

Wellbeing



Wellbeing

This section relates to Quality Area 2 of the National Quality Standard: Children's health and safety.

Wellbeing describes a child's happiness, confidence, physical condition and general outlook on life. It goes hand in hand with healthy living which not only includes a balanced diet and regular exercise but also social, spiritual, emotional, cultural and economic aspects.

Preschool teachers contribute to the wellbeing of young children by giving them a secure and supportive environment that meets their health and safety needs. This includes a culturally-inclusive environment where:

- the dignity and rights of children and families are respected
- the culture, language and religion of individual children are catered for
- children are nurtured as they learn
- children's independence, self-esteem and self-confidence are developed
- the supervision level is appropriate to the children's age and stage of development
- staff are aware of and responsive to the additional needs of children with allergies, medical conditions, special dietary requirements and/or special learning needs.

For many young children a sense of wellbeing is connected to their increasing physical confidence and competence. Therefore it is important for preschool staff to support the physical development of the children in their care. Promoting and facilitating active and healthy lifestyles in preschool increases the likelihood that children will continue these habits throughout their lives and contribute to their ongoing wellbeing.

Wellbeing is a key component of *the Early Years Learning Framework* for Australia.

"To support children's learning it is essential that educators attend to children's wellbeing by providing warm, trusting relationships, predictable and safe environments, affirmation and respect for all aspects of their physical, emotional, social, cognitive, linguistic, creative and spiritual being." (Outcome 3, Early Years Learning Framework p30)

Health

This section relates to Quality Area 2 of the National Quality Standard: Children's health and safety.

Standard 2.1

Each child's health is promoted.

Physical health impacts on children's learning and development. All professionals working with young children, including preschool staff, have a responsibility to:

- support the development of safe and healthy habits
- encourage physical activity
- promote eating nutritional and interesting food
- instil healthy eating habits
- promote daily living habits, attitudes and skills that encourage children to take responsibility for the wellbeing of themselves and others.

Preschool staff are responsible for helping children who have health support needs while attending preschool. This may include giving them prescribed medications, first aid (including emergency care), temporary care when they are sick, performing health care procedures and developing individual health care plans if required.

Student Health in NSW Public Schools: A Summary and Consolidation of Policy 2005 sets out the health requirements for schools and is relevant to young children attending Department of Education and Communities preschools. To help implement the policy, detailed information on a wide range of child health issues and their management can be found on the Department's website at www.schools.nsw.edu.au/student-support/studenthealth/index.php.

Infection control

When children attend preschool their exposure to infectious conditions may increase simply because they have age-characteristic behaviours that help spread infection. They may also be exposed to other children who are contagious without recognisable symptoms. Therefore, children need guidance and support to develop good hygiene habits such as handwashing.

The use of detergent or soap and water when doing basic cleaning such as wiping table surfaces and/or toys, and wearing gloves when required can reduce the risk of spreading infection amongst children, staff and visitors.

What do the Education and Care Services National Regulations say?

The Regulations highlight the need to minimise health risks for young children by using appropriate health and hygiene practices.

Regulation 77 (2) *The nominated supervisor of an education and care service must implement, and ensure that all staff members of, and volunteers at, the service implement -*

(a) adequate health and hygiene practices; and

(b) safe practices for handling and storing food -

to minimise risks to children being educated and cared for by the service.

The National Health and Medical Research Council and the Department's Standard Precautions for Infection Control recommend ways to reduce health risks:

- use colour-coded cleaning cloths for different areas and cleaning uses (such as blue in the kitchen and red in the bathroom) and ensure all staff are aware of the code
- ensure tissues, face cloths or cloth towels are not used for more than one child
- use tissues and a disposable glove when wiping a child's nose
- dispose of gloves, paper towels and tissues immediately after use into a container with a disposable lining



- ensure children do not share sheets and pillowcases, cloth towels or other personal items
- ensure handbasins are not used for food and drink preparation or rinsing soiled clothing
- be careful with all bodily fluids, secretions and excreta
- use disposable gloves at all times when dealing with bodily fluids, secretions or excreta
- display hygiene procedures in bathrooms, staffroom and toilet areas.

TIP: Check local NSW Health child and family health centres for early childhood posters to display in the bathroom or classroom.

Make your own signs using relevant software programs, for example Boardmaker.

Element 2.1.4

Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.

TIP: Place posters or visual aids of correct handwashing procedures above handbasins. Check with your local NSW Health office or make your own using photographs of children from the preschool class or downloaded templates from software programs such as Boardmaker.

Handwashing

Handwashing, including drying hands, is one of the most effective ways of preventing the spread of infection.

Handwashing should occur:

- on arrival at the centre
- after going to the toilet
- before and after helping children with toileting (which may include nappy changing)
- before and after giving first aid
- before and after giving medication
- after wiping a child's nose
- before and after eating or handling food
- after patting or touching animals
- before and after preparing or cooking food
- before and after using playdough
- after coming into contact with any bodily fluids, for example when toileting accidents occur or a child is sick.
- before and after applying sunscreen

Element 2.1.3

Effective hygiene practices are promoted and implemented.

When teaching children to wash their hands the following points are a good guide:

- use soap and running water
- wash hands thoroughly while counting slowly from one to 15
- wash all parts of the hands including sides and between the fingers
- rinse hands well to remove soap
- dry hands with a new paper towel or an individual cloth towel.

TIP: Washing and rinsing hands should take about as long as singing Happy Birthday.

Avoid the risk of cross infection by ensuring cloth hand towels hang without overlapping.

Alcohol-based hand rubs can also be an effective way of cleaning hands if they aren't very dirty. This method still requires cleaning between fingers, around thumbs and under nails.

Guidance for schools on managing infection control is in the Department's *Infection Control Policy* PD/2005/0257 VO1 and the *Infection Control Policy Guidelines* at:

http://detwww.det.nsw.edu.au/media/downloads/detoh_s/adminandmanage/ohands/safeworklearn/injury_manage/infection/infect_guide.pdf.

Standard precautions for infection control are found in Appendix 2.1

Useful references

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013

Health and Safety in Children's Centres: Model Policies and Practices, 2nd edition revised, 2003.

Supporting health care needs

While parents have primary responsibility for managing their children's health, staff need to work with parents to support their children's health care needs while they are at preschool. This may involve giving medication, performing health care procedures or developing an individual health care plan.

