

**National Standards for Outside School Hours Care**  
Endorsed and Produced by the Children's Services  
Sub-Committee

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# NATIONAL STANDARDS FOR OUTSIDE SCHOOL HOURS CARE

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## National Standards for Outside School Hours Care

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### Introduction

An Outside School Hours Care (OSHC) service offers a caring and safe environment for the provision of a child care service for children between 5—12 years of age. It aims to meet the broad range of a child's social, emotional, recreational, physical, intellectual and creative outside school hours needs.

OSHC services provide care to school age children primarily while their parents are working, training or seeking employment. Care may be provided before school and after school hours, during the day on school designated pupil-free days, during school vacations or any combination of these times.

The provision of outside school hours care services has increased significantly over the past five years. The majority of services, which receive funding from the Federal and/or State/Territory governments, are auspiced by a sponsor and managed by a representative committee of the user group. The Management Committees usually comprise representatives from the sponsor body and parent group.

To date OSHC services across Australia have operated within a variable framework, ranging from statutory regulations, guidelines established by grant agreements and/or conditions of subsidy to voluntary codes of practice.

These National Standards are the first step towards achieving Australia-wide consistency in the provision of Outside School Hours Care. They represent baseline standards for the provision of child care for primary school age children across all States and Territories. The implementation of the National Standards will improve the capacity of the community to protect the health, wellbeing and rights of all children attending OSHC services in response to industry demand, and consistent with Australia's ratification of the United Nations Declaration of the Rights of the Child, 1959 and the United Nations Convention on the Rights of the Child, September 1990.

## 1. Facilities

The following areas are considered:

- 1.1 space requirements;
- 1.2 food preparation facilities;
- 1.3 toilets and hand basins; and
- 1.4 storage facilities.

### 1.1 Space requirements

School age children in care have a need to move about and engage in a number of activities. OSHC services should provide areas for children which are safe, which have the space to allow flexibility in programming and to allow the children a choice of large or small group or individual activities. After a day of classroom participation, many children will feel the need for boisterous activity and quieter sessions will also be required. Adequate space provisions are required to avoid overcrowding and to decrease the risk of accidents associated with cramped confined spaces. These spaces should be available to allow school age children to be physically and psychologically comfortable, to safely store their possessions and display their creativity. To ensure adequate supervision of the children at all times, the indoor space should, where possible, open out onto the outdoor space, and its use should take into account the climatic conditions and the value of shaded areas and verandahs. Access from the indoor venue to the outdoor space should be safe and easy. OSHC services should also provide access for children with disabilities.

## *Standard*

- 1.1.1 The indoor space requirement shall be 3.25 sq metres of unencumbered play space per child. When calculating this space such items as any passageway or thoroughfare, kitchen, toilet or shower area located in the building or any other facility such as cupboards are to be excluded.*
- 1.1.2 The indoor space requirement may be less if it can be demonstrated that the 3.25 sq metres space requirement cannot be met, and the approving authority can be satisfied that the reduced space requirement will not impact negatively on children using the area.*
- 1.1.3 The outdoor space requirement shall be 12 sq metres of usable play space per child.*
- 1.1.4 The outdoor space requirement may be less if it is demonstrated that a lesser requirement will not impact negatively on children using the area and where alternative sites are not available to meet the needs of the community.*

## 1.2 Food preparation facilities

The provision of nutritious snacks is an integral part of a quality service (with the possible exception of some before school services where breakfast is provided). Cooking as an activity also features largely in most programs, teaching children about basic nutrition.

For health and safety reasons, where food is prepared and stored, it must be able to be kept free from contamination and to be stored, prepared and handled hygienically.

## *Standard*

- 1.2.1 Safe, hygienic facilities for the preparation, storage, heating and cooking of food for children, including a sink, refrigerator and hot and cold running water supply shall be accessible to staff. These facilities shall be in a room where the program usually runs or accessible to the service.*

Child care services must comply with State and local authority legislation. Some specific health regulations may require additional standards.

## 1.3 Toilets and hand basins

OSHC children and staff should have safe access to toilets (including access for children with disabilities) and hand-washing facilities.

It is desirable to provide separate toilets for girls and boys.

