Tasmanian Licensing Standards For Centre Based Child Care, Class 5 (0 – 12 years)

October 2014



Department of Education Education and Care Unit

PREFACE

Tasmanian Licensing Standards for Centre Based Child Care, Class 5 (0-12 years)

A draft of the Tasmanian Licensing Standards for Centre Based Child Care Standards, Class 5 were reviewed and modified in December 2011 and again in September 2014. This version became effective from 1 October 2014.

Scope of the Licensing Standards for Centre Based Care, Class 5

The standards are applicable to all Centre Based Care, Class 5 services that are required to be licensed under the provisions of the *Child Care Act 2001*, Section 11. These services are defined* to include Occasional Care services and some other services excluded from the scope of the National Quality Framework. This currently (October 2014) includes the Australian Government Budget Based funding program.

The standards are minimum standards. The Child Care Act 2001, Section 6 states 'The interests of children are to be regarded as the paramount consideration in the interpretation, enforcement and administration of this Act, the regulations and the standards'.

*Definitions

Occasional Care comprises services providing education and care for 0-12 year olds on a sessional basis for short periods, that is, less than 8 hours a day, 5 days a week, 48 weeks a year.

Note: They may enable parents to attend appointments, take care of personal matters, undertake casual or part-time employment, study or have temporary respite from full time parenting. These services may be provided by community based or private providers and may be funded by the Australian or State Governments or operate without funding.

Development of the Centre Based Care, Class 5 Standards

Background to the development of the Standards

The National Quality Framework for education and care commenced on I January 2012. The National Quality Framework (NQF) for education and care services does not include all child care services. In Tasmania, the services not included in the NQF are called Centre Based Care, Class 5 and are specifically stated in the *Education and Care National Regulations* as being excluded from the definition of an education and care service. These services continue to be licensed under the Tasmanian *Child Care Act 2001*.

The Tasmanian Standards for Centre Based Care, Class 5 (0 - 12 years), have been modified to be a concise combination of the previous Tasmanian Licensing Standards Centre Based Care, Class 1 (CBC1) and Centre Based Care, Class 2 (CBC2).

As the terms CBC1 and CBC2 will no longer be required, to distinguish between specific age groups, the following terms and definitions have been applied:

'under school age care setting' previously known as CBC1; **'school age care setting'** previously known as CBC2;

Note: Where a 4 year old is in a school age care setting, they will be included as school age, unless otherwise specified. However, due consideration should be given to whether higher ratios, alterations to the care environment or review of the program to specifically cater for four years olds may also be required to support a safe and suitable care environment for all children.



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Changes in relation to the formatting of the Standards

In 2014, the Explanatory Notes were separated from the Licensing Standards document to form a separate Licensing Operational Guide (LOG). The purpose of the LOG is to assist services in the interpretation of the Standard, inform services regarding the practices of the Education and Care Unit in assessing the Standard, and provide details of where services may obtain further information.

Changes in relation to references to the Building Code of Australia (BCA)

The Tasmanian Licensing Standards for Centre Based Care prior to 2012 referenced the BCA and/or BCA Tasmanian-Appendix requirements in a number of the Standards that related to the physical premises.

Within the Tasmanian Centre Based Care Standards, Class 5, these direct references to the BCA and BCA Tasmanian-Appendix have been removed, as the requirement to meet these is contained in the relevant building legislation. As with any relevant legislation, services are required to ensure they comply.

The references to building matters in these Standards now refer more to functionality and procedural requirements than building requirements.

Note: The Building Code of Australia (BCA) and/or BCA Tasmanian-Appendix requirements apply to new buildings and new building works, such as major renovations. Under the *Building Act 2000*, section 117(6), the re-use of a building for which a new registration, licensing or approval is required by a function control authority (of which the Education and Care Unit is one) is taken to be a change of use of the building. Section 117 specifies further requirements around the change of a use of a building, including the need for an Occupancy Permit or Building Permit (as relevant). This may mean that the BCA and/or BCA Tasmanian-Appendix may also apply in these situations, not just new buildings/new building work.

Implementation of Working with Children Check

The commencement of the *Registration to Work with Vulnerable People Act* 2013 requires those involved in child-related work in Tasmania to hold a Working with Children Check. Working with Children Checks are being implemented in Tasmania through a transitional process that commenced I July 2014.

For further information regarding the requirements for a Tasmanian Working with Children Check see <u>www.justice.tas.gov.au/workingwithchildren</u> or <u>www.education.tas.gov.au</u>



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I FIT AND PROPER

STANDARD

The child care service provider and all persons who have regular contact with the children who are placed in the service's care are to be fit and proper persons.

Rationale

A duty of care is owed to all children in a child care service, and the standard of care required in relation to these children is high. In order to ensure that the safety of children is maximised and their developmental needs are addressed, a child care service provider must ensure that all persons who care for children directly, other staff, and those who have regular contact with children at that service, are fit and proper persons. This includes persons who are in the presence of the children in care on a regular basis, (for example, visitors, members of the service operator/management committee, contractors, volunteers and students) or in a capacity that would indicate to children that this person is a 'friend' and not a stranger of whom to beware. This excludes parents who are visiting or collecting their children, are assisting in the program as 'parent help' and are not conducting other business at the service or fulfilling a functional/management role.

Note: Refer to Schedule I for definitions of terms.

I.I Fit and Proper

The licence applicant/holder and other persons connected with the child care service are to meet the following criteria in order to be assessed as a fit and proper person, in conjunction with the provisions of the *Child Care Act 2001*.

- a) The licence applicant/holder/licensee representatives (where the applicant is a body rather than an individual, at least two representatives must meet the following criteria) are to:
 - i) satisfactorily meet all requirements of the 'Fitness and Propriety' check conducted by the licensing authority;
 - ii) maintain a current Tasmanian Working with Children Check or a valid safety screening clearance issued by the Department of Education;
 - iii) demonstrate an understanding of their legislative responsibilities under the *Child Care Act 2001*; and
 - iv) implement procedures to ensure that all staff and other persons connected with the service are fit and proper.
- b) All members of the service operator who are directly involved in the management of the child care service are to:
 - i) satisfactorily meet all requirements of the 'Fitness and Propriety' check conducted by the licensing authority;
 - ii) maintain a current Tasmanian Working with Children Check or a valid safety screening clearance issued by the Department of Education.

c) Responsible persons are to:

- i) satisfactorily meet all requirements of the 'Fitness and Propriety' check conducted by the licensing authority;
- ii) maintain a current Tasmanian working with Children check or a valid safety screening clearance issued by the Department of Education.



d) Persons in charge are to:

- i) satisfactorily meet all requirements of the 'Fitness and Propriety' check conducted by the licensing authority;
- ii) maintain a current Tasmanian Working with Children Check or a valid safety screening clearance issued by the Department of Education.

e) All staff, including persons under 18 years of age, are to:

maintain a current Tasmania working with Children Check or a valid safety screening clearance issued by the Department of Education.

f) Persons 18 years and older who are volunteers, students, or regular visitors, are to:

maintain a current Tasmanian Working with Children Check or a valid safety screening clearance issued by the Department of Education.

Note I: Persons under 18 years who are volunteers, students or regular visitors do not need to provide a current Tasmanian Working with Children Check or a valid safety screening clearance, unless requested by the service.

1.2 Confidentiality and privacy provisions and duty of care

All persons covered by 1.1 a - f are to:

- i) understand the need for, and maintain, the confidentiality of client and staff information; and
- ii) demonstrate an understanding of duty of care towards children in care, and undertake to ensure that they will meet their duty of care at all times.



SCHEDULE I: FITNESS AND PROPRIETY DEFINITIONS

For CENTRE BASED CARE Class 5 (0 – 12 years)

The following definitions apply to roles and terms as they relate to the *Child Care Act 2001* and/or to the Licensing Standards. The meanings may therefore differ from those applied by services to similar terms, i.e. a service may have people considered to be 'responsible' who are not considered to be 'responsible persons' as defined under the Act.

Carer (is taken to mean the same as **'child carer'**) means a person who, for fee or other material benefit, cares for the child:

- a) in that person's own primary residence; or
- b) in that person's approved premises; or
- c) in the child's primary or other residence; or
- d) in premises in which child care is provided under a centre based child care licence;

Licence applicant is the individual or body that is applying to hold a licence to operate or provide a child care service.

The service operator may choose to hold the licence or may authorise an individual employee to hold the licence. In most circumstances, the service operator is a body (see the definition below), although it may also be an individual owner/operator. Therefore, an individual licence applicant may be an owner/operator of the service or an employee of the service operator.

Licensee or **licence holder** is the individual or body to whom a licence to operate or provide a child care service has been issued.

Licensee representative is a person nominated by the service operator to represent all members of the service operator on licensing matters where the service operator holds the licence. This person is expected to have a higher level of understanding about the operation of the child care service and its adherence to the Licensing Standards.

- For a community based management committee, this person may either hold a specific position on the executive or be a general member;
- For a company, this person may be a director;
- For a partnership, this person may one of the partners; and
- For an individual owner, that person will be the licensee (and therefore automatically fulfilling the role of the licensee representative).

At times, where it is appropriate to the structure of the service, the licensee representative may be a person employed by the service operator e.g. a chief executive officer, or the like.

Where the licensee is a body (e.g. a company, government agency, partnership, registered business or community based management committee/board), the Education and Care Unit requires this body to nominate at least two **licensee representatives** for licensing purposes.

Person in charge of a child care service under a centre based licence is a person who:

- is physically at the centre/facility/premises where children are provided with child care by that service; and
- is in charge of the day-to-day running and supervision of that service/centre/facility/premises.



The Licensing Standards require there to be:

- an appointed person in charge, in charge of the service who is responsible for ensuring that the service meets its duty of care in relation the children in care; and
- a nominated person in charge when the appointed person in charge is absent from the premises.

In practice there may be a number of persons nominated to fulfill this person in charge role in the absence of the appointed person to ensure that the service, at all times has someone in charge and taking responsibility. Staff and parents are to be aware who this person is.

Persons in charge (including nominated persons in charge) in an under school age care setting, are required to have an approved qualification.

In relation to 'Fitness and Propriety' requirements, the appointed person in charge, and any persons nominated as person in charge on a regular (e.g. 1 or 2 days a week) or long term basis (for 4 weeks or more), are to satisfactorily meet all requirements of the 'Fitness and Propriety' check conducted by the Education and Care Unit.

Responsible person role under the *Child Care Act* 2001 is:

- An individual, other than the person in charge of the child care service, to whom is assigned by the licensee, the general responsibility for, and supervision of the child care service under the licence; or
- Any other body or individual, other than the person in charge of the child care service, who
 has the authority to give directions and make decisions in respect of the management of
 that child care service.

People fulfilling this role include, for example, co-ordinators who have responsibility across a number of services, third party managers, franchisees/franchisors. This role **does not** apply to those people who are licensees, persons in charge, those in a second in charge role or those acting in person in charge roles.

This role is also different to that defined under the Education and Care Services National Law (Tasmania).

Staff member of a child care service under a centre based care licence means an individual employed by the service operator and:

- a) is likely to have contact with children in care at the service; or
- b) operates in a capacity that would indicate to children that this person is a 'friend' and not a stranger of whom to beware, e.g. ancillary staff.

Service operator is the name of the organisation/management body that provides the service from the child care centre. It may be a community based management committee or incorporated body, a company, registered business, a partnership, a government agency or an individual who owns the service. The service operator may choose to hold the licence or may authorise an individual employee to hold the licence.

Volunteer is a person who undertakes duties authorised by the service as a voluntary worker, and who receives no remuneration or compensation in money or other consideration, e.g. parents who participate in fundraising activities or working bees, or committee members.

Proof of current Tasmanian Working with Children Check includes:

- Licensee sighting and maintaining a record of the identifying number and expiry date of a current Tasmanian Working with Children Check;
- individuals maintaining a current Working with Children Check.



- Proof of a current valid safety screening clearance includes:
 Licensee sighting and maintaining a copy of the valid safety screening clearance;
 - individuals maintaining a valid safety screening clearance.



2 CARER QUALIFICATIONS

STANDARD

Carers are to possess appropriate knowledge, skills and experience.

Rationale

Research demonstrates that the most significant variable which influences the quality of care provided is the level of related training which carers have undertaken. Appropriate training and a sound understanding of child development, facilitate the carer's ability to recognise and provide for children's needs, and to competently manage groups of children.

During school aged years, children begin to look outside the home for guidance and support. Influential adults, including carers, become sources of new information, skills and points of view, and provide different approaches to life's challenges and dilemmas.