An individual health care plan is needed for any child who is diagnosed with severe asthma, type 1 diabetes, epilepsy or anaphylaxis, is at risk of an emergency reaction or requires health care procedures.

Regional staff are available to support the development of individual health care plans especially when a child has an emergency care need such as anaphylaxis or another complex health care need.

Information about developing individual health care plans is available at: www.schools.nsw.edu.au/studentsupport/studenthealth/individualstud/devimpindhplan/index.php.

If a child enrolled at the preschool has a specific health care need, allergy or other medical condition parents must be provided with a copy of the Department's student health policy.

When a preschool child with an individual health care plan transitions to Kindergarten, staff need to give parents a copy of the current plan and encourage them to discuss it with the school at enrolment. This will help teachers plan for the child's health care needs in the new setting.

TIP: Department of Education and Communities Legal Issues Bulletins are published on a regular basis and provide legal advice on issues such as accidents, duty of care and administration of prescribed medication.

Giving medication

All school staff must follow the Department's Student Health in NSW Public Schools policy for administering medication to children. The policy states that the school (including the preschool) must assist with administering prescribed medication during school hours, if parents or other carers cannot reasonably do so.

Preschool staff who volunteer and are trained can give prescribed medication to children in non-emergency situations.

In general, schools and preschools, do not give medication which has not been specifically requested by a medical practitioner for an individual child for a specific condition.

In some cases the medical practitioner may prescribe an over-the-counter medication. If so, staff should follow the same procedures as for 'prescribed medications'. Parents must complete and sign a Request for Administering Prescribed Medication form, available at www.schools.nsw.edu.au/studentsupport/studenthealth/individualstudy/formletters/index.php.

The following procedures apply to giving medication:

- On arrival, parents give the child's medication to a staff member for safe storage
- All non-emergency medication is to be stored in a locked cupboard or locked container in the refrigerator, out of reach of children
- Medication must be in its original packaging with a pharmacy label which states the child's name, dosage instructions and current use-by date. Medication without this labelling must not be given
- When a staff member administers medication to a child, the staff member records this and another member of staff verifies that the medication was administered as prescribed. The record must include the name of the medication, the date, time and dosage given and the names and signatures of staff members who gave and checked the medication. This is to be made available to parents for verification
- Permission forms to give medication for a prolonged period must be reviewed and updated when there is a change to the medication dosage or frequency.

Administration of prescribed medication can form part of an individual health care plan

- Parents are encouraged to advise if a child is on medication, even when it is not given at the preschool
- All medication forms are to be kept in the school until the child reaches the age of 25 years

There may be times when emergency medication needs to be given to children in the preschool. This must be documented in the individual health care plan (particularly for conditions such as anaphylaxis)

If an emergency occurs, that has not been documented in the emergency response section of the individual health care plan, preschool staff will provide a general emergency response which may involve calling an ambulance.

TIP: Have a photo of the child in an obvious appropriate space (for example, staffroom and/or kitchen) and include medical details and emergency procedures

What do the Education and Care Services National Regulations say?

The Regulations set out procedures for giving medication. It states that medication is not to be given without the consent of parents. For further information see regulations 92 - 96.

Anaphylaxis

All preschool staff should be aware of children with allergies and consider ways to reduce their exposure to known allergens.

Anaphylaxis is a severe life-threatening allergic reaction and needs to be regarded as a medical emergency.

In most cases, anaphylactic reactions can be prevented with precautions to avoid the known allergen, however, when anaphylaxis occurs an emergency response is required.

Parents need to advise the school if their child is diagnosed with an allergy and is at risk of anaphylaxis.



The implementation of *Anaphylaxis Procedures for Schools 2012* is mandatory for NSW government schools and preschools. These include information on the management of severe reactions at preschool as well as the development of individual health care and emergency response plans.

Children and their parents will not always be aware that they have a severe allergy. To reduce the risk of exposure to a high-risk allergen, preschools may decide in consultation with their community, to ask families not to bring nut or nut products to the preschool site or to preschool activities. Preschools should also review their program to make sure that they do not support the use of these products.

Regulation 136 of the *Education and Care Services National Regulations* state that at least one person who has undertaken approved anaphylaxis training and one who has undertaken approved emergency asthma training must be in attendance and immediately available at all times.

This person may be located in the school as long as they are available in an emergency.

Each school needs to consider how they will meet this requirement.

Element 2.1.1

Each child's health needs are supported.

More information is on the Department's student health website at www.schools.nsw.edu.au/studentsupport/studenthealth/conditions/anaphylaxis/guidelines/index.php

TIP: Translated information and forms can be found at www.det.nsw.edu.au/languagesupport/documents/index_a.htm.

Useful Reference:

Australasian Society of Clinical Immunology and Allergy (ASCIA) www.allergy.org.au Action Plans for Anaphylaxis can be found at <http://www.allergy.org.au/content/view/10/3/>

Sick children

What do the *Education and Care Services National Regulations* say?

Regulations 85 - 87 outline the procedures for children who become ill, have an accident or need medication at preschool.

If a child becomes ill while at preschool, parents should be contacted and asked to collect them or arrange for their nominated emergency contact to pick them up.

The child should be made comfortable and kept under adult supervision until they recover or are collected by their parent.

Element 2.1.1

Each child's health needs are supported.

More information on procedures for supporting sick children is on the student health section of the Department's website at www.schools.nsw.edu.au/studentsupport/studenthealth/schpracprog/unwellstudents/index.php

Infectious diseases

The *Education and Care Services National Regulations* (regulation 88) requires that an infectious diseases policy is in place that outlines the practices to be followed.

Children suffering from certain infectious diseases should be excluded from attending preschool. Staff should always refer to the current NSW Health guidelines on exclusion and follow standard infection control procedures.

If a child is suspected of having an infectious disease, for example chicken pox, they should be isolated from other children, made comfortable and supervised by a staff member until collected.

If a child contracts a vaccine-preventable disease, preschool staff should tell the principal who will contact parents and the nearest public health unit if necessary.

All parents must be told of any outbreak of an infectious disease at the preschool and asked to keep children with infectious diseases at home for the appropriate timeframe. This information can be found in the NSW Health fact sheet, *Infectious Diseases of Children* at <http://www.health.nsw.gov.au/factsheets/infectious/childhoodillness.html>. The child must also get a medical clearance from a doctor before they return to preschool.

