Procedure

Family Day Care Hygiene

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Family Day Care Hygiene

Purpose & Scope

Lake Macquarie Family Day Care protects the health, safety, and dignity of children in care to ensure they have optimum opportunity to grow and learn.

Careful attention to hygiene standards significantly reduces the risk of transmission of infectious disease and other illness in children, educators, and their families.

Lake Macquarie Family Day Care promotes children’s awareness of health issues through activity based programs provided by educators.

Process

Bathing of Children

1 The educator will ensure bathing facilities are available at their residence or venue, at all times, which are safe for children, having regard for the age of the child, including:

- non-slip surfaces are applied to bath/shower areas
- hot water taps are fitted with a tempering valve or a thermostatic mixing valve to ensure the temperature of the hot water accessible to a child does not exceed 40 degrees centigrade, and fill baths by running hot and cold water together, never hot water by itself
- educator checks temperature of bath before placing the child in the bath, using a bath thermometer or elbow
- electrical equipment, poisonous or dangerous substances or equipment are inaccessible to children
- educator empties bath water immediately after use
- children to not share bath water

2 Educators shall accommodate bathing/showering of children only when:

(i) the cleanliness, health and hygiene needs of the child warrant the bathing/showering of the child (e.g. child has vomited or suffered diarrhoea, child is in care for extended care hours, child has engaged in extremely messy play, child has a specific health condition or need, etc)

(ii) the educator can maintain constant visual and/or auditory supervision of all children in care, whilst providing the child to be bathed or showered appropriate privacy

3 The educator must:

(i) discuss the child’s bathing needs with the parent (e.g. allergies or sensitivities to products used, physical capabilities, fears, cultural practices etc) and share information about a child’s bathing with the parent of the child

(ii) ensure the dignity and privacy of the child is respected by the educator, members of the educator’s residence or venue, visitors and the other children in care at all times during the bathing process

(iii) at all times remain at the side of a younger child while in a bath, and must remain in the vicinity of, and not engage in other duties or become distracted (e.g. answering a telephone, preparing meals, nappy changing), while an older child is in a bath

(iv) ensure only the registered educator is solely responsible for the bathing of a child at all times, (i.e. the educator cannot delegate supervision and/or bathing of children to another person, including an older sibling of the child, at any time)

(v) ensure all bathing areas and equipment are appropriately cleaned and sanitised after use
(vi) provide each child with an individual towel, face washer and other equipment for use during bathing, which are laundered after each use

(vii) ensure children demonstrate appropriate behaviour in the bathing area at all times (e.g. no boisterous or active play, no pushing, running, jumping, or climbing)

**Child Bites**

4 Educators must supervise children’s play and ensure the program takes into account each child’s age, physical and emotional development, and temperament and provides sufficient equipment, space, rest, and instruction to develop children’s social skills. (See- Lake Macquarie Family Day Care – Behaviour Management (child) Procedure).

5 If a biting incident occurs, educators must:

- reassure the child who has been bitten
- inspect the child's skin for cuts, abrasions or breaks
- wash the area thoroughly with soap and running water
- cover with a clean dressing if the skin is broken
- rinse the biting child’s mouth with water if the bite has broken the skin
- advise the parents of the incident, and suggest they seek medical advice if the skin is broken (See Emergency, Evacuation, Incident, Injury, Trauma & Illness Procedure)
- inform Lake Macquarie Family Day Care staff of the incident and actions
- review the program to identify preventative strategies for the future

**Using gloves** - Ref –Staying Healthy 5th Edition

6 When to wear gloves

<table>
<thead>
<tr>
<th>Type of gloves</th>
<th>When to wear them</th>
<th>How to maintain them</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disposable gloves</td>
<td>When there is a chance you may come in contact with body fluids, including faeces, urine, saliva, vomit or blood</td>
<td>No maintenance – use them once and throw them away; do not reuse</td>
<td>Changing nappies</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Managing cuts and abrasions</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cleaning spills of body fluids</td>
</tr>
<tr>
<td>Reusable gloves</td>
<td>When cleaning the education and care service</td>
<td>Clean according to the manufacturer’s instructions</td>
<td>General cleaning duties</td>
</tr>
<tr>
<td></td>
<td>When preparing bleach solutions for use after cleaning a surface</td>
<td>Store dry between uses</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Replace when showing signs of wear</td>
<td></td>
</tr>
</tbody>
</table>