Staff with relevant training and/or qualifications can be appropriate role models, and it is also important that staff appreciate children as individuals, respect children, listen to their ideas, plan for their interests and offer choices, and are consistent and reliable.

2.1 Carer in a position not requiring an approved qualification

The carer is to have:

- a) an understanding of their duty of care in relation to children;
- b) experience in caring for children, or the ability to acquire the skills to care for children;
- c) an understanding that the environment provided for children needs to be safe:
 - i) physically;
 - ii) emotionally; and
 - iii) socially;
- d) a basic knowledge of ages and stages of development;
- e) a basic knowledge of children's health, hygiene, nutritional and safety needs; and
- f) an understanding that the environment needs to also:
 - i) be challenging, whilst safe;
 - ii) foster children's sense of security; and
 - iii) support children's learning and social development.

2.2 Carer in a position requiring an approved qualification, in an under school age care setting

In addition to meeting the criteria in 2.1, carers in this category are to hold an approved qualification.

Note: Refer to Schedule 2 for details of approved qualifications.

2.3 Qualifications of the person in charge, in an under school age care setting

(i.e. the appointed person in charge who is physically at the premises where children are provided with child care, and in charge of the day-to-day running and supervision of the program). In addition to meeting the criteria in 2.1, the person in charge is to hold an approved qualification.

Note: Refer to Schedule 2 for details of approved qualifications.



2.4 First Aid qualifications

- a) There must be at least one staff member on the premises at all times who holds:
 - i) a current approved first aid qualification; and
 - ii) current approved emergency asthma management qualification; and
 - iii current approved anaphylaxis management qualification; and
 - iv) current approved CPR qualification (which must include child CPR and be updated annually).
- b) This person is to be immediately available in an emergency situation.

Note I: First Aid qualifications must comply with the First Aid qualifications as set out from time to time and published on the Education and Care Unit's website.



SCHEDULE 2: QUALIFICATIONS

For CENTRE BASED CARE CLASS 5

(Under school age care setting)

I Approved qualifications for Centre Based Care, Class 5 (under school age care setting) include:

A minimum of a two-year full-time or equivalent accredited post-secondary education, or tertiary qualification in child care (early childhood), or education (early childhood).

Note: A tertiary qualification in education (primary) is an approved qualification where the person works exclusively with children aged three years or older.

2 Status of persons with other qualifications approved for licensing purposes prior to 1997

- 2.1 Other qualifications approved for licensing purposes prior to the July 1997 Tasmanian Centre Based Child Care Licensing Guidelines included:
 - a) Mothercraft Nursing;
 - b) NNEB (National Nursery Examination Board, England);
 - c) SRN (Nursing); and
 - d) other, related, tertiary qualifications (approved as appropriate by the licensing authority).

2.2 Persons holding a qualification approved for licensing purposes prior to July 1997, and working as a qualified carer prior to July 1997 as per 2.1:

- a) will maintain their qualified status while they maintain continuity of work/employment (i.e. do not have a break greater than five years) in the child care profession, including home based care; OR
- b) where continuity is not maintained (i.e. where there is a break in their work/employment in the child care profession which is greater than five years), will be required to obtain certification from a registered training organisation (RTO), stating that their competencies meet the required current approved qualification standard.



3 RATIO OF CARERS TO CHILDREN

STANDARD

There must be sufficient numbers of carers to children in care at all times.

Rationale

A major determinant of quality care is the number of children cared for by each carer. In the implementation of carer:child ratios, the interests of the child are paramount.

Smaller group sizes facilitate children's engagement in play, ensure lower levels of distress in children, and enhance more positive, nurturing behaviour from carers.

The ratios below are minimum ratios only. There may be circumstances where higher ratios may be required in order to ensure quality of care is maintained. Such circumstances may include certain types of activities and excursions, and to appropriately provide for the needs of individual children.

3.1 Person in charge

- a) To ensure a service meets its duty of care in relation to children in care, it must appoint a person in charge, as defined.
- b) There must be a person on the premises nominated as person in charge when the appointed person in charge is absent from the premises.
- c) If the service wishes to introduce a job share or part-time arrangement for the position of person in charge, then it must demonstrate how it will manage the situation to ensure that duty of care will continue to be met.
- d) In an under school age care setting, the person in charge must hold an approved qualification.

3.2 Carer:child ratio

The minimum carer to children ratio is:

Age of child Under school age children:	Carer:child ratio
Under three years	1:5 (or part thereof)
• Three to five years inclusive	1:10 (or part thereof)

School age children:

I:I5 (or part thereof)

3.3 Number of staff on premises

- a) Under school age care setting:
 - i. Where there are children under three years of age, and the number of children exceeds five, there must be at least two carers on duty, one of whom must be qualified.
 - ii. Where the youngest child is three years or older, and the number of children exceeds six, there must be at least two staff on duty, one of whom must be a qualified carer.

Note: Refer to Standard 11.1d) regarding the protocol for single staff.

- b) School age care setting:
 - At all times, there must be a minimum of one carer on duty. When there are 13 or more children on the premises, there must be at least two carers on duty.



3.4 Carer:child ratios are to be maintained at all times

Carer:child ratios are to be maintained at all times, including lunch breaks and children's sleep/rest times.

3.5 Averaging provision in an under school age care setting

The minimum carer:child ratio may be met by applying an averaging provision, under the following conditions:

a) Children under three years

- i) Overall, there must be an average of one carer for every five children under the age of three years;
- ii) No less than one carer for every four babies under 12 months;
- iii) No less than one carer for every five children aged between one and two years; and
- iv) No less than one carer for every seven children aged between two and three years.

b) Children aged between two and five years inclusive

No less than one carer for each group of seven children, provided that the group does not include more than three children aged between two and three years.

3.6 Qualified carer:child ratio – under school age care setting

- a) There will be an even distribution of qualified staff across the service;
- b) The minimum ratios are:
 - i) one qualified carer for every 10 children (or part thereof) under the age of three years;
 - ii) one qualified carer for every 20 children (or part thereof) for children aged three to five years inclusive; and
 - iii) one qualified carer for every 15 children (or part thereof) for combinations of children between birth and five years of age inclusive, provided that the group does not include more than five children under the age of three years;
- Qualified carer:child ratios are to be maintained at all times.
 Note: There is no qualified ratio referenced within a school age care setting, as qualifications are not required.

3.7 Unqualified carers aged under 20 years

- a) Unqualified carers, aged between 18 and 20 years, may be included in the carer:child ratios where it can be demonstrated that:
 - i) adequate supervision by senior staff occurs at all times;
 - ii) the carer aged between 18 and 20 years meets the criteria for filling an unqualified position; (refer to Standard 2.1); and
 - iii) in an under school aged care setting there is no more than one carer aged 18 to 20 years per two senior carers.
- b) Persons under the age of 18 years shall **not** be included in the carer:child ratio without the service having received written permission from the Secretary, Department of Education.



3.8 Staffing ratios for excursions and transport

For ratios of carers, staff and other adults, refer to Standard 4: Excursions and Transport.



4 EXCURSIONS AND TRANSPORT

STANDARD

Children's safety and wellbeing must be maintained during the excursion and any associated travel while in the care of the service.

Rationale

Children clearly benefit from excursions that provide them with opportunities to experience a broad range of environments and to explore their local community.

Excursions are fun, recreational experiences that provide children with an appropriate level of challenge. Excursions can allow children considerable freedom within predetermined limits, and provide opportunities for children to learn about their community and valuable life skills.

At the same time, well planned excursions incorporate the management of any possible risks in familiar or unfamiliar environments.

The service must assess whether any additional staffing is required for the proposed venue and activities, and to meet their duty of care.

This standard covers excursions, including travelling to/from excursion destinations, and any other travel, including home/school pickup and delivery.

4.1 Parental permission for excursions

- a) No child is to leave the premises without a parent(s') written authorisation;
- b) Where a service offers routine excursions:
 - i) written information must be provided to a child's parent(s) when the child enters care detailing the nature of these routine excursions; and
 - ii) written authorisation for a child to participate must be obtained from the parent(s)when the child enters care, as a record that the parent(s) acknowledge the nature of these routine excursions.
- c) Where a service offers non-routine excursions:
 - i) specific information about each non-routine excursion must be given to the parent(s), detailing:
 - a. the date/times;
 - b. the proposed destination;
 - c. the method of transport;
 - d. activities/purpose of the excursion;
 - e. identified risks and risk management strategies;
 - f. carer/adult to child ratios; and
 - g. security arrangements, where applicable (e.g. overnight).
 - ii) written authorisation for a child to participate must be obtained from the parent(s) for each non-routine excursion.

4.2 Hazard identification and management

The service is to:

- a) develop a written procedure in order to identify, assess and manage any hazards associated with an excursion;
- b) implement the procedure prior to and during each excursion; and
- c) adjust adult to child ratios in accordance with Standard 4.4 4.5, and take any other action required to manage identified risk.



4.3 Safety of children on excursions

For any excursion, there must be:

- a) appropriate supervision by staff at all times;
- b) one carer with current First Aid qualifications as per Standard 2.4, and the knowledge and ability to implement current First Aid procedures;
- c) a well-equipped first aid kit, including any emergency medication suitable for the excursion, readily accessible at all times;
- d) a list of all children and adults participating in the excursion;
- e) emergency information, e.g. emergency contacts for all children, names and details of children with allergic reactions;
- f) a mobile phone or means of contact with emergency services readily accessible; and
- g) carer/adult to child ratios for excursions as per Standard 4.4 4.5.

4.4 Carer/adult to child ratio on excursions, including travel to and from the destination

4.4.1 Under school age care setting

a) The minimum requirement on any excursion, including travel to and from the destination:

The minimum carer:child ratio for the age group must be maintained (Refer to Standard 3.2: *Carer:child ratio*).

- b) Where excursions involve children crossing a major road, the adult:child ratio must be:
 - i) I:4 (or part thereof) for children under five years; and
 - ii) 1:10 (or part thereof) for children aged five years.
- c) Where the service identifies the likelihood that there is a significant hazard within the excursion, the adult:child ratio must be:
 - i) I:2 (or part thereof) for children under the age of four years; and
 - ii) I:5 (or part thereof) for children aged four years and over.

d) If the children are to swim, the following conditions apply

- i) swimming at a pool can occur only where there is at least one adult with the group who holds a current Bronze Medallion (or equivalent) or where a qualified lifeguard, informed of the excursion, is present and available to assist;
- ii) swimming at a beach can occur only where a qualified lifeguard, informed of the excursion, is present and available to assist; and
- iii) the adult:child ratio is 1:1 for children under three years, and 1:2 for children aged three years or older, with the adult to be in the water with the child/ren.

Note: The intent of this standard can be met where the service decides that there will be a qualified (Bronze Medallion or equivalent) adult positioned on the poolside. This person must be positioned in order to see the children and carers in the water and be available to assist any of those children and carers immediately if required. This may mean that there is one less adult in the water than the ratio specified above.



iv) children not in the water must be supervised at all times, and the relevant carer to child ratio for the identified level of risk for that situation must be applied.

Note: The qualified (Bronze Medallion or equivalent) adult is over and above the staffing requirement for supervision of children who are not in the water.

v) the carer in charge of the excursion must always be present and maintain overall responsibility.

e) If the children are to paddle (but not to swim):

- i) The service is to assess the level of risk and adjust ratios accordingly.
- ii) The carer(s) and any other adults present must be able to see the children at all times and be able to assist children immediately if required.

4.4.2 School age care setting

a) The minimum requirement on any excursion, including travel to and from the destination:

- i) The minimum **carer**:child ratio of 1:15 (or part thereof); and, in addition.
- ii) the minimum ratio of I adult: 10 children (or part thereof) must be maintained while on an excursion.
 Note: If this adult is a volunteer, they must be under direct supervision of a carer please refer to Standard 4.6.
- Where the service is on a school site and regularly uses another unlicensed part of the school on a routine excursion basis, the service is to advise the licensing authority of the need to continue to operate with a minimum **carer**:child ratio of 1:15 (or part thereof), or 1:12 if it is a single staff service.

EXCEPT WHERE:

b) Significant hazard

Where the service identifies the likelihood that there is a **significant hazard** within the excursion, the adult:child ratio is 1:5 (or part thereof)

c) If the children are to swim:

- Swimming at a pool can occur only where there is at least one adult with the group who holds a current Bronze Medallion (or equivalent), or where a qualified lifeguard, informed of the excursion, is present and available to assist;
- ii) Swimming at a beach can occur only where a qualified lifeguard, informed of the excursion, is present and available to assist;
- iii) The adult:child ratio is 1:5 for children, with the adult to be in the water with the children;

Note: Where the service includes 4 year olds, the adult:child ratio of 1:2 must be applied.

