"Let the little children come to me" Matthew 19:14

A MINISTRY OF MUELLER COMMUNITY CHURCH

75 Morris Road Rothwell Q 4022

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Email: elc@mueller.qld.edu.au

CENTRE HANDBOOK

2023
You have cared for and nurtured your child since birth and seen him or her develop and grow within your home. The first and most significant avenue of learning, morally, spiritually and educationally is a child’s home. Here at the Centre we are excited about the prospect of working with you in the care and education of your child.

We believe your child is a unique and special gift from God. Their developing sense of self and awareness of God will be based on familiar things - love, kindness, patience, dependability and trust - which are modelled by loving parents, educators and members of the community. Our aim at this Centre is to care for your child and provide an educational program in an environment where your child feels comfortable, accepted and secure.

Our programs cater for children's individual interests and developing skills and abilities. Educators aim to partner with parents to extend children’s intellectual, physical, spiritual, emotional and social development.

We extend our warmest welcome to you and your child and look forward to the challenges and exciting times ahead.

Katrina Burdon
Director of Childcare
Nominated Supervisor
ETHOS


Mueller Community Church is a body of Christian people; a local, caring church family with the purpose of showing the life-transforming power of God through various ministries in our community and overseas.

The Early Learning Centre is one of the many ministries of this integrated Christian community. The first phase of the development was Mueller College, a Christian school with over 1500 students ranging from Preparatory to Year 12. Continued developments have seen the provision of a Retirement Village and Residential Care Facility, a Community Centre and an auditorium.

The Early Learning Centre is structured to meet the needs of children from 6 weeks up to school age, and aims to provide learning experiences that are in harmony with the Bible and Government requirements. These learning experiences address the total needs of the child encompassing the spiritual, the academic, the physical, the social and the emotional.

The Centre is mostly resourced with dedicated Christians who are supportive of families in the role of raising their children. Families are encouraged to be involved in the life of the Centre.

The Centre employs educators consistent with Government regulations in terms of qualifications and numbers. All educators understand the needs of children and their development and attend professional development courses. Lead Educators have child-free preparation times each week.

All educators recognise the individuality of each child and family and observe a policy of acceptance regardless of race, creed, gender, ability, class or culture.
## EDUCATORS

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Qualification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Leader</td>
<td>Stephanie Cotterill</td>
<td>Diploma of Early Childhood Ed &amp; Care</td>
</tr>
<tr>
<td>Outdoors Educator</td>
<td>Stephanie Cotterill</td>
<td>Diploma of Children’s Services</td>
</tr>
<tr>
<td>Kitchen Support</td>
<td>Carolyn Ross, Leanne Collier</td>
<td>Cert III in Early Childhood Ed &amp; Care</td>
</tr>
<tr>
<td>Receptionists</td>
<td>Sascha Hopkins, Kerrianne Sheppard</td>
<td></td>
</tr>
<tr>
<td>6 wks—24 mths (Purple Room)</td>
<td>Katie Hill, Sophia Balboni-King, Tracey Harmer, Helen Robins, Ashleigh Ryan</td>
<td>Assoc. Dip. Ed (Child Care), Cert III in Early Childhood Ed &amp; Care, Assoc. Diploma of Education (Child Care), Cert. III in Children’s Services, Cert. III in Children’s Services</td>
</tr>
<tr>
<td>15 mths—30 mths (Red Pelicans)</td>
<td>Lisa Eversham, Anjilin Pomfrett</td>
<td>Diploma of Children’s Services, Diploma of Children’s Services</td>
</tr>
<tr>
<td>25 mths—35 mths (Red Possums)</td>
<td>Cheryl Blair, Jenny Trappett, Linda Geddes</td>
<td>Diploma of Children’s Services, Diploma of Community Services (Chn’s Services), Cert III in Early Childhood Ed &amp; Care</td>
</tr>
<tr>
<td>Red Room Educators</td>
<td>Janine Hollands, Gee Berczi</td>
<td>Diploma of Community Services (Chn’s Services), Cert III in Early Childhood Ed &amp; Care</td>
</tr>
<tr>
<td>30 mths—42 mths (Green Frogs)</td>
<td>Jodie Hatch</td>
<td>Diploma of Children’s Services</td>
</tr>
<tr>
<td>3 yrs—4 yrs (Green Turtles)</td>
<td>Yendis Hill</td>
<td>Adv. Dip. of Chn’s Services studying Bach. Ed. (Early Childhood)</td>
</tr>
<tr>
<td>Green Room Educators</td>
<td>Danni Milton, Tracy Cocker, Helene Boyle</td>
<td>Diploma of Children’s Services, Cert. III in Children’s Services, Diploma of Children’s Services</td>
</tr>
<tr>
<td>Kindergarten (Yellow Room)</td>
<td>Jo Kirby, Vicki Terry, Chloe Kissick</td>
<td>ECT, Diploma of Children’s Services, Cert III in Early Childhood Ed &amp; Care</td>
</tr>
<tr>
<td>Kindergarten (Blue Room)</td>
<td>Rebecca Browning, Shelley Brymner, Andrea Free</td>
<td>Dip. Tch. Early Childhood B. Education (E.C.), Bachelor of Education (Early Childhood), Cert. III in Children’s Services</td>
</tr>
<tr>
<td>Blue/Yellow Rooms Floating Educators</td>
<td>Shelley Brymner, Carolyn Tookarchi</td>
<td>Bachelor of Education (Early Childhood), Diploma of Children’s Services</td>
</tr>
<tr>
<td>Afternoon Program (Green Room)</td>
<td>Lisa Eversham, Jenny Trappett, Yendis Hill, Steph Cotterill, Jodie Hatch, Vicki Hodgson</td>
<td>Diploma of Children’s Services, Diploma of Community Services (Chn’s Serv.), Diploma of Community Services (Chn’s Serv.), Diploma of Early Childhood Ed &amp; Care, Diploma of Children’s Services, Diploma of Children’s Services</td>
</tr>
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*Days noted after role indicate the days they work.*
CENTRE MANAGEMENT
Mueller College Early Learning Centre is governed by a Management Committee that oversees the operation of the Centre. This committee consists of:

Executive Director  
Fin Hatch

Chief Financial Officer  
David Litke

Finance Manager  
Derick Malherbe

Director of Childcare  
Katrina Burdon

The Management Committee encourages families to be involved in the education and care of their children by sharing information, supporting and participating in the program, and regularly communicating with educators.

Families are invited to assist with feedback, comments and suggestions concerning all aspects of the Centre and will be invited to participate in reviews of the Centre’s programs, policies and quality improvement process.

The Management Committee meets monthly to discuss the day to day workings of the Centre, plan improvement strategies, and work through issues that have been raised by children, families, staff, and/or community members.

For enquiries, concerns or comments regarding all daily operational matters, families are asked to contact:

Shelly Coulson  (Director of Child Care)  3897 2756

APPROVAL
Mueller College Early Learning Centre operates under the Education and Care Services National Law Act 2010. The Centre must comply with this Act and the Education and Care Services National Regulations 2011. This compliance includes requirements about activities, experiences and programs, the numbers of educators and children, and staff qualifications.

Information Services include:

Early Childhood Education and Care:  http://www.earlychildhood.qld.gov.au
MISSION STATEMENT
The mission of Mueller College Early Learning Centre is to support families by providing for their children a friendly, safe, nurturing Christian environment. In the pursuit of excellence in education and care, the Centre seeks to foster the children’s love of learning, equipping them with the foundations for life-long learning. Our Centre seeks to provide a stimulating environment where the rights of children are upheld and children have a strong sense of identity and wellbeing.

CENTRE PHILOSOPHY
Our Centre encourages and values the development of the “whole child”. We believe that each child is unique and should be immersed in language and communication and be provided with opportunities for growth and development physically, socially, emotionally, spiritually, creatively and cognitively.

We believe that all children attending our Centre should have their needs met in a safe, caring and supportive Christian environment. We believe that all children should have the opportunity to express themselves and have input into their learning environment.

We believe that each child should be supported to build and maintain sensitive and responsive relationships with other children and adults.

We are dedicated to providing appropriate educational programs guided by our Christian ethos. Educators seek to respond to each child’s individual strengths, interests and ideas and use intentional teaching to scaffold and extend each child’s learning.

We believe that children need a strong sense of identity, wellbeing, connection and engagement to enable them to develop a positive attitude to learning. We seek to build on children’s prior and current experiences.

We seek to engage children in a rich learning environment which is welcoming, inclusive of all, promotes competence, is responsive to children’s ideas and opinions, encourages problem-solving, decision-making, independent exploration and discovery, and highlights the importance of play for learning.

We believe that our programs should encourage healthy living by promoting healthy eating and physical activity. They should support children to be environmentally responsible, promoting sustainable practices and respect for the environment.

We seek to create a supportive and caring environment for educators where mutual respect is valued. We are committed to their ongoing professional learning and development.

We recognise that each child is part of a unique family group with varying cultural and care needs. Australia’s Aboriginal and Torres Strait Islander cultures are valued as our nation’s first people.

We seek to honour and understand differences and to develop mutually respectful partnerships with families, sharing in decision making about their child’s learning, progress and development.

We strive to form meaningful and supportive links for children and families between home, the Centre and the wider community.

Reviewed October 2022
EDUCATIONAL PROGRAM

The Centre implements Australia’s National Early Years Learning Framework for early childhood educators called, “Belonging, Being and Becoming”. The aim of the Early Years Learning Framework is to extend and enrich children’s learning from birth to five years and through the kindergarten year leading into formal schooling.

ELEMENTS OF THE FRAMEWORK

The Framework comprises three inter-related elements called Principles, Practice and Learning Outcomes. Working in partnership with families, educators use the Framework to guide their planning for children’s learning. In order to engage children actively in learning, educators identify children’s strengths and interests, choose appropriate teaching strategies and design the learning environment. Children’s learning is then assessed to inform further planning.