**Cleaning & Disinfecting**

7 Educators must maintain their care area in good repair and properly clean, and ventilate the area, at all times, and must ensure:

- spills, food scraps, soiling, insects and play waste, are cleaned up and disposed of immediately
- kitchen counters, cutting boards and utensils, and hard surfaces, (e.g. tables) are cleaned after each use
• potties are disinfected after each use
• floor areas are swept, mopped or vacuumed daily
• mouthed toys, doorknobs, bathroom and toilet areas are cleaned as required and disinfected daily
• fabric covered furniture is vacuumed at least weekly or, if pets use the area outside care hours, daily before care commences
• sandpits are inspected and disinfected regularly
• bathing areas are cleaned, and sanitised, after each use

8 Educators must
• vigorously rub surface to remove germs
• Rinse surface with clean water
• Dry the surface

9 When selecting toys, equipment and furnishing for the care area, educators need to consider how easy the items will be to clean, disinfect and maintain on a regular basis.

10 Educators must ensure the parent or educator launders bed linen used by children regularly, as required, and at minimum monthly intervals, or after each use where more than one child uses the linen.

11 **When to clean different surfaces** - Ref –Staying Healthy 5th Edition

<table>
<thead>
<tr>
<th>Surface or area</th>
<th>Wash daily plus when visibly dirty</th>
<th>Wash weekly plus when visibly dirty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bathrooms – wash tap handles, toilet seats, toilet handles, and doorknobs. Check the bathroom during the day and clean if visibly dirty</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Toys and objects put in the mouth</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Surfaces that children have frequent contact with (eg bench tops, taps, cots and tables)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Beds, stretchers, linen and mattress covers (if children do not use the same mattress cover every day)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Door knobs</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Floors</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Low shelves</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Other surfaces not often touched by children</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
12 Decision tree: when to use disinfectant - Ref – Staying Healthy 5th Edition

<table>
<thead>
<tr>
<th>Is the surface frequently touched?</th>
</tr>
</thead>
<tbody>
<tr>
<td>No  ▼</td>
</tr>
<tr>
<td>Yes ▼</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Has the surface been contaminated with blood or body substances from someone with a known or suspected infectious disease?</th>
</tr>
</thead>
<tbody>
<tr>
<td>No ▼</td>
</tr>
<tr>
<td>Yes ▼</td>
</tr>
</tbody>
</table>

- Use detergent and water
- Use detergent and water followed by either:
  - Disinfectant (for spot blood spills and other body substances)
  - Bleach (for small and large blood spills)

Contact with Body Fluids & Blood

13 Educators must use their best endeavours to prevent exposure of children in care to spilt blood, faeces, urine, vomit, or other body fluids. Educators must clean and disinfect the area of the spill as soon as possible using warm soapy water and then a bleach solution (1 part bleach and 9 parts water).

14 Educators must remove all contaminated waste, equipment, furnishings, or personal belongings from the care area immediately and store the items in a sealed plastic lined container, or yellow sharps container, pending disposal of the items or collection by parents. All containers used to store contaminated items must be inaccessible to children or located outside the care area. Contaminated items may include:
  - soiled nappies, clothing, linen, cushions or pillows
  - contaminated equipment, sharps or dressings used in providing first aid or dispensing medication
  - toys or other equipment, furnishings, utensils and cleaning cloths that have come into contact with body fluids or blood
  - tissues, handkerchiefs, paper towels, or used disposable gloves

15 Educators must clean and disinfect all containers used to store or soak contaminated items pending disposal at the end of each day.

16 Educators must wear disposable gloves when administering first aid, changing nappies, or handling contaminated waste. (refer to 6)

17 If an educator’s or a child’s skin is splashed with blood or body fluids the area should be washed with warm soapy water as soon as possible. If splashed in the eyes, rinse with cold water for several minutes. Educators must inform the parents of the child and Lake Macquarie Family Day Care staff of the incident and actions.

