff members attend relevant training courses and pass relevant information on to the rest of the staff.

CREATING A POSITIVE LEARNING ENVIRONMENT

OUR OSHC SERVICE WILL:

- ensure that educators sit with the children at meal and snack times to role-model healthy food and drink choices and actively engage children in conversations about the food and drink provided
- choose water as a preferred drink- consider serving it chilled or with ice in summer; add lemon, mint leaves or other fruits such as oranges for flavour
- endeavour to recognise, nurture and celebrate the dietary differences of children from culturally and linguistically diverse backgrounds
- choose foods from the five food groups
- create a relaxed atmosphere at mealtimes where children have enough time to eat and enjoy their food as well as enjoying the social interactions with educators and other children
- encourage children to try different foods but do not force them to eat
- not use food as a reward or withhold food from children for disciplinary purposes
- role-model and discuss safe food handling with children

OSHC SERVICE PROGRAM

OUR OSHC SERVICE WILL:

- foster awareness and understanding of healthy food and drink choices through including in the children's program a range of learning experiences encouraging children's healthy eating
- encourage children to participate in a variety of 'hands-on' food preparation experiences
- provide opportunities for children to engage in discovery learning and discussion about healthy food and drink choices
- embed the importance of healthy eating and physical activity in everyday activities and experiences

COOKING WITH CHILDREN

Cooking can help develop children's knowledge and skills regarding healthy eating habits. Cooking is a great, fun activity and provides opportunities for children to be exposed to new foods, sharing of recipes and cooking skills. During any cooking experience, educators will be vigilant to ensure that the experience remains safe, and relevant food hygiene practices are adhered to.

COMMUNICATING WITH FAMILIES

Our OSHC Service will:

- provide a copy of the *Nutrition and Food Safety Policy* to all families upon orientation at the Service
- provide opportunities for families to contribute to the review and development of the policy
- request that details of any food allergies or intolerances or specific dietary requirements be provided to the OSHC Service and work in partnership with families to develop an appropriate response so that children's individual dietary needs are met
- display menus for families to view easily
- communicate regularly with families about food and nutrition related experiences within the Service and provide up to date information to assist families to provide healthy food choices at home.
- communicate regularly with families and provide information and advice on appropriate food and drink to be included in children's lunchboxes- especially during Vacation Care. This information may be provided to families in a variety of ways including factsheets, newsletters, during orientation, information sessions and informal discussion.
- discuss discretionary choices- (food and beverages which are not necessary as part of a balanced diet) with families and if necessary, remove items from children's lunch boxes. Alternative healthy food will be offered to children.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Nutrition and Food Safety Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP- RELATED RESOURCES

Cooking, Cooling & Reheating Register	Managing Menus and Food Supplies
Food Delivery and Supplier Register	Menu Planning Checklist
Food Hygiene Practices Procedure	Nutritional Practices Procedure
Food Safety Certificate Register	Nutritional Practice Survey
Kitchen Cleaning Checklist	Vegetarian Menu Planning Checklist
Kitchen Cleaning Procedure	Refrigeration Temperature Control Register
Menu Amendment Notifications	Service Menu Table
Menu Development and Review Procedure	
Menu Evaluation Survey	

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

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Australian Government Department of Education Skills and Employment. (2011) (2022). *My Time, Our Place- Framework for School Age Care in Australia.V2.0*

Australian Government Department of Health *Eat for Health. The Australian Dietary Guidelines*
<https://www.eatforhealth.gov.au/guidelines>

Education and Care Services National Law Act 2010. (Amended 2023)
[Education and Care Services National Regulations](#). (Amended 2023).

Food Act 2003

Food Regulation 2015

Food Safety Standards (Australia only). (2015):

<http://www.foodstandards.gov.au/industry/safetystandards/Pages/default.aspx>

Food Standards Australia and New Zealand Act 1991

Food Standards Australia New Zealand. (2016). *Safe Food Australia – A guide to the food safety standard (3rd Ed.)*:

<http://www.foodstandards.gov.au/publications/Pages/safefoodaustralia3rd16.aspx>

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Guide to the National Quality Standard. (2020). (Updated 2023).