### *Standard*

**1.3.1** *Services shall provide:*

- a** *1 toilet for every 15 children or part thereof;*
- b** *hand washing facilities; and*
- c** *soap and hand drying equipment.*

## 1.4 Storage facilities

OSHC services usually share the space they use with other groups. Many services are required to pack all, or most of, their equipment away at the end of each day. Provision of adequate storage is necessary to ensure that equipment can be maintained in good repair. Some of the storage should be accessible by the children to allow them independent access to equipment. For health and safety reasons, however, other storage intended for the first aid kit and poisonous or dangerous substances or equipment should be accessible to staff but not to children. A lockable facility is necessary for the safe and confidential storage of all relevant OSHC records. Temporary storage of kitchen refuse and garbage is also required.

### *Standard*

**1.4.1** *The service shall have secure storage facilities for indoor and outdoor equipment.*

**1.4.2** *The service shall have storage facilities which are secure and inaccessible to children for cleaning materials, disinfectants, flammable, poisonous and other dangerous substances, tools, toiletries, first aid equipment, medication and program records.*

## 2. Health and safety

The following areas are considered:

- 2.1 *telephone facilities;*
- 2.2 *pools;*
- 2.3 *infectious diseases;*
- 2.4 *illness and accidents;*
- 2.5 *first aid facilities and qualifications;*
- 2.6 *medication;*
- 2.7 *food;*
- 2.8 *drinking water;*
- 2.9 *building cleanliness, maintenance and repairs;*
- 2.10 *health of staff and children;*
- 2.11 *animals;*
- 2.12 *emergency procedures / fire drills; and*
- 2.13 *transport.*

## 2.1 Telephone facilities

A telephone is essential both to the ordinary operating of an OSHC service and to the calling of medical or other assistance and to the calling of parents/guardians/approved persons during emergencies.

### *Standard*

- 2.1.1 *The OSHC service shall have an operating telephone which is readily accessible to staff at all times and, where the service is located in a remote area, appropriate alternatives such as an emergency 2-way UHF channel shall be used.*

## 2.2 Pools

Where children may gain access to swimming pools, Australian standards in relation to fencing around pools should apply. When paddling pools are used, they should be emptied after each use as bacteria and algae may otherwise grow in the water and pose a health risk to children.

## *Standard*

- 2.2.1 *All paddling and wading pools shall be emptied after use and stored to prevent the collection of water.*
- 2.2.2 *Isolation swimming pool fencing and gates which comply with ASA Standards 1926 and 2820 must be provided. Effective barriers should be in place to prevent access by any child in care to any area that opens directly into a fenced pool area.*
- 2.2.3 *Water containers must be safely covered or inaccessible to children.*
- 2.2.4 *Pool filters must be inaccessible to children in care.*

**Note:** Child care services must comply with State and Local Authority legislation.

## 2.3 Infectious diseases

In order to protect the health of both children and staff, it is necessary to minimise the risk of cross-infection by infectious diseases. Schools in many States recognise the dangers some infectious diseases may pose to large groups of children by excluding children with particular infectious diseases for set periods. Similar practices are ensured in child care for children aged 0-6 through state regulation.

However, any practices dealing with infectious diseases must respect the rights of individual privacy. They should also be in keeping with Commonwealth or State legislation which deals with particular diseases.

To minimise the risk of cross-infection between staff and children, hygiene practices and procedures consistent with advice from relevant state/territory health authorities should be observed at all times. The OSHC service should ensure that staff have access to up-to-date information from health authorities.

## *Standard*

- 2.3.1 *The OSHC service shall ensure that it has a policy on infectious diseases consistent with Commonwealth and State legislation which outlines the exclusion practices for children who have an infectious disease or who have been exposed to an infectious disease and shall ensure that the policy is practised.*

- 2.3.2 *Where information is provided about the occurrence in a service of an infectious disease, that information shall be made available to the parents/guardians/approved persons of children in the service in a manner that is not prejudicial to the rights of individual staff or children and which does not infringe commonwealth or state legislation.*
- 2.3.3 *The OSHC service shall as part of its policy ensure that the appropriate health and hygiene practices are observed, and that staff have access to current information provided by relevant authorities to minimise the health risks to children and staff.*

## 2.4 Illness and accidents

In the event of a child suffering an illness or injury while attending an OSHC service, every attempt should be made to ensure the sound management of the injury to prevent an exacerbation of the situation. The parent/guardian/approved person of the child or the child's emergency contact person should be informed of the situation wherever possible and this should happen immediately if the injury is serious—ie. if immediate medical aid or hospitalisation is required.