18 Educator’s must ensure any cuts; abrasions or skin infections on the educator or a child are covered.

19 Educators must not use hand washing facilities for disposal or cleaning of blood, body fluids, or chemicals.
Cleaning the blood spill

The best way to clean a blood spill depends on the size of the spill. The table below will help educators and decide on the most appropriate cleaning strategy.

Recommended methods for cleaning blood spills- Ref –Staying Healthy 5th Edition

<table>
<thead>
<tr>
<th>Size of spill</th>
<th>What to do</th>
</tr>
</thead>
</table>
| Spot (eg drop of blood less than the size of a 50 cent coin) | • Wear gloves  
  • Wipe up blood immediately with a damp cloth, tissue or paper towel  
  • Place the cloth, tissue or paper towel in a plastic bag or alternative; seal the bag and put it in the rubbish bin  
  • Remove gloves and put them in the rubbish bin  
  • Wash surface with detergent and warm water  
  • Wash your hands with soap and water |
Preparing the bleach solution

21 Always prepare bleach solutions according to the manufacturer’s instructions. Because bleach loses strength over time, always make up new dilutions of bleach every day. Any diluted bleach that is not used within 24 hours of preparation should be discarded.

Safe use of bleach

Always

- Read and follow the safety and handling instructions on the label
- Dilute bleach according to directions
- Wear gloves when handling and preparing bleach
- Check the use-by date before using bleach, because it can lose effectiveness during storage
- Make up a new batch of bleach each time you disinfect – it loses its effectiveness quickly once it has been diluted

Never

- Use bleach in a spray bottle
- Use hot water to dilute bleach
- Mix bleach with any other chemicals
- Use bleach on metals other than stainless steel – bleach is corrosive

Food Handling

22 When bringing food to an educator’s premises for their child, parents must consider transporting the food in an esky, ice pack or other suitable means of ensuring the food remains cool.

23 Educators must refrigerate food, brought by parents for their children, which contains:

- meat, seafood, poultry, dairy products
- sago products, mayonnaise, cream or imitation cream
- ready-made coleslaws or salads
- pre-cooked foods (e.g. sausage rolls, casseroles, rice, pasta or noodle dishes)
- prepared baby formula

24 When refrigerating food educators must keep food:

- at a constant temperature of 5°C or lower
- in the refrigerator, from the time the parent delivers the food until the food is ready to be served to the child
- wrapped or covered to prevent cross-contamination

25 When considering excursion arrangements educators must ensure facilities are available to store food at recommended temperatures. Educators must not keep babies bottles warm for extended periods.
26 If educators provide food for children in care (other than food brought from the child’s home) the educator must:

- lodge a Food Business Notification with NSW Public Health
- comply with all regulatory requirements of Food Amendment Act 2010

27 When cleaning food preparation areas educators must ensure they:

- change cloths and drying towels, and remove garbage regularly
- use a separate cloth for cleaning of:
  - utensils, dishes and cutting boards
  - tables and benches and appliances
  - bathrooms
  - other general cleaning (e.g.: floors, spills, hard surfaces)
- use hot soapy water to wash eating and drinking utensils, rinse in very hot water and change water frequently

28 Basics for meals and snacks – Ref 5th Edition Staying Healthy

- Clean the surfaces that will come in contact with the food and with the utensils that are to be used for the meal
- Wash and dry your hands thoroughly before preparing or serving food
- Check that all children have washed and dried their hands before they eat or drink

The same guidelines apply when you are preparing to give an infant a bottle as when you are preparing food for older children to eat

During the meal:

- If children are sharing food from a common bowl or plate, encourage them to make sure they understand that they need to use tongs, spoons, or other appropriate utensils to take the food they want to eat. Remind them that they cannot touch food that is being shared because this can spread germs that might make them or other children ill. This is why it is important to use utensils, not your hands, when taking food from a common bowl or plate.
- Do not allow children to share individual eating or drinking utensils, or take food from other children’s plates or bowls
- Use a separate spoon for each infant you feed
- Teach children to turn away from food when they cough or sneeze, and then to wash their hands
- If you are interrupted to care for another child while preparing food or spoon-feeding an infant, be sure to wash your hands again before you continue

29 Preparing food – Ref 5th Edition Staying Healthy

Always wash and dry your hands before handling food. Education and care services must have a hand basin (separate from the kitchen sink), soap, and disposable towels in the kitchen so that
educators and other staff who are preparing food can easily wash their hands. Check your state or territory’s food safety legislation for any other requirements

30 Heating and cooling food

Keep food hot (more than 60°C) or cold (5°C or less); otherwise, do not keep it at all. Heating and cooling food properly will help prevent germs from growing in the food.