National Health and Medical Research Council. *Australian Dietary Guidelines 2013*:

<https://www.nhmrc.gov.au/about-us/publications/australian-dietary-guidelines>

National Health and Medical Research Council. Department of Health and Ageing. *Infant Feeding Guidelines*. (2013):

https://www.eatforhealth.gov.au/sites/default/files/files/the_guidelines/n56b_infant_feeding_summary_130808.pdf

National Health and Medical Research Council. *Eat for health*: <https://www.eatforhealth.gov.au/>

NSW Food Authority: <http://www.foodauthority.nsw.gov.au/>

NSW Ministry of Health *Eat Smart Play Smart- A manual for Out of School Hours Care*. Third Edition (2016).

Revised National Quality Standard. (2018).

The Australian Dental Association: <https://www.ada.org.au/Home>

Victoria State Government Education and Training *Nutrition Australia Healthy eating in the National Quality Standard A guide for early childhood education and care services*

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011.

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JULY/MAY 2023	NEXT REVIEW DATE	MAY 2024
VERSION NUMBER	V9.07.23		
MODIFICATIONS	<p>JULY</p> <ul style="list-style-type: none"> updates to the Food Safety Standards (effective Dec 2023) <p>MAY</p> <ul style="list-style-type: none"> policy maintenance - no major changes to policy hyperlinks checked and repaired as required continuous improvement/reflection section added Childcare Centre Desktop Related resources section added link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
MAY 2022	<ul style="list-style-type: none"> policy maintenance - no major changes to policy hyperlinks checked and repaired as required 	MAY 2023	
OCTOBER 2021	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA Nutrition, Food and Beverages, Dietary Requirements Policy Guidelines (August 2021) Additional sections added for AP, Management, NS and Educator and food handlers additional related regulations and related policies added 	MAY 2022	
MAY 2021	<ul style="list-style-type: none"> minor editing inclusion of cultural or religious dietary practices sources checked for currency 	MAY 2022	
MAY 2020	minor additions- discretionary foods, online shopping addition of health professional's information to ensure best practice sources checked for currency	MAY 2021	
MAY 2019	Food hygiene section added, comprising of: <ul style="list-style-type: none"> - Buying and transporting food - Storing food - Preparing and serving food - Cleaning - Personal hygiene for food handlers Heading added to existing information – 'All staff handling food will:' New section added: Cooking with Children. Irrelevant points deleted	MAY 2020	
MAY 2018	Formatted in correct OSHC colours & styles. Made minor adjustments to better represent OSHC context. Additional information added to points.	MAY 2019	

	Rearranged the order of points for better flow Points added (Highlighted). Sources checked for currency.	
NOVEMBER 2017	Updated policy to comply with changes to the National Quality Standard and National Regulations	MAY 2018

Item 4.8 Safe Transportation Policy

EXECUTIVE SUMMARY

Council to review and adopt the Safe Transportation Policy with changes.

OFFICER'S RECOMMENDATION

That Council: Adopt the Safe Transportation Policy as presented.

Budget & Resource Implications

Nil

Background

Changes made to the Policy are highlighted.

Consultation (Internal/External)

Nil

Attachments

Attachment K - Policy

Report prepared by **Teena Chappell (Outside School Hours Care Coordinator)**

SAFE TRANSPORTATION POLICY

Our Out of School Hours Care (OSHC) Service provides education and care for children before school, after school and during school holidays. For children to access our Service, we provide transportation between our Service location, primary schools and other locations whilst participating on excursions.

Compliance with the Education and Care National Law and Regulations is mandatory to ensure the safety of children at all times and new provisions and amendments to these regulations are reflected in our procedures and policy for transportation and the safe handover of children.