## *Standard*

- 2.4.1** *The service must ensure that if a child has an accident or becomes ill while attending the OSHC service:*
- a the child is kept under adult supervision until the child recovers or until the child's parents/guardian/approved person or other authorised person takes charge of the child;*
  - b if the child requires immediate medical aid in the service, all reasonable attempts are taken to secure that attention and to notify the parent/guardian/approved person of the accident or illness;*
  - c in the case of medication being required in an emergency without the prior consent of the parent/guardian/approved person, every attempt is made to secure that consent or the consent from a registered medical practitioner; and*
  - d in the case of serious injury requiring hospitalisation, procedures for the transportation of the child to hospital are implemented.*

## **2.5 First aid facilities and qualifications**

In the event of an accident or a child's falling ill, first aid equipment and expertise must be available.

### *Standard*

- 2.5.1** *A first aid kit must be maintained in effective order on the premises in a position that is inaccessible to children but readily accessible to Child Care Workers in an emergency.*
- 2.5.2** *One staff member present shall be currently qualified in first aid.*

## **2.6 Medication**

In many shorter services, the administering of medication may seldom occur. It is, however, more frequent in long day services on pupil free days and during vacations.

Again, every attempt should be made to ensure the sound management of the situation. Good practice with regards to the administration of medication is essential to ensure that only appropriate doses of correct medicines are administered. In order to ensure that the interests of staff, children and parents/guardians/approved persons are not compromised, medication should be administered only with explicit permission from parent/guardian/approved person or, in the case of an emergency, with permission of a medical practitioner.

In the case of after school services, staff should be aware that children may be carrying medication in their school bags. Medication should be stored in a secure place and administered only with the written consent of the child's parent/guardian/approved person.

## *Standard*

- 2.6.1** *Medication shall not be administered to a child unless the child's parent/guardian/approved person has given written consent authorising administration.*
- 2.6.2** *In an emergency when a child's parents/guardians/approved persons are unable to be contacted, medication shall only be administered with the permission of a medical practitioner.*
- 2.6.3** *If any medication is administered by staff during the child care service, records shall be kept detailing the medication used, the date, time and dosage of administration and the person who administered it.*

## 2.7 Food

Most services provide snacks to children, rather than main meals, and would expect children to bring their own lunch, for example in full day services. It is important to ensure that food provided by services is of good quality, nutritious and varied.

Resources are available from organisations such as the Heart Foundation.

## *Standard*

- 2.7.1** *The service shall ensure that food provided at a program shall be nutritious and varied.*

*2.7.2 The service shall ensure that it has a policy on the provision of food and shall ensure that the policy is practised.*

## 2.8 Drinking water

It is clearly essential that children attending a service should have ready access to drinking water.

### *Standard*

*2.8.1 Services shall ensure that drinking water is provided and available at all times.*

## 2.9 Building cleanliness, maintenance and repairs

The provision of an environment that is safe, clean and in a hygienic condition is necessary for the general health of children and to prevent vermin and to reduce the risk of harmful micro-organisms.

Environments must be regularly cleaned and kept in a hygienic state to protect against vermin, bacteria and fungal outbreak which can have serious consequences to a child's health.

### *Standard*

*2.9.1 The service shall ensure that the venue, grounds, and all equipment and furnishings used by the service are maintained in a safe, clean, hygienic condition and in good repair at all times.*

*2.9.2 Every effort shall be made to maintain a vermin free environment.*

*2.9.3 Suitable receptacles for the temporary storage of kitchen refuse and garbage shall be provided, lidded and emptied daily.*

*2.9.4 The program area has appropriate heating, ventilation and lighting.*

*2.9.5 Hazardous machinery, chemicals and activities which are likely to cause potential danger to children are not to be used or undertaken while the service is in operation.*

## 2.10 Health of staff and children

There is much documentation supporting the risks associated with the consumption of alcohol and other drugs when operating in precise situations. Clearly, judgements are impaired and the risks of accidents occurring are increased in these situations. Furthermore, the consequences of modelling undesirable behaviour to children must be avoided in all child care services, including Out of School Hours Care.

Research indicates that the risk to passive smokers is considerable. In the interest of the health of children, both in the long term and the immediate consequence to children who suffer from lung sensitive conditions, it is necessary that children are not exposed to this risk. Management bodies should also be aware of the possible legal implications of not providing a smoke free environment.

