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PURPOSE

The policy seeks to ensure that The University of Auckland Early Childhood Centres including Hineteiwiwa Te Kohanga Reo are committed to the health and safety of all children, staff and visitors to the centres at all times. The Early Childhood Centres aspire to have a “culture of Health and Safety” being the responsibility of all staff. Staff and parents/whanau are encouraged to bring any Health and Safety issue to the manager/leaders and are empowered to take action if there is immediate danger. The intent of the “culture of Health and Safety” is to ensure that children, staff and visitors are protected and the health and safety standards in all centres are maintained.

* Please refer to each centre’s specific H & S procedures for site specific details.

1.0 DEFINITIONS

“The Manager” is the person or persons responsible for the day to day management of the centre/s and the person or persons to whom the centre Leaders report to.

A “Centre Leader” is the staff person responsible for an individual Early Childhood Centre.

An “Educator/Kaiako” is a qualified, in training or designated (special knowledge) Early Childhood Education teacher.

“Parent/whanau” are the persons responsible for the custody and care of the child.

“Child/tamariki” refers to each child attending the centre.

2.0 POLICY

2.1 Supervision of children

High quality supervision and interactions reduce the likelihood of accidents and injury.

a. The Manager will ensure adequate staff who are qualified or in training, are present at all times to meet or better licensing requirements. A designated “person responsible” will be on site at all times.

b. Staff will be rostered to ensure all areas have adequate staff supervision to meet the needs of the children as required. Children will be in the sight of an adult at all times.

c. Staff or adults visiting or working in this service are to be well supervised and visible in the activities they perform with children. This includes having adequate internal windows and an open door policy for private spaces where intimate caretaking of children is required.

d. Breaks for staff will be scheduled to enable adequate supervision of children.

e. Frequent staff communication to inform each other about movements within the centre will ensure children are not left unsupervised under any circumstances.

2.2 Injury Prevention Strategies
a. Staff will take all reasonable steps to eliminate, minimise or isolate potential dangers from things such as liquid spills, toys in traffic ways, sharp objects etc.

b. All doors to adult only areas i.e. kitchen, laundry, entrance-exit ways and resource rooms will be closed or locked at all times to ensure children do not have access to these areas.

c. All chemicals will be stored in marked containers and be kept out of the reach of children at all times. This will include cleaning agents.

d. Hot drinks will be consumed in staff only areas and use a covered cup while outside these areas.

e. Children will remain seated while eating or drinking and will be supervised by a staff member.

f. Staff will wear gloves when blood or body fluids is present, where practical, and/or wash their hands thoroughly.

g. Power outlets will be covered when not in use or made inaccessible to children.

h. Children may not climb gates, sit on tables, or jump off furniture and chairs.

i. Resources provided for children will be non-toxic, e.g. paint, crayons

2.3 Occupational Safety and Hazard Management
(Please refer to specific procedures in each centre.)

Maintenance
a. The Centre Leader will ensure all equipment is maintained in a safe condition.

b. The Centre Leader will contact University Maintenance (Property Services) who will carry out repairs and sign off online when they are completed.

c. It will be the role of the Manager, in consultation with the Centre Leader to ensure that the repairs are carried out.

Site Safety and Hazard management,
a. The Centre Leader or an assigned educator will complete a safety check on the outdoors every morning and complete a written record in the maintenance book/dairy of any repairs to be carried out. (Refer OSH check list)

b. Staff training on occupational safety and health will be provided every 2 years.

c. Strategies will be in place to:
   i) Eliminate the hazard wherever possible
   ii) Minimise the risks of the hazard
   iii) Isolate the hazard to ensure no harm comes to a person as a result of the hazard.

e. Annually complete the Hazard Register Review for University compliance. Hazard Reviews are sent to Health & Wellness (HR), for completion in March each year.