We acknowledge our duty of care obligations by adhering to relevant legislation providing adequate supervision of children at all times, maintaining correct educator to child ratios, maintaining accurate attendance records and providing appropriate child restraints for children under our care.

[Note: This policy includes new requirements under the Education and Care Services National Law for regular transportation effective 1 March 2023.]

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND LAW	
4 (1)	Definition regular transportation
24(ha)	Application for service approval—centre-based service A description of any proposed regular transportation of children by or arranged by the education and care service
85	Incident, injury, trauma and illness policies and procedures
89	First Aid Kits
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion

101	Conduct a risk assessment for excursion
102A	Transportation of children other than as part of an excursion
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
102E	Children embarking a means of transport – centre-based services
102F	Children disembarking a means of transport – centre-based services
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios
136	First aid qualifications
158	Children’s attendance record to be kept by approved provider
161	Authorisations to be kept in enrolment record
168	Education and care service must have policies and procedures
168(2)(ga)	Education and care service must have policies and procedures (transportation)
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures
175(2)(f)(g)	A notification must be made to the regulatory authority if regular transportation starts or ceases being provided or arranged by the service
177(1)(o)(p)	Prescribed enrolment and other documents to be kept by the approved provider a record of children embarking a means of transport at the education and care services premises as set out in regulation 102E(4)(c); a record of children disembarking a means of transport at the education and care service premises as set out in regulation 102F(4)(d)
183	Storage of records and other documents
S51(4A)	The approved provider must ensure that the number of children educated and cared for by the service at any one time does not exceed the maximum number of children specified in the service approval
s165	Failure to adequately supervise children
s167	Failure to take reasonable precautions to protect children from harm and hazards

RELATED POLICIES

Administration of First Aid Policy	Emergency Evacuation Policy
Acceptance and Refusal of Authorisations Policy	Enrolment Policy
Administration of First Aid Policy	Excursion Policy
Behaviour Guidance Policy	Health and Safety Policy
Child Protection Policy	Incident, Injury, Trauma and Illness Policy
Child Safe Environment Policy	Medical Conditions Policy
Delivery of, and collection from Education and Care Service Premises	Record Keeping and Retention Policy
	Responsible Persons Policy
	Work Health and Safety Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place in relation to the safe transportation of children and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

[ACECQA, 2021]

We aim to ensure that all children being educated and cared for by our OSHC Service are adequately supervised at all times. This includes ensuring educator to child ratios are met whenever and wherever our service is operating including providing or arranging transportation as part of our OSHC Service activity.

SCOPE

This policy applies to children, families, staff, management the approved provider, nominated supervisor, students and visitors of the OSHC Service.

IMPLEMENTATION

The safety of children enrolled at the OSHC Service is paramount. Every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury. Appropriate safety measures have been implemented through our comprehensive risk assessment process to ensure supervision is adequate at all times including transporting children before and after school to our Service and when children are participating in excursions as part of the educational program. Educator to child ratios are adhered to in addition to ensuring the maximum numbers on the service approval are not breached at any time. Adequate supervision is therefore not static as it is dependent upon a range of considerations documented in risk assessments. Specific risk assessments and procedures for excursions during school holidays are included in our *OSHC Excursion Policy*. Procedures are in place to ensure a Nominated Supervisor or staff member is present and accounts for each child (and make a record) when children

embark and disembark the vehicle at the service premises and the interior of the vehicle is thoroughly checked to ensure no child is left behind.

DEFINITIONS (March 2023)

Excursion: an outing organised by an education and care service

Regular outing: in relation to an education and care service, means a walk, drive or trip to and from a destination

- (a) that the service visits regularly as part of its educational program; and
- (b) where the circumstances relevant to the risk assessment are *substantially* the same on each outing

Regular transportation: in relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are the same for each occasion on which the child is transported.