Australia’s food safety standards state that reheated food should reach 60°C. Heating to this temperature will destroy germs that may have grown in the food since it was cooked. However, it is recommended that food be reheated until it reaches 70°C, and should stay at this temperature for 2 minutes. This is because the education and care service may not know if the prepared food has been with in the temperature ‘danger zone’ (5-60°C)

**Heat food, or milk for bottles once only. Do not allow it to cool and then reheat it – this can allow germs to grow**

Use a food thermometer to ensure that cooked or reheated food reaches the correct temperature. Keep a non-mercury thermometer in your fridge so that you can check that the temperature is below 5°C.

Check that the food has cooled before giving it to the child. Remove a small piece of food with a spoon to another plate and test the temperature of the food with your hand. Throw this piece of food away and wash the spoon.

Throw out all leftovers. Tell parents what food their child left, but do not return the leftover food to the parents

31 Separating raw and cooked foods

If foods have been properly reheated, any germs that were in the food will have been killed. It is important not to let raw food come in contact with cooked food, because the raw food may have germs in it

To prevent cross-contamination between raw and cooked foods:

- Keep raw and cooked foods separate, even in the fridge
- Keep cooked food above uncooked food in the fridge
- Use separate utensils (such as cutting boards and knives) for raw and cooked food

32 Preparing, storing, and heating bottles – Ref 5th Edition Staying Healthy

Bottles of breast milk and formula need to be carefully prepared, stored, and heated.

Breast milk contains the mother’s antibodies, which help prevent illness in infants. Encourage and support mothers of infants up to 12 months old to provide expressed breast milk, or to visit the education and care service to feed their infants.

33 Preparing bottles

When preparing formula, always wash your hands first, and ensure that work surfaces, bottles and other equipment are clean. Follow the manufacturer’s instructions carefully
34 Storing bottles

Formula or breast milk needs to be kept refrigerated or frozen. Keep a non-mercury thermometer in your fridge so that you can check that the temperature is below 5C. All bottles need to be labelled with the child’s name and the date the bottle was prepared or brought in by the parent.

It is best to make up fresh formula for each feed and give it to the child as soon as it has cooled. If this is not possible, the freshly made formula should be cooled immediately and stored in the back of the refrigerator (where it is coldest) for no more than 24 hours. Throw away any formula that is left over. Do not freeze or reheat leftover made-up formula.

Breast milk can be stored in several ways.

- Refrigerated for 3 – 5 days at 4C or lower (4C is the typical temperature of a standard fridge); always store breast milk at the back of the refrigerator, not in the door
- Stored without refrigeration (if needed) for 6 – 8 hours if the room temperature is less than 26C
- Frozen in a separate freezer section of a refrigerator for up to 3 months; if your freezer is a compartment inside the refrigerator, rather than a separate section with its own door, then only store the breast milk for 2 weeks
- Frozen in a deep freeze (-18C or lower) for 6 – 12 months

When thawing frozen breast milk, always use the oldest milk first. Frozen breast milk can be thawed:

- In the refrigerator and used within 24 hours
- By standing the bottle in a container of lukewarm water and used straight away

35 Heating bottles

Heat bottles once only. Do not allow a bottle to cool and then reheat it – this can allow germs to grow.

Do not warm bottles in the microwave. Microwave ovens distribute heat unevenly. Water in the milk can turn to steam that collects at the top of the bottle, and there is a danger that the infant could be scalded. Many parent use microwaves to warm bottles at home. In the home environment, usually only one or two people are preparing bottles, using the same type of bottle and the same microwave every time, so the risk of overheating the milk and scalding the infant is lower.

To heat bottles:

- Stand the bottle in a container of hot water for no more than 15 minutes
- Before feeding the infant, check the temperature of the milk by letting a little drop onto the inside of your wrist – it should feel comfortably warm or even a little bit cool
- Never microwave breast milk
- Never refreeze thawed breast milk
- Only warm the milk once, and discard any warmed milk that has not been used
Hand washing - Ref 5th Edition Staying Healthy

36 Educators must model correct hand washing techniques to children and ensure the educator’s and children’s hands are washed regularly.