It is well accepted that children are influenced by the behaviours of others around them. Modelling of sound hygiene practices by staff and encouraging their use by children will promote the child to adopt personal hygiene practices beneficial to their long term health.

### *Standard*

- 2.10.1 *Staff must be of good health and free from any medical conditions or dependency on any medication and/or substance that may affect their ability to care for children.*
- 2.10.2 *Staff requiring regular medication should hold a medical certificate confirming their ability to care for children.*
- 2.10.3 *No person who is adversely affected by drugs or alcohol shall supervise or remain in the presence of a child in care.*
- 2.10.4 *Staff shall not consume alcohol during the hours children are in care.*
- 2.10.5 *The management body shall provide a smoke-free environment.*
- 2.10.6 *Staff shall observe strict health, hygiene and sun protection practices in relation to children that have regard to current community standards and are in accord with relevant government guidelines to minimise risks to children.*
- 2.10.7 *Staff shall encourage children to observe these practices.*

## 2.11 Animals

Although few OSHC services would keep animals, it is important that those that do ensure the animal is adequately cared for. This is necessary for the health and safety of the children and to avoid any legal problems arising from the protection of animal rights.

### *Standard*

- 2.11.1** *Any animal or bird kept by the service shall be maintained in a clean and healthy condition.*
- 2.11.2** *The service shall ensure that there is no animal, bird or livestock present in the program area which is likely to be a source of infection or which in any way may be detrimental to the well-being of the children.*

## 2.12 Emergency procedures/fire drills

To ensure the safety of children in the case of fire and other emergencies, emergency procedures must be known and practised. If the service's venue has a disaster plan, as most schools would, for example—the service's emergency procedures should be consistent with that policy.

It is advisable that a record of practices be kept by the service for a period of two years.

In addition, the personal safety and security of children while attending an OSHC service is of primary importance. The OSHC service should develop a policy and procedures for implementation in the event of harassment or a threat by a person/s known and/or unknown to children/staff/volunteers while in attendance at the OSHC service.

### *Standard*

- 2.12.1** *The service shall develop emergency procedures in consultation with the venue owner and any appropriate local authority.*
- 2.12.2** *The service shall ensure all staff and children are familiar with the emergency procedures.*

*2.12.3 The service shall ensure that the emergency procedures are practised with the children a minimum of once per term (including new children and those who do not attend on a regular basis), or as determined by the relevant authority.*

*2.12.4 The service shall ensure that the venue's disaster plan includes a section dealing with the child care program.*

*2.12.5 The OSHC service shall ensure that its policy includes procedures for harassment and/or threat to children by persons known and unknown to the service.*

**Note:** Child care services must comply with State and local authority legislation. Some specific regulations may require additional standards.

## 2.13 Transport

Children in OSHC services have a right to be safe while travelling in transport provided by the service and/or as part of the activities.

### *Standard*

*2.13.1 The OSHC service shall ensure that:*

- a vehicles used by children comply with the appropriate road transport regulations;*
- b its policy includes a procedure developed in the event of a vehicle breakdown and/or accident;*
- c the child travelling has the written consent of the parent/guardian/approved person.*

## 3. Staffing

The following areas are considered:

- 3.1 staff:child ratios*
- 3.2 staff qualifications/training*
- 3.3 minimum staff numbers*
- 3.4 fit and proper persons*

## 3.1 Staff:child ratios

One of the most important determinants of adequate care in OSHC is the number of staff who work in the services as this will affect the quality of their interactions with the children. The staff:child ratio is an important factor for positive staff—child interactions and, less directly, interactions between children.

The nature of the service is obviously relevant in determining staff : child ratios. OSHC services are organised in such a way that not all children are participating in the one activity at the one time, or even all indoor or outdoor activities at once. A range of indoor and outdoor activities are offered simultaneously, and children are often free to move between them although vacation care services may be more structured in their timetabling of activities. Staff:child ratios need to be able to accommodate varied and mixed age groups and the concepts of a less structured program, ‘safe play’ and choice which characterise OSHC services.

It is acknowledged that the proposed standard allows for a higher staff:child ratio, as currently exists in some States/Territories and that the ratio for the supervision of children on excursions and/or swimming may include carers other than the regular staff.