Note: The intent of this standard can be met where the service decides that there will be a qualified (Bronze Medallion or equivalent) adult positioned on the poolside. This person must be positioned in order to see the children and carers in the water and be available to assist any of those children and carers immediately if required. This



may mean that there is one less adult in the water than the ratio specified above.

- iv) Children not in the water must be supervised at all times, and the relevant adult:child ratio for the identified level of risk for that situation must be applied; and
- v) The carer in charge of the excursion must always be present and maintain overall responsibility.
 Note: The qualified (Bronze Medallion or equivalent) adult is over and above the staffing requirement for supervision of children who are not in the water.

d) If the children are to paddle

- i) The service is to assess the level of risk and adjust ratios accordingly.
- ii) The carer(s) and any other adults present must be able to see the children at all times and be able to assist children immediately if required.

4.5 Overnight Care

4.5.1 An overnight care environment, e.g. a camp, away from the licensed premises

- i) The service must ensure that:
 - a minimum of two senior staff (one of whom must hold an appropriate child care qualification, in an under school age care setting) are present at all times;
 - two staff members with current First Aid qualifications as per Standard 2.4, and the knowledge and ability to implement safety procedures are present at all times;
 - c) the minimum adult:child ratio of 1:8 (or part thereof) is maintained for a school age care setting;
 - d) the minimum adult:child ratio of 1:2 (or part thereof) for children under 3 years of age and 1:4 (or part thereof) for children 3 – 5 years of age, is maintained.
- ii) The service must, in advance of an overnight excursion/camp, assess the proposed facilities, using the 'Service self-assessment for safety and suitability of overnight excursion/camps' (See Appendix I), which covers:
 - a) Maintaining a safe environment.
 - b) Sleeping arrangements.
 - c) Food arrangements.
 - d) Personal hygiene arrangements.

The completed form(s) must be available to the licensing authority on request.

Notes

- I. The minimum **carer**:child ratio (or part thereof) applies.
- 2. Staff and adults, when undertaking ancillary roles, e.g. cooking, are **NOT** included in the adult:child ratio.
- 3. A single staff service may meet the intent of a) and b) with:
 - one carer who holds a current Tasmanian Working with Children Check or valid safety screening clearance, an appropriate child care



qualification and current First Aid qualifications (refer to Standard 2.4), plus

- one adult with a current Tasmanian Working with Children Check or valid safety screening clearance and current First Aid qualifications (refer to Standard 2.4).
- 4. The licensing authority will **NOT** be involved in inspecting or licensing the sites used for excursion/camps with overnight care.

4.6 Use of volunteers/parents on excursions

The minimum **carer**:child ratio must always be maintained while on an excursion. However, volunteers 18 years of age and older, parents, and close family relatives, e.g. grandparents, may be used to make up the additional **adult**:child ratio required, on the condition that:

- a) volunteers and regular visitors are always under the direct supervision of a carer;
- volunteers and regular visitors (other than parents and close family relatives) hold a current Tasmanian Working with Children Check or valid safety screening clearance*; and
- c) **for overnight excursions**, all volunteers and regular visitors **including** parents and close family relatives hold a current Tasmanian Working with Children Check or valid safety screening clearance*.

4.7 All vehicles

All vehicles used for transporting children must comply with the appropriate transport regulations, including

- a) i) valid vehicle registration certification;
 - ii) seating for each child; and
 - iii) appropriate child restraints, correctly installed, where required.
- b) Children must be directly supervised and never left unattended when in or around a motor vehicle.
- c) There must be at least one staff member available at all times, including in an emergency, who holds current First Aid qualifications in line with Standard 2.4.
- d) The driver must:
 - i) hold a valid driving licence for the vehicle;
 - ii) no longer be required to display provisional licence plates;
 - iii) have a zero blood alcohol content; and
 - iv) not be adversely affected by drugs or medication.
- e) Loose objects, such as luggage, are to be safely stored and secured.
- f) The service must have a written policy/procedure in the event of an emergency/accident.

4.8 Service's vehicle

In addition to meeting 4.7 a) – f), where the service operates its own vehicle to transport children in care:

- a) the vehicle must be roadworthy and regularly serviced; and
- b) the driver must hold a current Tasmanian Working with Children Check or valid safety screening clearance* **and** meets the requirements of 4.7d).



Note I: The driver may be considered within the minimum carer:child ratios and, if so, must meet the requirements of Standard 2.1.

Note 2: Whilst children are in a vehicle owned by the service they are in the care of and remain the legal responsibility of the service.

4.9 Collection and delivery of children in a school age care setting

The service is to assess the risk and adjust ratios accordingly.

As a minimum:

- a) Walking the minimum **carer**:child ratio of 1:15 must be maintained;
- Service vehicle the minimum **adult**:child ratio of 1:10 must be maintained; and
- c) Other vehicles the minimum **adult**:child ratio of 1:10 must be maintained.

Note I: Under the *Child Care Act 2001*, the term 'premises' is defined to include a vehicle; however, due to the potential risks to children, the above ratios apply. **Note 2:** For an under school age care setting, refer to Standard 3.2.

* For further information regarding the requirements for a Tasmanian Working with Children Check or valid safety screening clearance refer to Standard 1.



5 PROGRAMMING

STANDARD

Programs that support and maximise each individual child's development, and allow for age-appropriate learning experiences, leisure and recreational activities, are to be provided in a safe, stimulating and supportive environment.

Rationale

A supportive learning environment, rich with opportunities for imaginative play, self-expression and creative thought, is fundamental to the development of children. The provision of sufficient and varied opportunities for play enhances each child's growth and individuality. Such opportunities must be culturally appropriate and diverse, offering experiences that facilitate each child's individual development.

Programming in a school-age care setting is to include informal recreation and leisure activities, that will enhance and facilitate children's development. The program is to be flexible, immediately responsive to children's emerging interests, and provide varied opportunities for play. Programs must also provide some measure of physical activity, on a regular basis, particularly outdoor physical activity.

School age programs need to balance 'challenge' (a necessary daily component of the program, extending the child/ren's interests) with 'risk' (which, because it may potentially involve danger, must be planned for). A 'risk' is generally obvious to a school aged child, and they can decide whether or not to take that risk. Programs therefore must be planned in consultation with the children at the service, and assist them to understand an appropriate level of risk for their age/skill levels, and involve them in risk management.

Living with 'risk' is essential to the development of life skills – consequently, programs which are overprotective of children may in fact prevent children from becoming *appropriate* and competent risk takers.

Planning, continual evaluation of programs and keeping written records will assist in monitoring each child's development, and in maintaining consistency with the centre's philosophy and goals, and will inform parents of experiences offered to their children.

The Early Years Learning Framework and/or the Framework for School Age Care may assist services in the development of their program.

5.1 Programming

- a) Programs are to be:
 - i) child-centred;
 - ii) reflect the philosophy and goals of the service;
 - iii) documented;
- b) Programs are to:
 - i) be inclusive of the cultural diversity of all families using the service; and
 - ii) support children to explore a range of cultural experiences in an environment free from prejudice.
- c) Programs are to take into account:
 - i) the developmental needs of individual children;
 - ii) group size and composition;
 - iii) children with additional needs; and
 - iv) expectations of children's parents.



- d) Programs are to encourage appropriate social interaction, and positive and responsible behaviour.
- e) Programs are to take into account:
 - i) the weather and the physical environment;
 - ii) suitable materials, toys and equipment, required to support the program; and
 - iii) quiet/active times and settings.
- f) Programs are to offer all children the opportunity to:
 - i) explore a variety of experiences, both indoor and outdoor;
 - pursue their own interests, including opportunities to return to and complete 'long-term' projects;
 - iii) be spontaneous;
 - iv) freely choose activities (including a balance of new and/or challenging experiences), solve problems, and have access to learning experiences;
 - v) practise autonomy and independence and, as appropriate, leadership;
 - vi) learn and practise life and social skills;
 - vii) be involved in an appropriate level of physical activity, which reflects current health guidelines for the age group;
- g) All programs must promote the dignity and rights of each child at all times. This includes:
 - i) guidance towards acceptable behaviour, with encouragement freely given;
 - positive child management techniques, (i.e. must not include physical, verbal or emotional punishment that could humiliate, frighten or threaten the child);
 - iii) respect for the values of the child's family; and
 - iv) flexible routines to ensure the needs of individual children are met.
- h) In addition, programs in a school age care setting must:
 - i) be appropriate to the program offered, (i.e. holiday, before or after school);
 - ii) be planned with significant input from the children, written, displayed and evaluated regularly, allowing children the opportunity to contribute meaningfully to the development and evaluation of the program.

5.2 Program Records

The service provider is to maintain and display a record of the program, which describes the experiences that will be provided. This is to be readily available to all parents, including those who do not regularly attend the service venue.



6 PLAY AND SLEEP SPACE

STANDARD

A safe and clean environment must be provided that is spacious enough to prevent overcrowding, and supports a range of daily activities and routines while minimising the risk of accidents and health risks.

Rationale

The physical environment affects the behaviour and interactions of children and adults. Sufficient physical space is essential to ensure a safe environment which allows children the opportunity to explore their world, while moving freely and energetically. The amount, arrangement and use of space, both indoors and outdoors, must facilitate children's physical, intellectual, social and emotional development.

As sleep is essential to healthy development for children under school age, a service must have sleeping facilities for this age group, which enables a significant number of children to sleep or rest at any one time, and procedures which allow for children's individual needs. Sleep/rest areas must be arranged in such a way as to promote restful sleep. (Requirements for overnight care are covered in Standard 18: Overnight Care at the Licensed Premises).

The amount of space required in addition to the children's play spaces is dependent upon the nature of the service and the length of time that children are present at the service.

6.1 Licensed Capacity

The licensee is to ensure that the licensed capacity, as noted on the licence, is not exceeded.

6.2 Indoor play space

Indoor play space is to be maintained as 3.25m² of unencumbered play space per child.

6.3 Outdoor play space

Outdoor play space is to be maintained as 7m² of unencumbered play space per child.

6.4 Sleep space for children aged from birth to two years

a) Sleep space, in addition to the required play space, is to be maintained in accordance with the following:

Each required sleep room/area, must:

- i) **for children up to the age of 12 months**, provide 2m² of sleep space for the total number of children under 12 months present at any one time; and
- ii) **for children aged one year**, provide $2m^2$ of sleep space for at least half the number of children present at any one time.
- b) Cots/age-appropriate bedding are to be arranged to ensure:
 - i) direct access to each child;
 - ii) adequate space between cots; and
 - iii) accessibility to the exit at all times (refer to Standard 11.11: Fire Safety).



6.5 Supervision of sleep room

Where the sleep space is not directly adjacent to the playroom in use, or where visibility cannot be easily maintained, then:

- i) a supervision policy must be in place; and
- ii) where the carer does not remain in the room, there must be an operating baby monitor.



7 FURNITURE, EQUIPMENT AND BEDDING

STANDARD

Age-appropriate furniture, equipment and bedding must be provided and maintained in good order.

Rationale

Age-appropriate furniture, equipment and bedding in sound repair, assists in maintaining children's safety and wellbeing, and supports their development.

Under school age children must have individual access to a bed to promote undisturbed sleep. While the sleeping requirements for children who are three years and over are less than those of infants, it must be assumed that all children under the age of five years may need to sleep/rest during the course of a day. Cots are recommended as the most appropriate bedding for children up to 18 months.

(For overnight care requirements, refer to Standard 18: Overnight Care at the Licensed Premises).

7.1 Furniture and equipment

Where applicable, furniture and other equipment must comply with and be maintained so that it continues to meet relevant Australian Standards.

7.2 Children's toys, equipment and furniture

- a) There must be adequate, appropriate toys and equipment available to meet the age/ developmental stages of the children in care.
- b) Toys, equipment and furniture must be maintained in a good state of repair, and if damaged or unsafe, must be inaccessible to children.
- c) Toys, equipment and furniture must not be hazardous to children.
- d) Toys and equipment must be regularly cleaned.