2.4 Child Injury / Accident
a. At any one time there will be two staff/educators on duty with up to date first aid certificates.

b. The priority will be to administer first aid immediately by the witnessing staff member or person responsible, and to inform the Centre Leader.

c. If necessary, the Ambulance Service will be called. Parents will be contacted immediately, and depending on traffic or location, may arrange to meet ambulance at the hospital. If a parent is not present at the time of transfer, a staff member will travel and stay with child while in hospital until parents arrive.

d. If any child is taken to hospital, the Manager must be informed immediately.

e. For all other injuries, first aid treatment is administered and recorded in the accident book. If necessary, contact parents and request them to take the child to their doctor.

f. For any accident, ensure parents are informed as soon as possible. Staff will inform the parents when their child is collected and ensure they sign the accident register.

g. The staff member who performed first aid is to record what happened, action taken and day and time in the accident register. For serious injury which requires hospital treatment or ongoing medical attention, the Centre Leader is required to inform the Manager who will record details in the Campus Life Risk register.

h. The Centre Leader will ensure that details of all parent current contact numbers and at least one additional emergency contact are easily accessible and kept up to date on a monthly basis.

2.5 **Staff Injury / Accident**

a. All permanent staff will hold a current paediatric first aid certificate. Online or face to face instruction, to avoid back injury and hearing loss, will be provided every 2 years.

b. Staff will take all reasonable steps to minimise potential dangers from things such as burns, water spills, toys in traffic ways, etc.

c. In the case of accident or injury, administer first aid immediately.

d. If necessary call the ambulance service and notify the emergency contact for that staff member.

e. Ensure staff member is able to get home safely and follow up to see what support if necessary.

f. At the time of an accident or injury, other staff will supervise and reassure children.

g. The Centre Leader is to complete an Accident Incident Occupational Safety and Health form and forward to Health & Wellness (HR). Serious injury should be reported immediately to the Manager, who will provide assistance if necessary, and report in the Campus Life risk register if required.
2.6 Food preparation and consumption Refer to the Heart Foundation “Healthy Heart” guidelines

a. Breast feeding will be supported in every centre. Infant formula and breast milk will be kept chilled and heated to body temperature (37 degrees).

b. Fresh food will be provided where it is cost effective. Processed food will be kept to a minimum. Food grown in the centre garden will supplement the menu and support curriculum learning.

c. Children will have access to filtered, drinking water at all times.

At centres where a cook is employed:-

a. The cook will display a high standard of hygiene levels which are to be maintained at all times to avoid any risk of contamination to the children or staff who eat the meals provided.

b. Menus are planned in advance according to centre requirements and a daily menu documented and provided for parents to view daily. These menus are kept on record, for 12 months.

c. Lunch shall consist of a 2 course well balanced meal. The centre will also provide morning and afternoon tea. Centre staff and the cook need to plan menus considering a low salt, sugar, fat and colouring food options in advance according to centre requirements.

At centres where there is no cook:-

a. Food is to be stored correctly and all unheated food not eaten by children is returned home. Reheated food will be checked as at a safe temperature before being given to children.

b. Where morning & afternoon tea is provided, staff will plan morning and afternoon tea menus, considering a low salt, sugar, fat and colouring food options in advance according to centre requirements. A daily menu shall be provided which outlines the food served to children. These menus are kept on record for 3 months.

2.7 Illness and infectious disease

a. All people will make every effort to protect all others from contacting infectious diseases, use standard precautions; eg, hand washing, hand sanitisation, coughing into elbow, disposal of tissues immediately.

b. Children and adults who are sick are not to be present at the centre. This will include vomiting, diarrhoea, high temperatures, conjunctivitis, impetigo and any other contagious illness, as per Ministry of Health Contagious diseases publication.

c. The Ministry of Health Contagious Diseases Chart is used as the authoritative list of illnesses, and details will be displayed on the parent noticeboard, to be used by parents and staff as a guide.

d. If children or staff return to work in less than the recommended timeframe, they will be asked to go home, to minimise the potential of cross-infection.

e. Staff and children who become ill while at the centre will be allowed to leave immediately or if necessary, stay in isolation until a family member arrives to collect them. A designated area isolation area will be identified in each centre.
f. Unwell children will be isolated and put on a bed, regularly monitored or supervised by a staff member. If staff observe such things as lowered activity, temperature fluctuation, sleepiness, fussiness, complaints of sore throat or diarrhoea the child’s parent will be contacted and requested to collect the child as soon as possible.

g. Staff will give immediate first aid, eg. keeping child cool by sponging with luke warm water.

h. The staff member will record and sign the accident and illness book, with action taken and time child was collected from the centre.

i. For pandemic illness follow separate pandemic plan procedures and advice provided by the Ministry of Health.