Transportation (that is part of the education and care service): Transportation forms part of an education and care service if the service remains responsible for children during the period of transportation. The responsibility for, and duty of care owed to, children applied in scenarios where services are transporting children, or have arranged for the transportation of children, including between an education and care service premises and another location, for example their home, school or a place of excursion.

Transition: In relation to the day-to-day process of moving between the service and a range of different education and care settings or from the education and care setting to a school setting.

Written authorisation: authorisation given by a parent or other person named in the child's enrolment record as having authority to authorise the child being transported by the service or on transportation arranged by the service. If the transportation is regular transportation, the authorisation is only required to be obtained once in a 12-month period. The authorisation must state:

- a) the child's name; and
- b) the reason the child is to be transported; and
- c) if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outings; and

- d) if the authorisation is **not** for a regular transportation, the date the child is to be transported; and
- e) a description of the proposed pick-up location and destination; and
- f) the means of transport; and
- g) the period of time during which the child is to be transported; and
- h) the anticipated number of children likely to be transported; and
- i) the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation; and
- j) any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported; and
- k) that a risk assessment has been prepared and is available at the education and care service; and
- l) that written policies and procedures for transporting children are available at the education and care service.

TRANSPORT SPECIFIC RISK ASSESSMENT

As per the Education and Care Services National Law, our service will *'ensure that every reasonable precaution is taken to protect children...from harm and from any hazard likely to cause injury'* (Section 167). Our OSHC Service will conduct comprehensive transport specific risk assessments to minimize and manage all potential risks for transporting children before authorisation is sought to transport a child. [Reg. 102B, 102D (4)].

A risk assessment will be undertaken at least annually for *'regular transportation'* of children. Each time our Service transports, or arranges, the transport of children as part of an excursion, a new risk assessment will be conducted. All risk assessments will be regularly assessed and evaluated as to facilitate continuous improvement in our service.

Our risk assessment process is guided by the following:

- **identify** any hazards or potential hazards that transporting the child may pose to the safety, health and wellbeing of the child
- **assess** the risk of harm or potential harm using a risk matrix
- **specify how the identified risks will be managed** by eliminating or minimising the impact using control measures
- **evaluate** the current risk or potential harm by implementing control measures
- **review** and monitor the risk or potential harm to ensure it continues to be managed as a low risk

source: Risk assessment and management ACECQA (2020)

Our risk assessment will consider:

- a) the proposed route and duration of the transportation; and
- b) the proposed pick-up location and destination; and
- c) the means of transport; and
- d) any requirements for seatbelts or safety restraints (as per the law of our jurisdiction); and
- e) any water hazards; and
- f) the number of adults and children involved in the transportation; and
- g) given the risks posed by transportation, the number of educators or other responsible adults to provide supervision and whether any adults with specialized skills are required; and
- h) whether any items should be readily available during transportation (mobile phone, list of emergency contact numbers) and;
- i) the process for entering and exiting-
 - i. the education and care service premises; and
 - ii. the pick-up location or destination (as required); and
- j) procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking.

Additional considerations may include:

- the experience of the driver and licensing conditions for the vehicle
- the age, ability, needs and skills of children being transported (non-ambulant)
- the experience of **the** adults involved in transportation and their capacity for supervising children
- movement of children between the vehicle and venues
- traffic conditions
- extreme weather conditions or natural disasters
- environmental hazards such as temperature extremes, smoke
- communication to/from the vehicle- mobile phone reception
- health needs of all children and adults
- first aid provision and management of illness, injuries and emergencies
- child safe practices.

source: NSW Government Kids and Traffic (2020)

THE APPROVED PROVIDER WILL NOTIFY THE REGULATORY AUTHORITY:

- **that the Service will offer or arrange transportation as part of the service approval application**

- within seven (7) days if there is a change to the regular transportation provided or arranged by the service, including if the regular transportation is no longer provided.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR WILL ENSURE:

- all staff, volunteers and students follow the *Safe Transportation Policy* and procedure
- all staff and driver (s) are aware of and inducted in the *Safe Transportation Policy* and procedure and have completed practical training relating to safe transportation of children
- a copy of any training undertaken by staff related to practical training of safe transportation is kept at the Service
- risk assessments are carried out prior to seeking authorisation for transporting children
- risk assessments for 'regular transportation' are evaluated to ensure potential risks are identified and managed at least annually or when circumstances for transportation change such as route or destination, identified risks/hazards (water hazards)
- any updates to policies and procedures are clearly communicated to all staff
- roles and responsibilities are clearly communicated with educators
- a designated driver is nominated as the person who will be responsible for driving the vehicle
- a designated educator is nominated as the person who will be responsible for accounting for each child before, during and after transportation and ensuring relevant records are completed
- messages from families regarding attendance changes to pick up or drop offs are communicated to the designated educator/educators
- children are signed into the service attendance record upon collection, noting the time children enter the vehicle
- rehearsals for transportation of children are conducted throughout the year as 'best practice'
- details of the safest route for travel, type of vehicle and required restraints are included in the risk assessment
- every reasonable precaution is taken to protect students from harm and hazards likely to cause injury
- effective and adequate supervision is provided (see below)
- educator to child ratio requirements are maintained at all times, including when children are being transported as part of the service activity
- a record of staff working directly with children (regulation 151) is kept
- compliance with first aid requirements of Regulation 136 is met at all times
- parents/guardians complete a written authorisation for regular transportation of their child and a copy of this is filed in the child's enrolment record/ attached to the enrolment form

- children are instructed on processes for entering and exiting the OSHC service premises and school (drop off) site; and are aware of pick up and destination locations
- the *Transport Pick up/Drop off Checklist* is completed each time transportation is provided to children
- A *Transportation Attendance Record* is provided to the designated educator prior to leaving the service to record:
 - children's attendance on the vehicle
 - how children are accounted for as they embark and disembark on the vehicle
 - a final check of the vehicle, including the interior, to ensure no child is left on the vehicle
- children are signed into or out of the attendance record upon delivery or collection of child to the service in accordance with the *Delivery of Children to, and Collection from Education and Care Service Premises Policy*
- the *Transportation Attendance Record* is completed to record how each child was accounted for as they embark or disembark from the vehicle during transportation
- once all children have exited the vehicle/bus, a final check is conducted, including the interior of the vehicle, to ensure no child is left on the vehicle
- a secondary educator conducts a final sweep of the vehicle, including the interior of the vehicle, to ensure there are no children or belongings left behind (best practice)
- the designated educator/Nominated Supervisor confirms the interior of the vehicle was checked and has signed the *Transportation Attendance Record*
- a second educator confirms the interior of the vehicle was checked and has signed the *Transportation Attendance Record* (best practice)
- under no circumstances will the driver and educators/employees supervising children be under the influence of alcohol or drugs
- children's attendance is checked against an accurate attendance record showing when children are within the care of the OSHC service (including when being transported)
- children's attendance is checked by the supervising educator/staff before departure from the designated pick-up location and marked as present as they disembark from the vehicle
- procedures for the safe handover of children between the Service and other educational site is documented correctly
- educator to child ratio requirements are maintained at all times, including when children are being transported as part of the service activity
- a record of staff working directly with children (regulation 151) is kept
- children exit the vehicle using the 'safety door'