7.3 Nursery equipment

- a) **Cots**
 - The service must use or provide for use cots which meet Australian Standard 2172: 1995 (Household Cots) as the minimum, or, where the licensing authority agrees, Australian Standard 2195 (Porta-cots).
 - ii) Cots must be:
 - a. safely positioned;
 - b. free of transfers, and any string, ribbon, ties or beading; and
 - c. free of all types of cot bumpers (padding tied to the cot).

b) Bunks and cradles

- i) Bunks and cradles must not be used in an under school age care setting.
- ii) If bunks are used in a school age care setting:
 - a. the bunks must meet the relevant Australian Standard; and
 - b. school age children under six years of age are to sleep on the lowest bunk.

c) High/low chairs (chairs with a tray)

i) Children must be supervised when in a high or low chair.



ii) An age-appropriate, safety harness must be used to protect a child sitting in a high chair.

d) **Prams and strollers**

- i) children must be supervised at all times when in the pram or stroller;
- ii) the pram/stroller must not be overloaded;
- iii) an age-appropriate safety harness must be fitted and adjusted to each child; and
- iv) as a general rule, prams and strollers must not be used for children to sleep in.
 However, if a child does fall asleep in a pram or stroller, carers must continue to supervise the child.

e) Walkers and jolly jumpers

Walkers and jolly jumpers must not be used.

- 7.4 a) Cots/beds where the service operates continuously for more than 4 hours per day
 - i) **For children up to the age of 12 months:** there must be one cot or ageappropriate bed for each child present at any one time.
 - ii) **For children aged I year:** there must be one cot or age-appropriate bed/ mattress for each child present at any one time.
 - iii) **For children aged two and three years:** there must be a minimum of one age-appropriate bed/mattress for every two children present at any one time.
 - iv) **For children aged four years:** there must be a written management plan to ensure that children aged from four to five years are able to rest if required.

b) Cots/beds where a session is provided for a maximum of four hours

- i) **For children up to the age of 12 months:** there must be one cot/ageappropriate bed for each child present at any one time.
- ii) **For children aged I and 2 years:** there must be a minimum of one ageappropriate bed/mattress for every two children present at any one time.
- iii) **For children aged three and four years:** there must be a written management plan to ensure that children aged from three to five years are able to rest if required.
- c) For all children there must be appropriate facilities located in a suitable area to cater for situations such as a child being unwell or where a child/children can rest.

7.5 Storage of beds/mattresses

After use, beds and mattresses must be:

- a) cleaned;
- b) aired; and
- c) stored appropriately.

7.6 Bed linen

- a) There must be sufficient bed linen (e.g. sheets/doonas/blankets/pillowcases; and impervious mattress covers, where required) to ensure that children do not share the bed linen prior to laundering the bed linen.
- b) After each use, the bed linen must be:
 - i) laundered; or



ii) each child's linen stored separately.

7.7 Soft furnishings

Large cushions and soft furnishings must be regularly cleaned.



8 GENERAL FACILITIES

STANDARD

In addition to children's play space, the service must have sufficient space, equipment and facilities to ensure a healthy, safe and comfortable environment for children, staff and parents.

Rationale

It is important for services to have sufficient space, equipment and facilities to ensure that the health and safety needs of children, staff and parents are met.

The organisation and structure of the physical environment must be inviting and comfortable, to encourage a free flow during daily routines of eating, toileting, resting and playing and allow for positive interactions between children, staff and parents.

A balance of natural and artificial lighting, good ventilation and fresh air promotes the wellbeing of children and adults.

Provision needs to be made for privacy for parent/staff consultations and administrative procedures, secure storage of confidential records and also for staff respite.

Where a centre caters for children with additional needs and/or developmental delays, facilities must, where possible, be consistent with and sensitive to the requirements of these children.

8.1 Toilets and handbasins

The service is to ensure that there is:

- a) one toilet for every 15 children (or part thereof);
- b) one washbasin for every 15 children (or part thereof);
- c) sufficient soap and hand drying equipment;
- d) safe and suitable access to toilet facilities; and
- e) toilet facilities that afford privacy for children, while maintaining appropriate supervision.

8.2 Nappy changing facilities in an under school age care setting

Where children under the age of three years are cared for, hygienic nappy changing facilities are to be provided:

- a) a nappy change bench, able to accommodate the installation and storage of steps; (where steps are not required under the BCA, there is an appropriate procedure);
- b) one change mat for every 10 children (or part thereof) that has an impervious, washable surface, and is maintained in good repair;
- c) a bench type baby bath; (where not required under the BCA, there is an appropriate procedure);
- d) an appropriate water supply;
- e) in a location that enables a staff member changing a nappy to have visibility of the play area at all times; (where not required under the BCA, there is an appropriate procedure);
- f) adult handwashing facilities; (where not required under the BCA, there is an appropriate procedure); and
- g) suitable facilities for the hygienic disposal of waste materials.

8.3 Laundry facilities

a) The service is to have appropriate laundering arrangements either on or off the premises.



b) The service must have facilities for sanitary storage of soiled clothes, nappies and linen, pending laundering or disposal which are hygienic and inaccessible to children.

8.4 Floor surfaces

- a) The service is to ensure that in all areas, floor surfaces are suitable for the activities/routines conducted.
- b) Toilet and wet areas must be maintained so that the likelihood of accidents (e.g. due to slippery surfaces) is reduced.

8.5 Hot water

Hot water which is accessible to children must be tempered; or in an existing school age care setting, which is not required to comply with the Tasmanian Plumbing Code:

- hot water taps must be guarded or disabled; or
- appropriate supervision must be in place.

8.6 Food preparation facilities

- a) The service's food preparation facilities are required to be safe and hygienic for the preparation and storage of food and drink. Appropriate equipment may include:
 - i) a refrigerator;
 - ii) a stove/microwave (not required where care is provided for four hours or less, unless this incorporates a meal period);
 - iii) a sink with hot and cold running water;
 - iv) a facility for heating babies' bottles and food, that is adjacent to or part of the babies/toddlers area; and
 - v) where these facilities are not immediately available, a service must ensure safe and hygienic conditions are maintained.
- b) In an under school age care setting, the food preparation facilities are to be protected by a door or gate, including childproof latches, that prevents access to the facilities by children. Where this is not a requirement under the BCA, children must be supervised at all times, and must not be able to access hazards in these areas.
- c) In a school age care setting, where there are hazards in the food preparation facilities or where the food preparation facilities are not immediately adjacent to the program's main area, a management plan is required.

8.7 Reception and administration areas

Where the service operates continuously for more than four hours per day, a space for:

- a) administration; and
- b) private consultations with parents;

is to be provided.

8.8 Storage

- a) The licensee must ensure that there is secure storage for:
 - i) confidential information, records and other documents, including any confidential records/information taken off site;
 - ii) other equipment and materials.
- b) There must be secure, **labelled** storage for items including cleaning materials, flammable, poisonous or other dangerous substances so that these items are inaccessible to children.



c) Children under three years of age must not have unsupervised access to bags.

8.9 Telephone

- a) The service is to have an operating telephone on the premises readily accessible at all times.
- b) Where the service operates with a single staff person, there must be a portable, operating telephone with that person when that person cannot access the primary telephone.

8.10 Lighting

- a) Every room used by the children must be effectively and safely lit, using natural light as much as possible. Where natural lighting is limited, the children's program must be planned to ensure children experience a balance of indoor/outdoor time.
- b) In an under school age care setting, fluorescent lighting is to have diffusers or be guarded.
- c) In a school age care setting, where there is active play which may result in damage to lighting, any fluorescent lighting is to be guarded.

8.11 Ventilation

Every room used by the children must be effectively and safely ventilated.

8.12 Heating/cooling

- a) Heating and cooling is to be provided at a safe and comfortable temperature, when children are in care;
- b) Where heating/cooling units and fans are used, they are to be safely situated, or adequately shielded, to prevent access and injury to children.

8.13 Windows

- a) The service is to ensure that children's view to the outside is optimized.
- b) Where a window gives access to a pool or significant hazard:
 - i) a key lock is to be fitted;
 - ii) the window is to be locked whenever children are in care; and
 - iii) keys are to be kept out of the reach of children.
- c) Windows, when opened, must not create a hazard to children, e.g. a significant drop, or running into an open window frame.
- d) In an under school age care setting, if a window faces onto a drop of 600mm or more, or onto any other significant hazard, or leads to an unlicensed area, a lock which limits the extent of the opening to a maximum of 125mm, or a secure screen, or other device, is to be fitted to the window.

Note: For glazing requirements see Standard 11: Safe Environment



9 FENCES AND BARRIERS

STANDARD

In an under school age care setting there must be fencing around the perimeter of the licensed outdoor play area, and any identified hazards must be isolated by fences or barriers and gates.

In a school age care setting, safe, secure, clear outdoor boundaries must be established and access to any identified significant hazards must be prevented/restricted by an agreed, appropriate barrier or safety management plan.

Rationale

In an under school age care setting, appropriate fencing, whether around the perimeter of licensed outdoor play areas, or isolating an identified hazard, is necessary to ensure that children cannot leave the service unaccompanied, nor access dangerous areas and hazards. Appropriate barriers considerably reduce the risks associated with children's accidents, drownings and falls. In a school age care setting, outdoor boundaries need to be established to prevent children's unsupervised access to any significant hazards that have been identified. A barrier or safety management plan will reduce the risk of children running impulsively into hazards, e.g. traffic, water hazards or significant drops.

Note: 'Barriers' may include balustrades, railings, doors and windows, as required.

9.1 Child safety

9.1.1 Under school age care setting

The service must:

- a) maintain fencing, barriers and gates to meet requirements as outlined in 9.2 9.8;
- b) place signs requesting closure of gates/barriers on gates and barriers giving primary access/exit to the premises;
- c) ensure that fencing, gates, balustrades, retaining walls and barriers have nothing near them that will enable children to scale that fence, gate, balustrade, retaining wall or barrier;
- d) ensure that the effective height of the fencing and gates is maintained;
- e) ensure that gates are kept closed when not in use; and
- f) ensure adequate supervision so that children cannot exit unaccompanied from the licensed play area.

9.1.2 School age care setting

The service must ensure that:

- a) All staff and children are familiar with the identified outdoor boundaries;
- b) Children's access to any significant hazard is restricted by a barrier and/or a safety management plan; and
- c) All staff and children are to be familiar with any safety management plan.

9.2 Fencing and gates in an under school age care setting

a) Fencing and gates around a licensed outdoor play area are to provide an effective barrier to young children, be at least 1200mm high, and be designed, installed and maintained to prevent entrapment hazards; and



- b) Gates are to have self-fastening, childproof mechanisms, or are to be kept locked, and keys are to be:
 - i) kept out of the reach of children; and
 - ii) readily accessible by the staff in case of emergency.

9.3 Fencing and gates where there is a significant hazard adjacent to/within the premises

- a) Where there is a pool (1), spa, or jacuzzi adjacent to or within the premises, fencing and gates are to be designed, installed and maintained in accordance with the Australian Standards 1926 and 2820;
- b) Where there is an approved pool gate, the self-closing mechanism and latch must be maintained in good operational order;
- c) In an under school age care setting:
 - i) Where there is any other significant hazard adjacent to or within the premises. fencing and gates are to be designed, installed and maintained in accordance with the Australian Standards 1926 and 2820.
 - ii) Where there is any significant hazard adjacent to or within the premises and a risk assessment identifies a need to keep gates locked, the gates are to be kept locked, and keys are to be:
 - a. kept out of the reach of children; and
 - b. readily accessible by the staff in case of emergency.

Note: Existing fencing/gates which do not meet the Australian Standards, but are 1500mm high are suitable. However, when the fencing/gates need to be replaced, the replacement fence/gates must comply with Australian Standard 1926 and 2820;

(¹) 'Pool' refers to pools and other bodies of water which require fencing and gates to meet Australian Standards 1926 and 2820, e.g. spa or jacuzzi.

9.4 Vehicular gates in an under school age care setting

The service must ensure:

- a) vehicular gates to the play area are locked whenever children are able to access the outdoor play area;
- b) the key is:
 - i) kept out of the reach of children; and
 - ii) readily accessible by the staff in case of emergency.

9.5 Decking, patios and landings

a) Where there is access to decks, patios and landings and where there is a drop of 600mm or more, there must be an effective barrier of 1000mm in height, which is designed, installed and maintained to prevent entrapment.

9.6 Steps, stairs and ramps

- a) Where there is access to steps, stairs and ramps, and where there is a drop of more than 600mm, there shall be an effective barrier at least 865mm in height from the nosing of the stair tread/floor of a ramp, which is designed, installed and maintained to prevent entrapment; and
- b) Access to stairs for children under the age of two years is to be directly supervised.



9.7 Drops and barriers in an under school age care setting

- a) Where there is a difference of 600mm or less in height levels within a play area or between adjacent play areas, consideration must be given to providing an effective barrier at the highest point; and
- b) Where a difference in height exceeds 600mm, the barrier must be designed, installed and maintained to prevent children climbing the barrier.