2.8 Child Immunisation

a. Certain infectious diseases are required under the Health Act 1956 to be notified to the local Medical Officer of Health, so that public health prevention and control activities may occur.

b. The notifiable diseases on the National Immunisation Schedule are: diphtheria, tetanus, pertussis, haemophilus influenza type b, hepatitis B, poliomyelitis, measles, mumps, rubella (including congenital rubella) and tuberculosis. Notification is on clinical suspicion and should not await laboratory confirmation. Contact the local Public Health Nurse for further information.

c. An immunisation register is kept onsite and updated by the Supervisor.

- Each child’s immunisation information is recorded at the time of enrolment/starting and on advice of any further immunisations.
- If a child is not immunised then the family/whānau is advised that in the event of an outbreak of a notifiable disease they will be informed immediately.

2.9 Administering medicine.

(Please refer to specific procedures in each centre.)

a. It is the policy that all persons take all reasonable steps to ensure that correct medication is given to children. Qualified staff only will administer medicines to children and must sign medicine book when medicine is administered. Another staff member will double check the correct details of the child’s name and dose before medicine being given.

b. On arrival at the centre, all medication must be handed to a staff member. The amount, date, time to be given and type of medicine must be written by the parent, into the medication book.

c. Only medication authorised and signed by parents will be administered to children. All prescribed medication must have a chemist label attached to the bottle with the child’s name, date, and doctor’s name, amount of medicine to be given and the length of time the medicine is to be given. No medicine will be given if it has been prescribed to another member of the family or it is an outdated medicine, or is a non-pharmacy container.

d. On rare occasions, verbal consent from parents (by phone) may be accepted by the Centre Leader or person responsible, to administer medicine to a child that is
not on the medicine chart. This will be entered on the chart and the parent will be expected to sign when collecting the child.

e. In an emergency an ambulance or a Doctor will be called and they may administer medication.

2.10 **First Aid cabinet**

a. It will be the responsibility of the Centre Leader to ensure that the First Aid Cabinet is replenished on a regular basis. Kits are checked and restocked on a 6 monthly basis.

b. A list of the required contents of the cabinet will be kept inside the cabinet and the date of restocking recorded on the cabinet.

2.11 **Hand-washing**

a. Educational instruction will be given to children and staff regarding washing of hands and catching coughs.

b. Liquid soap, paper towels and tissues will be available for children and staff to use. Hand sanitiser will be available for staff and visitors use, at the entrance, in the kitchen and in the bathroom areas.

c. Children will wash their hands after toileting, before eating, after messy play and after handling pets or animals. Young children who are unable to wash their hands will be washed by the staff or individual flannels will be used.

d. Staff must use gloves and wash their hands after any interaction with children that involves contact with bodily fluids.

e. Staff will wash their hands before they handle food or drink, and after bathroom duties. All hand-washing will take place in the bathroom area.

2.12 **Nappy changing.**

(Please refer to specific procedures in each centre.)

a. Changing of children is only to happen in the bathroom area.

b. Staff will wash hands before and after changing a child’s nappy or wet or soiled clothing. Staff will always wear gloves when changing a bowel motion.

c. The nappy changing area is to be set up with easy access to all requirements, and correct ergonomic layout. A staff member will stay with the child when using the changing table at all times. Do not turn away or become distracted, to avoid falls.

d. Soiled clothes are rinsed and put in a plastic bag and returned to parents.

e. All nappy change activity is to be recorded on a chart in the changing area.