<table>
<thead>
<tr>
<th>Before</th>
<th>After</th>
</tr>
</thead>
</table>
| Educators and other staff | Taking off gloves  
| | Changing a nappy  
| | Cleaning the nappy change area  
| | Using the toilet  
| | Helping children use the toilet  
| | Coming in from outside play  
| | Wiping a child’s nose or your own nose  
| | Eating or handling food  
| | Handling garbage  
| | Cleaning up faeces, vomit or blood  
| | Applying sunscreen or other lotions to one or more children  
| | Touching animals  |
| Children | Eating or handling food  
| | Touching nose secretions  
| | Using the toilet  
| | Having their nappy changed – their hands will become contaminated while they are on the change mat  
| | Coming in from outside play  
| | Touching animals  |

Nappy Changing & Toilet Training

37 When caring for children wearing nappies educators must check children regularly to see if nappies are wet or soiled and must change children’s nappies as soon as possible if the nappy is wet or soiled. Educators must check nappies:

- at least every 2 hours
- before putting the child to sleep and after the child wakes
- before meal times
- before the child is due to leave care

38 Educators must conduct all nappy changes in a manner that reduces the spread of infectious illness.

39 Educators must ensure nappy change solutions, chemical disinfectants, wipes and lidded nappy buckets are stored outside the care area or are inaccessible to children.

40 Educators must dispose of soiled disposable nappies in a sealed plastic bag each day. If cloth nappies are used, the educator must dispose of faeces in the toilet and seal the nappy in a plastic bag, or immerse in a bleach solution, until collected by the parent.
41 When assisting children to use the toilet, educators must:

- wear disposable gloves
- supervise the child’s use of the potty or toilet and assist where necessary to ensure cleanliness
- ensure both the child and the educator wash their hands after the child toilets
- ensure the toilet area is clean before use by another child, empty the contents of a potty into the toilet and disinfect the toilet area as necessary and the potty after each use

42 **Nappy changing procedure** Ref – 5th Edition Staying Healthy

<table>
<thead>
<tr>
<th>Preparation</th>
<th>Changing</th>
<th>Cleaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Wash your hands</td>
<td>4. Remove the child’s nappy and put in a hands-free lidded bin. Place any soiled clothes in a plastic bag</td>
<td>12. Clean the change table with detergent and warm water after each nappy change</td>
</tr>
<tr>
<td>2. Place paper on the change table</td>
<td>5. clean the child’s bottom</td>
<td>13. Wash your hands</td>
</tr>
<tr>
<td>3. Put disposable gloves on both hands</td>
<td>6. Remove the paper and put it in a hands-free lidded bin. Remove your gloves and put them in the bin</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Remove your gloves and put them in the bin</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8. Place a clean nappy on the child</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9. Dress the child</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10. Take the child away from the change table</td>
<td></td>
</tr>
<tr>
<td></td>
<td>11. Wash your hands and the child’s hands</td>
<td></td>
</tr>
</tbody>
</table>

**Personal Hygiene**

43 Educators must prevent children sharing combs, brushes, hats, toothbrushes, bottles, dummies, eating utensils and cups, towels, face washers, bed linen and handkerchiefs.

44 Educators’ daily activity programs must include time for routines that instruct children in accepted hygiene practices, (e.g. regular hand washing, use of tissues, correct toilet use, care and use of own belongings).

45 Educators must ensure their own health and personal cleanliness and must:

- ensure cleanliness of their clothing, skin, nails and hair
- tie back or cover their hair when preparing and serving food
- refuse care if they, or a member of their household, are unwell or have a contagious illness
- cover all cuts, abrasions, rashes or lesions on their skin
- wear disposable gloves in accordance with recommendations of Staying Healthy -5th Edition
- ensure immunisation against contagious diseases recommended by their doctor is up-to-date
Recommended vaccinations for educators and other staff – Ref Staying Healthy 5th Ed

The National Health and Medical Research Council (NHMRC) recommends that all educators and other staff be immunised against:

- **Pertussis** – this is especially important for educators and other staff caring for the youngest children who are not fully vaccinated. Even if the adult was vaccinated in childhood, booster vaccination may be necessary because immunity to Pertussis decreases over time.