Element 2.1.4

Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.

Parents should be encouraged to tell the class teacher if a family member has an infectious disease, as this can help reduce the risk of the infection spreading to others.

Preschool staff should ensure that parents from culturally and linguistically diverse backgrounds are given information in their first language if necessary.

TIP: Use the Telephone Interpreter Service if required when contacting parents - Phone 131 450 (quote client code CO18294).

More information can be found online in:

Infection Control Guidelines on the Department's OH&S website at https://detwww.det.nsw.edu.au/adminandmanage/ohands/safeworklearn/injury_manage/infection/index.htm

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013 at <http://www.nhmrc.gov.au/publications/synopses/ch43syn.htm>

Otitis media

Ear infections are very common in young children and can cause a lot of pain and distress. Most infections are easily cleared but in some cases children can develop chronic otitis media which is long-term inflammation of the middle ear.

Preschool staff need to be aware that otitis media can result in hearing loss. This can fluctuate over time and impact on learning and development especially in the area of speech and language.

Otitis media is a significant ear health issue. The Department of Education and Communities is committed to working with NSW Health to reduce the incidence and impact of otitis media and conductive hearing loss.

Suggested strategies to help reduce the impact of recurrent ear infections include:

- using infection control procedures, particularly handwashing, to prevent the spread of respiratory infections
- ensuring noses are regularly wiped
- referring children to their local community health centre for screening and follow-up.

Element 2.1.1

TIPS: Make it practice for children to blow their noses after running around outside.

Teach children the Breathe, Blow, Cough program for preventing ear infections (see Appendix 2.2).

For more information contact your regional hearing team or student support coordinator.

Useful Resource:

Healthy Little Ears –produced by Mid Western Area Health Service.



Recording illness, accidents and incidents

The *Education and Care Services National Regulations* (regulations 85 - 87) highlight the need for records to be kept on illness or injury whilst children are at the preschool.

Teachers in preschools, as for all teachers in the school, need to ensure that all illnesses, accidents and incidents are documented. This may be kept in a register which states the child's name, date, time and details of the illness, accident or incident and any resulting injury or harm. The record must also note the action taken and by whom, be signed by the teacher, witnessed by another adult and verified by the parents.

An accident or incident report should be prepared for anything that occurs on the premises that is not minor. A commonsense approach should be taken to decide whether the accident needs to be reported.

Advice can be found in *Reporting School Accidents* which is the support document for the Reporting School Accidents Policy - PD/2002/0064/ VO3. The policy is online at www.det.nsw.edu.au/policies/student_admin/general/accidrpt/Accident_Policy_Update_2006.pdf.

All completed accident and incident reports should be given to the principal. The principal is responsible for any appropriate notifications.

These reports must be kept until the child reaches the age of 25 years, as with all children attending the school. Food and nutrition

This section also relates to Quality Area 7.

Element 7.3.1

Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements.

Food and Nutrition

The *Education and Care Services National Regulations* (regulation 78) require that all preschool children are exposed to healthy eating practices.

Children need a nutritious, balanced daily diet for their continued physical and intellectual development. The preschool program should promote good nutrition and help children and parents to develop good food habits.

As part of the educational program staff and children should discuss the relationship between nutrition, physical fitness and good health. (See links below from recognised health authorities).

Preschool staff need to provide a positive and healthy eating environment. They should act as role models, maintain good personal nutrition, eat with children and encourage independence and social skills at meal times.

Preschools can promote healthy eating habits by:

- incorporating nutrition information in the educational program
- providing nutritional information to parents
- ensuring that food is not used as a punishment or reward
- ensuring the availability of water at all times. Water or milk may be offered for morning/afternoon tea.

Teachers can provide parents with information about the nutritional needs of young children through posters, displays, library information, newsletters and correspondence. This can help encourage parents to send food to preschool that is nutritionally balanced.

Information on healthy eating can be found at www.healthykids.nsw.gov.au

TIP: Request that parents keep lunches cool by placing them in an insulated lunchbox or cooler bag with a frozen drink bottle or ice brick. This will avoid the risk of food spoiling.

Preschools should be aware of children with allergies and have strategies in place to avoid exposure to known allergens.

Staff also need to consider the special dietary requirements of children from diverse cultural and religious backgrounds.

Special dietary needs (including allergens) should be displayed in food preparation areas.

Standard 2.2

Healthy eating and physical activity are embedded in the program for children.

Useful references

Get Up and Grow: Healthy Eating and Physical Activity for Early Childhood. Australian Government Department of Health and Ageing 2009 <http://www.health.gov.au/internet/main/publishing.nsf/content/phd-early-childhood-nutrition-resources>

Munch & Move Resource Manual. NSW Department of Health 2008 <http://www.healthkids.nsw.gov.au/campaigns-programs/about-munch-move-resources/resource-manuals.aspx>

Health & Safety in Children's Centres Model Policies and Practices, 2nd edition revised, UNSW, 2003.

Dietary Guidelines for Children and Adolescents in Australia, National Health and Medical Research Council brochure.

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013

Caring for Children: Food, Nutrition and Fun Activities, C. Bunney & L. Williams, 4th edition, 2005.



Food preparation and handling

Food preparation and handling can be a part of the daily routines for staff in preschool and the educational program often includes cooking activities for children. Any area where food is prepared or stored should be kept clean and good hygiene and safety practices reinforced throughout all cooking activities.

To reduce the risk of exposure to food allergens staff in the preschools should follow the advice in *Anaphylaxis Procedures for Schools 2012*.

The following procedures are a good guide for staff when preparing and handling food:

- wash hands before and afterwards
- wear disposable gloves when preparing food
- do not handle food when ill
- cover and seal any cuts or sores
- wash fruit and vegetables thoroughly
- replace cutting boards and washing-up cloths on a regular basis
- use tongs or spoons when serving food
- keep food covered until served
- ensure children are not in the kitchen during meal preparation.

A list of children and their reactive foods should be updated regularly and displayed so that it can be seen by all adults involved in the program. This is especially important when children with anaphylaxis are attending the preschool.