CHILDREN’S LEARNING

Children’s learning is dynamic, complex and holistic. Physical, social, emotional, personal, spiritual, creative, cognitive and linguistic aspects of learning are all intricately interwoven and interrelated. Play is a key context for learning that:

- allows for the expression of personality and uniqueness
- enhances dispositions such as curiosity and creativity
- enables children to make connections between prior experiences and new learning
- assists children to develop relationships and concepts
- stimulates a sense of wellbeing

Children are given opportunities to initiate and lead learning and become active participants and decision makers in what they can do and learn. Educators can then respect and work with each child’s unique qualities and abilities.

Educators’ practices and the relationships they form with children and families have a significant effect on children’s involvement and success in learning. Children thrive when families and educators work together in partnership to support young children’s learning.

Children’s early learning influences their future opportunities. Wellbeing and a strong sense of connection, optimism and engagement enable children to develop a positive attitude to learning.

The five learning outcomes in the Early Years Learning Framework are designed to capture the integrated and complex learning development of all children across the birth to five years age range.

1. Children have a strong sense of identity
2. Children are connected with and contribute to their world
3. Children have a strong sense of wellbeing
4. Children are confident and involved learners
5. Children are effective communicators

Children’s learning is ongoing and each child will progress towards the outcomes in different and equally meaningful ways. Learning is not always predictable and linear. Educators plan with each child and the outcomes in mind.

DEVOTIONS

Within the program, educators may include a short devotion time each day. This is usually part of a group time and may include related songs, poems, activities and prayers. Stories are read from Children’s Bibles, age-appropriate devotional books or illustrated story books.

Reviewed October 2022

EDUCATORS

Children are cared for by two to six educators in each room. Each educator has been chosen because of a caring nature, a love of children and a desire to provide the best quality care for your child. Educator qualifications are consistent with (or higher than) Government Regulations and educators are required to regularly participate in professional development opportunities. Educators are relieved for lunch breaks, tea breaks and for programming time so that the educator to child ratio can be maintained.
Room

Mueller College Early Learning Centre provides care between the hours of 6.00am and 6.00pm.
Kindergarten programs operate between the hours of 8.30am and 4.00pm each day.
The Centre consists of seven groups.
The Purple Room caters for children from 6 weeks of age to 24 months.
The Red Pelicans Room caters for children from 17 months to 30 months.
The Red Possums Room caters for children from 25 months to 35 months.
The Green Frogs Room caters for children from 30 months to 42 months.
The Green Turtles Room caters for children from 3 years to 4 years.
The Yellow Room caters for children in Kindergarten.
The Blue Room caters for children in Kindergarten.

Changing Rooms

Mostly children stay in the same room all year. Occasionally during the year, if the opportunity arises, some children may be moved up to the next room after consultation with their families. If possible, children will be moved in small groups and will have a time of transition to become familiar with the new room.

Priority of Access

This child care service is required to assess each family’s need for care in accordance with the following Priority of Access Guidelines set out by the Commonwealth Government:
Priority 1—a child at risk of serious abuse or neglect
Priority 2—a child of a single parent who satisfies, or of parents who both satisfy, the work/training/study test under section 14 of A New Tax System (Family Assistance) Act 1999
Priority 3—any other child.

Please Note! Children of parents in the lower priority groups may have their days/times reduced or be asked to withdraw their places should there be a need for higher priority groups. If this becomes necessary, 14 days notice will be given.

Admission

Placement acceptance is given following the signing of the Enrolment Agreement and the payment of a Security Deposit equivalent to four weeks fees. This Security Deposit will be refunded, less any fees owing, when the child leaves the Service.

Hours

The Service is open from 6.00am to 6.00pm Monday to Friday.
Core program times for the Purple, Red and Green Rooms are from 8.30am to 3.30pm daily, while the Kindergarten programs operate from 8.30am to 4.00pm daily.
Combined programs operate from 6.00am to 8.15am in the Purple, Red and Green Rooms and 3.30pm to 6.00pm in the Purple and Green Rooms.
The Centre operates for 50 weeks a year and is closed for two weeks over Christmas. There are no fees charged for these two weeks.
BOOKINGS
Enquiries concerning bookings can be made at the Early Learning Centre Reception (ph. 3897 2756). If for any reason you will not be collecting your child at your usual time, please notify the staff of the time changes for that day.

FEES
The daily childcare fees are as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childcare</td>
<td>$111.50</td>
</tr>
<tr>
<td>Kindergarten</td>
<td>$111.50 (minimum 2 days per week)</td>
</tr>
</tbody>
</table>

Please be aware that fees may vary from time to time. Please refer to the Fee Schedule in the Early Learning Centre foyer.

The Centre is open from 6.00am to 6.00pm and care can be booked any time between these hours, Monday to Friday, depending on availability of places.

A Security Deposit of four weeks fees is required for each child utilising the Centre. This deposit is due before the child’s starting date and will be refunded when the child leaves the Service (provided all fees have been paid). If the weekly fee increases due to extra care being accessed, a CCS percentage or hours change, or some other reason, an adjustment to the security deposit will also be required to keep it equivalent to the total of four weeks fees.

Fees are due on day one and are payable weekly/fortnightly in advance. The preferred method of payment of fees is by direct debit from your bank account or credit card. Direct Debit Request Forms are available from Reception and are included with the enrolment paperwork. Fees can be paid at the Early Learning Centre Reception by cash, EFTPOS or credit card. Credit card payments may be made over the phone during office hours, 8.30am—4.00pm. It is your responsibility to keep fee payments up to date at all times. Failure to do so may result in termination of your child’s place at the Centre.

Please note that sick days, holidays and occasional absences must be paid for. There will be no charge for Public Holidays. If your child is absent on his/her regular day, you are required to acknowledge the absence for that day to be eligible for Child Care Subsidy.

CHILD CARE SUBSIDY
The Centre is approved to receive Child Care Subsidy. You will need to arrange Child Care Subsidy through your myGov account. This should be done well before your child starts at the Centre. You will require Customer Reference Numbers (CRNs) for both you and your child. These numbers will need to be supplied to the Centre along with the dates of birth of both you and your child. Please ensure that the parent/guardian accessing the child care subsidy is recorded as “parent/guardian 1” on the enrolment and agreement form.

HEALTH CARE CARDS
Parents of children in the Kindergarten Program (Yellow & Blue Rooms) who have a Health Care Card or Pension Concession Card are eligible for an extra rebate on fees. This rebate is applied as a discount on the weekly fees. To access this rebate, please present your health care card or pension concession card to our Receptionist for copying and registration. If your card expires during the year and is renewed, please remember to bring the new card in for copying.

DISCOUNTS
To be eligible for holiday discounts, a minimum of two weeks written notice is required for impending holidays. A holiday form is available at Reception for this purpose. Please ensure that your account is up-to-date prior to applying for a holiday discount.

SWAP DAYS
Due to the way the child care subsidy system works, make-up days are not available. If your child is going to be absent on a booked day, you may be able to swap to another day in the same week, provided there are vacancies in your child’s room.

PUBLIC HOLIDAYS
We do not charge fees for public holidays.
HOLIDAYS
We require a minimum of **two weeks written notice** of your child’s impending holidays. There is a **limit of 42 days absence per financial year**, which includes holidays, sick days, and occasional absences. After these forty-two days, Child Care Subsidy cannot be claimed for absences and full fees must be paid. The tally of absences appears on your account statements.

There is provision for additional absences after the forty-two days if designated criteria are met and supporting documentation is supplied. Please see the Director if you require more information.

ARRIVAL AND DEPARTURE
Children must be signed in and signed out each day by an authorised adult. Signing in and out is done electronically on iPads at Reception or alternatively, using the QR code at Reception. For insurance purposes, please make signing in the **first** thing you do on arrival at the Centre and make signing out the **last** thing you do when leaving the Centre. Signing children in and out is a legal requirement to fulfil Government Child Care Regulations. The records must be accurate and must be completed each day a child attends. **Please note that holidays, sick days and occasional absences must also be acknowledged on the iCheck-In system.** If at any time the iCheck-In system is not operational, there is a red folder on the Reception bench for manually signing in/out.

Please do not give your sign in details to other family members. Each authorised person needs their own sign in details set up in the system or alternatively, they can sign in/out in the Red Folder if only visiting occasionally.

**Please notify us early in the morning if your child will be absent for the day. Also, please leave an emergency contact number for the day if you will be somewhere different from the details given on the enrolment form.**

Please refer to the map for the correct entry/exit route for your child’s room.
COLLECTION OF CHILDREN

Children will not be allowed to leave the Centre with anyone who is not an adult (over 18 years of age). Children will only be permitted to leave the Centre with their parents, or adults who have been acknowledged in writing as authorised to collect them. It is essential to notify the educators in your child’s room, if there is to be a change of persons collecting your child. Please collect the “Changes to Authorisation of Collection” form from Reception and hand it to the Receptionist with all the details filled in. Please complete a form each time you wish to add people to, or remove people from, your child's authorised nominee list. If no notification has been received of a person collecting your child, the child will not be permitted to leave with that person. In emergencies when parents cannot collect their child they may contact the Director or person in charge by phone to authorise for another adult to collect the child. This person must be on the authorised list.

In the event that the educator does not know the person collecting the child, the person will be required to produce proof of identity. These measures are taken to protect the interests of your child. In the case of a child not being collected by 6.30pm, and no contact having been able to be made with parents/guardians or authorised contact persons, Juvenile Aid, Police or Crisis Care will be called on to collect the child and the child will be held in their care until contact with the family has been made. The Director or person in charge will be notified before these measures are taken.

OLDER SIBLINGS

If your child is accompanied by older siblings while you are delivering and/or collecting your child from the Centre, please do not allow any of the children (including older children) to enter or exit rooms without adult supervision. For the safety of all children at the Service, children of any age are not to open gates or doors in the Centre.