- **Measles-Mumps-Rubella – (MMR)** for educators and other staff born during or since 1966 who do not have vaccination records of two doses of MMR, or do not have antibodies against rubella.

- **Varicella** – for educators and other staff who have not previously had varicella (a blood test is required to prove previous infection).

- **Hepatitis A** – because young children can be infectious even if they are not showing any symptoms.

All staff should also consider having yearly influenza vaccinations. Influenza is very infectious and can spread through the air by coughing and sneezing, as well as by hands, cups and other objects that have been in contact with an infected person’s mouth or nose.

Additional vaccinations are recommended for special categories of educators and other staff:

- **Hepatitis B** – for educators and other staff who care for children with intellectual disabilities. Although the risk is low, seek advice about hepatitis B immunisation if the children are not immunised. Immunisation of the children should be encouraged.

- **Japanese encephalitis** – for educators and other staff who work in the outer Torres Strait islands for one month or more during the wet season.

Educators and other staff who are pregnant or immunocompromised (i.e. have a weakened immune system) should seek advice from their doctor about vaccinations. Some vaccinations are not recommended during pregnancy, or if a person has a disease or is undergoing treatment that affects their immune system.
## WHS Management System Information

### Record Keeping Requirements
Records associated with, and generated in compliance with this document include:-

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- 
- 

All records will be managed in accordance with *WHS Module 10 - Records*.

### Training Requirements
Specific training required to carry out the requirements of this document includes:-

- 

Training requirements will be managed in accordance with *WHS Module 12 – Training*.

### Auditing Requirements
Auditing of this process will be managed in accordance with *WHS Module 11 – Auditing*.

### Corrective Actions
Corrective actions are to be managed in accordance with *WHS Module 09 – Corrective Actions* whenever it is identified that the requirements of this document and its references are not being met.

### Review
This document will be reviewed in accordance with *WHS Module 04 – Document Control* and whenever there is a relevant change to applicable legislation, industry standards, Codes of Practice, the WHS Management System, or the process.

### Responsibilities, Authorities & Accountabilities
Responsibility, authority, and accountabilities for all positions within Council are outlined in *WHS Module 01 – WHS Responsibilities* and in the *WHS Responsibilities, Authorities and Accountabilities (RAA) Table* associated with *WHS Module 01*. The RAA table includes responsibility, authority, and accountabilities for employees, managers, supervisors, contractors, visitors, and persons with specialist roles within the organisation.

In addition to *WHS Module 01 – WHS Responsibilities*, the following positions have responsibilities, authorities and accountabilities associated with this document:

<table>
<thead>
<tr>
<th>Position</th>
<th>Responsibilities, Authorities &amp; Accountabilities</th>
</tr>
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Family Day Care Hygiene - Procedure
Version 10 - 10 June 2015

Controlled Document Information

Authorisation Details

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Audience: Departmental - Family Day Care Staff, Educators and Stake holders

Department: Community Planning

Officer: Service Manager - Jan Morgan

Review Timeframe: Max < 3 years  Next Scheduled Review Date: 10 June 2018

Authorisation: Manager Community Planning - John Ferguson - 10 June 2015

Related Document Information, Standards & References

Related Legislation:
- Public Health (Amendment) Act (NSW) 1991
- Work Health & Safety Act 2011 No 10
- Food Amendment Act 2010
- The National Quality Framework

Related Policies (Council & Internal):
- (Policy Name & TRIM Document No.)

