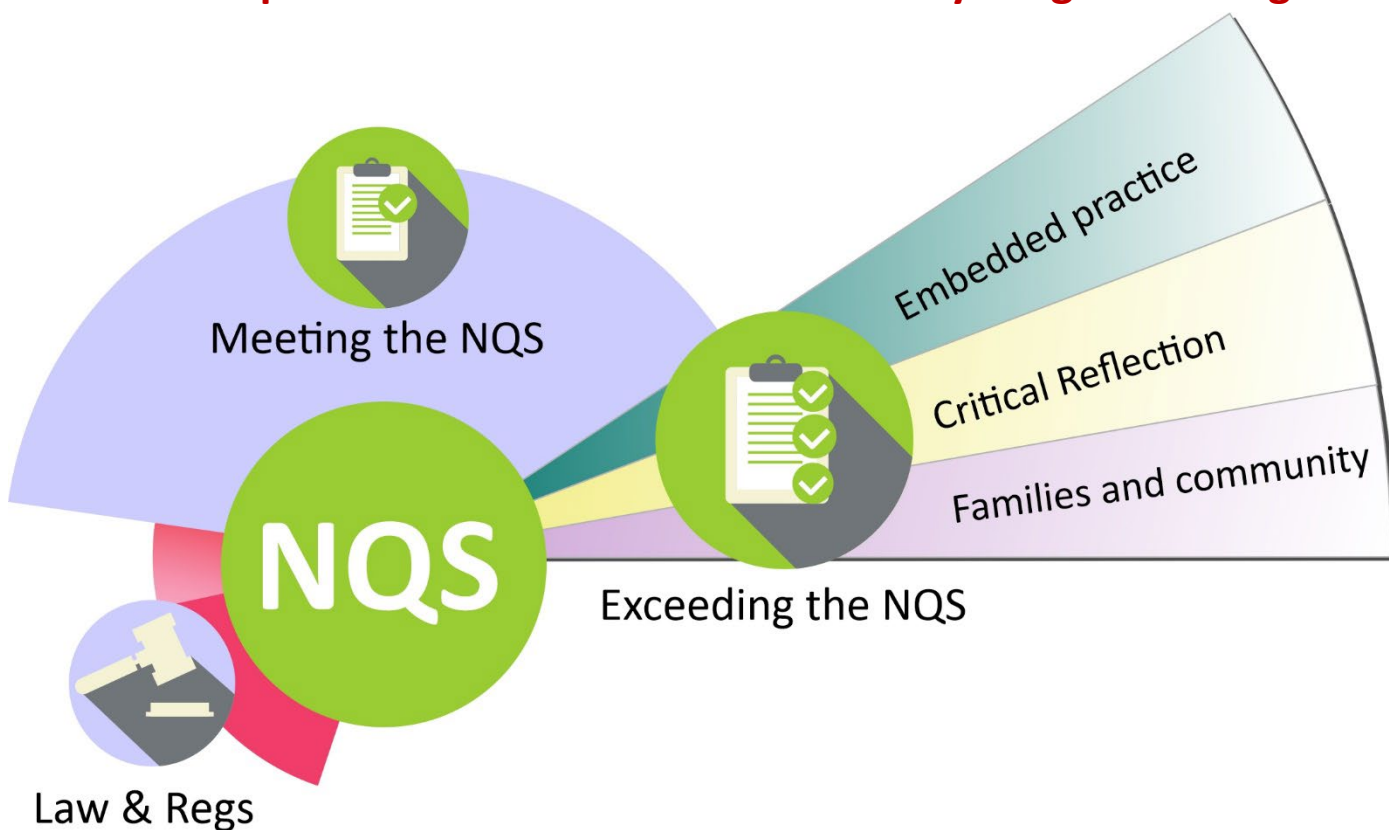



## Section 2. Experienced educators – ensure everything is meeting.



**First step:** We must ensure the Law and Regulations are always met. **Second step:** then we look at the NQS and work through the process of meeting the element. **Third step:** then we can look at and complete the exceeding themes. The logo above shows the effort required to do these three components. It should be easy and take little time to meet the Law and Regulations once you know what is required. Meeting then can become everyday practice, while exceeding takes a lot more time, thinking, connecting to families and community and practice change.

 **Law Section 51(1)(a) Conditions on service approval (safety, health, and wellbeing of children)**  
A service is operated in a way that— (a) ensures the safety, health and wellbeing of the children ... **Regulation 77 Health, hygiene and safe food practices (1)& (2)** The approved provider and nominated supervisor... must ensure that nominated supervisors and staff members of, and volunteers at, the service implement— (a) adequate health and hygiene practices; and (b) safe practices for handling, preparing and storing food— to minimise risks to children .... **Penalty: \$2000.**

**Regulation 85 Incident, injury, trauma and illness policies and procedures** The incident, injury, trauma and illness policies and procedures ...required under regulation 168 must include procedures to be followed by nominated supervisors and staff members of, and volunteers at, the service in the event that a

child—(a) is injured; or (b) becomes ill; or (c) suffers a trauma.

**Regulation 86 Notification to parents of incident, injury, trauma and illness** The approved provider ... must ensure that a parent of a child ... is notified as soon as practicable, but not later than 24 hours after the occurrence, if the child is involved in any incident, injury, trauma or illness while the child is being educated and cared for ....**Penalty: \$2000.**

**Regulation 87 Incident, injury, trauma and illness record (1)** The approved provider ... must ensure that an incident, injury, trauma and illness record is kept in accordance with this regulation.