REDUCING DAYS OF ATTENDANCE

Two week’s written notice is required for reducing the number of days of attendance or fees are payable in lieu.

PERMANENT DEPARTURE

Two week’s written notice is required or two week’s fees are payable in lieu. N.B. To be able to claim Child Care Subsidy, your child must attend on his/her last day. Failure to attend on this day will mean that full fees are payable for all days after the last actual day of attendance.

LATE FEE POLICY

The Centre closes at 6:00pm and children must be collected by this time. The late fee is $5 for the first five minutes or part thereof, and $1 per minute thereafter.
COMMUNICATION

There are pockets on the wall outside each room in the Centre where parents can collect their mail from the Centre. Please check regularly for information, excursion notices, and all other messages and notices. These pockets will have children’s first names and family name initials on them. Please ask staff to show you where they are located. Please also check regularly for email communication. There are room notice boards in each room and a notice board in the foyer. Please check room notice boards and walls daily for program information and notices. As the year progresses, educators will develop an individual profile for your child. Please discuss with them how you can contribute, and follow the progress of your child’s individual learning and activity throughout the year.

“Mueller Connect” is the online newsletter for Mueller College. It is updated weekly and can be viewed at www.muellerconnect.com.

Policies and Procedure Guidelines for the Service and the Centre’s quality improvement plan are available for viewing in the foyer.

FAMILY INVOLVEMENT

The Service recognises that parents are the primary caregivers and educators of their children. We value and encourage parents, grandparents and extended family members to support and participate in the program and events at the Centre. An Information Night presented early in the year will inform families about the program and give details about routines in the individual rooms. Information about other events for families to attend and events to be involved in will be advertised closer to the time throughout the year.

Parents may visit the Service at any time and will not be denied access to their child unless there is a current custody order in place, a copy of which is held on file.

Children thrive when families and educators work together in partnership to support young children’s learning. Parents are always welcome to share skills, interests, cultural background and practices in the educational program. Families will have opportunity to contribute to the development and review of the Service’s Statement of Philosophy, Policies and the Quality Improvement Process.

SHARING INFORMATION

We believe that children learn more effectively if their learning is built on prior and current experiences. This helps them to feel secure, confident and connected to familiar people and places. Information from families assists us to ensure children’s learning and experiences are more meaningful and connected to their lives and the things they are interested in.

At enrolment and at the commencement of each year we may ask for information about children’s backgrounds, experiences, likes, dislikes and home routines. Shared information helps us to include familiar ideas and interests and allows for the inclusion of other areas of diversity such as cultural issues which may be important to your child and family. Please assist us by regularly updating this information if requested as it is important that our information is kept up to date. We encourage you to frequently share verbally with your child’s educator about your family, special events and other community interests and connections as this will enable them to maximise your child’s individual learning and development.

Your feedback and suggestions are always welcome. Comments and Suggestion Forms are available at Reception to be placed in the Fees Box as needed. Please feel free to discuss any areas of concern with Shelly (Director of Childcare).

CUSTODY

Should there be a change in marital status either through divorce or separation, **legal documents regarding custody must be sighted by the Director and a copy kept on file in the Service.** We cannot legally refuse parental access to a child or permission for either parent to take a child from the Centre unless we have legal documentation to do so.
INCLUSION

This Service recognises the individuality of each child and family and observes a policy of acceptance regardless of race, creed, gender, ability, class or culture. Please see Policies and Procedures for further information.

BEHAVIOUR GUIDANCE

Our program promotes a positive approach to managing the behaviour of all children. Behaviour guidance has two primary goals. First we strive to find a solution to the current situation. Second, we try to help the children recognise consequences, explore alternative solutions and outcomes, and develop internal self-control. To accomplish these goals, we use the following techniques on a daily basis:

Positive Redirection
Positive behaviours will be encouraged by diverting children to more appropriate activities, showing appreciation for appropriate behaviour and building on each child’s strengths and achievements.

Positive behaviours will include: sharing; taking turns; negotiating with peers; active listening; problem solving; and displaying empathy for others.

Modelling
Educators will demonstrate acceptable behaviours during the course of their interactions with all children. Their role modelling will encourage positive and responsible behaviour within the areas of:

- socially acceptable behaviour
- interaction with peers
- maintaining a safe and caring environment

Limit Setting
Limits to behaviour will be clearly expressed in positive terms and reinforced consistently in a developmentally appropriate way. Children will be encouraged to help establish limits and the consequences when limits are not adhered to. Children will be encouraged to learn about their own feelings and emotions.

Establishing Spaces
Play spaces will have active, energetic play spaces balanced with passive, quiet and peaceful areas where children can find solace.

Problem Solving
Educators will encourage intellectual and moral reasoning skills by using natural and logical consequences and by asking questions that encourage problem solving. Educators will help children identify needs, feelings, causes, effects and alternatives.

Toddlers
As toddlers seek greater independence, they begin to stand up for themselves and test what they have a ‘say’ about and what happens to them. Educators will:

- take time to acknowledge desired behaviour and help children reflect on their own behaviour
- give simple clear instructions
- be consistent in their response to their behaviours
- give attention during ‘positive’ moments rather than when behaviours are inappropriate, provided there is no danger to themselves or other children
- try to minimise reasons for behaviour e.g. frustration, jealousy, tiredness, inability to communicate, feeling unwell and feelings of insecurity
- make sure children are aware of what is happening next

Parents are encouraged to discuss behaviour guidance with educators so they can work together with the child to develop the child’s internal self-control.
EXCURSIONS

Parents will be notified if the children are to go on an excursion or outing. The number of adults required for supervision will be determined through a risk assessment of the activity. Children must wear sandals, sneakers or shoes with laces, (not thongs or shoes with slippery soles).

Permission slips for each excursion must be signed by the parent prior to departure. Excursion costs will be added to your account. Travel will generally be on Mueller College buses, some of which do not currently have seat belts.

In-Centre excursions are organised at various times throughout the year. Permission forms must be completed and returned prior to the excursion date. Children will not be permitted to participate without written permission.

STUDENT WORK EXPERIENCE

This Centre supports the inclusion of work experience school students in the educational program. This is implemented on a limited basis upon request and in consultation with both the Director and the Educators involved.

Students will always be supervised and will never be left in charge of the group on their own.

Students are required to comply with the guidelines of the Service and regard any information on families as strictly confidential.

We recognise the benefits of having students and lecturers visiting our Service enabling us to keep contact with current educational trends and assisting with the training of possible future employees for our own Centre.

THE ENVIRONMENT

Nature Kindy is an integral part of the educational program. The aim of Nature Kindy is to educate children in the outdoor environment, with the key focus on supporting their holistic development. The sessions enhance and broaden the curriculum and have a strong emphasis on raising self-esteem and independence. All sessions follow strict safety procedures that are set in place to ensure each child has a safe unique learning experience. During the sessions, the children go for walks, read stories, participate in group activities and explore the natural environment.

The Centre actively promotes conservation and encourages children and families to protect and care for the environment. Children are encouraged to appreciate elements of the natural environment. Natural materials are used in the program wherever possible with many of the materials used for arts and crafts being recycled. Educators model environmentally friendly and sustainable practices. Native animals and insects are treated with care and respect and will be set free after an appropriate observation time for the children.

Gardens are present in playgrounds and children have the opportunity to be involved in the process of growing, harvesting and consuming fresh produce. Classroom waste is sorted into appropriate bins to allow for recycling and composting, hence reducing the amount of waste going to landfill.

Fresh food and reusable trays and dishes are used in the provision of lunch and morning and afternoon teas to reduce the over use of packaging. This is a conservation issue as well as a nutritional one.

As much as possible, cleaning materials in the Centre are biodegradable and environmentally friendly. Pest control is carried out annually.

SMOKING is PROHIBITED at the Centre and anywhere on the premises including the car park or within five metres of the Service boundary. This includes when the Service is open, weekends and holiday periods.
EMERGENCY PROCEDURES

If an emergency or natural disaster occurs at the Centre, the children and staff are well practiced in the required procedures to ensure, as far as possible, the safety and well being of each person present.

Emergency evacuation procedures are clearly displayed near the main entrance and exit and in each room, to be followed in the event of fire, natural disaster or other emergency. The Centre has registered with “MoretonAlert” to receive text and email alerts during times of emergency.

Safety drills will be practised regularly and at different times of the day. These are recorded and their effectiveness assessed. Procedures are updated as necessary when problems arise. The Centre is equipped with alarms and the required fire fighting equipment. Staff have received instruction in the operation of fire extinguishers.

In an emergency which requires a containment procedure, staff will follow requirements to secure persons within the building to prevent a potential threat of harm or injury to children, staff, visitors, contractors or other personnel. Potential threats may include dangerous persons, toxic spills, smoke, animals running loose or bad weather. Lock down drills are also practiced regularly and children and educators are familiar with lock down procedures.

If it is necessary for educators to attend to an injured child, staff ratios will be considered to ensure the supervision of the other children. Administration and management staff are readily available to step in for supervision purposes and for emergency assistance.

All parents of children attending the Centre who may require an emergency response for e.g. anaphylactic reactions, allergies, asthma, epilepsy, diabetes and croup will be required to provide medical information about children at risk at the time of enrolment, and when medical information updates are requested for their children. All children enrolled with these medical conditions will have an Individual Action Plan (Health Record Card) prepared in consultation with the child’s parent and medical practitioner. Health record cards are displayed in a clearly accessible area for educators.

CHILD PROTECTION

The Centre aims to support parents by providing loving care, guidance and education in a safe environment. We believe we have a responsibility to all children attending the Service to defend their right to care and protection. When dealing with any allegations of abuse or neglect of children, the Service will adopt measures to ensure protection of the child and all children in its care. Management are committed to ensuring that all educators and staff involved in its operations are aware of and comply with its Child Protection Policy, mandatory reporting requirements and screening requirements under legislation.