9.8 Doors

- a) If a door is a required exit (i.e. a fire exit) the exit path and doorway must remain clear of obstacles;
- b) Doors which give access to a pool or significant hazard must not be required exits, are to be securely locked whenever children are in care, and the key is to be:
 - i) kept out of children's reach, and
 - ii) readily accessible by the staff in case of emergency;
- c) In an under school age care setting, if a door opens onto an unlicensed area, children are not to be able to open the door.



10 WATER SAFETY

STANDARD

Children's safety must be maintained in and around water.

Rationale

Because of the attraction water holds for children it is essential to maintain a high level of vigilance in relation to water safety and children's access to water hazards. Carers must take every precaution to identify the risks, and document and implement hazard management strategies that protect children from drowning and water related accidents.

Note: For information about excursions to public pools, beaches or bodies of water, please refer to Standard 4: Excursions and Transport.

10.1 Understanding of the dangers of water

- a) The service provider must demonstrate an understanding of the dangers of water for children; and
- b) Carers must at all times directly supervise children's access to any body of water (e.g. baths, sinks, puddles, containers, water play activities and equipment).

10.2 Water play in an under school age care setting

Water play equipment (including wading/ paddling pools) may only be used while children are in care if the water play equipment:

- a) can be easily emptied by one person;
- b) is emptied immediately after each use;
- c) is stored safely, and in such a way as to prevent water collection; and
- d) is age-appropriate and presents no danger to children.

10.3 Swimming pool prohibition

a) The licensee must ensure that there is no swimming pool⁽¹⁾ on the service's licensed premises.

⁽¹⁾ **'Pool'** refers to pools and other bodies of water which require fencing and gates to meet Australian Standards 1926 and 2820, e.g. spa or jacuzzi.

10.4 Existing pools (1) adjacent to, or near the licensed premises

- a) The service provider must treat the pool ⁽¹⁾ as a major hazard and prevent children's unsupervised access to that pool ⁽¹⁾ by having in place fencing and gates that meet the Australian Standards 1926 and 2820, and/or securely locked doors and windows.
- b) The service provider must ensure that:
 - children do not have access to pool filters or any other component of pool systems;
 - ii) spa jets are not operated when children are in care; and
 - iii) the plant room is locked when children are in care.

⁽¹⁾ **'Pool'** refers to pools and other bodies of water which require fencing and gates to meet Australian Standards 1926 and 2820, e.g. spa or jacuzzi.

Note: If a pool⁽¹⁾ is utilised as part of an excursion, the provisions of Standard 4 apply.



10.5 Water features, including ornamental ponds

- a) The service provider must seek approval from the licensing authority prior to the commencement of construction of a water feature/pond;
- b) In an under school age care setting, with permanent water features used for children's play, there must be no ponding or pooling of water, and water must drain away when the water source stops.
- c) An ornamental water feature or pond that allows ponding or pooling, which can be accessed from a licensed play area, must be:

either: covered with a rigid material which will prevent submersion of a young child and which cannot be removed by a child;

or: treated as a significant hazard and enclosed as for pools (see Standard 9.3: Fencing and gates where there is a significant hazard adjacent to/within the premises).

10.6 Creeks/dams/rivers/sea and other bodies of water on, or near, the licensed premises

- a) In an under school age care setting, the outdoor play area is to be isolated from that hazard by fencing that meets Standard 9.3: Fencing and gates where there is a significant hazard adjacent to/within the premises;
- b) In a school age care setting, the licensee must ensure that children are prevented from gaining unsupervised access to these hazards by installing appropriate barrier(s), and/or having in place appropriate policies and procedures.

10.7 Excursions to bodies of water, e.g. to public pools, beaches

Refer to Standard 4: Excursions and Transport.



Centre Based Care Class 5, 0 – 12 years. Standard 10: Water Safety

II SAFE ENVIRONMENT

STANDARD

Children's overall development must be nurtured within a safe, well-maintained indoor and outdoor environment.

Rationale

Children require challenges and exposure to a wide variety of experiences in order that their development can be nurtured, within an environment that is safe, creative and stimulating.

The provision of a child-safe environment, where children are protected from known dangers and identified hazards, fosters independent creative play with reduced need for adult intervention. Such an environment requires careful planning and appropriate organisation.

Keeping the premises clean, well maintained and in good repair assists in protecting children from potential hazards and health risks.

Plants, birds and animals enrich a child's environment. However, while encouraging positive contact with animals, birds and plants, staff must ensure that children are protected from identified hazards.

11.1 Maintaining a safe environment

The service is to:

- a) demonstrate an understanding of supervision and have in place preventive measures to ensure a safe environment for children;
- b) maintain a hazard identification and management checklist, and complete this daily before the children access the indoor and outdoor areas;
- c) ensure that children are supported in following appropriate safety practices; and
- d) develop and maintain, if applicable, a Protocol to cover situations where one staff member is on duty.

11.2 First aid equipment

There must be a fully equipped first aid kit that:

- a) is labelled;
- b) is readily available to all staff;
- c) contains no out-of-date items; and
- d) in an under school age care setting, is locked, and/or inaccessible to children.

II.3 Storage – medication

- a) Medicines are to remain in the original, labelled containers.
- b) All medication must be stored at the temperature stated on the container, in a labelled, lockable or child-resistant container.
- c) Emergency medication needs to be accessible to staff, whilst inaccessible to children in an under school age care setting.
- d) Medication for self-administration in a school age care setting must be stored safely and accessed by children according to written instructions from a medical practitioner or the parent(s).
- e) Narcotic substances must be stored apart from other goods in an enclosure (e.g. a cupboard) that is securely locked and the key must be retained either on a person



entitled to administer the substance or stored in a place not readily accessible to others. All other medications must be securely stored away from narcotics.

11.4 Storage – poisons and other dangerous substances

To guard against the accidental poisoning of children through ingestion, inhalation or skin contact, all poisonous or dangerous substances must be:

- a) stored in an area which is clearly labelled, and secured;
- b) inaccessible to children; and
- c) stored separately from food.

11.5 Storage – dangerous items

All objects and materials which present a hazard are to be inaccessible to children; unless in a school age care setting, where children are to be directly supervised by a staff member.

11.6 Storage and use of equipment and tools in an under school age care setting

- a) Each power tool, petrol or fuel-driven machine, mechanical device, tool or implement is to be inaccessible to children.
- b) Children are not to have access to any area where hazardous activities are being undertaken, for example, mowing lawns, using power tools.

11.7 Building and grounds - cleanliness, repair and safety

- a) The building, grounds, all equipment and furnishings are to be maintained so that at all times they are safe, clean and in good repair.
- b) Rubbish is to be inaccessible to children and is to be stored appropriately until collection.
- c) There must be measures in place which ensure vermin control.
- d) The grounds and buildings are to be maintained, so that at all times there is no hazard for children because of inadequate surfacing under or around equipment, sharp or rough edges and surfaces, projections, and trip hazards.
- e) Gates, doors, design features, fencing and outdoor equipment must present no entrapment hazards for children.

II.8 Plants

- a) In an under school age care setting, plants known to be toxic/dangerous to humans must be removed, or made inaccessible to children.
- b) In a school age care setting, children must be educated about the dangers of any toxic plants in the local environment.

11.9 Animals and birds

- a) Any animal, bird or livestock on the premises is:
 - i) to be maintained in a clean and healthy condition; and
 - ii) not to be a source of danger, infection or cause of an allergic reaction.
- b) In an under school age care setting:
 - i) Carers are to directly supervise contact between animals and the children.
 - ii) Any animal or bird is to be kept in a separate area such as a cage or enclosure.



11.10 Burns, scalds, and electric shocks

- a) In an under school age care setting:
 - i) Children's access to and use of stoves/hotplates/cooking appliances/barbeques must always be under direct supervision.
 - ii) Power point covers are to be placed in all open power points.
 - iii) Electrical cords are to be maintained in good condition, and kept secured or out of the reach of children.
 - iv) Electrical items must be positioned safely.
 - v) Staff must exercise caution when handling hot liquids and food.
 - vi) Burners (oil/incense) must be safely positioned and inaccessible to children.
- b) In a school age care setting, the service must have a management plan to prevent the occurrence of any burns, scalds or electric shocks.

II.II Fire safety

- a) A service must provide, in accordance with the requirements of the BCA, a smoke alarm system, required exits, installed and portable fire protection equipment.
- b) Under the *General Fire Regulations 2010*, schools, child care centres, early childhood centres and school age care facilities are classified as 'specified buildings' requiring the service to prepare and maintain an evacuation plan approved by the Chief Officer, Tasmanian Fire Service [refer to Standard 17.6a)].
- c) In addition to the above, the service must also ensure that:
 - i) electrical outlets, cords and appliances are not covered by soft furnishings, carpets or other items which may create a fire hazard;
 - ii) flammable items are kept away from heat sources such as heaters or stoves; and
 - iii) access to fire protection equipment remains clear at all times.

Note: Standard 11.11 must be read in conjunction with Standard 17.6 Emergency and Evacuation Procedures.

11.12 Glazing in areas accessible to children (including glazed doors and side panels, other panels such as windows identified as hazards to children)

- a) All glazed internal and external door and side panels, and any glazing that is accessible to children and identified as a hazard must be safety glazed.
- b) For new, replaced or repaired glazing in an area identified as a hazard to children, a certificate stating that the quality and installation of the safety glazing materials comply with relevant Australian Standards is to be provided by the installer.
- c) In an under school age care setting, any glazing that is not required to meet the BCA and is accessible to children and identified as a hazard to children is:

either: professionally treated (i.e. safety glazed or treated with safety film appropriate to the thickness of the glazing);

or: effectively guarded by barrier(s) to prevent a child striking or falling against the glass.

d) In a school age care setting, glazing is to either comply with the BCA or, where not required to comply with the BCA; the service is to have a policy/procedure for the identification and management of risk, including immediate replacement of glass if necessary, in any area where glass accessible to adults/children presents a hazard.



11.13 Other glass

Items of furniture or equipment with a glass component, such as mirrors, must not present a danger to children.

11.14 Compliance with Building Regulations July 2004 (Tasmania)

Under the Building Regulations July 2004 Tasmania, the owner/occupier must comply with requirements of Schedule 4 of the Building Regulations July 2004, regarding the annual maintenance of essential safety and health features and measures.



12 HEALTH, HYGIENE AND INFECTION CONTROL

STANDARD

The health of children and staff is to be maintained through the application of appropriate health and hygiene practices.

Rationale

It is important that staff role-model positive health practices, that children are supervised, assisted and encouraged in their daily health and hygiene routines, and that the service takes appropriate measures to protect the health of children and staff.

12.1 General hygiene and infection control practices

The service is to implement policies and/or procedures which reflect current community standards and guidelines, to ensure that:

- a) staff observe appropriate health and hygiene practices; and
- b) children are encouraged to follow appropriate health and hygiene practices.

12.2 Infectious diseases

- a) The service is to implement a policy and/or procedures on infectious diseases which outline immunisation, exclusion and notification practices in line with health authority requirements or recommendations.
- b) The service is to ensure that staff and families are promptly informed about the occurrence of infectious diseases, in a manner that respects the rights of individual children or staff.
- c) The service is to keep records of cases of infectious diseases which require either exclusion or notification to relevant health authorities (refer to Standard 15.4 i)).

12.3 Sun protection

The service is to implement policies and/or procedures which reflect current community standards and health guidelines, to ensure that staff or any other person involved in the care of the children and children observe appropriate sun protection practices.

12.4 Staff health

- a) The service is to implement policies and/or procedures regarding the health of staff.
- b) Staff and others involved with the provision of care are required to maintain a reasonable standard of physical and mental health in order to fulfil their child care duties.
- c) The licensee must maintain their duty of care in relation to staff health and safety.
- d) Where there is concern that, for reasons of health, a person employed or involved in the service with the provision of care cannot perform their duties competently, the Secretary, Department of Education, may require that person to submit to a medical examination by a medical practitioner approved by the Secretary, Department of Education.

12.5 Alcohol and drugs

The service is to implement policies and/or procedures to ensure that:

- a) no person who is adversely affected by drugs or alcohol can care for children; and
- b) no person will consume alcohol or drugs (except those required for medical reasons) during the hours that children are in the care of the service.



Centre Based Care Class 5, 0 – 12 years. Standard 12: Health, Hygiene and Infection Control **Note:** The Education and Care Unit expects that service policies about alcohol and drugs include all persons in contact with the children in care; visitors, volunteers, students and ancillary workers.

12.6 Smoking

The service is to implement policies and/or procedures to ensure that:

- a) the premises provide a smoke-free environment both indoor and outdoor.
 - **Note:** 'Smoke free environment' includes when children are not present in the service.
- b) no staff member or other person involved in the care of the children is to smoke on excursions, or in vehicles used for transporting children.