### *Standard*

- 3.1.1** *There shall be a maximum of 15 children to 1 staff member.*
- 3.1.2** *There shall be a maximum of 8 children to 1 carer for excursions.*
- 3.1.3** *There shall be a maximum of 5 children to 1 carer for swimming.*

## 3.2 Staff qualifications/training

There is general acceptance within the children’s services industry of the principle that quality care is dependent on relevant staff training. The need for adequate numbers of qualified staff in child care services is based on recognition of the fact that the care of large groups of children for significant periods of time requires specialist knowledge and skills.

Formal training specifically related to outside school hours child care is not yet widely available although curriculum, and course development is currently being undertaken to address this.

While qualifications should form part of standards and regulations, development of such standards needs to take into account the fact that a significant proportion of staff employed in OSHC services have minimal or unrelated qualifications. State courses which are developed should include processes for the Recognition of Prior Learning.

In advance of the development of specific OSHC qualifications or child care courses covering the age range 0-12, qualifications in child care, early childhood teaching or primary teaching and recreation should be considered as acceptable in the sector.

Mandatory qualifications should include a phase in period.

## *Standard*

- 3.2.1 OSHC coordinators are required to be qualified.*
- 3.2.2 OSHC services must employ staff on the basis of a minimum of 1 qualified staff member to every 30 children, or part thereof.*
- 3.2.3 A degree in teaching (Primary and/or Early Childhood), an associate diploma in child care and/or youth or recreation (experience in working with children aged 5-12 years is desirable) shall be considered as an acceptable qualification.*

*The Commonwealth and States/Territories may review the listing of qualifications, on an annual basis, to ensure the relevance of the qualifications to OSHC services.*

- 3.2.4 Transitional arrangements may be developed to ensure that staff currently working in OSHC services are not disadvantaged by the introduction of the standard on qualifications.*

## 3.3 Minimum staff numbers

The minimum requirement is essentially related to staff and child safety and to emergency situations. If one child is injured or otherwise requires emergency attention, a sole staff member would have to choose between giving that child the necessary attention and continuing to supervise the other children. A minimum of two staff is also required, so that one staff member can continue to care for the children if the other is injured or becomes ill during the course of the program.

There are, however, many small groups of school age children whose need for child care cannot viably be met through the large service models which are currently the norm.

## *Standard*

**3.3.1** *There shall be a minimum of 2 staff members present at any one time.*

**3.3.2** *In certain defined circumstances the minimum of 2 staff members may be waived if appropriate, and approved by the appropriate State/Territory/Commonwealth Department.*

## 3.4 Fit and proper persons

It is essential that persons who may cause physical or emotional harm to children are prevented from any involvement in child care. There is a range of ways of objectively assessing whether a person is fit and proper to provide a child care service. These could include police checks, contacting referees and advertising in the press.

## *Standard*

**3.4.1** *A carer shall be a fit and proper person to undertake paid or unpaid work in the OSHC service.*

**3.4.2** *A person is fit and proper if:*

- a the person is capable of providing an adequate standard of child care in the OSHC setting,*
- b the person is of good character and is suitable to be entrusted with the care of children.*

## 4. Service procedures

The following areas are considered:

- 4.1** *Policy;*
- 4.2** *written programs;*
- 4.3** *hours of operation & procedures for collecting children;*
- 4.4** *Equipment;*
- 4.5** *staff interaction with children;*

4.6 *access; and*

4.7 *excursions.*

## 4.1 Policy

Parents/guardians/approved persons have a right to know the policies and practices operating in a child care service so that they can make an informed decision on the appropriateness of that service for their child. Access to written policies will ensure consistent expectations about the service. Policies also facilitate continuity as the people working in or having responsibility for the service change from time to time. Policies should be regularly reviewed and staff and children's parents/guardians/approved persons should have input into their content.

### *Standard*

4.1.1 *Services shall develop an operational policy. The policy shall include sections on the service's philosophy, administration, staffing, facilities and equipment, health and safety, programming, fees, participation of parent/guardian/approved person, cultural relevance, attention to children with a disability, gender equity, excursions and reporting of child abuse.*

4.1.2 *The OSHC service shall:*

*a display the Policy prominently in the program area and shall make the policy available to parents/guardians and approved persons on the child's enrolment and, on request at other times; and*

*b review the policy on an annual basis.*

## 4.2 Written programs

An OSHC program plan to include all activities should be developed for each service. This plan should reflect the cultural diversity of the community and incorporate the views of parents/guardians/approved person and the OSHC children.

The OSHC children should be involved in this planning process to ensure that their needs are met.

