



Occupational Health and Safety Policy

Authorisation	DSCC Management Committee
Review Date	December 2021
Approved Date	14 December 2021
Next Review Date (Frequency)	December 2024 (3 years) or sooner if required.
Relevant Documents	Attachment 1: Injury/Incident Notification and Investigation Attachment 2: Manual Lifting Procedures Attachment 3: Other risk minimalization procedures

AUTHORISATION

This policy was reviewed and adopted by the Dawson Street Child Care Co-operative (DSCC), at a committee meeting on the Approved Date defined above.

POLICY STATEMENT

Values

DSCC has a moral and legal responsibility to provide a safe and healthy environment for employees, children, parents/guardians, students, volunteers, contractors and visitors. This policy reflects the importance [Service Name] places on the wellbeing of employees, children, parents/guardians, students, volunteers, contractors and visitors, by endeavouring to protect their health, safety and welfare, and integrating this commitment into all of its activities.

DSCC is committed to ensuring that:

- the management group, staff and volunteers are aware of their health and safety responsibilities as employers, employees and volunteers
- systematic identification, assessment and control of hazards is undertaken at the service
- effective communication and consultation form a fundamental part of the management process to encourage innovative ways of reducing risk in the service environment
- training is provided to assist staff to identify health and safety hazards which, when addressed, will lead to safer work practices at the service
- it fulfils its obligations under current and future laws (in particular, the *Occupational Health and Safety Act 2004*), and that all relevant codes of practice are adopted and accepted as a minimum standard.

Purpose

This policy will provide guidelines and procedures to ensure that:

- all people who attend the premises of Dawson Street Children's Co-Operative , including employees, children, parents/guardians, students, volunteers, contractors and visitors, are provided with a safe and healthy environment
- all reasonable steps are taken by the Approved Provider, as the employer of staff, to ensure the health, safety and wellbeing of employees at the service.

SCOPE

This policy applies to the Approved Provider, Persons with Management and Control, Nominated Supervisor, persons in day to day charge, educators, staff, children, parents/guardians, students on placement, volunteers, contractors and visitors attending the programs and activities of DSCC

BACKGROUND AND LEGISLATION

Background

Everyone involved in an early childhood education and care service has a role to play in ensuring the service's operations are safe and without risk to the health and safety of all parties. In Victoria, health and safety in the workplace is governed by a system of laws, regulations and compliance codes that set out the responsibilities of employers and employees to ensure safety is maintained at work.

The *Occupational Health and Safety Act 2004* (OHS Act) sets out the key principles, duties and rights in relation to workplace health and safety. The *Occupational Health and Safety Regulations 2017* specifies the ways duties imposed by the OHS Act must be undertaken and prescribes procedural/administrative matters to support the OHS Act, such as requiring licenses for specific activities, or the need to keep records or notify authorities on certain matters.

The legal duties of an **employer** under the OHS Act are:

- to provide and maintain a workplace that is safe and without risk to the health of employees. This responsibility extends to contractors for routine tasks over which the employer has management. For contractors completing non-routine tasks, the employer must ensure that the service's daily operations and layout do not pose unreasonable risks
- to ensure other individuals, such as families and visitors, are not exposed to health and safety risks arising from the organisation's activities
- to consult with employees about OHS matters that will, or will likely, affect employees directly, including identifying hazards and assessing risks, and making decisions about risk control measures.

The OHS Act places the responsibility on **employees** for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the employer, including following guidelines, attending OHS-related training, reporting incidents, co-operating with OHS investigations, encouraging good OHS practice with fellow employees and others at the service, and assisting the employer with conducting OHS inspections during operating hours
- not interfering with safety equipment provided at the service, such as fire extinguishers.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Accident Compensation Act 1985* (Vic)
- *AS/NZS 4804:2001 and 4801:2001 Occupational health and safety systems*
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
- *National Quality Standard*, Quality Area 3: Physical Environment
- *National Quality Standard*, Quality Area 7: Governance and Leadership
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2017*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury. In the context of this policy, duty of care refers to the responsibility of education and care services to provide children, educators, staff, students, volunteers, contractors and anyone visiting the service with an adequate level of care and protection against reasonable foreseeable harm and injury.

Hazard: An element with the potential to cause death, injury, illness or disease.

Hazard identification: A process that involves identifying all foreseeable hazards in the workplace and understanding the possible harm that each hazard may cause.