Child abuse as defined by the Department of Education and Training Early Childhood Education and Care is action, behaviours or inaction by an adult towards a child or young person that harms or endangers the child’s psychological or emotional health, development or well being.

For advice and support regarding child abuse, and to report child abuse, contact the Child Safety Services Redcliffe on 07 3385 3500 or Caboolture on 07 5490 1000 or visit www.csyw.qld.gov.au/child-family.

After hours contacts

<table>
<thead>
<tr>
<th>Service</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Safety After Hours Service Centre</td>
<td>1800 177 135 (24hrs)</td>
</tr>
<tr>
<td>Queensland Police Service</td>
<td>131 444 or 07 3283 0555</td>
</tr>
<tr>
<td>Statewide Sexual Assault Helpline</td>
<td>1800 010 120</td>
</tr>
<tr>
<td>Crime Stoppers</td>
<td>1800 333 000</td>
</tr>
<tr>
<td>Persons with hearing impairment:</td>
<td>SMS: 0423 677 767</td>
</tr>
<tr>
<td></td>
<td>TTY: 133 677</td>
</tr>
<tr>
<td>Speak and Listen:</td>
<td>1300 555 727</td>
</tr>
<tr>
<td>Emergency</td>
<td>000</td>
</tr>
</tbody>
</table>

Family and Child Connect (13 32 64) is a free service available to families facing challenges. When you contact Family and Child Connect, you will speak with an experienced family support worker who will listen to your concerns. They can provide advice and link you with support services in your local area.
WORKPLACE HEALTH & SAFETY

This Service aims to provide children, staff, parents, voluntary workers and visitors with a safe and healthy workplace.

This Service upholds the following principles:

* Placing the safety of employees and children and the public ahead of protection of the Centre’s equipment and services.
* Providing a safe physical environment including buildings, grounds and equipment.
* Ensuring that each staff member is trained in basic principles of Workplace Health and Safety matters and also in matters specific to their area of responsibility.
* Supporting staff members in their duty of care to be fully responsible and accountable for health and safety issues including repairs and maintenance in specific areas.
* Developing an awareness in the children of good health and safety habits.
* Investigating the cause of every accident, and taking corrective action irrespective of whether personal injury has occurred.
* Encouraging a Duty of Care philosophy that regards workplace accidents as being preventable.

HYGIENE

The Service aims to maintain a healthy environment by ensuring that preventative measures are in place to maintain infection control. Hand washing is the most effective way of controlling the spread of infection in the Centre.

Educators wash their hands on arrival at the Centre, before all clean tasks, after dirty tasks and before going home. Educators will assist children to wash hands before eating, after nappy changes and toileting, playing outside or touching nose secretions. Parents may assist us by encouraging children to wash their hands when arriving at the Centre and before going home. Hand gel is available at Reception for parents as you arrive and leave if required. Hand washing sinks are available in each kitchen and bathroom. The Centre ensures that toilets and hand washing facilities are easily accessible to children. Hand gel is also available in each classroom.

Procedures are displayed around the Centre for Nappy Changing, Toileting and Hand Washing. For a complete list of all measures taken by educators at the Centre to ensure good hygiene, please refer to the Hygiene Policy.

HEALTH

* If a child becomes unwell while at the Service, putting other children and educators at risk of becoming ill, the parents or emergency contacts will be contacted to arrange for collection of the child. If a child is administered Panadol at the Service, a parent/guardian or authorised nominee will be required to immediately arrange for their collection.
* If a child is given paracetamol or ibuprofen in the morning, they should not attend care that day.
* No child showing symptoms of a heavy cold or any infectious illness (measles, mumps, chicken pox, conjunctivitis, unidentifiable rashes, impetigo, diarrhoea, vomiting, ear and throat infections) which could affect the health of other children, may attend the Centre, but is required to remain at home for the period specified by the health regulations.
* All parents are asked to notify the Service of the reasons for a child’s absence and also of the incidence of infectious diseases in the family.
* Please see the exclusion chart on the next page for recommended exclusion times.
* The Director, or in her absence the person in charge, has the right to send home any child whom she considers is not well enough to attend the Centre and to request a letter from the child’s doctor before being readmitted to the Centre should she consider it necessary.
* Children should remain at home for at least 24 hours after the last bout of diarrhoea or vomiting.
* If your child is ill and requires antibiotics, he/she must remain at home for 24 hours after the commencement of treatment to allow the medication to take effect.
* If your child is unable to attend due to illness, please phone the Centre early in the day to inform educators of the illness so that they can watch for symptoms in other children, alert other parents, and protect themselves.

Symptoms of illness

* unusual spots or rashes
* unusual behaviour
* febrile appearance
* breathing difficulties
* mucus discharge from the nose
* red, irritated or discharging eyes
* diarrhoea
* vomiting
* loss of appetite
* sore throat or trouble swallowing
* severe nappy rash
* infected skin patches, crusting of skin, or discharge
* severe, persistent coughing
* whoop or barking sound with cough
* frequent scratching of scalp or skin
* headache, stiff neck
* yellowish skin or whites of eyes
* unusually dark or changed urine
* smelly urine
* complaints of pain on voiding
* grey or very pale faeces
<table>
<thead>
<tr>
<th>Condition</th>
<th>Person with the infection</th>
<th>Those in contact with the infected person (The definition of ‘contact’ will vary between diseases)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Chickenpox (varicella)</td>
<td>EXCLUDE until all blisters have dried, and at least 5 days after the onset of symptoms.¹</td>
<td>EXCLUSION MAY APPLY EXCLUDE non-immune pregnant women and any child with immune deficiency or receiving chemotherapy. Advise to seek urgent medical assessment. Contact your Public Health Unit for specialist advice. Allosee Shingles Information below.</td>
</tr>
<tr>
<td>Cold sores (herpes simplex)</td>
<td>NOT EXCLUDED If the person can maintain hygiene practices to minimise the risk of transmission. Young children unable to comply with good hygiene practices should be excluded while sores are weeping. Sores should be covered with a dressing where possible.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>EXCLUDE until discharge from eyes has ceased unless a doctor has diagnosed non-infectious conjunctivitis.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*COVID—¹</td>
<td>EXCLUDE those who have symptoms and relevant contacts. See latest Queensland Health guidance for exclusion periods and criteria. Contact your Public Health Unit for specialist advice.</td>
<td>EXCLUSION MAY APPLY Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>Cytomegalovirus (CMV)</td>
<td>NOT EXCLUDED pregnant women should consult with their doctor.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Diarrhoea and/or Vomiting including:</td>
<td>EXCLUSION periods may vary depending on the cause.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• amoebiasis</td>
<td>EXCLUDE a single case until the person, has no symptoms (includes vomiting if applicable), is feeling well and they have not had any loose bowel motions for at least 24 hours or if the person has confirmed norovirus exclude for at least 48 hours.²</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• campylobacter</td>
<td>EXCLUDE all persons who prepare or serve food until they have not had any diarrhea or vomiting for 48 hours.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• cryptosporidium giardia</td>
<td>NOTE: If there are 2 or more cases with diarrhoea and/or vomiting in the same location, which may indicate a potential outbreak OR a single case in a food handler, notify your Public Health Unit.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• rotavirus</td>
<td>Diarrhoea: 3 or more loose stools or bowel movements in a 24 hour period that are different from normal and/or escapes a child’s nappy. See information below if norovirus is confirmed or considered likely as the cause of diarrhoea and vomiting.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• salmonella</td>
<td>but excluding: <em>norovirus</em> <em>shigellosis</em> <em>toxin-producing forms of E.coli (STE)</em></td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>• gastroenteritis</td>
<td>See advice for these specific conditions below.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Enterovirus 71 (EV71 neurological disease)</td>
<td>EXCLUDE until written medical clearance is received confirming the virus is no longer present in the person’s bowel motions.¹</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Fungal infections of the skin and nails (ringworm/tinea)</td>
<td>EXCLUDE until the day after antifungal treatment has commenced. (No exclusion for thrush).</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Glandular fever (mononucleosis, Epstein-Barr virus)</td>
<td>NOT EXCLUDED</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*German measles (rubella)³</td>
<td>EXCLUDE for 4 days after the onset of rash² or until fully recovered, whichever is longer. Pregnant women should consult with their doctor.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Haemophilus influenzae type b (Hib)</td>
<td>EXCLUDE until the doctor confirms the person is not infectious and has completed 4 days of appropriate antibiotic treatment.³ Contact your Public Health Unit for specialist advice.</td>
<td>EXCLUSION MAY APPLY Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>Hand, foot and mouth disease</td>
<td>EXCLUDE until all blisters have dried.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Head lice</td>
<td>Exclusion is not necessary if effective treatment is commenced before next attendance day (i.e. the child does not need to be sent home immediately if head lice are detected).</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Hepatitis A²</td>
<td>EXCLUDE until at least 7 days after the onset of jaundice¹ OR for 2 weeks after onset of first symptoms, including dark urine if there is no jaundice. If a person is asymptomatic contact your Public Health Unit for Specialist advice.</td>
<td>NOT EXCLUDED</td>
</tr>
</tbody>
</table>