Useful reference

NSW Food Authority
www.foodauthority.nsw.gov.au

Physical activity

Children need to move freely and be active every day!

There is increasing evidence of a relationship between the lack of physical activity and lifestyle diseases such as obesity, diabetes and heart disease.

Physical activity should occur throughout the day both indoors and outdoors and be an integral part of the daily preschool program.

Development of good habits in preschool can form the foundation for later years and impact on immediate and longer term health outcomes.

Preschools are ideal places to develop good physical activity habits for children. Preschools can also support parents by providing information on the importance of physical activity.

Element 2.2.2

Physical activity is promoted through planned and spontaneous experiences and is appropriate for each child.

Preschoolers should be physically active every day for at least three hours, spread across the entire day.
Get Up and Grow 2009.

Useful references

Get Up and Grow: Healthy Eating and Physical Activity for Early Childhood. Australian Government Department of Health and Ageing 2009 <http://www.health.gov.au>

Munch & Move Resource Manual. NSW Department of Health 2008 <http://www.healthkids.nsw.gov.au/campaigns-programs/about-munch-move-resources/resource-manuals.aspx>

Rest and sleeping

Rest or sleep time during the day is important because there can be a wide range of 'normal' sleep patterns for young children.

Children aged 3–5 years may still need a daytime sleep or rest. Therefore preschools offering a full-day program should give children the opportunity to sleep or rest according to their particular needs. Quiet activities can be offered to children who are awake whilst others are sleeping.

By kindergarten age many children no longer need a daytime rest, so teachers may decide to limit or stop with rest time towards the end of the preschool year.

What do the Education and Care Services National Regulations say?

Regulation 81 states that services.. "must take reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for by the service are met, having regard to the ages, development stages and individual needs of the children."

Each child should have their own linen which is appropriate to the climate and season.

To prevent cross infection:

- linen or other types of bedding should be washed before use by another child
- used linen should be stored in a way that prevents it touching clean linen.

Element 2.1.2

Each child's comfort is provided for and there are appropriate opportunities to meet each child's need for sleep, rest and relaxation.

Toileting

Although it is the parent's role to toilet-train their child at home, young children's toilet skills are still developing, so

it is appropriate for preschool staff to support parents in encouraging and reinforcing good toileting habits.

All staff have a duty of care for the safety and wellbeing of children. This might involve helping when there are difficulties with the toileting procedure, undressing for the toilet or in responding to soiling or wetting.

When helping children with toileting, staff can take the opportunity to extend children's skills by actively encouraging them to be responsible for their own toileting and handwashing. Staff should model and teach children to adopt hygienic practices such as flushing and effective handwashing.

Hygienic procedures for toileting are critical to reduce the risks and spread of diseases transmitted by bodily fluids.

Element 2.1.2

Nappy changing and other toileting procedures

Some children attending preschool may still be wearing nappies due to a medical condition or disability. If a child who wears nappies enrolls in the preschool, a nappy changing area should be organised which has a sink nearby. This must be separate from craft and food preparation areas.

Children with medical conditions that require specific support for toileting, for example catheterisation, will need an individual health care plan. For information about plans see www.schools.nsw.edu.au/studentsupport/studenthealth/individualstud/devimpindhplan/index.php.

Regional personnel such as the disability programs consultant or itinerant support teacher early intervention can be contacted.

Procedures for nappy changing can be found in Appendix 2.3 and recommended procedures for cleaning children who wet or soil themselves can be found at Appendix 2.4.

Element 2.1.3

Effective hygiene practices are promoted and implemented.



Cleaning

The *Education and Care Services National Regulations* (regulation 103) require that children's services premises, including equipment and furnishings are safe, clean and in good repair.

Each departmental school has a cleaning contractor who aims to keep the whole school safe, clean and hygienic. The contractor makes sure that the school is cleaned to the cleaning performance standards by 8 am each day (or at a time agreed to by the principal).

Preschool staff need to ensure that furnishings and play equipment are checked regularly and kept in a safe, clean and hygienic condition. There will need to be regular cleaning (as appropriate) of:

- tables and chairs
- indoor equipment
- soft toys
- puzzles
- books
- sand equipment
- outdoor construction toys

It is recommended that a cleaning schedule be kept in the preschool folder.

The principal may decide to close the preschool on the last day of each term. This allows for staff to disinfect equipment, furniture and beds, and secure buildings, resources and equipment ready for the new term.

Element 2.1.3

Effective hygiene practices are promoted and implemented.

Cleaning products

Staff should also consider the type of products used for cleaning desks, toys and equipment in the preschool. Many chemical cleaning products (including disinfectants) may be a potential risk to health, possibly triggering

conditions such as asthma, allergies and poisoning. Mild or neutral detergent (a pH level between 6 and 8) and water is suitable for all general environmental cleaning including blood, urine and vomit. The use of microfibre cloths is recommended as they remove dirt and moisture effectively.

Useful references

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013

Health and Safety in Children's Centres: Model Policies and Practices, 2nd edition, 2003.

Sandpits

Sandpits are fun and are often an integral part of the preschool program. To avoid the spread of infection particular attention needs to be paid to their cleanliness.

There are a number of ways to do this:

- securely cover when not in use to prevent contamination, such as animal excreta, broken glass and other objects
- check daily and remove contaminated sand or rubbish
- clean periodically. This can be done by:
 - watering with either mild detergent, diluted household disinfectant or a 1:10 solution of bleach
 - raking through with salt
 - digging the sand over monthly to reduce moisture and stop the sand from turning sour
- keep sand topped up to the maximum level. Sand should be within 100 mm of the top edge of the sandpit edging
- renew the sand annually or as necessary.

Kidsafe NSW Inc has information and advice on sandpit safety and design. The website address is www.kidsafensw.org

TIP: Have children turn the sand over as they are playing!

Safety

This section relates to Quality Area 2 of the National Quality Standard: Children's health and safety.

Occupational health and safety

The Department of Education and Communities is committed to ensuring a safe and healthy working and learning environment for staff, children and visitors to schools and preschools.

Accidents are often directly related to a child's growth and stage of development.

Parents of preschool-aged children need to be assured that their children are cared for in a safe environment where staff take the necessary precautions to reduce the risk of accidents.