Hazard management: A structured process of hazard identification, risk assessment and control, aimed at providing safe and healthy conditions for employees, contractors and visitors while on the premises of [Service Name] or while engaged in activities endorsed by [Service Name].

Harm: Includes death, or injury, illness (physical or psychological) or disease that may be suffered by a person as a consequence of exposure to a hazard.

Material safety data sheet: Provides employees and emergency personnel with safety procedures for working with toxic or dangerous materials. The data sheet includes all relevant information about the material such as physical properties (e.g. melting/boiling point, toxicity and reactivity), health effects, first aid requirements and safe handling procedures (e.g. personal protective equipment, safe storage/disposal and management of spills).

OHS committee: A committee that facilitates co-operation between an employer and employees in instigating, developing and carrying out measures designed to ensure the health and safety of employees in the workplace.

Risk: The chance (likelihood) that a hazard will cause harm to individuals.

Risk assessment: A process for developing knowledge/understanding about hazards and risks so that sound decisions can be made about the control of hazards. Risk assessments assist in determining:

- what levels of harm can occur
- how harm can occur
- the likelihood that harm will occur.

Risk control: A measure, work process or system that eliminates an OHS hazard or risk, or if this is not possible, reduces the risk so far as is reasonably practicable.

Serious Injury/incident: is one where an incident at the workplace results in death or serious injury, that is, if an injured person requires:

- Medical treatment within 48 hours of being exposed to a substance
- Immediate hospital treatment as an in-patient and/or immediate treatment for:
 - Amputation ◦ Anaphylaxis ◦ Serious head injury ◦ Serious eye injury
 - Separation of skin from underlying tissue (for example degloving or scalping) ◦ Electric shock ◦ Spinal injury ◦ Loss of bodily function ◦ Serious laceration.

And/or:

- Is a dangerous occurrence which seriously endangers the lives or the health and safety of people in the immediate vicinity including:
 - The collapse of part of the building or structure ◦ Implosion/explosion or fire ◦ Escape, spillage or leakage of substances ◦ An intruder on the premises.
- Is an incident involving a child which results in the death of a child, or an accident, incident injury or trauma to a child while being cared for, or educated by, DSCCC, requiring the attention of a registered medical practitioner or admission to hospital.

SOURCES AND RELATED POLICIES

Sources

- *Early Childhood Management Manual*, ELAA
- OHS in Early Childhood Services (ELAA): www.ohsinecservices.org.au
- WorkSafe Victoria: www.worksafe.vic.gov.au

Service policies

- *Child Safe Environment Policy*

- *Code of Conduct Policy*
- *Emergency and Evacuation Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Participation of Volunteers and Students Policy*
- *Privacy and Confidentiality Policy*
- *Road Safety and Safe Transport Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider and Persons with Management and Control is responsible for:

- providing and maintaining a work environment that is safe and without risks to health (OHS Act: Section 21). This includes ensuring that:
 - there are safe systems of work
 - all plant and equipment provided for use by staff, including machinery, appliances and tools etc., are safe and meet relevant safety standards
 - substances, and plant and equipment, are used, handled, and stored safely
 - material safety data sheets are supplied for all chemicals kept and/or used at the service (refer to: www.ohsinecservices.org.au)
 - there are adequate welfare facilities e.g. first aid and dining facilities etc.
 - there is appropriate information, instruction, training and supervision for employees

(Note: *This duty of care is owed to all employees, children, parents/guardians, volunteers, students, contractors and any members of the public who are at the workplace at any time*)
- ensuring there is a systematic risk management approach (refer to: www.ohsinecservices.org.au) to the management of workplace hazards. This includes ensuring that:
 - hazards and risks to health and safety are identified, assessed and eliminated or, if it is not possible to remove the hazard/risk completely, effectively controlled
 - measures employed to eliminate/control hazards and risks to health and safety are monitored and evaluated regularly
- ensuring regular safety audits of the following:
 - indoor and outdoor environments
 - all equipment, including emergency equipment
 - playgrounds and fixed equipment in outdoor environments
 - cleaning services
 - horticultural maintenance
 - pest control
- monitoring the conditions of the workplace and the health of employees (OHS Act: Section 22)
- protecting other individuals from risks arising from the service's activities, including holding a fete or a working bee etc., or any activity that is ancillary to the operation

of the service e.g. contractors cleaning the premises after hours (OHS Act: Section 23)