September 2021
<table>
<thead>
<tr>
<th>Condition</th>
<th>Person with the infection</th>
<th>Those in contact with the infected person¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B and C</td>
<td>NOT EXCLUDED cover open wounds with waterproof dressing.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Hepatitis E</td>
<td>EXCLUDE until at least 2 weeks after the onset of jaundice.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Human immunodeficiency virus (HIV/AIDS)</td>
<td>NOT EXCLUDED cover open wounds with waterproof dressing.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Influenza and influenza-like illness</td>
<td>EXCLUDE until symptoms have resolved, normally 5–7 days.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Measles²</td>
<td>EXCLUDE until the doctor confirms the person is not infectious but not earlier than 4 days after the onset of the rash.¹</td>
<td>EXCLUSION MAY APPLY vaccinated or immune contacts.</td>
</tr>
<tr>
<td></td>
<td>Contact your Public Health Unit for specialist advice.</td>
<td>EXCLUDE Immuno-compromised contacts (including those receiving chemotherapy) until 14 days after the appearance of the rash in the last case.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>EXCLUDE non-or incompletely vaccinated contacts, without evidence of immunity.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>Meningitis (bacterial)</td>
<td>EXCLUDE until well and has received appropriate antibiotics.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Meningitis (viral)</td>
<td>EXCLUDE until well.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Meningococcal infection²</td>
<td>EXCLUDE until the treating doctor confirms the child is not infectious and at least 24 hours of appropriate antibiotics have been completed.¹</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td></td>
<td>Contact your Public Health Unit for specialist advice.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Molluscum contagiosum</td>
<td>NOT EXCLUDED</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Mumps</td>
<td>EXCLUDE for 5 days after onset of swelling. Pregnant women should consult with their doctor.</td>
<td>NOT EXCLUDED pregnant women should consult with their doctor.</td>
</tr>
<tr>
<td>*Norovirus</td>
<td>EXCLUDE until no symptoms and no loose bowel motions for 48 hours.¹</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Roseola, sixth disease</td>
<td>NOT EXCLUDED</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Scabies</td>
<td>EXCLUDE until the day after treatment has commenced.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>Shiga toxin-producing E.coli (STEC)</td>
<td>EXCLUDE until diarrhoea has stopped and 2 samples have tested negative.</td>
<td>EXCLUSION MAY APPLY</td>
</tr>
<tr>
<td></td>
<td>Contact your Public Health Unit for specialist advice.</td>
<td>Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>Slapped cheek syndrome, fifth disease (paroviruses B9p, erythema infectiosum)</td>
<td>NOT EXCLUDED pregnant women should consult with their doctor.</td>
<td>NOT EXCLUDED pregnant women should consult with their doctor.</td>
</tr>
<tr>
<td></td>
<td>Note: Children are contagious until 24 hours after the fever resolves. Rashes generally occur after the infectious period has passed.</td>
<td></td>
</tr>
<tr>
<td>Shigellosis</td>
<td>EXCLUDE until there has been no diarrhoea or vomiting for 48 hours.</td>
<td>EXCLUSION MAY APPLY</td>
</tr>
<tr>
<td></td>
<td>Contact your Public Health Unit for specialist advice.</td>
<td>Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>Shingles (herpes zoster)</td>
<td>EXCLUDE all children until blisters have dried and crusted.</td>
<td>EXCLUSION MAY APPLY</td>
</tr>
<tr>
<td></td>
<td>EXCLUDE in adults if blisters cannot be covered.</td>
<td>Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td></td>
<td>NOT EXCLUDED in adults if blisters cannot be covered with a waterproof dressing until they have dried.</td>
<td></td>
</tr>
<tr>
<td>Streptococcal sore throat (including scarlet fever)</td>
<td>EXCLUDE until 24 hours of appropriate antibiotics have been completed.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Tuberculosis (TB)²</td>
<td>EXCLUDE until written medical clearance is received from the relevant Tuberculosis Control Unit.</td>
<td>NOT EXCLUDED</td>
</tr>
<tr>
<td>*Typhoid² and paratyphoid fever²</td>
<td>EXCLUDE until appropriate antibiotics have been completed.²</td>
<td>EXCLUSION MAY APPLY</td>
</tr>
<tr>
<td></td>
<td>Stool sample clearance will be required, contact your Public Health Unit for specialist advice.</td>
<td>Contact your Public Health Unit for specialist advice.</td>
</tr>
<tr>
<td>*Whooping cough (pertussis)³</td>
<td>EXCLUDE until 5 days after starting appropriate antibiotics or for 21 days from onset of cough AND confirmed that they are not infectious.¹</td>
<td>EXCLUSION MAY APPLY for contacts of an infected person.</td>
</tr>
<tr>
<td></td>
<td>Contact your Public Health Unit for specialist advice regarding exclusion of non-or incompletely vaccinated contacts.</td>
<td>Contact your Public Health Unit for specialist advice regarding exclusion of non-or incompletely vaccinated contacts.</td>
</tr>
<tr>
<td>Worms</td>
<td>EXCLUDE until diarrhoea has stopped for 24 hours and treatment has occurred.</td>
<td>NOT EXCLUDED</td>
</tr>
</tbody>
</table>

¹ This is an assistive tool, it is not intended to replace clinical assessment, management or judgment.

If you have any medical concerns, contact your healthcare provider or 13 HEALTH (13 4325 84) for further advice on the information within this poster, contact your nearest Public Health Unit via 13Health or at www.health.qld.gov.au/system-governance/contact-us/contact/public-health-units

Further information on recommendations:

Produced by the Communicable Diseases Branch (07) 3328 9753. Last revised September 2022. Printed copies may not be current. Always refer to the latest version found at www.health.qld.gov.au/public-health/schools/prevention

Use this QR Code to access a digital copy of this poster or visit www.health.qld.gov.au/public-health/schools/prevention
MEDICATION

If a child is ill enough to require medication, it is preferred that he/she remains at home. If however a child is on long term medication or is well enough to attend Child Care, prescribed medication will only be administered by Service staff if:

(1) The parent/guardian completes a Medication Request Form including instructions for the administration of the medication and any special requirements. Medication Request Forms are available at Reception or from your child’s Educator for this purpose. A copy is also included here.

(2) The medication is supplied in the original container clearly labelled by a pharmacist with:
- the name of the drug,
- the medical practitioner’s name,
- the child’s name,
- the expiry date,
- the dosage, and
- the time of administration.

Over-the-counter medications will not be administered by educators without written authorisation from the child’s parent/guardian in the form of a completed Medication Request Form. The medication must be in the original container, clearly labelled, and must include the dosage and expiry date. Out-of-date medication will not be administered.

Medication must be given directly to an educator and not left in the child’s bag or locker.

Parents of children attending the Service who may require an emergency response for health issues (e.g. anaphylactic reactions, allergies, asthma, diabetes, epilepsy or croup) are required to provide detailed medical information at the time of enrolment. All children enrolled with these medical conditions will have an Individual Action Plan (Health Record Card) prepared in consultation with the child’s parent and medical practitioner. This requirement ensures that all educators have adequate information to carry out their duty of care if an emergency arises with your child.

ANAPHYLAXIS

Parents of children with anaphylaxis are required to arrange a meeting with the Director to discuss a Risk Minimisation and Communication Plan before commencement. Parents are required to provide an Anaphylaxis Action Plan (with EpiPen) before their child commences at the Service.

ASTHMA

For a child suffering from asthma, an Asthma Action Plan from the child’s medical practitioner is to be provided to the Service. Parents of children with asthma are required to arrange a meeting with the Director to discuss a Risk Minimisation and Communication Plan before commencement.

Please notify the director of any changes to the information provided.

If children are receiving medication at home but not at the Centre, the Centre should be advised of the nature of the medication and its purpose and of any possible side effects it may have for the child.

At no time will medication provided for one child be administered to another, even though he or she may be a sibling of the child for whom the prescription was made.

Nebulisers will only be used at the Service if clear instructions are given regarding their use.

One dose of Panadol can be given as required in the event of illness if parents have signed for permission. If Panadol is administered while in care, parents will need to immediately arrange for the child’s collection from the Service.

The administration of ALL medication will be at the discretion of the Director.
This form must be completed for medication to be administered to your child while at the Early Learning Centre. It has been designed to ensure the safety of your child and to protect educators who do not have medical training.

PLEASE COMPLETE AND RETURN TO RECEPTION. If Reception is unattended, please hand to your child’s educator. For educators to assist in administering medication to your child, the following requirements must be met.

1) Medication must:
   * be supplied in the original container
   * be clearly labelled
   * have the dosage stated on the label
   * have the expiry date clearly visible
   * not be expired

2) Dosage requested must not exceed the recommended dosage on the label of the medication.

3) Due to the risk of allergic reactions, over-the-counter medication will not be administered by educators if the child has not previously taken it.

Child’s name: _____________________________________ Age: ________________
Condition: __________________________________ Date: ________________
Name of medication: ____________________________________________________
Dosage required: _____________________ Expiry date on medication: _____________
Time/s required: ______________________________________________________
Method of administration (e.g. oral): _________________________________________
Day and time medication was last administered: _________________________________
Has the child had this medication previously? ___________________________________
Does the medication require refrigeration? _____________________________________
Is there any additional information? ____________________________________________
(e.g. monitoring the child after medication is taken; restrictions on participation in activities; side effects)

Parent/Guardian requesting the administration of medication:
Name: ___________________________________ Contact No: ____________________
Relationship to the child: ___________________________________________________
I hereby request the administration of medication as instructed above.
Signature: ___________________________ Date: __________________

This form must be completed for medication to be administered to your child while at the Early Learning Centre. It has been designed to ensure the safety of your child and to protect educators who do not have medical training.

PLEASE COMPLETE AND RETURN TO RECEPTION. If Reception is unattended, please hand to your child’s educator. For educators to assist in administering medication to your child, the following requirements must be met.

1) Medication must:
   * be supplied in the original container
   * be clearly labelled
   * have the dosage stated on the label
   * have the expiry date clearly visible
   * not be expired

2) Dosage requested must not exceed the recommended dosage on the label of the medication.

3) Due to the risk of allergic reactions, over-the-counter medication will not be administered by educators if the child has not previously taken it.

Child’s name: _____________________________________ Age: ________________
Condition: __________________________________ Date: ________________
Name of medication: ____________________________________________________
Dosage required: _____________________ Expiry date on medication: _____________
Time/s required: ______________________________________________________
Method of administration (e.g. oral): _________________________________________
Day and time medication was last administered: _________________________________
Has the child had this medication previously? ___________________________________
Does the medication require refrigeration? _____________________________________
Is there any additional information? ____________________________________________
(e.g. monitoring the child after medication is taken; restrictions on participation in activities; side effects)

Parent/Guardian requesting the administration of medication:
Name: ___________________________________ Contact No: ____________________
Relationship to the child: ___________________________________________________
I hereby request the administration of medication as instructed above.
Signature: ___________________________ Date: __________________
IMMUNISATION

Childhood Vaccinations

The cheapest most reliable method of preventing some infections is immunisation. Immunisation protects the person who has been immunised, children who are too young to be vaccinated, and people who have been vaccinated but did not respond to the vaccine. The principle of immunisation is simple: it gives the body a memory of infection without the risk of natural infection.