- children wear approved seatbelts/restraints whilst the vehicle is in motion in accordance to **Queensland** Road Rules and Road Transport Act
- children are never left unattended in the vehicle
- education on road safety for children is included in the Service's programming (for example Kids and Traffic, Vic Roads Primary School roads information)
- safety rules are developed with children to ensure a clear understanding of appropriate and inappropriate behaviour
- staff are aware of appropriate procedures to be followed in the event of a vehicle crash involving staff and children from the OSHC Service
- a working mobile phone or other similar means of communication to communicate with the service, parents/carers is provided in case of emergency
- a list of emergency contact numbers for the children **and staff** being transported
- every effort will be made to notify parents/carers of delays returning to the OSHC Service if applicable
- relevant criminal history requirements and Working with Children Checks are made and verified for any person transporting children. WWCC is recorded in staff records
- the **designated** person driving the vehicle/bus holds a current Australian driver's licence **relevant to the vehicle classification**
- any allegation of misconduct of the educator or staff member will be reported immediately as per the Reportable Conduct Scheme detailed in our *Child Protection Policy* and/or *Child Safe Environment Policy* **and Code of Conduct Policy**
- the maximum number of children approved for a service as confirmed on the service approval is adhered to no matter where the children are located, including when they are being transported by the Service [S. 51(4A)]
- the *Administration of First Aid Policy* is implemented in the event of a serious incident, injury, trauma or medical emergency, including contacting emergency services and notifying parents/guardians as **required**
- flow charts for procedures of what to do in case of an emergency (missing **or unaccounted child**) are clearly communicated with all stakeholders regularly, **including implementation of the the *Missing Child During Regular Transportation Procedure***
- to explicitly communicate attendance register procedure with all stakeholders (school, parents, educators)
- effective and adequate supervision is provided when children are being transported. Consideration **must include:**

- the number, age and ability of children
 - visibility and accessibility
 - physical positioning of educators
 - risks related to the mode of transportation (including travel on foot)
 - risks in the environment, location, route and while travelling
 - the experience, knowledge and skill of each educator
 - the capacity of an educator to immediately respond to a situation requiring urgent intervention
- an easily recognised and suitably equipped first aid kit is easily accessible during transportation
 - educators carry medication, health plans and risk assessments for individual children
 - at least one staff member accompanying children during transportation holds:
 - an approved first aid qualification and
 - a current approved anaphylaxis management training qualification and
 - an approved emergency asthma management training qualification.

THE DESIGNATED EDUCATOR/DESIGNATED DRIVER/EDUCATORS WILL ENSURE:

- they adhere to the *Safe Transportation Policy* and participate in practice training relating to the safe transportation of children
- they are aware of their roles and responsibilities while providing transportation for children
- a Risk Assessment has been completed in accordance with the requirements as outlined above
- their driver's licence is current and the driver is in a fit and proper state to drive
- if driving larger vehicles to transport children they hold the relevant licence for the vehicle classification
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- effective and adequate supervision is provided when transporting children
- educator to child ratio requirements are maintained at all times, including when children are being transported as part of the service activity
- children are never left unattended in the vehicle
- they adhere to the road rules and regulations mandated by law within each state/territory
- children remain seated and do not behave in a dangerous or inappropriate manner
- children wear approved seatbelts/restraints whilst the vehicle is in motion in accordance to [state/territory] Road Rules and Road Transport Act
- the vehicle is parked in a secure and safe location for children to access

- the number of passengers does not exceed the legal requirement
- a working, fully charged mobile phone is taken in case of an emergency
- the *Administration of First Aid Policy* is implemented in the event of a serious incident, injury, trauma or medical emergency, including contacting emergency services and notifying parents/guardians as required
- the *Missing Child During Regular Transportation Procedure* is followed in the event a child is deemed missing or unaccounted for
- a fully equipped first aid kit is easily accessible
- medication, health plans and risk assessments for individual children are available during transportation
- educators and designated drivers wear a high visibility vest
- a list of emergency contact numbers for the children and staff being transported is available
- emergency contact information is available
- every effort will be made to notify parents/carers of delays returning to the Service if applicable
- messages from families regarding children's attendance changes to pick up or drop offs are communicated effectively and timely to educators travelling with children

TRANSPORTATION ATTENDANCE RECORD KEEPING [Reg: 177 (1)(o)(p)]