- providing adequate instruction to staff in safe working procedures, and informing them of known hazards to their health and wellbeing that are associated with the work that they perform at the service
- ensuring that all plant, equipment and furniture are maintained in a safe condition
- developing procedures to guide the safe use of harmful substances, such as chemicals, in the workplace
- ensuring that OHS accountability is included in all position descriptions
- allocating adequate resources to implement this policy
- displaying this policy in a prominent location at the service premises
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
- implementing/practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
- implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
- identifying and providing appropriate resources, induction and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
- ensuring the Nominated Supervisor, educators, staff, contractors, volunteers and students are kept informed of any relevant changes in legislation and practices in relation to this policy
- consulting appropriately with employees on OHS matters including:
 - identification of hazards
 - making decisions on how to manage and control health and safety risks
 - making decisions on health and safety procedures
 - the need for establishing an OHS committee and determining membership of the committee
 - proposed changes at the service that may impact on health and safety
 - establishing health and safety committees
- notifying WorkSafe Victoria about serious workplace incidents, and preserving the site of an incident (OHS Act: Sections 38–39) Attachment 1
- holding appropriate licenses, registrations and permits, where required by the OHS Act
- attempting to resolve OHS issues with employees or their representatives within a reasonable timeframe
- not discriminating against employees who are involved in health and safety negotiations
- allowing access to an authorised representative of a staff member who is acting within his/her powers under the OHS Act
- producing OHS documentation as required by inspectors and answering any questions that an inspector asks
- not obstructing, misleading or intimidating an inspector who is performing his/her duties.

The Nominated Supervisor and Person in Day to Day Charge is responsible for:

- ensuring that all educators/staff are aware of this policy, and are supported to implement it at the service
- organising/facilitating regular safety audits of the following:
 - indoor and outdoor environments
 - all equipment, including emergency equipment
 - playgrounds and fixed equipment in outdoor environments
 - cleaning services
 - horticultural maintenance
 - pest control
- ensuring that all cupboards/rooms are labelled accordingly, including those that contain chemicals and first aid kits, and that child-proof locks are installed on doors and cupboards where contents may be harmful
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
- ensuring that all equipment and materials used at the service meet relevant safety standards
- ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children (refer to *Road Safety and Safe Transport Policy*)
- implementing and practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
- implementing and reviewing this policy in consultation with the Approved Provider, educators, staff, contractors and parents/guardians
- identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
- keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy.

The OHS Staff Representative will:

- Review Children's Incident/Injury/Trauma/Illness Record Book twice per annum to identify any black spots or recurrent issues and report same to the Management Committee as necessary.
- Ensure regular inspections of the centre are completed and documented, risk assessment results are reported and appropriate actions carried out to reduce or remove hazards or risks.
- Ensure any OH&S issues are discussed at staff meetings.
- Participate in the development, implementation and review of OH&S policies and procedures.

Educators and other staff are responsible for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the Approved Provider, including:

- following OHS rules and guidelines
- helping to ensure housekeeping is of the standard set out in service policies
- attending OHS training as required
- reporting OHS incidents
- co-operating with OHS investigations
- encouraging good OHS practices with fellow employees and others attending the service
- assisting the Approved Provider with tasks relating to OHS, such as conducting OHS inspections during working hours
- not interfering with safety equipment provided by the Approved Provider
- practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
- teaching children about positive safety behaviours, including correct use of protective equipment, correct use of facilities and equipment, and identifying and responding to hazards
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
- maintaining a clean environment daily, and removing tripping/slipping hazards as soon as these become apparent
- keeping up to date with current legislation on child restraints in vehicles if transporting children (refer to *Road Safety and Safe Transport Policy*)
- implementing and reviewing this policy in consultation with the Approved Provider, Nominated Supervisor, educators, staff, contractors and parents/guardians.

Students on placements, volunteers, contractors and parents/guardians at the service are responsible for:

- being familiar with this policy
- co-operating with reasonable OHS rules implemented by the service
- not acting recklessly and/or placing the health and safety of other adults or children at the service at risk.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to occupational health and safety issues
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures (Regulation 172(2)).