Parents at this Centre will be asked to show documentation of their child’s immunisation status at enrolment. All children attending Mueller College Early Learning Centre are required to be up to date with immunisations in accordance with the Government requirements to be eligible for Child Care Subsidy. Original immunisation documents are required to be sighted by Child Care Office staff and copies are kept on file.

Please note:

Any unimmunised children will be excluded from care during outbreaks of specific immunisation preventable diseases such as measles and whooping cough, even if they are well. Please notify us at Reception each time your child’s immunisation has been updated. Children whose immunisation records are not up-to-date will also be treated as unimmunised in the event of an outbreak.

A vaccination schedule is displayed in the foyer of the Early Learning Centre along with Health Department leaflets on immunisation. Educators are encouraged to be vaccinated and the Licensees subsidise the cost of some vaccinations to encourage staff to comply. Please refer to Policies and Guidelines for further information.

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**Immunisation Schedule Queensland**

**CHILDREN**

**July 2020**

**Before vaccinating:**
- **IMPORTANT:** Children diagnosed with medical risk factors for invasive meningococcal disease are funded to receive multiple doses of MenB (Meningococcal B) vaccine. The number and timing of doses is dependent on the age and diagnosis. Refer to the Meningococcal chapter of the Handbook for number and timing of doses.

**Legend**
- **Reconstitute**
- **SC** Subcutaneous
- **IM** Intramuscular

**IMPORTANT NOTES**
- **Note applies to all children.**
- **Note applies to Aboriginal and Torres Strait Islander children.**
- **Note applies to children born with medical risk factors.**

**DISEASE**

- Hepatitis B
- Tuberculosis
- DTPa-hib-IPV-Hib
- Polio
- Rota
- Hepatitis A
- Measles-mumps-rubella
- Meningococcal ACWY
- Neisseria
- Measles-mumps-rubella-vaccines
- Acynomyxoplasma influenzae type b
- DTPa
- Hepatitis A
- DTPa-IPV
- Hepatitis A
- Pneumococcal

**VACCINE BRAND**

- Hib-Vax2 pediatric
- OR:
- Engerix-B pediatric
- Infarix
- Heptavax-V
- PRP-T (ProPegas) pediatric
- Infarix HP pediatric
- Infarix IPV pediatric
- Infarix VR pediatric
- Pediatric

**ADDITIONAL VACCINES**

- OR:
- Engerix-B pediatric
- Infarix
- Infarix IPV pediatric
- Infarix VR pediatric
- Pediatric

**METHOD & SITE**

- IM / Al. 1st shot
- Intradermal / Deltoid
- Oral / 8 months
- IM / Al. 3rd shot
- IM / Al. 3rd shot
- IM / Al. 2nd shot
- IM / Al. 2nd shot
- IM / Al. 2nd shot
- Oral / 8 months
- Oral / 8 months
- IM / Al. 2nd shot
- IM / Al. 2nd shot
- IM / Al. 2nd shot
- IM / Al. 2nd shot
- IM / Al. 2nd shot

**additional information**

- Infarix is a combination vaccine which contains tetanus and diphtheria toxoids, hepatitis B antigen, and diphtheria and tetanus antitoxins. It is indicated for the prevention of diphtheria, tetanus, and hepatitis B infections.

- Heptavax-V is a combination vaccine which contains hepatitis A and B antigens. It is indicated for the prevention of hepatitis A and B infections.

- ProPegas is a combination vaccine which contains tetanus and diphtheria toxoids, hepatitis B antigen, and diphtheria and tetanus antitoxins. It is indicated for the prevention of diphtheria, tetanus, and hepatitis B infections.

- Infarix HP is a combination vaccine which contains hepatitis A and B antigens. It is indicated for the prevention of hepatitis A and B infections.

- Infarix IPV is a combination vaccine which contains hepatitis A and B antigens and polio antigens. It is indicated for the prevention of hepatitis A and B infections and polio infections.

- Infant is a combination vaccine which contains hepatitis A and B antigens and polio antigens. It is indicated for the prevention of hepatitis A and B infections and polio infections.

- Pediatric is a combination vaccine which contains hepatitis A and B antigens and polio antigens. It is indicated for the prevention of hepatitis A and B infections and polio infections.

**Health Department**

## Immunisation Schedule Queensland

### ADOLESCENTS & ADULTS

**October 2021**

**Updated October 2021**

### Before vaccinating:
- ALWAYS review the Australian Immunisation Register (AIR) to check the patient’s previous immunisation history
- Check the online Australian Immunisation Handbook (the Handbook) or download the Handbook app for information about catch-up vaccination, timing of vaccination for special risk groups at immunisationhandbook.health.gov.au/
- Check the correct vaccine dose number has been recorded and report all vaccinations to AIR as soon as possible.

### AGE

<table>
<thead>
<tr>
<th>AGE</th>
<th>DISEASE</th>
<th>VACCINE BRAND</th>
<th>ALL PEOPLE (Aboriginal, Torres Strait Islander people, and People with medical risk factors)</th>
<th>Additional vaccines for: Aboriginal and Torres Strait Islander people</th>
<th>People with medical risk factors</th>
<th>METHOD &amp; SITE</th>
<th>IMPORTANT NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 7 students 1 (or age equivalent)</td>
<td>Human papillomavirus (HPV)</td>
<td>Gardasil 9</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>IM / Deltoid</td>
<td>2 doses given at 0 and 6 months</td>
</tr>
<tr>
<td></td>
<td>Diphtheria-tetanus-pertussis</td>
<td>Boostrix</td>
<td>●</td>
<td>●</td>
<td>1 dose</td>
<td>IM / Deltoid</td>
<td>Immunocompromised and 15 to 19 year old adolescents require 3 doses given at 0, 2 and 6 months</td>
</tr>
<tr>
<td>Year 10 students 1 (or age equivalent)</td>
<td>Meningococcal ACWY</td>
<td>Nimenrix</td>
<td>●</td>
<td>●</td>
<td></td>
<td>IM / Deltoid</td>
<td>1 dose for each dose recommended for each pregnancy. Administer between 20–32 weeks gestation for optimal protection</td>
</tr>
<tr>
<td>Pregnant women</td>
<td>Diphtheria-tetanus-pertussis</td>
<td>Adecel OR Boostrix</td>
<td>●</td>
<td>●</td>
<td>1 dose</td>
<td>IM Deltoid</td>
<td>Additional dose 2–12 months later</td>
</tr>
<tr>
<td>Born during or since 1996</td>
<td>Measles-mumps-rubella</td>
<td>Priorix OR MMR</td>
<td>●</td>
<td>●</td>
<td>2 doses. Minimum interval between doses is 4 weeks</td>
<td>IM or SC / Deltoid</td>
<td></td>
</tr>
<tr>
<td>≥50 years</td>
<td>Pneumococcal</td>
<td>Prevenar 13</td>
<td>▲</td>
<td>▲</td>
<td></td>
<td>IM / Deltoid</td>
<td>Aboriginal and Torres Strait Islander people only.  Depends on previous pneumococcal vaccinations—Check AIR</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pneumovax 23 3</td>
<td>▲</td>
<td>▲</td>
<td></td>
<td>IM or SC / Deltoid</td>
<td>Dose of Prevenar 13 at ≥50 years of age with a dose of Pneumovax 23, 2–12 months after that and then a second dose of Pneumovax 23 at least 5 years after the previous dose (see Handbook)</td>
</tr>
<tr>
<td></td>
<td>Pneumococcal</td>
<td>Pneumovax 23 4</td>
<td>▲</td>
<td>▲</td>
<td></td>
<td>IM or SC / Deltoid</td>
<td>Not required if fully vaccinated previously against pneumococcal—Check AIR</td>
</tr>
<tr>
<td>≥70 years</td>
<td>Varicella zoster (shingles)</td>
<td>Zostavax</td>
<td>●</td>
<td>●</td>
<td>1 dose</td>
<td>SC / Deltoid</td>
<td>1 dose. Catch-up available for ages 71–79 years (until 31 Oct 2023). Not to be used in people with compromised immune function (see Handbook).</td>
</tr>
</tbody>
</table>

### People diagnosed with medical risk factors:

| At diagnosis                      | Prevenar 13 | ● | IM / Deltoid | ● | Children ≥2 months of age, adolescents and adults of any age diagnosed with medical risk factors for invasive pneumococcal disease (see Handbook) |
| Additional dose 3–12 months after previous dose or at ≥4 years of age, whichever is later | Pneumovax 23 3 | ● | IM or SC / Deltoid | ● | Dose of Prevenar 13 at diagnosis |
| Second dose 5–6 years later       | Pneumovax 23 4 | ● | IM or SC / Deltoid | ● | Dose of Pneumovax 23, 2–12 months after the diagnosis dose or at ≥4 years of age, whichever is later |
|                                   | Nimenrix | ● | IM / Deltoid | ● | Medical risk factors for invasive meningococcal disease |
| Meningococcal ACWY               | Bexsero | ● | IM / Deltoid | ● | Multiple doses of Meningococcal ACWY and Meningococcal B vaccine are recommended dependent on age of diagnosis and ongoing risk of disease |

### Seasonal influenza vaccination

Eligible groups (refer to the Handbook for further information):
- All children aged 6 months to less than 5 years
- All Aboriginal and Torres Strait Islander people aged 6 months and older
- All pregnant women at any stage of pregnancy
- Individuals with medical conditions predisposing them to severe influenza

Note: Refugees and other humanitarian entrants aged 20 years and older with no documented history of vaccination are eligible for the following vaccinations: diphtheria-tetanus-pertussis, choleunovax, poliovaccinets, measles-mumps-rubella, hepatitis B, chickenpox, human papillomavirus, meningococcal ACWY

Note: Maximum 2 lifetime doses of Pneumovax 23

For number and timing of doses:


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1 Catch-up is available for adolescents up to 19 years of age for diphtheria-tetanus-pertussis, poliovaccinets, measles-mumps-rubella, hepatitis B, chickenpox, human papillomavirus, meningococcal ACWY

2 Maximum 2 lifetime doses of Pneumovax 23
To find out more about Immunisation for you and your child call 13 HEALTH (13 43 25 84).