**Regulation 88 Infectious diseases** If there is an occurrence of an infectious disease ..., the approved provider ... must ensure that reasonable steps are taken to prevent the spread of the infectious disease .... **Penalty: \$2000.** (2) If there is an occurrence of an infectious disease ..., the approved provider ... must ensure that a parent or an authorised emergency

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contact of each child ... is notified ...as soon as practicable. Penalty: \$2000.

**Regulation 89 First aid kits** The approved provider ... must ensure that first aid kits are kept in accordance with this subregulation, ... (a) an appropriate number of first aid kits must be kept having regard to the number of children being educated and cared for by the service; and (b) the first aid kits must be suitably equipped; and the first aid kits must be easily recognisable and readily accessible to adults, having regard to the design of the ... premises. **Penalty: \$2000.**

#### **Regulation 90 Medical conditions policy**

#### **Regulation 91 Medical conditions policy to be provided to parents**

**Regulation 92 Medication record** (1) The approved provider ... must ensure that a medication record is kept that includes the details set out in subregulation (3) for each child to whom medication is or is to be administered ... **Regulation 93 Administration of medication** (1) & (3) The approved provider and nominated supervisor... must ensure that medication is not administered to a child ... unless — (a) that administration is authorised; and (b) the medication is administered in accordance with regulation 95 or 96. **Penalty: \$2000.** (2) The approved provider ... must ensure that written notice is given to a parent or other family member of a child as soon as practicable, if medication is administered to the child under an authorisation referred to in subregulation (5)(b).

**Penalty: \$1000.**

#### **Regulation 94 Exception to authorisation requirement—anaphylaxis or asthma emergency**

(1) Despite regulation 93, medication may be administered to a child without an authorisation in case of an anaphylaxis or asthma emergency. (2) If medication is administered under this regulation, the approved provider or a nominated supervisor ... must ensure that the following are notified as soon as practicable— (a) a parent of the child; (b) emergency services.

**Regulation 95 Procedure for administration of medication** Subject to regulation 96, if medication is administered to a child ...— (a) the medication must be administered— (i) if the medication has been prescribed by a registered medical practitioner, from its original container, bearing the original label with the name of the child to whom the medication is to be administered, and before the expiry or use by date; or

(ii) from its original container, bearing the original label and instructions and before the expiry or use by date; and (b) the medication must be administered in accordance with any instructions— (i) attached to the medication; or (ii) any written or verbal instructions provided by a registered medical practitioner; and (c) ... the following must be checked by a person other than the person administering the medication— (i) the dosage of the medication to be administered; (ii) the identity of the child to whom the medication is to be administered.

**Evidence to show compliance** – Educators prioritise the safety, health, and wellbeing of children. We implement proper health, hygiene, and safe food practices and follow our policies and procedures for incidents, injuries, trauma, and illness, ensuring parents are promptly notified of any occurrences. Records are maintained for incidents, injuries, trauma, and illnesses. Reasonable steps are taken to prevent the spread of infectious diseases, and first aid kits are appropriately equipped and accessible. A medical conditions policy is shared with parents. Medication administration follow regulations, with a medication record kept and proper authorisation obtained. An exception applies for anaphylaxis or asthma emergencies, but parents and emergency services must be notified. Medication is administered following specific procedures, including checking dosage and the child's identity.



## Meeting the NQS

**Looking at the element in detail** - Element 2.1.2 and understood educators must model and implement:

- effective ways to manage children’s illnesses and injuries
- infection control and hygiene procedures
- risk management approaches
- safe food practices (preparation, transport, storage).

### **Assess your practice first.**

Read the below description and evaluate it in relation to your practices.

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**Meeting – Using the 'Staying Healthy' Publication:**  
 We use the 'Staying Healthy in Childcare' publication to guide our practice and provide relevant information to families. For instance, I share guidelines on handwashing and coughing/sneezing etiquette from the publication during parent meetings, through newsletters, or by providing printed materials. This ensures families have access to the same information and can implement healthy practices at home.

**Teaching Children about Health and Hygiene:**  
 We implement engaging activities to teach children about health and hygiene. During group time, we discuss topics like brushing teeth, nutrition, and staying active using visual aids. Hands-on activities like handwashing before meals or after play are incorporated into our routines, and we use storytelling, songs, or puppet shows to introduce concepts. Special events, 'Healthy Harrold' or themed weeks focused on health allow children to role-play and learn about healthy habits.

**Discussing Service Health or Hygiene Practices with Families:** To familiarise families with our service's health and hygiene practices and enable them to implement them at home, we engage in discussions during orientation sessions and family meetings. We explain our routines, such as handwashing and cleaning protocols, and the reasons behind them. We encourage open communication, address families' concerns, and provide resources like handouts or posters to support consistency between our service and home environments.

If you are doing similar practices to the example, use the below questions to help you write your 'meeting' description so you can add it to your QIP.

A MEETING QIP and Self-Assessment Tool (SAT)
<i>Please give an example showing how you use the 'Staying Healthy' publication to guide your practice and to provide relevant information to families.</i>
<i>Please give an example of activities you implement which teach children about health and hygiene issues.</i>
<i>Please give an example where you discussed Service health or hygiene practices with families so they're familiar with Service practices and/or can implement relevant practices at home.</i>

**If you and your educators need to learn how to do the above to achieve meeting, proceed to the next page.**

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