13 FOOD AND NUTRITION

STANDARD

Food provided by the service must be nutritious, appetising, and culturally and developmentally appropriate.

Rationale

The childhood years are vital in the establishment of lifelong eating habits and food attitudes. Sound nutrition practices are necessary for normal development, good health and the prevention of illness.

Where the service elects to provide food, it is responsible for providing nutritious foods in a safe and positive learning environment.

I3.I Food and nutrition policy

The service must implement a food and nutrition policy and/or procedures which outline the service's approach to:

- a) promoting appropriate nutrition to meet children's developmental needs;
- b) documenting appropriately individual children's dietary needs in relation to children's culture, religion, health and allergies; and
- c) food handling and storage practices, consistent with the *Food Act 2003* and the Australia New Zealand Food Standards Code (the Food Standards Code).

13.2 Food and drink provision

- a) Safe drinking water is to be available at all times for children.
- b) Staff members are to be familiar with individual children's allergy needs and know how to respond.
- c) Where the service elects to provide food and drink for children, it is to ensure that:
 - meals, snacks and drinks are nutritious, varied, adequate in quantity, culturally appropriate, offered at frequent intervals, and take into account children's individual dietary needs;
 - meal equipment (such as crockery, cutlery and furniture) is appropriate to the children's developmental level and encourages their physical skill development and independence; and
 - ii) a menu which details the food provided daily is to be prominently displayed for children and parents' information.

13.3 Food handling and hygiene

- a) All services must comply with legislated food safety requirements [Food Act 2003 and the Australia New Zealand Food Standards Code (the Food Standards Code)]; and
- b) Food is to be prepared, handled and stored:
 - i) in a safe and hygienic manner consistent with the Food Standards Code; and
 - ii) appropriately, to prevent children with allergies having contact with known allergens.
- c) Individual drinking containers are to be provided for all children.



d) Where the service elects to provide food, it must ensure that food handlers have food safety skills and knowledge commensurate with their work activities as required by the Food Standards code.



14 OUTDOOR PLAY ENVIRONMENT AND EQUIPMENT

STANDARD

Outdoor play environments and equipment are to be organised and maintained to maximise challenge and variety for children, within safe parameters, in accordance with relevant Australian Standards.

Rationale

Outdoor play and physical exercise are important for the health, development and general wellbeing of children. The outdoor play environment must be designed to be suitable to the child's age and ability, allow for ease of supervision, while presenting challenge, variety and excitement for the children.

To ensure that shade is maximised, priority needs to be given to areas where children play for extended periods, such as water play.

Care needs to be taken to ensure that equipment is developmentally appropriate and of a safe construction in accordance with Australian Standards. Supervision of the highest standard is necessary to ensure that children remain safe in playgrounds that present challenge and excitement for their age and ability. It is known that supervision reduces the risk of injury while children are at play.

14.1 The outdoor play environment

- a) The outdoor play environment must:
 - i) be easily supervised;
 - ii) provide a variety of areas, such as open spaces/quiet areas/active areas to allow for differing types of play opportunities and interests;
 - iii) comprise a range of surface types.

In an under school age care setting, the outdoor play environment must:

- iv) have adequate shade for the number of children and activities undertaken, including passive play (i.e. sandpits);
- v) be accessible from the licensed indoor play area;
- b) A hazard identification and management checklist is to be completed daily, before children access the outdoor play area.
- c) The service provider must maintain all equipment, surfaces and vegetation in the outdoor play area in good repair to prevent any hazards for children due to lack of appropriate softfall, trip hazards, protrusions, entrapment hazards.
- d) In a school age care setting, the service must ensure there is a procedure in place to notify the service provider/school regarding any required maintenance of the outdoor play environment and equipment.

14.2 Outdoor play equipment

- a) Outdoor play equipment (both fixed and non-fixed equipment), and the surfaces under and around the equipment, must comply with, and be maintained so that they continue to meet relevant Australian Standards.
- b) The outdoor play equipment must be:
 - i) appropriate to the age and ability level of the children;
 - ii) maintained in a good state of repair;
 - iii) positioned safely; and



Centre Based Care Class 5, 0 – 12 years. Standard 14: Outdoor Play Environment and Equipment

- iv) stored safely, as appropriate.
- c) Sandpits must be:
 - i) shaded;
 - ii) maintained in a safe and clean condition; and
 - iii) in an under school age care setting, securely covered when not in use.
- d) Bikes and other mobile play equipment must be:
 - i) appropriate to the age and ability level of the children;
 - ii) used in areas away from potential hazards such as swings and slides; and
 - iii) in a school age care setting, when riding bikes and using other mobile play equipment, children are to wear appropriate safety equipment (i.e. safety helmets).
- e) In an under school age care setting, staff must directly supervise children at all times outdoor equipment is in use;
- f) In a school age care setting, staff must closely supervise children at all times outdoor equipment is in use;
- g) Children are to be made aware of guidelines for use of equipment, such as only one child at a time to use the equipment;
- h) Equipment is to be fitted with relevant safety items when in use;
- i) Swings for the baby/toddler age group must:
 - i) have an appropriate harness; and
 - ii) be used in areas away from potential hazards.
- j) In a school age care setting, trampolines must:
 - i) comply with the provisions set out in AS 4989 2006;
 - ii) be installed on certified under-surfacing; and
 - iii) be used with appropriate safety measures in place.

Note: As a general practice, trampolines must not be used in an under school age care setting.



15 ADMINISTRATION AND RECORDS

STANDARD

The service must develop administrative practices which support and inform families and staff, ensure that the duty of care is met, and that records are appropriately maintained.

Rationale

Clear communication, accurate record keeping, and efficient and effective management strategies are important determinants of quality care. Access to information about the organisation allows parents to make informed decisions about the appropriateness of the child care service in relation to their individual family needs.

The service must develop practices to ensure confidentiality of the service's records and information obtained about the children, their families, and staff. The service must comply with relevant privacy principles when drawing up forms which obtain personal information about children, their families, staff and students.

Where information/records are taken off-site from the service, the service must have procedures in place to ensure that these are dealt with in a secure and confidential manner.

Where a service keeps records in electronic/scanned format, consideration must be given to appropriate procedures to ensure the records are legible for the required period of time, and whether the technology for long-term storage will be suitable and adequate for the required period of time.

15.1 Access to information

- a) The following items must be prominently displayed:
 - i) current licence;
 - ii) evacuation plan;
 - iii) telephone numbers for emergency services, at each telephone;
 - iv) emergency numbers whenever there is one staff member only on the premises, including the name and telephone number of a nominated person who is on call and available when the service is operating [refer to Standard 11.1 d)]; and
 - v) telephone number, address and other relevant information of the licensing authority.
- b) The following items are to be readily available:
 - i) the service's philosophy;
 - ii) times and days of operation;
 - iii) fees;
 - iv) policies, procedures and practices, with a covering index; and
 - v) the Child Care Act 2001 and the Centre Based Care Class 5 licensing standards.

15.2 Insurance

The service must maintain current public liability, workers compensation and other insurance policies as required by law.



15.3 General certificates and documentation

- a) The service must retain certificates/documentation to confirm:
 - i) that glazing materials and installation meet the relevant Australian Standards;
 - ii) that hot water is tempered, if applicable;
 - iii) approval of the fire evacuation plan by the Tasmania Fire Service;
 - iv) inspection of fire protection equipment;
 - v) the service's emergency/evacuation practices to be kept for five years;
 - vi) where applicable, cots meet relevant Australian Standard/replacement plan for cots;
 - vii) where applicable, furniture and any other equipment meet relevant Australian Standards;
 - viii) that impact absorbing surfacing materials meet the relevant Australian Standards;
 - ix) that the installation of impact absorbing materials meets the relevant Australian Standards;
 - x) that outdoor equipment meets the relevant Australian Standards; and
 - xi) that pool fencing and gates meet relevant Australian Standards, where such fencing and gates are required.
- b) The service must have available the following documentation:
 - i) Information for parents about excursions; and
 - ii) hazard identification checklist and maintenance schedules to be kept for two years.

Note: Where a hazard has caused an injury to a child/member of the public, then these records must be retained until that child/person turns 25 years of age, consistent with the requirements of the *Tasmanian Limitation Act 1974*.

15.4 Records

a) Enrolment and contact information

- i) The following details about each child must be recorded prior to commencement of care:
 - a. name, date of birth and gender of child;
 - b. child's residential address;
 - name, address, contact telephone numbers and place of employment of parent(s);
 - d. name, address and contact telephone numbers of any person⁽¹⁾ authorised by the parent(s) to collect the child;
 - e. name, address and contact telephone numbers of any person who may be contacted in an emergency if child's parent(s) are not available; and
 - f. name, address and telephone number for the child's medical practitioner.
- ii) The service must retain these records for at least six years.

(1) **Note:** A sibling may, with written parental authorisation, collect the child.

b) Child information

- i) In addition to the enrolment information, the service must maintain the following information about each child:
 - a. details of allergies;



- b. other relevant medical history or detail, including wherever possible, emergency action plans for children with asthma, anaphylaxis or similar conditions;
- c. immunisation;
- d. special requirements notified by a parent(s) regarding culture, religion or special needs;
- e. primary language spoken by child, or if child has not learned to speak, the child's parent(s); and
- f. copy of any court order pertaining to a family or child.
- ii) The service must retain child information records for at least six years, unless an incident occurs in relation to any of the matters listed above, in which case all of the child's enrolment and information records must be retained until that child turns 25 years of age, consistent with the requirements of the *Tasmanian Limitation Act 1974*.

c) Attendance register

- i) There must be an attendance register which details:
 - a. name of child;
 - b. time of arrival;
 - c. time of departure;
 - d. signature of person leaving the child; and
 - e. signature of authorised person collecting the child.
- ii) Any special arrangements for collection/departure of a child must be authorised by the parent(s), and documented.
- iii) The service must retain attendance records for at least six years.
- iv) The service must have a procedure to immediately advise appropriate persons of a child's absence, when that child's place in the service has been reserved and/or the child is expected by staff.

d) Parent permissions

- i) The service must keep a record of parental permission for:
 - a. emergency medical, hospital and ambulance services;
 - b. application of 'non-scheduled' (i.e. not covered under the Poisons Regulations) treatments, such as nappy cream ointments, insect bite creams, antiseptic creams;
 - c. child to be taken on routine and non-routine excursions or escorted to or from a specified place [refer to Standard 4.1 b) and c)]; and
 - d. child to leave the service unaccompanied (in a school age care setting).
- ii) The service must retain parent permissions for at least six years.

e) Authorisation and administration of medication

- i) The service must maintain a record of a parent(s') written authorisation of medication to be administered to their child while the child is in care, including:
 - a. the name of the child;
 - b. the name of the medication, the date(s) and the time the dosage is to be administered;
 - c. a doctor's/pharmacist's⁽¹⁾ instructions relating to the dosage and its administration, if applicable;



- d. the time the medication was last administered; and
- e. the parent(s') signature.

(1) Under the *Poisons Regulations 2008*, medication may also be prescribed by dentists, optometrists, authorised optometrists, and authorised nurse practitioners.

Note: Where the service does not have the written authorisation of the parent(s), e.g. in an emergency, the service may elect to obtain verbal authorisation, in which case documentation must be retained as per e) ii) iii) and iv) and v).

- ii) The service must maintain a record of the administration of medication, including:
 - a. the name of the child;
 - b. the name of the medication, the date and the time the dosage was administered;
 - c. whether the parent's authorisation is consistent with instructions on the medication label;
 - d. the dosage administered as per doctor's/pharmacist's instructions;
 - e. the name and signature of the person who measured and administered the dosage;
 - f. the name and signature of the person who witnessed the measurement and the administration of the dosage (not required if a single staff service); and
 - g. written acknowledgement of the record of administration of the medication by the person collecting the child.
- iii) In a school age care setting, where a child self-administers medicine, there must be written instructions from a medical practitioner or from the parent(s), including the expected level of supervision.
- iv) If an incident occurs as the result of the administration of medication, then those records must be kept until that child turns 25 years of age, consistent with the requirements of the *Tasmanian Limitation Act 1974*.
- v) Other than iv), records of the authorisation and administration of medication must be retained for at least six years.

f) Child accident and injury report form

- i) The following information is to be recorded on a report form:
 - a. full name and age of child;
 - b. date, time and circumstances of the accident or injury;
 - c. location where the accident or injury occurred;
 - d. nature of any injury sustained;
 - e. names of witnesses;
 - f. action taken, including administration of first aid;
 - g. name and signature of the person making the report, and date;
 - h. time of child's departure from the service and name of person collecting the child;
 - i. record of persons notified and by whom; and
 - j. signature of parent(s) and date, as acknowledgement that they have been notified of the child's accident or injury.



