

## Educators

*At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard*

**Looking at the element in detail** - A service reviewed what the NQF Guide said about element 2.2.1 and understood educators:

- need to supervise children at all times to ensure their safety
- always need to be alert for potential hazards that may endanger children or cause accidents and injuries
- need to take actions (reasonable precautions) to remove or minimise identified risks of harm to children.

### What does poor supervision look like?

- Educator physically there and counted in ratio, but sitting doing nothing. They have mastered the act of gazing through children.
- Educator on patrol walking around and around looking busy, but still not identifying potentially dangerous situations like the child moving the tyre over to the fence ready to use it as a ladder to jump over the fence.
- Educator working with one or two children with their back to the rest of the room or outdoor space and not seeing what is going on behind them which is a full-scale disaster about to happen.
- Educators grouped together talking about things not related to children, and not watching the children.
- Educator who has smuggled their phone in to their bra so they can use it in the playground in a location where the CCTV can't see.

These forms of supervision are easy to find in ECEC. What are some of your supervision concerns?

What happens when supervision isn't good? Usually, an incident where a child is injured or is in an area where there's a high potential risk of injury eg from roads and cars because they've left the service without an adult.

**We could say poor supervision = poor health outcomes for children as they can be injured.**

When we look at the element like this, we need to investigate why an adult would want a poor health outcome for a child? When we dig a little deeper the next question we could identify is why adults do things that are risky to their health?

Let's turn to health psychology to see if we can find answers. A part of the definition of health management includes behaviour which removes or reduces the risk of becoming ill or injured. For example, not smoking reduces the risk of cancer, weight control and exercise reduces the risk of obesity and related issues like high blood pressure, heart disease, type 2 diabetes, osteoarthritis, respiratory problems, back pain and some cancers, safe sex reduces the risk of disease including HIV, and

### Week 26, 23 - 27 August 2021- 2.2.1 Supervision

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consuming less alcohol reduces the risk of cancer, domestic violence and behaviours that lead to accidents. However, many people still drink too much, smoke, have unprotected sex, and are obese knowing full well it's not healthy. There are many ways to address the above issues and one of the best is through motivational interviews.

**Motivational interviews**

Let's try using the motivational interview technique to improve our supervision practices. Go through the questions with a team member. Note the interviewer's role is to help the person identify problems accurately and work out themselves how to solve these.

What are some of the good supervision practices you implement?

What is there about your behaviour or supervision practices in the room or outdoors that you or other people might see as concerning?

What difficulties or hassles have you had in relation to supervision?

What do you think will or might happen if you don't change anything?

**Consider the advantages of change:**

What would be the good things about improving your supervision practices?

If you could make a change immediately by magic, how might things be better for you?

**Evoking the intention to change:**

Never mind the 'how' for right now—what do you want to happen?

How important is this to you? How much do you want to do this?

What do you intend to do?

**Evoking optimism about change:**

When else in your ECEC practices have you made a significant change like this? How did you do it?

What personal strengths do you have that will help you succeed?

Who could offer you helpful support in making this change?



The EYLF and MTOP says “Critical reflection involves closely examining all aspects of events and experiences from different perspectives.” Pick one of the following reflection points to complete the table below:

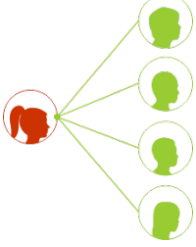
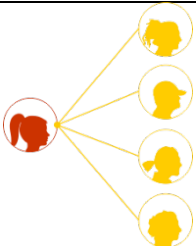
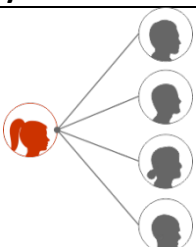
- Do your supervision practices effectively balance children’s safety with their rights to privacy and age appropriate independence?
- Are your supervision practices flexible enough to effectively accommodate changes in children’s ages, group size, activities and location?
- Are there any potentially dangerous activities, spaces, resources or equipment that could be better managed to reduce risks to children (included in our QIP improvement plan)?

Critically reflect through the eyes of:	Write your critical reflection below	What changes did you or will you make because of the reflection?
<p><b>a child</b></p>	I love playing or relaxing in spaces which are private and educators aren’t always watching me or my friends.	Changes we made following this reflection included: <ul style="list-style-type: none"> <li>• adding a short article to our regular newsletter and to our Facebook page explaining some of the benefits of risky play including play where children feel as they can disappear/get lost – and how we ensure children are always effectively supervised in these situations eg through strategic placement of educators and mirrors</li> <li>• ensuring educators greet families when they arrive to collect their child and tell families where their child is to make our supervision practices more transparent eg Reyne’s playing over near the big tree.</li> </ul>
<p><b>an educator</b></p>	It’s a balance between letting children have the privacy they sometimes crave away from adult supervision, and providing effective supervision to ensure they’re always safe.	
<p><b>your families</b></p>	Sometimes I can’t even see my child when I arrive to pick them up and I have to hunt around for them. I’m not sure they’re being properly cared for?	
<p><b>theorist and current research</b></p>	Children enjoy risky play. Sandseter (2007) has grouped risky play into several categories including play where children can ‘disappear/get lost.’	