Related Procedures, Guidelines, Forms, WHS Modules/PCD's, Risk Assessments, Work Method Statements:
- Family Day Care – Behaviour Management (child) Procedure
- Incident, Injury, Trauma & Illness Procedure

Standards COP’s & Other References
- NSW Food Authority
  www.foodauthority.nsw.gov.au
- Good Food in Family Day Care: Family Day Care Council of Australia & NSW Department of Health and aged Care, 2002
- NSW Health Department:

Definitions

<table>
<thead>
<tr>
<th>Term / Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nominated Supervisor</td>
<td>Authorised Supervisor of Lake Macquarie Family Day Care, Nominated Supervisor – responsible (along with the Approved Provider) for ensuring the scheme is following the Law and the Regulations, Certified Supervisor – a person with a supervisor certificate placed in day to day charge of an education and care service.</td>
</tr>
</tbody>
</table>
| Educator | (a) a person actually involved in educating, minding or caring for children at his or her residence or venue and whose name appears on a current Lake Macquarie Family Day Care Register of Educators (a primary educator) ; and  
(b) a person whose name appears on a current Lake Macquarie Family Day Care |
Register of Educators and who is engaged as a relief educator to educate, mind or care for children in the residence or venue of a primary educator

(c) a person whose name appears on a current Lake Macquarie Family Day Care Register of Educators and who is engaged as an educator assistant to educate, mind or care for children in the residence or venue of a primary educator for no more than 4 hours

<table>
<thead>
<tr>
<th>Change Table</th>
<th>any stable surface for changing nappies, together with a mat that has an impervious washable surface, including:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a) floor or other stable hard surface, (b) bench or table (not used at any time for preparing, serving or consuming food or for providing children’s craft or learning activities) (c) bed or other stable item of furniture</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent</th>
<th>the parent of a child registered for care with Lake Macquarie Family Day Care and includes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a) guardian of the child, and/or (b) a person who has the legal custody of the child.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regulatory requirement</th>
<th>State and Federal government regulations that are relevant to the provision of Family Day Care services in NSW</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Approved Service</th>
<th>Lake Macquarie Family Day Care</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Service</th>
<th>an education and care service operated by an educator whose name appears on a current register of educators for Lake Macquarie Family Day Care</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Service users</th>
<th>educators, staff, children, parents, volunteers or visitors to the education and care service operated by the educator</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Staff</th>
<th>an employee or employees of Lake Macquarie City Council for service within Lake Macquarie Family Day Care</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>The National Quality Framework</th>
<th>Includes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• a national legislative framework that consists of the Education and Care Services National Law Act 2010 and Education and Care Services National Regulations 2011</td>
</tr>
<tr>
<td></td>
<td>• a National Quality Standard</td>
</tr>
<tr>
<td></td>
<td>• an assessment and rating system</td>
</tr>
<tr>
<td></td>
<td>• a Regulatory Authority in each State and Territory who will have primary responsibility for the approval, monitoring and quality assessment of services in their jurisdiction in accordance with the national legislative framework and in relation to the National Quality Standard.</td>
</tr>
<tr>
<td></td>
<td>• The Australian Children’s Education and Care Quality Authority (ACECQA)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work Health and Safety</th>
<th>Includes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Work Health and Safety Act 2011 No 10</td>
</tr>
<tr>
<td></td>
<td>Work Health &amp; Safety Regulations</td>
</tr>
<tr>
<td></td>
<td>OHS Act 2000</td>
</tr>
<tr>
<td></td>
<td>OHS Regs 2001</td>
</tr>
<tr>
<td></td>
<td>LMCC OHS Management System Information</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Version History</th>
<th>Version No</th>
<th>Date Changed</th>
<th>Modified By</th>
<th>Details and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>13/03/2006</td>
<td>J. Wade</td>
<td>Updated reference to Children’s Services Regulations 2004</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>24/8/2006</td>
<td>J. Wade</td>
<td>Update attachment 1</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>9/1/2009</td>
<td>J. Wade</td>
<td>Include bathing and hand washing sections, update references and</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th></th>
<th>Date</th>
<th>Author</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>14/05/2011</td>
<td>S. Cornwell</td>
<td>Update Responsible Officer, updated References, add sections to inform Family Day Care Staff of any incidences, remove attachments</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>17/07/2013</td>
<td>J. Morgan</td>
<td>Update to include 5th Edition Staying Healthy 2012 information added related to immunisation for educators, tables for using gloves, cleaning different surfaces, decision tree: when to use disinfectant, cleaning blood spills including prepare bleach, hand washing, nappy change. Updated references</td>
</tr>
<tr>
<td>10</td>
<td>10/06/2015</td>
<td>J. Morgan</td>
<td>No changes</td>
</tr>
</tbody>
</table>