ATTACHMENTS

Attachment 1: Injury/Incident Notification and Investigation

Attachment 2: Manual Lifting Procedures

Attachment 3: Other risk minimalization procedures

OCCUPATIONAL HEALTH AND SAFETY POLICY

Date Reviewed	Details of Changes (if any)	Date of Next Review
December 2021	Updated to ELAA Policy with edits.	December 2023
April 2016	Reviewed in consultation with Director and Staff OHS Rep with minor amendments made.	April 2018
February 2016	Inclusion of the Drug and Alcohol Management Requirements for Bus Operation in the Appendix.	April 2016
April 2014	The following policies incorporated into OH&S Policy: <ul style="list-style-type: none">• Minimising Use of Toxic Products Policy• Maintenance of Buildings and Equipment Policy □ Use and Storage of Dangerous Products Policy• Non-Smoking Policy	April 2016
August 2012	Updated Outdoor Yard Safety Checklist 2012	February 2013
June 2012	Update of relevant legislation and various matters arising from Staff comments	February 2013
April 2010	Update of relevant legislation	February 2012
March 2008	Removal of OH&S Subcommittee	February 2010
February 2007	Inclusion of Anaphylaxis information	February 2010

July 2006	2005 KPV Model Policy on OH&S used as template. DSCC Policy 2004 reviewed	July 2007
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MINIMISING USE OF TOXIC PRODUCTS POLICY (superseded)

Date Reviewed	Details of Changes (if any)	Date of Next Review
April 2014	Incorporated into Occupational Health & Safety Policy	Nil
April 2010	No changes	February 2012
March 2008	Initial DSCCC policy based on National Childcare Accreditation Council advice.	February 2010

MAINTENANCE OF BUILDINGS AND EQUIPMENT POLICY (superseded)

June 2012	Reference to new regulations and corresponding procedures	June 2012
April 2010	Updated with Children's Services Regulations 2009 Checklists added to Appendix 1 Minor text corrections	April 2012
March 2008	Initial DSCCC policy based on National Childcare Accreditation Policy.	March 2010

USE AND STORAGE OF DANGEROUS PRODUCTS POLICY (superseded)

Date Reviewed	Details of Changes (if any)	Date of Next Review
March 2010	No substantive change	February 2012
February 2008	New policy – sourced from OH&S policy and 2005 KPV Model Policy	February 2010

April 2014	Incorporated back into OHS Policy – no clear justification for duplication	Nil
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NON-SMOKING POLICY (superseded)

Date Reviewed	Details of Changes	Date of Next Review
March 2011	Minor typographical amendments	March 2014
March 2008	Initial DSCCC policy based on 2006 KPV Non-Smoking Policy.	March 2011
April 2014	Incorporated into OHS Policy	Nil

Attachment 1: Injury/Incident Notification and Investigation

DETAILED GUIDANCE ON INCIDENT INVESTIGATION

INCIDENT INVESTIGATION PRINCIPLES

In addition to reporting an incident, it must also be investigated. Effective incident investigation is an integral component of an organisation's hazard management program, and the following general principles should be followed:

- In case of injury, first make sure that the injured worker is properly cared for.
- Remember that the main purpose of incident investigation is to establish all the contributing factors, and to take steps to prevent any similar incident.
- Where practicable, have the scene kept undisturbed and investigate as soon as possible. In serious cases, you may need to wait for WorkSafe to investigate first.
- Thorough, extensive, detailed investigations for serious injury/illness and dangerous occurrences, and for minor injury/illness, near misses and asset or property damage with high potential severity.
- The investigation should not be conducted as a 'witch hunt' to find out who is to blame or because the compensation process requires it.
- It is important to avoid the effects of emotional feelings that may be present in any incident investigation. Watch out for the use of words such as 'blame', 'cause', 'unsafe', 'careless', 'fault', 'wrong', 'bad'.
- Look for the contributing factors and their effects.
- Whenever possible, go to the scene of the incident for initial investigation – take photos, make drawings and take measurements.
- Interview all witnesses, one at a time and separately, and reassure each person about the purpose of the investigation.
- Be objective: don't have a fixed opinion in advance.
- Express sincere appreciation to anyone who helped in the investigation.
- Record all data accurately, completely and in writing!

There are three key elements of effective incident investigation: observation, description and analysis.

Observation

Inspect the scene and take photographs if possible, recording any damage regardless of the need for repair. Observation also includes the recording of details from witnesses, and determining whether they actually saw the incident or whether they are surmising.

Description

This involves providing a detailed description of the incident for others to understand the sequence of events leading to the incident. This is generally summarised from the observations and may include photos, statements, plans and so on.