The Department's Occupational Health and Safety Directorate offers a range of information and support tools for managing specific hazards and risks in schools, that is also relevant to preschools. It is available at

<http://detwww.det.nsw.edu.au/adminandmanage/ohands/safeworklearn/riskmanage/index.htm>.

Element 2.3.2

Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

Supervision

Supervision in preschools should be a part of the whole school supervision plan in line with the Department's Memorandum to Principals: *Care and Supervision of Children* 97/165 S.156. The plan should acknowledge that preschool children need closer supervision than school-aged children due to their age and the nature of their activities. Therefore preschool staff must be more aware of potential hazards to ensure the risk of illness, accidents and harm is reduced wherever possible. When staff supervise children they should not perform other duties which would affect the quality of their supervision and their interactions with children.

Staff need to take a commonsense approach to ensure children are adequately supervised if the preschool's toilets are not visible or easily accessible from the preschool room.

Element 2.3.1

Children are adequately supervised at all times.

This section also relates to Element 4.1.1.

Educator-to-child ratios and qualification requirements are maintained at all times.

What do the *Education and Care Services National Regulations* say?

Regulation 271 requires a staff-to-child ratio of 1:10. Staff to child ratios alone do not determine what is considered adequate supervision. For more information see the Guide to the Education and Care Services National Law and The *Education and Care Services National Regulations 2011*.

Arrival and departure

The *Education and Care Services National Regulations* (regulations 99 & 158) require that staff pay attention to the arrival and departure of children in the preschool to ensure their safety. The following procedures are a good guide:

- Children are to be brought to and collected from the preschool by a parent or other person who is authorised in writing by the parent to collect the child
- Children are not to be left in the preschool grounds without adult supervision
- Preschool staff are to receive children directly from parents, or other authorised person, and are not to release them into the care of any unauthorised person
- At the end of each day, two staff members must check all areas to ensure that no child remains on the premises



- An arrival and departure register needs to be kept and should be signed by parents or person with authorisation, when delivering or collecting a child (a sample arrival and departure register can be found at Appendix 2.5).

Element 2.3.2

Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

This section also relates to Element 6.3.2.

Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.

- The register needs to be stored on site for three years and kept until the child reaches 25 years of age. Each preschool may need to develop arrival and departure procedures that are specific to their own context. An example is provided at Appendix 2.6

TIP: Have a sign-on sheet for the children. Use children's photos to show who has arrived at the preschool. Children match their name with their photo to show they've arrived.

Excursions

Preschool excursions are conducted in line with the Department's *Excursion Policy Implementation Procedures*. Preschool teachers must be familiar with the policy and procedures and take a risk management approach when conducting excursions to ensure the safety of all children.

To ensure adequate supervision and in recognition of the age of the children, the Department's excursion procedures include some specific requirements for the preschool.

- The minimum adult to child ratio for preschool excursions is one adult to five children. However if the excursion involves using public transport or crossing a major road, the ratio is one adult to four children

- If the excursion is to a beach, river, lake or other place where there is a significant water hazard, the minimum adult to child ratio is one adult to two children
- If the purpose of the excursion is to learn water safety or to learn to swim, the ratio is one adult for every child.

As for the rest of the school children need parental permission to take part in any excursion. However, for regular outings only one parent authorisation and one risk assessment is required in a 12 month period unless there is a change.

When preparing information about the excursion for parents, the total number of adults accompanying the children must be recorded. It is recommended to also include the names of staff members.

The school mobile phone may also be taken on the excursion so parents can make contact in an emergency.

It should be noted that visits to the school are not regarded as excursions unless the school is on a completely separate site and the children need to cross a major road to access the school.

For specific requirements on excursion risk assessments and authorisations see at Appendix 2.7.

Element 2.3.2

This section also relates to Element 6.3.2.

Bus Travel

In some locations preschool aged children need to travel by school bus. This situation needs to be discussed with the family, preferably at the time of enrolment to determine whether an alternate arrangement can be organised, for example a sharing arrangement between families.

Where there is no alternative a plan is developed in consultation with families. The plan needs to be in writing and agreed to by all parties.

Duty of care in this situation is paramount, and issues to consider include:

- who will be responsible for signing the child in and out of the preschool
- appropriate permissions
- the time the bus arrives at the school as this may have supervision implications.

An older sibling may sign the child in and out on behalf of the parent, or the teacher could sign on behalf of the parent.

Ultimately the decision is made in consultation with the family by looking at the local situation - ensuring the safety of the children.

This section also relates to Element 6.3.2

Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.

Child protection

All Department staff must complete child protection training to ensure they understand their responsibilities under the child protection legislation.

Teachers must follow the Department's child protection procedures if there are concerns about risk of harm to a child. They should also support children to develop self-care skills that enable them to protect themselves and others from harm.

The Department's *Protecting and Supporting Children and Young People: Revised Procedures* details the responsibilities of preschool staff if they have concerns about suspected risk of harm to a child.

Accidents and emergency treatment

Preschool staff need to assure parents that all necessary actions will be taken if their child is involved in an accident or emergency.

On enrolment, parents are to be asked to give written authorisation for staff to seek urgent medical and hospital treatment and/or to call an ambulance for their child if needed.

Preschool staff have a duty of care to comfort and care for sick and distressed children as well as providing immediate help if required.

A staff member with a current approved first aid qualification and anaphylaxis and emergency asthma management training must be present and immediately available at all times (regulation 136).

In departmental preschools the person with these qualifications may be located in the school but must always be immediately available in an emergency (regulation 136 (2)). Schools should carefully consider how they will meet this requirement.

The preschool must have a fully stocked first aid kit that is accessible to all staff but not to children. A cardiopulmonary resuscitation (CPR) chart for adults and children should be kept with the first aid kit and also displayed in prominent positions in the preschool, both inside and outside.

The NSW Department of Education and Communities First Aid Guidelines provides for two first aid allowances to be paid to schools on the basis of need. The principal can apply for the additional allowances through Employee Services in Bathurst.

Useful Reference

Legal Issues Bulletin No. 46 NSW Department of Education and Communities



Emergency contacts

Staff will need to act promptly in an emergency. Preschools must have the following information, with contact telephone numbers, clearly displayed next to each telephone at all times:

- emergency number – 000
- Poisons Information Centre
- local hospital casualty department
- local police
- street address and telephone number of the preschool
- nearest crossroad to the preschool premises.