INJURIES
When sudden illness or injury occurs, the child’s parent/s will be contacted. When this is not possible, the authorised nominees will be contacted. Should this also not be possible, the Director or person authorised by the parents has the discretion to seek appropriate medical attention at the parents’ expense.

SUN & INSECT PROTECTION
The Centre aims to reduce the harmful effects of exposure to the sun for both children and educators, by ensuring sun protection measures are put in place as a high priority and are consistently practised. Exposure to the sun’s ultraviolet radiation (UVR) in childhood is a major risk factor for all forms of skin cancer. Reducing children’s exposure to UVR is considered to be the single most effective strategy for reducing future rates of skin cancer in Australia.

Young children’s skin is very sensitive and susceptible to damage and sunburn from ultraviolet radiation from the sun. It is important that the use of the following sun safe behaviours start in early childhood:
1. seeking shade when possible
2. wearing sun safe clothing
3. wearing a broad brimmed hat
4. wearing sun glasses to protect eyes
5. applying SPF 30+ broad-spectrum sunscreen 20 minutes before going outside

In Queensland the UV index is 3 or more every day of the year. A UV index of 3 or above indicates the need for sun protection. In Brisbane in summer at midday, 8 minutes of unprotected sun exposure is enough to induce skin damage that increases the risk of skin cancer. In summer before 10am and after 3pm when UVR is less intense, damage can occur in as little as 12 minutes. Even in winter at midday, skin damage can occur in less than 30 minutes.

Sunscreen
Applying sunscreen is an important measure to protect children from the harmful effects of the sun. As recommended by the Cancer Council, a broad-spectrum, water-resistant and SPF 30+ sunscreen is used at the Centre.

Sunscreen and Babies
The Australasian College of Dermatologists recommends the use of sunscreen “at any age when there is unavoidable exposure to the sun” and states sunscreen is safe to use on babies. However it is best to keep babies under 12 months out of direct sun during the sun protection times, or well protected using other forms of sun protection.

Vitamin D and Sun Exposure
The sun’s ultraviolet (UV) radiation is both the major cause of skin cancer and the best natural source of Vitamin D. In Australia we need to balance the risk of skin cancer from too much sun exposure with maintaining Vitamin D levels. The Cancer Council states that “Sunscreen use during the sun protection times should not put people at risk of vitamin D deficiency”.
As the UV levels in Brisbane are 3 and above all year round, sun protection is needed at all times when children are playing outside. The Cancer Council says that short incidental exposure to the sun is the best way to produce Vitamin D.
Measures to Ensure Sun Safety at the Centre

Educators:
* A supportive environment has been provided with large shady verandas and various shade covers over outdoor areas and play equipment.
* Educators avoid outside time with the children in the middle of the day.
* Educators are required to set an example for children and also wear hats outside.
* Unless indicated otherwise on the enrolment and agreement form, educators ensure that sunscreen is applied to children before outside play.
* Educators reapply sunscreen before a second outside play time.

Parents:
* Parents are encouraged to send their children in clothing that protects back, neck and shoulders from the sun. T-shirts or clothing with sleeves are best, as sleeveless or strappy clothing offers little protection.
* Broad brimmed or legionnaire style hats are recommended as the best protection for children’s faces, necks and ears.
* Children are required to wear hats outside all year round. Children without hats will be asked to play in the shade.
* We request that parents please apply sunscreen to their child prior to arriving or when arriving at the Centre.
* Should your child suffer from an allergy to the product used at the Centre, you may send along sunscreen for your child. It must be named and kept by educators, not in the child’s locker. Please only do this if really necessary as applying sunscreen from individual tubes is very time consuming.

For Your Information:
* Mosquitoes are also a problem at times and educators can apply repellent as needed. Unless indicated otherwise on the enrolment and agreement form, educators apply insect repellent on children as needed. Please notify educators if your child is allergic to any products.
* There is a free SunSmart app available for iPhone, iPad and Android. The app lets you know when you do and don’t need sun protection, making it easier than ever to be smart about your sun exposure all year. Features include sun protection times based on UV ratings, 7 day weather forecast, alert function, Vitamin D tracker and sunscreen calculator.
* Daily UV index forecasts for most Queensland cities and towns can be found at www.bom.gov.au/uv/index.shtml

TOYS
Please do not allow your child to bring toys from home to the Centre. There is the possibility that toys will be lost or broken which is quite upsetting for the child. Children have a wide range of resources to play with while they are at the Centre.

FOOD
Morning tea, lunch and afternoon tea are provided at the Centre. Children eat together in their rooms at meal times in a safe, clean and relaxed environment. It is our aim to make meal times a positive learning experience where children are encouraged to develop healthy eating habits. Weekly menus can be viewed in the foyer. Menus for 6-9 months and 9-12 months are on the upper clipboard. Menus for 12+ months are on the lower clipboard.

Drinks
We have made water our “drink of choice” at the Centre. Children acquire many of their habits through peer pressure or peer modelling. If all children drink water then many children who have not previously done so soon acquire the habit. In fact, parents have commented in past years that they value this practice. Water will be provided at mealtimes and is freely available at other times from the bubblers and water jugs.
FOOD (continued)

We request that parents do not send drink bottles to the Centre as some nasty mouth injuries can occur if children are accidentally bumped as they drink. All drinks will be from cups or from the bubblers. Parents of toddlers can discuss their child’s individual needs with the Educator.

Breakfast

Please supply the food and drink items needed if your child requires breakfast at the Centre. To comply with our food licence, any food supplied must be in the original packaging inside a sealed container.

Breakfast is a very important meal for children. Eating breakfast helps to replenish their energy stores for the day ahead. Children who regularly eat breakfast tend to have a lower body mass index (BMI), and are less likely to be overweight compared with children who don’t eat breakfast regularly.

A healthy breakfast contains essential nutrients including protein, calcium and fibre as well as energy from low GI (glycaemic index) carbohydrates.

If choosing breakfast cereals for your child, keep in mind that many of them contain too much sugar, salt or both to be healthy choices for everyday eating. Choose breakfast cereals that have had minimal processing and are low GI. Good choices include oats, wholegrain, bran or puffed wheat cereals. Look for cereals that have less than 2.5g of saturated fat per 100g and less than 400mg of sodium per 100g. Also look for cereals with no more than 20g of sugar per 100g or for cereal containing dried fruit, no more than 25g of sugar per 100g.

Some healthy breakfast choices for busy, growing children include: yoghurt with fruit; a fruit smoothie; multigrain toast with baked beans; whole-wheat or wholegrain cereal with sliced fruit such as banana or kiwi fruit; porridge made with oats. Please do not send foods containing nuts or nut products.

If you wish to send breakfast items to be kept at the centre, they must be stored in sealed containers clearly labelled with the child’s name and expiry date. The original packaging must also be included within the container. For any home-made items, please include a full list of ingredients.

Food for Infants

Food needs for infants will be individually planned for, based on discussions with parents. Please provide important information to educators about your child’s food habits, patterns and concerns at home. Educators will record when babies require bottles, feeds, rest times, etc.

Bottle Feeding (babies)

Educators will support and co-operate with mothers as much as possible to allow them to persevere with breast feeding their babies. Frozen breast milk can be sent in express bags if desired. Please write the date and time of expressing on the bags as well as the child’s name. Frozen breast milk can be stored for up to three months.

Educators will listen carefully to parents and attempt to follow the feeding patterns they have developed with their infants. Details of times and amounts of feeds will be recorded on Parent Feedback Sheets.

Infant Formula:

Educators will make up bottles during the day. Please send sufficient pre-measured formula for the day (allowing for possible refusals) along with pre-measured bottles of cooled boiled water. Please ensure the bottles have secure lids for hygiene purposes. If you wish to bring formula already prepared, please ensure the bottles are made up fresh each morning. All bottles and containers must be clearly named.

For resources and information, please see the following:

Australian Dietary Guidelines The Australian Dietary Guidelines give advice on eating for health and wellbeing. They’re called dietary guidelines because it’s your usual diet that influences your health. Based on the latest scientific evidence, they describe the best approach to eating for a long and healthy life. www.eatforhealth.gov.au/guidelines

Nutrition Australia is an independent, member organisation that aims to promote the health and well being of all Australians. Resource and facts sheets may be found at www.nutritionaustralia.org.

Raising Children Network is a website funded under the Australian Government’s Family Support Program. A wide range of fact sheets and articles are available at www.raisingchildren.net.au.

The Australian Government Department of Health provides a Health Information Directory where you are able to access online health and well being information. Fact sheets and other resources on this site are constantly expanded and regularly reviewed. See www.health.gov.au.
PHYSICAL ACTIVITY

The National Physical Activity Guidelines for Australians outline the minimum levels of physical activity required to gain a health benefit and ways to incorporate incidental physical activity into everyday life.

Great Reasons to be Active

Being active is good for you in so many ways. It can provide a huge range of fun experiences, make you feel good, improve your health, and is a great way to relax and enjoy the company of your friends. Regular physical activity can:

- help prevent heart disease, stroke and high blood pressure;
- reduce the risk of developing type II diabetes and some cancers;
- help build and maintain healthy bones, muscles and joints reducing the risk of injury; and
- promote psychological well-being.