The designated driver and designated educator will ensure:

- the *Transport Pick up/Drop off Checklist* is completed each time transportation is provided to children
- the *Transportation Attendance Record* is completed to record:
 - each child is signed into the Transportation Attendance Record and Service attendance record upon collection, noting the time children enter the vehicle (for collection from school/home)
 - each child is signed out of the Transportation Attendance Record and service attendance Record noting the time children exit the vehicle (delivery of children to school/home)
 - each child is accounted for as they embark and disembark from the vehicle during transportation
 - that once all children have exited the vehicle/bus, a final sweep of the vehicle is conducted by the designated educator/ nominated supervisor, including the interior of the vehicle, checking around and under seats, storage areas and under the vehicle to ensure there are no children or belongings left behind

- o a secondary educator conducts a final sweep of the vehicle, including the interior of the vehicle, checking around and under seats, storage areas and under the vehicle to ensure there are no children or belongings left behind (best practice)
- o a second educator will confirm the interior of the vehicle was checked and sign the *Transportation Attendance Record* (best practice)

SAFE MAINTENANCE OF TRANSPORTATION VEHICLE

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR/ DESIGNATED EDUCATOR/ DESIGNATED DRIVER/EDUCATORS WILL ENSURE:

- the transportation vehicle is fitted with the required seat belts and child restraints, approved by the Roads and Traffic Authorities (see Rule 266 of the Australian Road Rules)
- there are sufficient seat belts installed for all passengers in accordance with current Australian Safety Standards- (AS/NZS 1754)
- the vehicle has enough fuel to transport the children each day as in accordance to schedule
- the vehicle is registered, roadworthy and insured (general legal requirements and best practice standards are adhered to)
- any repairs are completed as soon as possible by a qualified mechanic
- checks of the vehicle should be recorded, signed by the relevant person and kept for inspection by the Regulatory Authority
- drivers hold a current Australian driver's licence, licenced to carry the required number of passengers for the vehicle
- in the event of any mechanical or other breakdown, children will be kept safe, comfortable and occupied with suitable activities
- every effort will be made to notify parents/carers of delays returning to the Service if applicable

FAMILIES WILL:

- adhere to the Service's Delivery of children to, and collection from Education and Care Service Premises *Policy* and *Safe Transportation Policy*
- communicate any change in transportation requirements for their child with the OSHC Service as soon as they are aware (for example: no transport is required on a particular day as the child has returned home from school due to illness)
- notify the OSHC Service if their child is going to be absent on a particular day and not require transport

- ensure written **authorisation** for transportation of their child by the OSHC Service is granted by either the parent or authorised nominee **(for transportation authorisation)** named in the child’s enrolment record
- **provide emergency contact details and phone numbers upon enrolment and** update emergency contact **details and phone** numbers regularly
- **sign attendance record upon delivery or collection of child to the service in accordance with the *Delivery of Children to, and Collection from Education and Care Service Premises Policy.***

EDUCATOR TO CHILD RATIOS (ACECQA 2020)

Over preschool age	1:15	NT, QLD, SA, TAS, VIC, NSW
	1:11	ACT
	1:13	WA (Regulation 369)
	(or 1:10 if kindergarten children are in attendance)	

CONTINUOUS IMPROVEMENT/ REFLECTION

Our *Safe Transportation Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP RELATED RESOURCES

<p>Employee Induction Checklist</p> <p>Missing Child during Regular Transportation Procedure</p> <p>Regular Transportation Authorisation</p> <p>Safe Transportation of Children Module</p>	<p>Transport Pick Up/Drop Off Checklist</p> <p>Transporting Children Risk Assessment Template</p> <p>Vehicle/Bus Transportation Procedure</p> <p>Transportation Attendance Record</p>
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[Kids and Traffic- Early Childhood Road and Safety Education Program](#)

- Transporting children safely- Guidance on Understanding safe transport and travel requirements for education and care service providers (2020).
- Safe Travel and Transport- Advice for working with children, families, schools and communities (2020).