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Critically reflect through the eyes of:	Write your critical reflection below	What changes did you or will you make because of the reflection?
 <p><b>a child</b></p>		
 <p><b>an educator</b></p>		
 <p><b>your families</b></p>		
 <p><b>theorist and current research</b></p>		



## Complete your QIP

The information you write below can go directly into your QIP or Self-Assessment Tool (SAT) (NSW ONLY)  
Instructions

For a <b>MEETING</b> QIP and Self-Assessment Tool (SAT)	For <b>Exceeding</b> the QIP and Self-Assessment Tool (SAT)
<i>Please discuss the way educators' supervision procedures/arrangements ensure children are protected from harm and hazards. Include any supervision plans at the Service, and when supervision levels may need to increase.</i>	<i>Please give an example showing how you're consistently attuned to each child's needs and ensure their safety at all times.</i>
<i>Please give an example of an activity or routine where you included learning to promote children's safety or health eg learning about using new equipment, sun/water safety, road/transport safety.</i>	<i>Please discuss how you and your team consistently adjust supervision procedures/arrangements when required.</i>
<i>Please give at least 5 examples of 'reasonable precautions' you take at the service. (Many of these will be work, health and safety type actions.)</i>	<i>Please discuss how your supervision arrangements and 'reasonable precautions' consider the service's unique environment and changes to that environment <b>(included in QIP strength)</b>.</i>
If you cannot answer these questions above the you are not meeting. This means you need to create an improvement plan and make changes to your practice	If you cannot answer these questions above the you are not exceeding. This means you need to create an improvement plan and make changes to your practice

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Checklist

### Why are you doing the checklist?

The practices identified in the checklist are what the assessor needs to see you do so they can check you're 'meeting the NQS.' If you embed all the things in the checklist, then you are meeting the Element 2.2.1. If there's something on the checklist that you're not doing, then you need to either adjust your practice to do it, or ask for help and training to do what's on the checklist ie work with your educational leader or room leader who should teach/coach you how to do it.

### The checklist keys to use.

**E = Embedded** I do that **ALL** the time

**K = I know** I need to do that, but I don't do it all the time

**T = Please teach** me how to do it or improve my understanding of why I need to do it.

Name Educator 1	
Name Educator 2	
Name Educator 3	
Name Educator 4	
Name Educator 5	

### Supervision

Do you always supervise children including during toileting, sleep, rest, meals, transitions and higher risk activities eg water play, cooking, woodwork, nappy changes?					
Do you always adjust your level of supervision to reflect the ages, number of children, activity, location, experience level of team members etc?					
Can you always see and hear sleeping/resting children, and do you check young children (eg babies) at regular intervals?					
Do you make sure children only leave the service with their parent, authorised nominee, to attend an authorised excursion or transport service, or during a medical or other emergency?					
Do you communicate your movements and relevant information about children with team members to ensure there's always adequate supervision (eg Danni's playing in the maze, I'm just going to the toilet)?					
Do you share supervision arrangements/plans with relief staff?					
Do you closely supervise all visitors, students and volunteers at all times children are present?					
<b>Reasonable Precautions</b>					
Do you always follow the Policies and Procedures which promote children's safety eg:					
• Sun Protection Policy which requires educators to follow recognised sun safe practices?					
• Sleep and Rest Policy which requires educators to follow safe sleep practices recommended by Red Nose?					
• Water Safety Policy which requires educators to follow water safety practices?					
• Hazardous Substances Policy which requires educators to ensure children cannot access hazardous products like medications, detergents, cleaning products, garden chemicals, and electrical equipment?					
• Tobacco, Drug and Alcohol Policy which aims to ensure staff are never impaired by alcohol or legal/illegal drugs at work?					
• Physical Environment Policy which aims to ensure service has safe indoor and outdoor environments and work practices eg do you compete daily					

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safety checks, effectively implement maintenance practices, consume hot food and drinks in staff only areas, remove or cordon off identified risks?					
• Medical Conditions Policy which requires educators to follow management (action) plans, risk minimisation and communication plans for children with a specific health care need, allergy or medical condition?					
• Excursion Policy which requires educators to complete appropriate risk assessments and adequately supervise children during excursions?					
• Transport Policy which requires educators to complete appropriate risk assessments and adequately supervise children during transport					
Do you regularly discuss safety issues with children, teach them how to safely use equipment and resources, and involve them in setting safety rules where age appropriate?					

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