Physical Activity Recommendations for Children 0-5 years

For infants (birth to one year) physical activity – particularly supervised floor-based play in safe environments – should be encouraged from birth. Before infants begin to crawl, encourage them to be physically active by reaching and grasping, pulling and pushing, moving their head, body and limbs during daily routines, and during supervised floor play, including tummy time. Once infants are mobile, encourage them to be as active as possible in a safe, supervised and nurturing play environment.

Toddlers (1 to 3 years) & Pre-schoolers (3 to 5 years) should be physically active every day for at least three hours, spread throughout the day.

Young children don’t need to do their three hours of physical activity all at once. It can be accumulated throughout the day and can include light activity like standing up, moving around and playing as well as more vigorous activity like running and jumping. Active play is the best way for young children to be physically active.

Children younger than 2 years of age should not spend any time watching television or using other electronic media (DVDs, computer and other electronic games) and for children 2 to 5 years of age these activities should be limited to less than one hour per day.

Television, DVDs and playing computer games usually involve sitting for long periods – time which could be spent playing active games or interacting with others.

Infants, toddlers and pre-schoolers should not be sedentary, restrained, or kept inactive, for more than one hour at a time, with the exception of sleeping.

All children need some “down time” but they are not naturally inactive for long periods of time. Sitting in strollers, highchairs and car seats (restrained) for long periods isn’t good for children’s health and development. Try to take regular breaks on long car trips and walk or pedal for short trips when you can.
CLOTHING

The Centre recognises that young children need adult assistance in meeting their needs for safe and comfortable clothing. Educators will consult with parents to cater for any individual needs and requirements with regard to their children’s clothes. Please send your children in comfortable clothing which is appropriate for the climatic conditions. Educators will monitor children’s clothing needs throughout the day and encourage the putting on or removal of extra clothing (e.g. jumpers) as appropriate.

In support of our Sun Protection Policy and the Cancer Council of Australia, all children are asked to wear hats when playing outside. It is recommended that children wear broad brimmed or legionnaire style hats as they provide the best protection for children’s faces, necks and ears. Hats without chin straps are requested as the straps can be a choking hazard. To protect backs and shoulders from the sun, it is also recommended that children do not wear strappy, sleeveless, or backless clothing. Parents are asked to send a COMPLETE SET of spare clothing for their child each day in case of the need to change, arising from such things as toileting accidents or getting wet during water play (e.g. shirt, shorts and undies or dress and undies). Please make sure they are in your child’s bag each day as children sometimes become distressed if they cannot wear their own clothes. Please do not allow your child to bring costume jewellery to the Centre as it is likely to get broken or lost and may pose a choking hazard for young children.

Safe, comfortable footwear that fits well is essential. Shoes that give little protection or support or that have raised heels or soles can cause accidents. For safety reasons, if children are wearing sandals, clogs or thongs they will be required to remove them before climbing on playground equipment. It is our preference that children remove shoes before going on the play equipment, however, if you require them to leave their shoes on, joggers or shoes with a good tread are required for climbing.

Soiled clothing items will be placed in a sealed plastic bag, named, and placed in a container in each room. Parents are notified of the need to collect soiled items via a collection tag being stapled to the child’s bag.

Please ensure all items of clothing are named, including socks, undies and spare clothes.

Additional Clothing Needs

Babies: Nappies are provided by the Centre. Please send two or more changes of clothes per day. Nappy rash cream is provided by the Centre and can be used provided you have ticked the appropriate box on the permission form. If teething gel is required at any time, please supply this along with a completed Medication Request Form.

Toilet Trainers: Please send 4 pairs of training pants and a pull-up for rest time if preferred.

Older Children: Please send your child in casual, easily laundered clothing. Clothes that will withstand physical activity, sand, dirt, and paint and which can be managed by the child him/herself are the most appropriate.

SLEEP AND REST

Children will be given adequate time throughout the day to have rest or sleep periods as required. Educators will consult with parents to determine the individual requirements for rest time, settling children before and during rest time, and for understanding “tired cues” to judge when sleep is required. There will be a quiet place available at all times where infants can sleep. Older children who may not require a sleep will be encouraged to rest quietly during a short rest period. They will be able to use the rest period as a time to relax and engage in quiet activities. Cots will be used for infants. Waterproof stackable beds are available for all other children at rest time.

We follow safe sleeping practices which include sleeping babies on their backs from birth, ensuring their faces and heads are uncovered and free from bedding, pillows and toys, and the provision of a safe sleeping environment. Please be aware that amber bead necklaces and bracelets will be removed during rest time as they pose a choking hazard.

Bed Linen for Rest Time

To prevent the spread of infectious diseases, each child will require a FITTED cot size sheet; a flat sheet; a bunny rug for cooler weather; a pillow if required which must be no larger than cushion size with a removable cover; and a sheet bag large enough to contain all bedding. Please make sure everything is named. Bedding must be taken home weekly for laundering. Bed linen must be kept in a separate cloth bag whilst in the Centre to reduce the risk of cross infection. Please place your child’s name on the outside of the sheet bag. For children in the Purple Room, please send bedding in a pillow case that is named on the outside.
LOST PROPERTY
Please make sure ALL your child’s property is named including socks, undies and shoes! If your child’s clothes are named, they can easily be returned to their locker. Lost property which is unnamed may be found in the Lost Property Box near the front entrance. Unclaimed lost property is regularly donated to Life Line.

BIRTHDAYS
These are special occasions and we encourage parents to send along cupcakes or an easy to cut cake on the day nearest their child’s birthday so that we can help them celebrate.

GRIEVANCE PROCEDURE
The Centre fosters positive relations between all parents and educators. Every parent has the right to a positive and sympathetic response to his/her concerns. Solutions are sought to resolve all disputes, issues or concerns in a fair, prompt and positive manner.

In all matters concerning the welfare and development of the child, the parent should first consult with the child’s Educator. If the matter cannot be settled please refer the matter to the Director. In all matters concerning the operation of the Centre, parents should take their concerns straight to the Director. The Director will ensure that accurate information is available to you concerning the matter. It is recommended that parents avoid discussions on social media in relation to concerns as this may lead to misinformation.

If, after discussion with the Director, matters are still not resolved, concerns should be referred to the Management Committee.

COMMUNITY INFORMATION
More information about childcare may be obtained from the Department of Education and Training Early Childhood Education and Care.

The Mueller College Early Learning Centre endeavours to engage with the local and wider community in a mutually beneficial and supportive relationship, in an effort to support children’s lifelong learning and recreational enrichment. Various groups from the community will be periodically invited to contribute to the program. This may include interactive programs, educational programs, sporting, music and second language programs. Access to inclusion and support assistance from other relevant professionals is facilitated as required.

The Centre is also committed to making available information about community groups and activities for both children and families. Information will be available through notices, newsletters, foyer notice board, leaflets and pamphlets available in the hall near Reception. Please discuss with the Director if you require any further information about specific community services available in the area.

The following services may be of assistance for parents and children:

- Parentline 1300 30 1300 (8am-10pm)
- Kids Help Line 1800 55 1800 (24 hrs)
- Early Childhood Education & Care 137 468 (13 QGOV)
- Women’s Infolink 1800 177 577
- Queensland Health 1343 2584 (13 HEALTH)
READY FOR CHILDCARE AND KINDY

EARLY MORNING DROP OFF PROCEDURE:

6.00am—7.10am
1. Sign your child in on the iPads at Reception or by using the QR code at Reception.
2. Drop your child off in the Purple Room.
   Take your child’s bag to their regular room and put the bag in the locker and the sheet bag in the basket.

7.15am—7.55am
1. Sign your child in on the iPads at Reception or by using the QR code at Reception.
2. If your child is under 3 years old, drop them off in the Purple, Red or Green Room. If your child is 3 years old or older, drop them off in the Green Room.
3. Place your child’s bag in their locker and the sheet bag in the sheet bag basket.

8.00am onwards
1. Sign your child in on the iPads at Reception or by using the QR code at Reception.
2. Take your child to their regular room. In the interests of assisting your child towards independence help them to place the bag in the appropriate locker and the sheet bag in the sheet bag basket.

LATE AFTERNOON PICK UP PROCEDURE:

Before 4.20pm
1. Collect your child from their regular room or playground.
2. Gather your child’s belongings and when you are ready to go, let the educators know that you are taking your child.
3. Sign your child out on the iPads at Reception or by using the QR code at Reception.

4.25pm—6.00pm (approx)
1. Collect your child from the Green Room / Playground or the Purple Room.
2. Gather your child’s belongings and when you are ready to go, let the educators know that you are taking your child.
3. Sign your child out on the iPads at Reception or by using the QR code at Reception.
WHAT TO BRING:

For kindergarten children—YELLOW ROOM & BLUE ROOM
* A named hat that protects the face, neck, and ears
* A full spare set of clothes—named
* A sheet bag with a fitted cot size sheet and a top sheet—all named
* A named school bag big enough to carry all the child’s belongings

For toddlers and children 2-3 years
* A named hat that protects the face, neck, and ears
* 2 full spare sets of clothes - named
* If toilet training, sufficient training pants (all named) for the day and spares for emergencies
* Bottles and dummies as required
* A sheet bag with a fitted cot size sheet and a top sheet—all named
* A named school bag big enough to carry all the child’s belongings

For babies
* A named hat that protects the face, neck, and ears
* Sufficient formula and bottles of cooled boiled water for the day, allowing for possible refusals, with appropriate instructions to be mixed by educators.
* If desired, frozen breast milk stored in express bags labelled with the date and time of expressing and the child’s name
* 2 or more changes of clothes—named
* Dummies as required
* A named pillowcase containing a fitted cot size sheet and a top sheet—all named
* A named school bag big enough to carry all the child’s belongings

We look forward to working with you and your child in the Centre.
May God bless you and your family.