Element 2.3.3

Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

Emergency evacuation

Each school has an emergency evacuation plan to follow in case of fire, flood, bomb threat or any other emergency situation that requires evacuation of the building. This plan must include procedures for the preschool.

All preschool staff, including relief staff, must be made aware of the emergency evacuation procedures. Copies of the procedures are to be displayed in a prominent position in each playroom and at each main preschool exit.

Regulation 97 (3) states that **all staff and children** in the preschool need to practice emergency evacuation procedures **once a term**. Details of each practice, including an evaluation of the procedures followed, are to be recorded and kept for two years afterwards.

Element 2.3.3

Sun protection

Children generally attend preschool at a time of day when the UV rating is at its highest; The *Education and Care Services National Regulations* require preschools to have a sun protection policy.

What do the *Education and Care Services National Regulations* say?

Regulation 114 states that outdoor spaces must include adequate shaded areas to protect children from overexposure to ultraviolet radiation from the sun.

The NSW Cancer Council advises that reducing outdoor play during peak UV periods is one of the key ways to protect children and staff from the effects of UV radiation:

- In the months from October to March, sun protection (hats, protective clothing, sunscreen and shade) is needed and consideration should be given to the amount of time children spend outdoors between 11 am and 3 pm. Where possible outdoor activities should be scheduled outside of these hours
- In the months from April to September, sun protection is needed when children are outside between 10 am and 2 pm. Outdoor activities can be scheduled to take place at any time
- In June and July, it is not necessary for hats and sunscreen to be worn unless the preschool is in the far west of the state.

Sun protection should be included in the preschool's learning programs. When parents enrol their children they are informed about the preschool's sun protection procedures. At this time any special requirements their children may have with sun protection (including allergies) should be discussed with staff.

The preschool's sun protection policy and procedures are developed in line with the Department's *Sun Safety for Students Guidelines*. Further guidance can be found in *The Cancer Council NSW SunSmart childcare: A guide for service providers*, Sydney, 2008. Recommended procedures can be found at Appendix 2.6.

Element 2.3.2

Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

TIP: To become a SunSmart preschool contact the NSW Cancer Council. Information is available from www.cancercouncil.com.au/sunsmart.

Buildings and equipment

All buildings and equipment should be safe and in good repair. It is important that departmental provisions for maintenance programs in schools include the preschool. Urgent minor repairs for the preschool should be carried out as for all other areas in the school.

The *Education and Care Services National Regulations* (regulations 104 ,105) require each child to have access to sufficient furniture, materials and developmentally appropriate equipment.

The design and height of the preschool fences and gates should prevent children from climbing over, going through or crawling under them.

Consideration also needs to be given to the following:

- Gates leading to and from outdoor play areas need to be of the same height and equipped with a childproof self-locking mechanism. Gates require special attention and need regular maintenance to ensure they remain self-locking
- Outdoor play areas have a childproof fence of at least 1200mm on all sides. 1500 mm is the recommended height
- The surfacing used underneath or around play equipment on the premises should comply with the playground surfacing requirements of the Australian and New Zealand standard AS/NZS 4422:1996

- The recommended depth of soft fall under fixed equipment is 300 mm
- Mobile play equipment over 500 mm also needs to be set up on softfall to a depth of 300 mm
- Playground equipment must be safe and in good repair. It should not pose any fall, pinch, crush or trap hazard to the children.

This is consistent with requirements for play equipment in the school.

Kidsafe NSW Inc can provide information and advice on playground safety and design. The website address is: www.kidsafensw.org

Element 2.3.2

Electrical and fire safety

All electrical equipment should be well maintained. Electrical cords must be secured safely away from children's reach and power points fitted with protectors, to ensure children's safety.

When not in use equipment should be stored in a safe place that is inaccessible to children.

Fire extinguishers must be placed appropriately throughout the building, as in the rest of the school, and a fire blanket kept adjacent to any cooking facilities.

Fire extinguishers need to be checked yearly.

Element 2.3.2

Useful Reference

Guide to the Education and Care Services National Law and Education and Care Services National Regulations 2011
<http://acecqa.gov.au/links-and-resources/national-quality-framework-resources/>

Chemical safety

The occupational health and safety (OH&S) Regulations and clause 70 of the *Education and Care Services National Regulations* require staff to ensure that all dangerous cleaning materials, disinfectants, poisonous and other dangerous substances and medications are kept in a child-resistant container. They must be labelled with a description of contents and directions for their use.

The following items should be kept in secure storage facilities that are inaccessible to children:

- all cleaning materials, including detergents and disinfectants
- poisonous and other dangerous substances
- dangerous tools and equipment
- toiletries
- medications (kept in a childproof container and refrigerated, if necessary)
- first aid equipment.

For more information refer to Chemical Safety in Schools at <https://detwww.det.nsw.edu.au/assetmanagement/chemicals/foreword.htm> or contact your regional OH&S liaison manager.

Element 2.3.2

TIP: Dangerous substances such as cleaning solutions, items or equipment are not to be kept in places such as toilets, where children might be able to access them.

Animals in the preschool

Animals used in the preschool educational program can provide valuable learning experiences for children. Animals can help children care for other living things and teach a sense of responsibility, caring and tolerance. Staff must supervise children at all times when in contact with animals and good hygiene practices are to be followed, as animals can pass on both minor and serious diseases to humans.

The following procedures are a good guide:

- All children and adults wash their hands thoroughly after handling animals, especially before touching food
- Animals' food and water containers must be kept separate from any areas used for food preparation for children
- Animals must be kept off tables where food is prepared and served
- Animals should be well cared for and kept healthy
- Animal enclosures and cages must be kept clean
- If an animal is unwell, the advice of a vet must be sought
- Children should not handle animals that are unwell.

Element 2.3.2

Useful resource

The Department has a set of guidelines for keeping animals at school. These can be found at <http://www.schools.nsw.edu.au/animalsinschools/resources/guidelines/index.htm>



Plants in the preschool

Any plants or vegetation that pose any risk of injury or severe discomfort or poisoning need to be identified and maintained or removed to ensure that they are no longer a hazard to children in the preschool.