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2023). Policy and Procedure Guidelines. *Safe Transportation of Children.*
 ACECQA. (2023). [Fact sheet. Changes to Regular Transportation of Children](#)

ACECQA. (2023). [Risk Assessment and management- Safe Transportation of children safety checklist and regular transportation record form.](#)

ACECQA. (2023). [Guidance for Adequate Supervision During Transportation.](#)

ACECQA. (2023). [Minimising the Risk of Children Being Left Behind in Vehicles.](#) NQF Review 2019

Australian Government Department of Education (2022). [My Time, Our Place- Framework for School Age Care in Australia.V2.0](#)

Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2023).

[Education and Care Services National Regulations.](#) (Amended 2023)

Guide to the National Quality Framework. (2017). (Amended 2023)

Kids and Traffic Early Childhood Road Safety Education Program (NSW)

Revised National Quality Standard. (2018).

Road Transport (Safety & Traffic Management) Act 1999.

Queensland Government Early Childhood Education and Care (2021) [Guidelines for health and safety- Transportation](#)

Vic Roads- Primary school road safety education resources

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	Tina Chappell	Coordinator	July 2023
POLICY REVIEWED	JANUARY/JULY 2023	NEXT REVIEW DATE	JULY 2024
VERSION NUMBER	V11.07.23		
MODIFICATIONS	<ul style="list-style-type: none"> Major edit of existing policy to comply with new regulations effective 1 March 2023 Amendment to National Regulations 2022 (under the Education and Care Services National Law) added New section added: <i>Transportation Attendance Record</i> Merging of some sections to avoid repetition- (picking up children/during transportation/dropping off children- included in main policy content and related Procedure) <p>JULY</p> <ul style="list-style-type: none"> Review of policy MTOP V2.0 added to sources 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY/SEPTEMBER 2022	<ul style="list-style-type: none"> policy maintenance – additional National Law section added Western Australia services- check Regulation 369 for ratio requirements Western Australian National Regulations added no major changes to policy addition of various roles for a designated educator- e.g. buckling each seat belt 	JULY 2023	

	<p>together after children have exited the vehicle/bus</p> <ul style="list-style-type: none"> • minor formatting edits within text • hyperlinks checked and repaired as required • September 2022 small edits following Kids and Traffic information Continuous improvement section, <i>effective</i> supervision, clear communication with all stakeholders, deleted comment driver acting as supervisor (this would be in breach of regulations) 	
OCTOBER 2021	<ul style="list-style-type: none"> • additional law/regulations added- ACECQA Guidelines to Policy and Procedure document (August 2021) • additional consideration for risk assessment included • training and rehearsals of transport policy and procedure added as best practice • checks of the vehicle after disembarkation to be recorded as best practice 	JULY 2022
OCTOBER 2020	<ul style="list-style-type: none"> • relevant National Law added • clarification of adequate supervision added • additional information re: communication/telephone • additional resources added- Kids and Traffic 	JULY 2021
AUGUST 2020	<ul style="list-style-type: none"> • Policy name changed to reflect new regulations- Safe Transportation • NEW regulations added (effective 1 October 2020) • definitions added to reflect amendments to Regulations • transport-specific risk assessment added • inclusions for risk assessment and information for written authorisation added • resources added for reference 	JULY 2021
JULY 2020	<ul style="list-style-type: none"> • additional regulations included • further information added to ensure compliance to National Regulations requirements • additional sections- picking up children, dropping off children • additional points included to ensure safety of all children <p>sources checked for currency</p>	JULY 2020
JULY 2019	New policy created for OSHC services	JULY 2020

Item 6. General Business

DATE OF NEXT MEETING

12 September 2023

CONCLUSION

Peter Bennett
Chief Executive Officer