- ii) If a child has a serious accident at the service resulting in the child requiring significant medical treatment/hospitalisation, the service must keep a record that the Secretary, Department of Education has been:
 - a. notified no later than the next working day of the circumstances of the injury; and
 - b. provided with a written report within three working days.
- iii) The service is to retain a child's accident or injury report forms until that child turns 25 years of age, consistent with the requirements of the *Tasmanian Limitation Act 1974*.

g) Register of accidents and injuries

- i) The service must keep a register of accidents and injuries which details:
 - a. full name, and age or date of birth of child;
 - b. location and date of the accident or injury; and
 - c. brief description of the circumstances of the accident, and the nature of the injury.
- ii) The service must retain the register of accidents and injuries until the youngest child recorded in the register turns 25 years of age, consistent with the requirements of the *Tasmanian Limitation Act 1974*.
- iii) If the accident and injury report forms are stored together, this may form a register.

h) Notification of the death of a child

- i) If a child dies while at the service, or as the result of an accident at the service, the record of the details surrounding the death is to be retained for a period of six years, consistent with the requirements of the *Tasmanian Limitation Act 1974*.
- ii) The Secretary, Department of Education, must be:
 - a. notified no later than the next working day of the circumstances of the injury or death; and
 - b. provided with a written report within three working days.
- iii) The service must keep a record that the Secretary, Department of Education, was:
 - a. notified no later than the next working day of the circumstances of the injury or death; and
 - b. provided with a written report within three working days.

i) Illness and cases of notifiable disease

- i) The service must keep a record of illness and any case of notifiable disease which occurs at the service or is notified by a child's parent(s) to the service, which details:
 - a. name and age of child;
 - b. the symptoms, and the date and time symptoms were noticed;
 - c. the room/area of service, or whether the service was notified by the parent; and
 - d. any action taken.
- ii) The service must retain records of illness and notifiable disease for at least six years.



j) Personnel management

- i) The service must keep a copy of the following for each staff member:
 - a. evidence of a current Tasmanian Working with Children Check or valid safety screening clearance* (refer to Standard 1.1);
 - b. current first aid qualifications (refer to Standard 2.4);
 - c. approved qualifications, if applicable (refer to Standard 2.);
 - d. documentation to validate a staff member's progress towards an approved qualification, if applicable (refer to Standard 2);
 - e. documentation to validate that staff member's qualification meets current qualification requirements, if applicable [refer to Standard 2: Qualifications, Schedule 2)];
 - f. driving licences, if applicable ;and
 - g. copy of approval of the Secretary, Department of Education, to employ a person under 18 years of age where that person is part of the carer to child ratio, if applicable [refer to Standard 3.7 b)].
- ii) The service must retain these records while staff are employed, or for five years, whichever is the greater.
- iii) The service must keep a copy of staff rosters for two years.
- iv) The service must keep a copy of the current Tasmanian Working with Children Check or valid safety screening clearance* of persons 18 years and older who are volunteers, students, or regular visitors for five years [refer to Standard 1.1 f)].

15.5 Maintenance of records

- a) Records are to be kept up to date, and in a safe and secure area.
- b) Records must remain confidential to those who have a right to access them [refer to Standard 1.2.

* For further information regarding the requirements for a Tasmanian Working with Children Check or valid safety screening clearance refer to Standard I.



16 PHILOSOPHY, POLICIES AND PROCEDURES

STANDARD

The service is to develop appropriate policies to ensure staff and families are well informed, duty of care is met, and clear practices and procedures are maintained.

Rationale

Written documentation is essential for effective and consistent communication within organisations. The provision of clear, written policies and procedures which reflect current professional practice and community expectations, assist in service accountability.

Written policies and procedures provide tangible evidence of intended practices which are consistent with the philosophy of the centre, and must be regularly reviewed, evaluated and updated.

Note: Standard 16 provides a list of policies/procedures required under all the standards. In some cases, the relevant Standard may provide more specific information about the **content** to be included in these policies/procedures.

16.1 Philosophy

The service's philosophy is to contain the service's values and beliefs about the care and rights of children and any other matters of ethical importance to the service. The philosophy must inform the practices, policies, and directions of the service.

16.2 Policies

The service must implement written policies and/or written procedures for each of the following areas:

a) Emergency situations and evacuation/invacuation:

- i) emergency evacuation plan, as approved by the Tasmania Fire Service;
- ii) emergency invacuation plan;
- iii) accidents, injuries and incidents;
- iv) death of a child;
- v) absconded/lost child;
- vi) abandoned child; and
- vii) security arrangements, if applicable, e.g. for overnight care;

or for excursion/camp with overnight care as per Standard 4, or overnight events.

b) Health, hygiene and safety:

- i) single staff protocol;
- ii) medication, including
 - person administering medication is authorised by the person in charge;
 - paracetamol;
 - the administration of medication in emergencies;
 - the storage; and
 - disposal of medication.
- iii) infectious diseases and exclusion practices;



Centre Based Care Class 5, 0 – 12 years. Standard 16: Philosophy, Policies and Procedures

- iv) immunisation;
- v) child protection, consistent with the relevant Act;
- vi) staff health;
- vii) alcohol, drugs and smoking;
- viii) occupational health and safety;
- ix) food and nutrition, including allergies;
- x) hygiene, including handwashing, and laundry;
- xi) general cleaning and maintenance;
- xii) excursions and transport, including emergencies;
- xiii) sun protection;
- xiv) plants and vegetation; and
- xv) glass management plan, if applicable.

c) Administration:

- i) bookings, cancellations, fees and opening times;
- ii) delivery and collection of children, including late collection of children (Standard 15);
- iii) access to the service by parents;
- iv) exchange of information with parents;
- v) confidentiality and privacy (Standard 1.2);
- vi) parent access to child; and
- vii) complaints/grievance procedures for parents and staff.

d) General

- i) staff/child interactions;
- ii) behaviour guidance;

Note: where a school age care program operates within a school, the program may attempt to ensure that behaviour management strategies are consistent with those operating within the school.

- iii) supervision;
- iv) diversity and inclusion (Standard 5); and
- v) equity and anti-bias issues.

e) Programming

Programming policies are to:

- i) complement the service's philosophy;
- support the individual development of each child, include planning, implementation and evaluation (Standard 5);
- iii) outline mechanisms for parent participation;
- iv) encourage and maximise the social, physical, emotional, recreational and intellectual development of each child; and
- v) in a school age care setting, encourage child/ren participation.

16.3 Maintenance of policies

The service must have procedures to review and update philosophy, policies and procedures.



17 EMERGENCY PROCEDURES, FIRST AID AND ADMINISTRATION OF MEDICATION

STANDARD

In the event of an emergency, or a child becoming ill or having an accident, the staff must take appropriate action.

Rationale

In order to respond appropriately and quickly in emergencies, including accidents and illness, staff must have current qualifications in first aid, CPR (including child CPR), anaphylaxis and emergency asthma management, and well-practised emergency procedures.

17.1 Records

For all emergencies, the service must maintain records in accordance with Standard 15: Administration and Records:

- a) parental authorisation for emergency medical/hospital/ambulance services (refer to Standard 15.4 d));
- b) accident and injury (refer to Standard 15.4 f) and 15.4 h) iii));
- c) authorisation and administration of medication (refer to Standard 15.4 e)); and
- d) illness/cases of any notifiable disease (refer to Standard 15.4 i)).

17.2 First aid equipment and qualified first aiders

The service must:

- a) have at least one staff member on the premises at all times who holds current, recognised first aid qualifications (refer to Standard 2.4), and is immediately available in an emergency situation; and
- b) maintain a safely located, appropriately equipped first aid kit, readily available to all staff (refer to Standard 11.2).

17.3 Medical/emergency treatment

- a) If a child has an accident/injury or becomes ill while attending the service, the child must be kept under adult supervision until the child's parent(s), or a person nominated by the parent(s), or emergency services personnel take responsibility for the child.
- b) If a child requires immediate medical aid, the service must take all necessary steps to secure that attention.
- c) If emergency treatment/medical aid is sought, the child's parent(s) must be notified as soon as possible.
- d) If medical treatment is sought off the premises, relevant information must be taken with the child.
- e) In an emergency where the child requires medication and the service does not have the parent(s') prior authorisation, every attempt must be made to secure the parent(s') authorisation, or the authorisation of a registered medical practitioner previously nominated by the parent(s).



17.4 Medication

- a) The service must:
 - i) store all medications safely;
 - ii) develop appropriate policy and procedures (refer to Standard 16.2 b);
 - iii) administer medication in line with policy and procedures; and
 - iv) keep records as per Standard 15.4 e).
 - In a school age care setting:
- b) i) medication for self-administration is to be stored safely; and
 - ii) where a child self-administers medicine, there must be written instructions from a medical practitioner or from the parent(s), including the expected level of supervision.

17.5 Notification of serious accident or death

If a child has a serious accident at the service resulting in the child's hospitalisation or death, the service must:

- a) notify the Secretary, Department of Education no later than the next working day of the circumstances of the injury or death; and
- b) provide the Secretary, Department of Education with a written report within three working days.

17.6 Emergency and evacuation procedures

- a) For safety in the event of fire, the service must ensure that the building they occupy complies with the *General Fire Regulations 2010* and that:
 - i) there is a fire evacuation plan, approved in writing by the Chief Officer, Tasmania Fire Service;
 - ii) the evacuation plan is prominently displayed in each functional area of the service.

Note: The **Quick Action Plan**, i.e. the crucial, emergency steps to evacuation must be displayed in each functional area of the service – it is not necessary to display the complete evacuation plan.

- iii) all staff and children are familiar with the evacuation plan and emergency procedures;
- iv) evacuation practices are conducted at least twice a year; and
- v) a record of the practices is retained at the service for five years.
- b) For all emergencies, the service must ensure that:
 - i) telephone numbers for emergency services are prominently displayed at each landline/fixed telephone and/or stored within any mobile/cordless telephone;
 - ii) there are documented emergency procedures [refer to Standard 16.2 a)].

17.7 Provisions when only one staff member is on the premises

When there is only one staff member on the premises, there must be:

- a) a documented protocol which:
 - i) clearly displays (with the other emergency contacts) the name and telephone number of a nominated person who is on call and available when the service is operating; and



- ii) ensures that the children and staff are familiar with and regularly practise the evacuation plan and other emergency procedures.
- b) an operating mobile telephone OR cordless telephone if the staff member is unable to readily access the fixed telephone.



OVERNIGHT CARE AT THE LICENSED PREMISES 18

STANDARD

The safety of children must be maintained when in overnight care.

Rationale

The service must demonstrate an understanding of the special needs of children in overnight care, and provide quality care, maintaining a comfortable and safe environment for the children.

Overnight care includes both 'sleepovers' at the licensed premises (e.g. an occasional event as part of a Vacation Care program) and also a regular service for families (e.g. 24 Hour Care).

Staff and adults, when undertaking ancillary roles, e.g. cooking, are **NOT** included in the adult:child ratios.

Note I: In order to be able to provide overnight care as a regular service to families, the service must meet all requirements under Standard 18.1 and be approved to have a Condition of Licence.

18.1 Maintaining a safe overnight care environment (regular, on-going service)

The licensee must ensure that:

- the minimum carer to child ratio is maintained at all times: a)
- b) a minimum of two senior staff (one of whom must hold an approved qualification in an under school age care setting) are on the premises at all times;

Note: This includes situations where the application of the carer:child ratio would generally allow for only one carer to be present.

- in an under school age care setting, staff remain awake throughout their shift. c)
- as a minimum, one staff member directly supervises the children at all times; d)
- at least one staff member holds current first aid qualifications, as per Standard 2.4; e) and the knowledge and ability to implement safety procedures, is present at all times; and
- f) security arrangements are documented and made available for parents prior to the child being accepted into overnight care.

18.2 Maintaining a safe overnight care environment for a 'sleepover' at a licensed premises

- a) In addition to meeting 18.1 (a) – (f), where a 'sleepover' occurs at the licensed premises, the licensee must ensure that:
 - i) in a school age care setting, the minimum adult:child ratio of 1:10 (or part thereof) is maintained;
 - in an under school age care setting, the minimum adult:child ratio of 1:3 (or ii) part thereof) for children under 3 years of age and 1:6 (or part thereof) for children 3 – 5 years of age, is maintained;

18.3 Sleeping arrangements

- Suitable sleeping arrangements must be provided for each child in overnight care. a)
- b) Each child is to have their own bed/cot.