Programs should be developed regularly and information about the program should be readily available to the children's parents/guardians/approved persons.

Programs should encompass activities which would be expected to be part of the life of school age children outside school hours, for example, during school vacations, excursions would be normally part of programs. Programs should be developed which take into account the fact that some children may spend substantial amounts of time in before and/or after school care services and in vacation care services over a period of up to seven years.

Sound preparation and written plans assist in organisation and coordination, communication with parents/guardians/approved persons and encouraging parental input, program evaluation and flexibility.

## *Standard*

- 4.2.1** *Programs shall be designed and evaluated with regard to each child's out of school hours social, physical, emotional, recreational, intellectual and creative developmental needs.*
- 4.2.2** *Programs of activities shall be regularly developed and displayed at service venues.*
- 4.2.3** *Programs of activities shall be available to all parents/guardians/approved persons including persons who do not regularly attend the service venue.*

## **4.3 Hours of operation and procedures for collecting children**

The hours of operation, in accord with the needs of the community, should be included in the policy. The policy should include the procedures for the service in the event of the parent/guardian/approved persons picking up children after the advertised hour and/or where children have permission from their parent/guardian/approved person to leave the service unaccompanied.

## *Standard*

- 4.3.1** *The OSHC service shall ensure that its policy includes the operating hours for the program and procedures for the collection of children.*

## **4.4 Equipment**

A range of equipment is necessary to ensure that the developmental needs of the children in care can be properly met and should facilitate a balanced learning program including the development of the children's fine and gross motor skills and social interactions. Provision of equipment should be based on programming to meet the outside school hours developmental needs of children.

## *Standard*

- 4.4.1** *The OSHC service shall ensure that children have access to a range of equipment and materials which are suitable, safe and well maintained.*

## **4.5 Staff interaction with children**

Acceptable standards of behaviour need to be maintained to ensure the physical and emotional health of all children and staff in the program, and to ensure the service is able to meet its objectives without undue disruption.

The quality of staff interactions with children has a significant impact on children's development and growth and on their feelings of confidence and self-worth.

Children in OSHC services have the right to interact with staff and with one another within a framework of a non-discriminatory and equitable code of practice. This code of practice should be based on an appropriate behaviour management model which includes positive behaviour reinforcement strategies, as well as strategies for modifying behaviour such as 'bullying'.

Children should be encouraged to understand and participate in the development of the OSHC code of practice, including the design of positive behaviour strategies and strategies for unacceptable behaviour.

## *Standard*

- 4.5.1** *Appropriate standards of discipline shall be maintained by children being given positive guidance directed towards acceptable behaviour with encouragement freely given.*
- 4.5.2** *The service shall ensure that the dignity and rights of the child are maintained at all times. The service shall ensure that:*
- a the child is safe and secure and that the dignity and rights of the child are maintained at all times.*
- 4.5.3** *Where a school age program operates within a school, attempts should be made to ensure that behaviour management strategies are consistent with those operating within the school.*

## **4.6 Access**

OSHC services should be equally accessible by all children and organisational arrangements should always maximise access. This will involve overcoming barriers to access for some groups of children within the community.

Where demand for places exceeds the available supply, services should accept or reject enrolments in a consistent policy-based manner.

## *Standard*

- 4.6.1** *The OSHC service shall ensure that its policy includes priority of access procedures. These procedures must ensure that the organisational arrangements and activities undertaken as part of the program are inclusive of all groups in the community in which the service operates.*

## **4.7 Excursions**

It is the OSHC service's responsibility to protect and provide the maximum safety of children at all times during any OSHC program activity. The OSHC service therefore should:

- a take steps to ensure that all excursions comply with transport legislation and regulations;*

- b formally approve all activities occurring outside the program area; and
- c obtain written permission from parents/guardians/approved persons before a child is taken on an excursion or activity outside the OSHC program area.

In addition, the first aid kit, a list of the names of all children on the excursion and the emergency procedures/phone numbers should be taken on every excursion.

## *Standard*

**4.7.1** *The OSHC service shall approve all excursions and:*

- a only take a child outside the program area with the written permission of the child's parent/guardian/approved person for that specific excursion.*
- b ensure that the first aid kit, a list of all children on the excursion and the appropriate emergency telephone numbers are taken on every excursion and are readily accessible to staff at all times.*
- c ensure that parents/guardians/approved persons are provided with the details of each excursion.*

**Note:** Child care services must comply with State and local authority legislation. Some specific transport regulations may require additional standards.