2.13 **Supervision of children sleeping**

(Please refer to specific procedures in each centre.)

a. Staff must monitor sleeping children at all times.
b. Children under 2 years of age are given the opportunity for undisturbed sleep throughout the day. When they are enrolled at the centre the staff will discuss with the parents their child’s sleep patterns at home to enable the staff to establish a routine for their child while at the centre.

c. Children over 2 years of age are given the opportunity to sleep between 12:00pm and 2:00pm.

d. If a staff member is not in the room continuously, the staff member will monitor sleeping children every 10 minutes by entering the room and checking each child, and sign a register to document this.

e. All children are provided with individual beds and bedding. Bedding is laundered weekly (or when wet or soiled). All beds are sanitized if wet or soiled. All children rising from rest/sleep with wet clothes and/or nappies will be changed immediately.

f. A window is open to create air circulation. If required, fans and heaters are used to keep the room temperature comfortable (21-23 degrees).

g. Children’s linen will be stored individually in separate named bags.

h. It is the responsibility of the staff member supervising the sleeping children to record the length of sleep of each child.

i. Parents may request that a child cease having sleep. Staff in consultation with parents can gradually reduce the sleeping time of a child if appropriate.

2.14 Sun safety.
(Please refer to specific procedures in each centre.)

a. The staff will follow the recommendations of the Cancer Society to protect children from harmful UV rays of the sun and wear hats and sunscreen whenever outside.

b. Parents/whānau are to provide a hat with neck protection. The centre provides sunblock for the children, unless parents request their own brand is used. All children and staff will be required to wear a hat when they are outside.

c. On enrolment a conversation with parents about suitable sunscreen and protective clothing will take place. Signed permission must be given by parents regarding the use of sunscreen lotion, and if there is knowledge of any skin reactions, parents are to provide a suitable lotion or protector.

d. Shade cover over the sandpit will be provided to ensure there is adequate sun protection. On sunny days, activities will be placed in areas where there is shade. Special care is to be taken near the water trough, as sun is reflected off water.

e. Sunburn will be taken just as seriously as other burns. (Refer to burns treatment in individual centre procedure.) If sunburn does occur, the skin will be cooled with water or a wet cloth for 20 minutes.

2.15 Excursion procedures.
(Please refer to specific procedures in each centre.)
a. Parent’s permission will be required before their child can be taken outside of the centre eg; on short walks around the centre complex. Permission will be provided by completing a statement on the child’s enrolment form.

b. If the parent does not give permission the child will remain in the centre with a staff member who is stated in the license as being a ‘person responsible’.

c. When children are taken on walks in the local area, the child ratio is one adult to two under 2 year old children and one adult to four over two year old children. The required ratio at the centre will be maintained.

d. When a child is to be taken out of the centre by motor vehicle, written advice will be given to the parent at least one week before the outing is to take place and the parent will give written permission.

e. For full centre trips a chartered bus / public transport should be used for transporting children.

f. If it is every required for children to travel in a car, the driver will have a full license and car will have a current warrant and registration. There will be two adults if there are more than 3 children in the car and each child will use an approved child restraint. (Refer Traffic regulations)

g. When children are taken on centre outings the group ratio will be:
   • under 2 year old children and near water 1 : 1 - 2
   • any other visit 1 : 2 - 4
If this is not achieved, the trip will be cancelled.

h. Children will wear name centre t shirts or tags with the centre name and phone number written on it. A roll call will be carried out regularly.

i. An emergency pack will be taken by the staff. It will contain first aid equipment, medication, a phone card or cell phone, list or parent contact details, wet wipes, nappies, drinking water, spare clothes etc.

j. If all children from the centre go on an outing, a notice on the door will inform visitors where the children are, and the approximate time of return.

k. The Centre Leader and Manager will hold copies of the driver’s license for each designated driver. All drivers and vehicles will comply with Land Transport regulations.

2.16 Emergency procedures
(Please refer to specific procedures in each centre.)

a. Trial fire evacuation and earthquake drills will be held once every 6 months (each semester) and overseen by the University of Auckland Emergency Services Manager.

b. A designated Emergency/Fire Warden, usually the Centre Leader, will keep a record of the date and time of each trial evacuation, plus feedback reports with recommendations to action.
c. Emergency kits with all recommended requirements are checked on an annual basis and items with a used by date replaced each year.

d. Procedures will be displayed and are to be followed by all staff.

e. Keep calm and keep control of all children - do not allow them to leave the assembly area.

f. Have easy access to a current list of emergency phone numbers for children and educators, kept near the warden’s vest.

g. Have warm blankets available, especially for sleeping or very young children.