Note I: Mattresses alone are not sufficient for overnight care.

Note 2: Standard 7.3 b) applies;

- c) If bunks are used (only permitted in a school age care setting):
 - children under six years of age are to sleep on the lowest bunk; i)



Centre Based Care Class 5, 0 – 12 years. Standard 18: Overnight Care at the Licensed Premises

- ii) the bunks must meet the relevant Australian Standard;
- d) In a school age care setting, the sleep space is to be gender-segregated.
- e) Ventilation must be adequate.

18.4 Other facilities

There must be:

- a) sufficient bed linen (e.g. sheets/doonas/blankets; and impervious mattress covers, where required) to meet the needs of children in overnight care;
- b) a bath and/or shower for the children's use;
- c) sufficient towels and bathroom linen to meet the needs of children in overnight care;
- d) all other facilities as outlined in Standard 8: General Facilities; and
- e) in an under school age care setting, adequate nappy changing/toileting facilities in reasonable proximity to the sleeping area.

18.5 Other matters

- a) Programs for overnight care, in addition to meeting the criteria for Standard 5, must:
 - i) provide for the needs of the children in overnight care; and
 - ii) be of the same quality and standard as activities and learning experiences offered during the day.
- b) Food and drink available to children in overnight care must meet all criteria of Standard 13.



APPENDIX I

Service self-assessment for safety and suitability of overnight excursions/camps [Reference: *CBC 5* Standard 4.5]

Service Name:_____

Address where overnight excursion/camp will be held:

Date(s) of excursion/camp: _____

	N/A	What action must be taken?	Date completed	Signature
MAINTAINING A SAFE ENVIRONMENT			•	
Site checked. (Look for things like cracked		Management plan for identified		
windows; inadequate surfaces under the outdoor		hazards – developed, implemented		
play equipment; unsecured vehicles/trailers in the		and available:		
outdoor play area; water hazards; untempered				
hot water)				
Following hazards identified:				
Indoor				
Ι.		Indoor		
2.		1.		
3.		2.		
4.		3.		
5.		4.		
Outdoor		5.		
I.		Outdoor		
2.		l.		
3.		2.		
4.		3.		
5.		4.		
5.		5.		
Fire protection equipment (including smoke				
detectors) in place and/or readily available.				
Date last tested:				
Bushfire emergency operation plan		Date(s) emergency practice(s) held		
developed, current, available/displayed?		with staff and children:		
Emergency invacuation plan (as applicable) –		Date(s) emergency practice(s) held		
developed, current, available/displayed?		with staff and children:		
developed, cui i eitt, available/displayed:		with stall and third en.		
A mobile phone or means of contact with		Any other strategies service will		
emergency services is readily available		put in place?		
A list of emergency numbers readily available				
with the phone (i.e. displayed/entered into				
phone)?				
Excursion/camp specific:				



SLEEPING ARRANGEMENTS (including		
bedding)		
Are children required to bring own sleeping	Spare sleeping bags/pillows/pillow	
bag/pillow/pillow case?	cases available.	
There is easy access for each person to a		
required exit (fire exit).		
If there are bunks:	 Management plan for bunks; 	
NOTE: In an under school age care setting,	Product safety alert 'Bunk Bed	
children are not permitted to use bunks.	Safety' has been referred to;	
Excursion/camp specific:		
FOOD ARRANGEMENTS		
Facilities available to enable food to be prepared	Management plan required.	
and stored in a safe and hygienic manner.		
Sufficient water, fit for drinking, is adequately	Management plan required.	
available.		
Sufficient quantity of drinking containers and		
utensils available		
Are there children with specific food	Management plan required.	
requirements.		
Excursion/camp specific:		
PERSONAL HYGIENE ARRANGEMENTS		
Appropriate hand washing and drying		
arrangements		
Adequate arrangements for showering/bathing.		
Appropriate toileting arrangements in place:		
If required, appropriate nappy change facilities. Excursion/camp specific:		
Excursion/camp specific:		

I, on behalf of ______ (insert service name) agree to:

- 1. implement any required actions to ensure the safety of the children;
- 2. maintain and attach all management plans, as applicable;
- 3. maintain this completed 'service self-assessment plan' and, as requested, make available to the Education and Care Unit; and
- 4. provide a copy of the following to the Education and Care Unit on request:
 - a. program
 - b. security arrangements
 - c. the attendance and staff rosters for the overnight excursion/camp.

Name:	
	(Please print)
Position:	
Signature:	
Date:	



GLOSSARY

'**ancillary staff**' means persons employed by a child care service provider or in respect of a child

'applicant' means a person who has applied for a licence under section 13;

'approved premises' means premises approved by the Secretary, or premises of a class approved by the Secretary, under subsection (2);

'approved registration body' means a person who holds a registration body approval licence;

'approved registration body licence' means a licence granted under section 16 that authorises one or more of the activities specified in section 10;

'Authorised officer' means a person appointed as an authorised officer under section 72;

'carer' see child carer;

'Centre Based Child Care Licence', means a centre-based child care licence granted under section 16 that authorises the activity specified in section 11;

'Centre Based Care Class 5' means Occasional Care Services and Services funded through the Australian Government Budget Based funding program.

Occasional Care comprises services providing education and care for 0-12 year olds on a sessional basis for short periods, that is, less than 8 hours a day, 5 days a week, 48 weeks a year. Note: They may enable parents to attend appointments, take care of personal matters, undertake casual or part-time employment, study or have temporary respite from full time parenting. These services may be provided by community based or private providers and may be funded by the Australian or State Governments or operate without funding.

Budget Based Funded (BBF) early childhood services are funded by the Australian Government. **Note:** They are funded by the Australian Government where the market would otherwise fail to deliver services. BBF services are predominately in rural, remote and Indigenous communities and are also operationally known as non-mainstream services. They may include long day care centres.

'child' means a person who has not attained the age of 13 years;

'child care' has the meaning given by section 4;

'child care centre' means premises, other than a person's primary residence or approved premises or the primary or other residence of the child, at which a child may be provided with child care;

'child care service' means -

- a) the operation by an approved registration body of any business that involves one or more of the activities authorised by the licence; and
- b) the operation by the holder of a centre-based child care licence of any business that involves one or more of the activities authorised by the licence; and
- c) the operation by the holder of a home-based child care licence of any business that involves one or more of the activities authorised by the licence;
- d) the provision of child care by a registered carer;

'child care service provider' means -

- a) an approved registration body; and
- b) a holder of a centre-based child care licence; and
- c) a holder of a home-based child care licence;
- d) a registered carer;

'child carer', in respect of a child who is being provided with child care, means a person who, for fee or other material benefit, cares for the child -

e) in that person's own primary residence; or



- f) in that person's approved premises; or
- g) in the child's primary or other residence; or
- h) in premises in which child care is provided under a centre-based child care licence;

'close relative', in relation to a person, means -

- a) another person who resides with that person; and
- b) another person who is a guardian of that person; and
- c) another person who, in the opinion of the Secretary, may have frequent or extended contact with a child for whom that person is operating or providing or may operate or provide a child care service;

'director', in relation to a body corporate -

- a) if the body corporate is a corporation within the meaning of the *Corporations Act*, has the meaning as in the *Corporations Act*; and
- b) if the body corporate is not a corporation within the meaning of the *Corporations Act*, means a person holding a position in the body corporate that is equivalent to or substantially the same as the position of director in a corporation, within the meaning of the *Corporations Act*;

'early childhood centre' means any premises or part thereof providing or intending to provide a centre-based education and care service within the meaning of the *Education and Care Services Law Act 2011 (Tas)* and centre-based services that are licensed or approved under State and Territory children's services law, but excludes education and care primarily provided to school aged children in outside school hours settings and services licensed as *Centre Based Care Class 4* under the *Child Care Act 2001 (Tasmania)*.

'employ' means employ for payment or other reward and includes engage the services of, whether as an employee or an independent contractor or otherwise;

'extended family' has the same meaning as in the Children, Young Persons and Their Families Act 1997;

'guardian' has the same meaning as in the Children, Young Persons and Their Families Act 1997;

'home-based child care' means the provision of child care -

- a) in the child's primary or other residence; or
- b) in the child carer's primary residence; or
- c) in the approved premises of the child carer;

'home-based child care licence' means a licence granted under section 16 that authorises one or more of the activities specified in section 12;

'licence' means -

- a) an approved registration body licence; and
- b) a centre-based child care licence; and
- c) a home-based child care licence;

'licence applicant' means the individual or body that is applying to hold a license to operate or provide a child care service;

'licensee or **licence holder'** means the individual or body to whom a licence to operate or provide a child care service has been issued;

'licensee representative' means the person nominated by the service operator to represent all members of the service operator on licensing matters where the service operator holds the licence. This person is expected to have a higher level of understanding about the operation of the child care service and its adherence to the Licensing Standards;

'licensing authority' means the Department of Education as the Department responsible for administering the *Child Care Act 2001*;

'may' indicates that the power may be exercised or not exercised; with discretion;

'must' indicates that the power is required to be exercised;

'parent' includes a stepmother, stepfather and guardian;



'person in charge' –

- a) in relation to the child care service operated or provided by an approved registration body, the person who is directly in charge of the day-to-day coordination of the child care service; and
- b) in relation to a child care service operated or provided by the holder of a centre-based child care licence or a home-based child care licence, the person who
 - i) is physically at the centre, residence or other facility or premises where children are provided with child care by that service; and
 - ii) is in charge of the day-to-day running and supervision of that service or centre, residence or other facility or premises,

whether the person referred to in paragraph (a) or (b) is the holder of the licence under which the child care service operates or is provided, or an individual employed by that holder;

'potential child carer' means a person who is desirous of obtaining employment as a child carer;

'premises' includes –

- a) a vehicle, vessel and other means of transport; and
- b) a part of premises;

'registered carer' means a person who has been registered as a child carer by an approved registration body;

'registration' means registration of a person as a child carer by an approved registration body in accordance with the relevant Standards;

'regulations' means the regulations made and in force under this Act;

'responsible person' means the individual to whom is assigned by an incorporated or unincorporated body the general responsibility for, and supervision of the operations of, the provision of child care under a licence held by that body;

'safety screening clearance' is a crucial component in assessing whether a person is a fit and proper person. The process enabled the Conduct and Investigations Unit, Department of Education, to request information from the Police, and other government departments, e.g. Child Protection etc. It remained in place until I October 2014 when it was replaced by the requirement to hold a Working with Children Check under the *Registration to Work with Vulnerable People Act 2013*.

The Registration to Work with Vulnerable People Regulations 2014 specify the dates from when individuals holding a safety screening clearance are required to hold a Working with Children Check. Therefore the safety screening clearance is only considered valid until these specified dates are reached, even though the original letter regarding the safety screening clearance from the Department of Education may state a later expiry date.

'school age child/ren' means children 5 years and over. Where 4 year olds are in a school aged setting they will be included as school aged, unless otherwise stipulated.

'school age care facility' is a facility providing care for children (primarily) 5 years or older in an outside of school hours setting which is either approved or licensed under the *Education and Care Services National Law Act (Tasmania) 2011* or the *Child Care Act 2001.*

'school age care setting' previously known as CBC2;

'service operator' is the name of the organisation/management body that provides the service from the child care centre. It may be a community based management committee or incorporated body, a company, registered business, a partnership, a government agency or an individual who owns the service. The service operator may choose to hold the licence or may authorise an individual employee to hold the licence;

'spouse', in relation to a person, includes a person who, although not legally married to that person



- a) is generally recognised as the de facto husband or wife of that person; or
- b) has a relationship with that person that is of a marital nature;

'Staff Member' of a child care service under a Centre Based Care Licence means an individual employed by the service operator and:

- a) is likely to have contact with children n care at the service; or
- b) operates in a capacity that would indicate to children that this person is a 'friend' and not a stranger of whom to beware, for example, ancillary staff.

'Standards' means the Child Care Standards issued under section 47, as amended or substituted from time to time;

'under school age child/ren' means child/ren less than 5 years;

'under school age care setting' was previously known as CBCI;

'unencumbered space' means useable, clear space which is always available for children's use. This excludes areas such as passageways, thoroughfares, (including door swings), toilet and hygiene facilities, any area permanently set aside for storage or administration or any other space that is not suitable for children.

'volunteer' means a person who undertakes duties authorised by the service, as a voluntary worker, and who receives no remuneration or compensation in money or other consideration, e.g. parents who participate in fundraising activities or working bees, or committee members.

'Working with Children Check' means a registration to work with children in the regulated activity of child care services under the *Registration to Work with Vulnerable People Act 2013*.