Analysis

Establishing precisely what has occurred, which involves analysis of the descriptions, including information from key witnesses. Here it may be helpful to make use of people who are familiar and unfamiliar with the workplace

Conducting incident investigation interviews

The first step in a normal incident investigation is (if possible) to interview the employee involved. Here is some guidance on good interview technique:

- Put the worker at ease: Remind them that you are interested solely in preventing a recurrence of the incident and that you can only do this with their help. Convince them that the interview is simply a joint effort to prevent other incidents that could be more serious. A friendly and understanding manner is a necessity in gaining cooperation.
- Conduct the interview at the scene of the incident whenever possible: It will help the person explain, and you understand. Make the interview as private as you can. This will not only put the worker at ease, but will also prevent his/her observations and ideas from being influenced by the opinions of others. It also avoids possible embarrassment over any mistakes.
- Ask for his/her version of the incident: Be sure he/she understands their version just as they saw it and not 'dressed up' for your benefit. Then let them tell it! Try not to interrupt them. If you don't understand something, wait until they have finished their story and then ask. Above all, don't make judgements or judgemental remarks. This will only put him/her on the defensive and defeat the whole purpose of the interview.
- Ask any necessary questions: The key word here is 'necessary'. Limit your questions to facts as much as possible, particularly early in the interview. Find out:
 - What happened?
 - What was done?
 - How it was done?

Try to avoid 'why'-type questions, such as 'Why were you doing...?' Wait until you have all other information because 'why' questions are likely to make him/her defensive. Ask open questions – ones that can't be answered 'yes' or 'no' – whenever possible. They will give you much more information. Naturally, all questions should be asked in a friendly, constructive manner.

- Close the interview on a positive note: The best way to wind up an interview is by discussing strategies that can be taken to control the incident from happening again. This reaffirms the purpose of the interview in the employee's mind and will assure his/her further cooperation.

These same techniques can be used in interviewing a witness to an incident. Witnesses should be treated just as tactfully as a person involved in an incident. They 'don't want to get anyone in trouble' any more than a person wants to incriminate him/herself.

A witness does not have to be an eyewitness. He/she may simply be someone familiar with the circumstances involved in the incident. In the case of a fatality or serious injury, a witness may be the only source of information for the incident investigation. Whether a person is involved in or is a witness to an incident, the interview should be held as soon as possible while the circumstances are fresh in the mind.

HOW TO MAKE INVESTIGATIONS SUCCESSFUL

Successful investigations are those in which an organisation learns what has happened and can then apply this to identify immediate and underlying causes, which can then be used to determine corrective action to prevent similar incidents occurring again.

In addition to the guidance provided above, some other important factors required for successful investigations are:

- allow sufficient time for the investigation
- ensure personal bias is removed
- ensure consultation with employees throughout the investigation process
- ensure relevant contributing factors are considered
- ensure appropriate risk control measures are selected and included in recommended corrective action
- ensure corrective action is tracked through to completion and that a review is conducted to determine if they have proven to be effective.

Ensuring that at least one person in the investigation team is familiar with the guidance in this OHS section of the manual will help with due consideration of these important factors.

REGISTER OF STAFF INCIDENT/INJURY/TRAUMA/ILLNESS RECORD

The employer shall ensure that Register of Injury forms is present in the workplace and that employees are aware of the location of the forms.

NOTIFICATION PROCEDURES AND INVESTIGATION

The procedure for the notification and investigation is as follows:

INCIDENT/INJURY NOT CLASSIFIED AS SERIOUS

Notification

All injuries and incidents, where a person was or could have been injured, must be reported as soon as possible using the Register of Injury forms [Attachment 3].

The Director will notify the Management Committee of such incidents.

Investigation of Injuries

Where considered appropriate, on receipt of an injury report, the Management Committee shall arrange for an investigation of the incident/injury and set in place an action plan as appropriate.

ACCIDENT OR INCIDENTS THAT SERIOUSLY AFFECT PERSONS INVOLVED

Notification

Any workplace incident/injury that seriously affects the safety of employees or others in the workplace must be reported to the Director/Team Leader immediately. As soon as possible after the incident/injury occurs, the employee/adult affected, if able, must complete a Register of Injury form and provide a copy to the Chair of the Management Committee.

Accidents relating to children are to be recorded in the Children's Incident / Injury / Trauma / Illness Record Book (as required under regulation 87 of the Education and Care Services National Regulations 2011).

Work Safe Victoria Notification

Under relevant Occupational Health and Safety legislation, DSCCC is responsible for advising Work Safe Victoria of serious incidents/injuries.

Notification is required:

- Where an incident at a workplace or equipment site results in death or serious injury
- Of dangerous occurrences which seriously endanger the lives or the health and safety of people in the immediate vicinity.