**Fire Procedure**

i) Follow University procedures for evacuation (see exit signs) when test alarm is rung. All staff will be familiar with the evacuation procedures

ii) Staff will ensure the building is evacuated. Leave premises by nearest Fire Exit. Each staff member will take responsibility for the children nearest them and the Centre Leader or person responsible will check the building is clear and collect the roll.

iii) One staff member will be at fire exit door leading the exit of the building. A guide rope will be used if children will assemble near traffic movement.

iv) Report to assembly area, which is most likely to be in the sandpit at the centre.

v) The Centre Leader or person responsible will check off the roll using a physical head count, and the centre roll.

vi) If possible, an appointed staff member is to remain at the entrance to direct fire brigade.

vii) Only if conditions permit should any attempts be made to extinguish the fire.

**Earthquake Procedure:**

All staff and children are to be familiar with the Civil Defence “Turtle Safe” video content. Refer to Annex Nine of Ministry of Education Emergency Planning Guide.

i) Staff will call 'earthquake' to signal the beginning of an earthquake.

ii) Adopt turtle position (knees together, hands clasped firmly behind head, bury face in arms, protect head, and close eyes tightly). Refer to video “Tommy the Turtle”.

iii) If outside, staff and children will adopt the turtle position.

iv) Remain in building until all clear is given by the Centre Leader, or until Emergency Services arrive.

v) Check for hazards and decide whether it is safer in the building or to evacuate, remembering that in a civil emergency it is likely unknown hazards can be more numerous outside the centre than inside. Only move children out of the confines of the centre as a very last safety resort.
vi) *If evacuation is essential:* 
Remain calm, take centre register, emergency kit, evacuate children in small groups, each with a designated staff member, using a guide rope for older children. Early Childhood centres are a high priority for assistance from Emergency Services. Leave a notice on the doors as to the intended departure route and muster point, for parents to follow. Check no-one is in the building. Assemble in a safe area (playground). Undertake a head count of all staff and children. Follow University of Auckland campus emergency procedures and tune into radio station for further direction.

vii) Take emergency kit as recommended by Civil Defence.

### 2.17 Cleaning
*(Please refer to specific procedures in each centre.)*

a. A cleaner is employed to give the centre a complete clean every evening. The centre has a complete quarterly spring clean. In addition to telephone contact, a communications book will be kept to assist with good communications between cleaning staff and centre staff.

b. All cleaning fluids will be kept out of the reach of children at all times, choosing low toxicity products where possible.

c. A detailed cleaning schedule will be kept for staff to follow.

d. Staff will keep the centre as clean as is practical during the day, with particular attention to the bathroom area.

### 2.18 Animal care

A designated staff member will ensure that animals will have a healthy living environment which will include weekends and holidays.

a. The cages will be cleaned frequently and regularly.

b. Animal food will be stored away from other food and be clearly marked.

c. Children must wash their hands after handling animals.

d. All sick animals will be kept away from children and adequate care and veterinary attention given to them.

**Noxious Plants**

a. Kowhai – seed pods are to be collected by the outside duty staff and disposed of.

b. Swan plant – when children touch or pick material from these plants they must wash their hands thoroughly straight afterwards.

### 2.19 No smoking policy

a. The University of Auckland is designated smoke free.

b. Smoking is not permitted in or outside the entrance to the building, playground, centre complex or grounds of the campus.
c. If people come into the centre smoking, they will be asked to extinguish their cigarette immediately.

d. ‘No Smoking’ signs are displayed outside and inside the centre, to remind persons entering the centre.

3.0 RELATED PROCEDURES / DOCUMENTS

Education (Early Childhood Services) Regulations 2008
Health and Safety in Employment Act 1992
Heart Foundation “Healthy Heart” guidelines
The Health (Immunisation) Regulations 1995?2012
Ministry of Education & Civil Defence ECES Emergency Planning Guidance (BPG 6/11)
Ministry of Education Circular 2001/151 or MOE website – H29
Smoke Free Environments Act 1990
University of Auckland Health and Safety Policies

4.0 DOCUMENT MANAGEMENT

Prepared by: Manager Early Childhood Centres
Owned by: General Manager of Accommodation
Approved by: Director of Campus Life
Date issued: 15 April 2010
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