## 5. Administrative functions

The following areas are considered:

- 5.1** *parent/guardian/approved person participation and access;*
- 5.2** *insurance; and*
- 5.3** *maintenance of records.*

## 5.1 Participation and access

Parents/guardians/approved persons have the right to choose the type of care that they consider appropriate for their children. Participation by parents/guardians/approved persons in issues relating to the care of their children is important for several reasons. Parents/guardians/approved persons are the prime and continuing carers of their children; they have long term responsibility for their children; their participation enhances staff responsiveness to the needs of their children. Participation by parents/guardians/approved persons in a service's management body or in an advisory committee which can make recommendations to the service's management can help ensure that a service is responsive to the needs and desires of parents/guardians/approved persons.

Parents/guardians/approved persons also need to have physical access to the program area to ensure their confidence in the service provided. A continuing exchange of ideas and information is also enhanced when a parents/guardians/approved person is able to watch the child's activities in the context of the child care service.

### *Standard*

**5.1.1** *The OSHC service shall ensure that its policy includes a procedure:*

- a to ensure that the parents/guardians/approved persons may enter the service any time and may, at an appointed time exchange detailed information about their child with the coordinator;*
- b to allow for the management of complaints by parents/guardians/approved persons.*

## 5.2 Insurance

Insurance protection is an essential ingredient of sound management. It protects children, parents, staff and licencees from the severe financial consequences of matters of public liability.

## *Standard*

- 5.2.1 The OSHC service shall ensure that there are current, appropriate public liability and adequate insurance policies in place in respect of the provision of the OSHC service.*

## 5.3 Maintenance of records

Child care services need to keep adequate records to ensure the safety and wellbeing of children and to ensure the legal protection of staff.

Records should contain any relevant medical and custody details for each child, parents/guardians/approved person and other emergency contacts and any special requirements relating to the child. The method of keeping these records must respect the rights of individual privacy.

Daily records need to be kept of children's attendance and parents/guardians/approved persons should generally sign their children in and out when they leave them at, or collect them from, the service and note the time at which this occurs.

However, OSHC occupies a middle ground between schools and child care for preschool children. Many school age children walk alone to or from school or other activities. They should be able to do so to or from the child care service with the (express written) consent of their parents/guardians/approved person.

Where children have permission to walk to or from the service alone, they should be signed in and/or out by the OSHC coordinator and the time of their arrival or departure should be noted.

In addition, and for legal purposes, a record of any child injury and/or illness should be kept until the child reaches the age of 24 years. These records should be kept in a secure location to ensure the legal protection of staff in the event of future questions about the procedures followed.

The OSHC service should ensure that a daily record of children's attendance is kept, noting the time of entry and the time of departure from the service for each child. In the event of child's absence from the service, when a place has been booked and/or the child is expected by staff, the coordinator should take immediate steps to advise the appropriate person.

## *Standard*

- 5.3.1 OSHC services shall keep in a secure and accessible place records for each child relating to:*
- personal details (name, address, date of birth);*
  - relevant medical details (if any);*
  - relevant custody details (if any);*
  - details of people authorised to collect children from the program;*
  - permission for the child to leave the program unaccompanied (if applicable);*
  - signing in and out of children at the beginning and/or end of programs;*
  - name, home and work address and phone numbers of parent/guardian/approved person;*
  - name, address and phone number of persons who may be contacted in an emergency (if parents/guardians/approved person is not available);*
  - name, address and phone number of the child's doctor;*
  - authorisation to seek emergency medical, hospital and ambulance services (or the chosen alternative of the parents/guardians/approved person);*
  - any special needs or considerations relating to the child; and*
  - records as required by standards 2.6.1, 2.6.2, 2.6.3 and 4.7.1.*
- 5.3.2 These records shall be confidential.*
- 5.3.3 The OSHC service shall ensure that a record is kept of a child's illness or accident, where this occurs during the program. The record shall be kept in safe storage until the child turns 24 years of age.*
- 5.3.4 The OSHC service shall ensure that:*
- a a daily attendance roll is kept, indicating for each child, the time of entry to and time of departure from the service; and*

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*b the policy includes a procedure to immediately advise the appropriate persons of a child's absence, when that child's place in the service has been reserved and/or the child is expected by staff.*