For more information refer to the Department's Landscape Management in NSW Public Schools at https://detwww.det.nsw.edu.au/assetmanagement/assets/media/landscape_management.pdf

Element 2.3.2

Water safety

The *Education and Care Services National Regulations* (regulation 168) state that a health and safety policy which includes water safety is required by all services and a risk management process undertaken (regulation 101).

To provide connectedness with nature and opportunities for exploration, preschools may choose to have mud and/or water features as a part of the outdoor environment.

Staff need to assess the risk to children around water.

Ensuring:

- adequate supervision at all times
- water containers or water features that could be drowning hazards are appropriately covered or inaccessible to children.

If there is a swimming pool already located on the premises it must be fenced in accordance with the Swimming Pool Act 1992. It is recommended that one adult is present for each child using the swimming pool (regulation 274).

Element 2.3.2

Standard Precautions for Infection Control

Standard Precautions for Infection Control should be used by all staff, students, visitors, volunteers and contractors to reduce the risk of transmission of infectious diseases during care procedures.

What are standard precautions?

Standard Precautions in the workplace involve the use of safe work practices and protective barriers for the control of the spread of infection from both recognised and unrecognised sources of infection.

It is not possible to reliably identify sources of infections or communicable diseases, therefore it is necessary to presume that the blood (including dried blood) and body substances of **all persons** be considered as potential sources of infection independent of diagnosis or perceived risk.

When do I use standard precautions?

Standard Precautions must be used before and after care procedures, when providing first aid, when handling and disposing of sharps and contaminated material and when handling animals and potentially infectious agricultural substances.

There is a potential risk of infection when exposed to:

- blood, including dried blood
- all other body fluids, secretions and excretions, including saliva and mucous but excluding sweat
- broken skin
- mucous membranes eg mouth and nose.

What do I need to do?

1. Use good hygiene practices

Wash your hands after any contamination, following any care procedure and after any activity which involves contaminated substances whether or not gloves are worn.

2. Take care of your skin

Take care of your skin as it is the first barrier to disease and protect damaged skin by covering with a waterproof dressing or by gloves.

3. Use good handling and disposal procedures

Minimise contact with potentially infectious substances by using personal protective equipment such as gloves, aprons, masks or goggles.

Ensure that reusable equipment such as that used in first aid provision is cleaned after use and single use items are discarded after use.

Follow the Department's procedures when handling and disposing of sharps and use a suitable sharps container.

Dispose of other contaminated or infectious waste, such as from first aid or care procedures, in a plastic bag which is tied securely and placed inside a second plastic bag and tied securely then placed in the workplace garbage hopper.

Contain all blood and body fluids ie confining spills, splashes and contamination of the environment. Clean up spills promptly.

4. Take prompt action if contact is made with blood or body fluids

Wash skin with mild soap and water, rinse eyes with water, rinse your mouth and spit out.

Breathing, Blowing, Coughing Program (BBC Program)

The BBC program was developed by Ruth Barker, a physiotherapist from Alice Springs. It is a strategy used in schools throughout Australia. This program is effective as it actually reduces the causes of Otitis Media such as a cold, flu and asthma by improving the health of the respiratory tract.

Using the Valsva Method (holding nose and blowing air in mouth with the lips shut until the ears pop) assists in exercising the eustachian tube. This method will improve the Eustachian tubes ability to drain any fluid in the middle-ear space.

Our 'Healthy Kids'- Blowing, Breathing, Coughing (BBC) Program

- First I blow my nose. One side, then the other side
- Then I check if it's empty
- Then I hold my nose and blow my nose to pop my ears
- Then I take 5 deep breaths and have 2 big coughs
- I do 10 star jumps
- Then I take 5 deep breaths and 2 big strong coughs again
- I run around the big tree in the playground
- Then, last of all, I empty my nose, I pop my nose and have a big cough. That's all.

Useful reference

Otitis Media and Aboriginal Children. A Handbook for teachers and Communities. Board of Studies 1994
http://ab-ed.boardofstudies.nsw.edu.au/files/otitis_media_aboriginal_children.pdf

Nappy changing and other toileting procedures

A nappy changing area with handwashing facilities nearby needs to be provided if a child enrolled at the preschool wears a nappy. It should be separate from craft and food preparation areas.

Equipment for nappy changing should include:

- washable vinyl-covered change pads
- dispenser with disposable gloves
- storage space for clean nappies and other necessary supplies
- disposable wipes
- paper towels
- plastic bags for soiled clothes
- foot-operated, plastic-lined bin for disposal of paper wipes, paper towel and disposable gloves
- separate bin for disposal of nappies (available from contractors supplying sanitary napkin disposal units. The choice of contractor is a school-based decision)
- appropriate access procedures for children to reach the change mat.

When changing nappies the following procedures are to be used:

- children who are able should be encouraged to independently climb up onto the change table
- use paper on change table
- disposable gloves should be worn
- children should be wiped with disposable wipes
- paper wipes and gloves should be disposed of in a plastic-lined bin
- nappies should be disposed of into an appropriate bin
- change pads should be washed with soap and water and then wiped with disinfectant after each nappy change
- children's hands should be washed after each nappy change
- children should not be left unattended.
- adult's hands should be washed before putting on and after taking off gloves

Change table surfaces should be kept clean, waterproof and free from tears and crevices.

TIP: If children are still wearing nappies parents should provide nappies, disposable wipes and any creams that the child needs. Disposable nappies should be used to aid in infection control.

Useful reference

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition. National Health and Medical Research Council, 2013

A good practice guide for spilt urine or faeces and cleaning children after wetting or soiling themselves.

When cleaning spilt urine or faeces:

- wear gloves
- place paper towel over the spill and carefully remove paper towel and contents
- place the paper towel and gloves in a plastic bag, seal the bag and put in the rubbish bin
- put on new gloves and clean the surface with warm water and detergent and allow to dry
- remove and discard gloves
- wash hands thoroughly with soap and warm water.

If a child needs cleaning after wetting or soiling themselves the following procedures apply:

- wear gloves and use damp paper towels or pre-moistened towels
- wet paper towels from a tap (not a bowl or a sink full of water) or bottle. If using a tap the towel should not be rewetted as this will contaminate the sink
- dispose of paper towels
- place soiled clothes in a sealed plastic bag for parents to take home
- wash the child while standing in a shower (if appropriate)
- remove gloves, discard them and wash hands thoroughly with soap and warm water.

Reference

Staying Healthy: Preventing infectious diseases in early childhood education and care services, 5th edition National Health and Medical Research Council, 2013

PRESCHOOL ARRIVAL AND DEPARTURE REGISTER

Child's name	Arrival time	Parent Signature	Departure time	Parent Signature	Comments

Arrival and departure procedures

Arrival and departure times are an important part of the daily routine in the preschool. The way children and families are welcomed on a daily basis should be carefully considered.

Specific procedures for these times provide rich opportunities to build relationships with children and families. These procedures not only ensure children's safety but can set the tone for the whole day.

It is important for families to be familiar with the procedures. Therefore consideration needs to be given as to how they will be communicated, for example inclusion in an information booklet.

Arrival and departure procedures will vary from school to school depending on the physical layout and structure of the preschool day.

Below are suggestions that can be adapted for each school's context.

Arrival

- The arrival and departure register is to be completed and should include the date and time of the child's arrival and must be signed by the person accompanying the child.
- On arrival each child is greeted by a staff member. Children must not be left in the building or the playground without staff being made aware of their arrival.
- Parents who arrive early should stay with their children until the specified preschool starting time or until a staff member provides access to the classroom.
- On arrival parents may assist their children to put their belongings in the appropriate place and accompany them to the classroom.
- Parents are asked to inform staff of any changes regarding the collection of their child that day. These changes should be noted on the arrival and departure register for that day.

Departure

- The arrival and departure register is to be completed with the time of the child's departure from the preschool and must be signed by the adult collecting the child
- Parents are requested to inform a staff member of the child's departure
- If a parent is late in collecting their child, they must notify the preschool by telephone. The staff will explain the situation to the child to alleviate anxiety
- Parents who have not arrived by **(insert a certain time)** will be contacted by the school. If they are not available the emergency contact will be telephoned
- If an emergency arises regarding a change to departure, parents are requested to ring the preschool to notify of the changes
- Where a parent or other authorised person is unable to collect the child, a parent may verbally authorise another person to collect the child. Parents are required to provide relevant details regarding that person's identity and ensure that the staff can easily identify the person, for example on presentation of a driver's licence.
- Staff will not allow a person to collect a child who has not been authorised by the parent. If a parent is unable to be contacted, then the child will remain in the school's care.
- If a person unknown to staff arrives to collect the child and authorisation has not been received, staff should not allow the child to leave until authorisation has been obtained
- When collecting their own child parents are asked to ensure the safety of other children by making sure the front door or gate is closed.

Additional considerations may include:

- An invitation for parents to stay for a short while on arrival and prior to departure, to share some of their child's learning experiences
- The need for specific arrival and departure routines for individual children
- The provision of a space for families to gather after they have delivered their child to the preschool class.

Risk assessment and authorisation for excursions

Regulation 100 states that the nominated supervisor must ensure that a risk assessment is carried out in accordance with regulation 101.

Regulation 101 - Conduct of risk assessment for excursion

- (1) A risk assessment for an excursion must -
 - (a) identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion; and
 - (b) specify how the identified risks will be managed and minimised.
- (2) a risk assessment must consider –
 - (a) the proposed route and destination for the excursion
 - (b) any water hazards
 - (c) any risks associated with water-based activities
 - (d) the transport to and from the proposed destination for the excursion
 - (e) the number of adults and children involved in the excursion
 - (f) given the risks posed by the excursion, the number of educators or other responsible adults that is appropriate to provide supervision and whether any adults with specialised skills are required (e.g specialised skills could include life-saving skills.)
 - (g) the proposed activities; and
 - (h) the proposed duration of the excursion; and
 - (i) the items that should be taken on the excursion. (e.g A mobile phone and a list of emergency contact numbers for children on the excursion).

Regulation 102 -Authorisation for excursions

Regulation 102 states that the nominated supervisor must ensure that a child being educated and cared for by the service is not taken outside the service premises on an excursion unless written authorisation has been provided .

Subregulation 4 - The authorisation must be given by a parent or other person named in the child's enrolment record as having authority to authorise the taking of the child outside the education and care service premises by an educator and must state –

- (a) the child's name
- (b) the reason the child is to be taken outside the premises
- (c) the date the child is to be taken on the excursion (unless the authorisation is for a regular outing)
- (d) a description of the proposed destination for the excursion
- (e) the method of transport to be used for the excursion
- (f) the proposed activities to be undertaken by the child during the excursion; and
- (g) the period the child will be away from the premises
- (h) the anticipated number of children likely to be attending the excursion
- (i) the anticipated ratio of educators attending the excursion to the anticipated number of children attending the excursion
- (j) the anticipated number of staff members and any other adults who will accompany and supervise the children on the excursion
- (k) that a risk assessment has been prepared and is available at the service.

Sun protection procedures

The following procedures can help children avoid harmful exposure to UV radiation:

- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) should be considered when planning excursions and playground activities.
- Outdoor activities should be planned to occur in shaded areas as much as possible. Shade options can include a combination of portable, natural or built shade.
- Parents who do not want their child to use sunscreen need to put it in writing with their wishes clearly stated. A list of children who are not to use sunscreen should be displayed near the building exit and where the cream is stored.
- Parents should be asked to apply sunscreen to their child before or on arrival at the preschool. All staff and children should apply SPF30+ broad-spectrum, water-resistant sunscreen 20 minutes before going outdoors and reapply every two hours. Staff should encourage and show children how to apply sunscreen.
- Staff should act as role models and show sunsafe behaviour by wearing a sunsafe hat and clothing, applying sunscreen and using and promoting the use of shaded areas for play.

Families and visitors are also encouraged to model positive sunsafe behaviour.

A good practice guide:

- Staff and children wear sunsafe hats that protect their face, neck and ears.

A sunsafe hat is a:

- legionnaire hat
- bucket hat with a deep crown and brim size of at least 5 cm (adults 6 cm)
- broad-brimmed hat with a brim size of at least 6 cm (adults 7.5 cm)
- When outdoors, staff and children wear sunsafe clothing (e.g. dresses with sleeves and collars) that covers as much of the skin as possible (especially the shoulders, back and stomach)
- Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended
- Sun protection information should be promoted to staff, families and visitors. Information is available from the Cancer Council NSW website www.cancercouncil.com.au/sunsmart.