The Chair of the Management Committee or Director will make telephone contact with Work Safe on 13 23 60 (24 hour emergency response line) immediately the incident is reported.

The Chair of the Management Committee or Director will then complete Work Safe Victoria Incident Notification Form and ensure that it is sent to the nearest Work Safe Office within 48 hours.

Notification to Other Authorities

If deemed to be a serious incident under the Education and Care Services National Regulations 2011 (NSW) (refer regulations 12, 174 and 176), the Director will advise the relevant regulatory authority within the timeframes specified. The relevant regulatory authority may be the Department of Education and Training or the Australian Children's Education and Care Quality Authority.

Incident Investigation

On receipt of an Injury/Incident Report the Chair of the Management Committee (or nominee) shall arrange for an investigation to commence within two working days of the incident/injury and be completed within two operational days for the centre.

Summary of key tasks in the interview of employees or other persons materially involved in an incident or issue:

- Explain at the outset that this is a formal interview in accordance with DSCC's procedures.
- Explain they may have a witness present.
- Ask about the incident:
 - Provide each person with an opportunity to present their own version of the incident.
 - Present any specific "allegations" for responses. ○ Present all details one by one and record the answers.
 - Ask any other relevant questions arising from the statements by other persons, particularly if there is any conflict or contradiction.
 - Give the opportunity to review earlier "version/s" of events outlined during the interview.

Post Investigation Actions

Following completion of the investigation of an accident or incident that seriously affected the persons involved, a report is prepared by the Chair of the Management Committee for the Management Committee.

The report will also propose any relevant recommendations or actions.

A Management Committee meeting will be convened as a priority to receive the report and recommendations. An appropriate Action Plan will be determined with relevant timelines.

Staff involved in the injury/incident investigation will be advised as soon as possible of:

- Results of the investigation.
- The Action Plan.

The Action Plan is to be implemented within designated timelines and the Chair of the Management Committee will be responsible for ensuring that the Action Plan is implemented.

Return to Work

For significant workplace injuries a return to work plan will be put in place for an injured staff member who has been off work with no current work capacity for 20 calendar days or more.

A return to work plan will be completed in conjunction with the treating medical practitioner, as required by Work Safe Victoria.

DSCC will endeavour to support injured workers in their return to work for any level of workplace injury.

REGISTER OF INJURY

[DAWSON STREET CHILDCARE CO-OPERATIVE]

Employee Particulars

Name:	Employee No:
Address:	Supervisor:
Date of Birth:	Occupation:
Sex:	

Particulars of Incident

Date of incident:	Time of incident:	am <input type="checkbox"/>	pm <input type="checkbox"/>	Date injury notified:
Location at time of incident:				
Description of incident:				
Were there any witnesses to the incident:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Name:		Phone:		
Name:		Phone:		
Did you sustain an injury as a result of the incident:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Particulars of Injury

Nature of injury:	
Part/s of body injured:	
Did you require treatment/first aid:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Treatment given by:	
Details of treatment:	
Did the Employee return to work after the treatment: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, initiate RTW procedures	
<div style="display: flex; justify-content: space-around;"> Normal Duties <input type="checkbox"/> Alternative Duties <input type="checkbox"/> </div>	

Name of person making entry:
Relationship to injured person:

Signature:	Date:
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Employer Acknowledgment

Name:	Signature:
Position:	Date:
Work Safe Victoria Notification Required:	Yes <input type="checkbox"/> No <input type="checkbox"/>
To whom	Date: Time:

Copy of Dawson Street Childcare Co-operative Privacy Collection Statement to be provided to the Employee.

Attachment 2: Manual Lifting Procedures

MANUAL LIFTING PROCEDURES

Correct procedures and practices for safe manual handling must be observed by all staff at DSCC.

Care of our backs is most important. Be sure that correct lifting procedures are maintained at all times - "Keep your back straight and bend your knees, keep your elbows close to the body."

Lifting of children should be kept to a minimum, with staff getting down to the child's level to comfort and talk to them rather than lifting the child up. The sides of cots must always be lowered before putting a child in or taking them out.

Staff are encouraged to use their common sense in assessing the risk associated with manual lifting and observe the following correct lifting practices:

- Staff must never twist while lifting.
- When staff lift a child or object they should not stretch over and lift, but lean close and raise as close as possible to their body.
- Staff should:
 - Kneel where possible rather than bend down.
 - Avoid sitting on child sized chairs. ○ Refrain from carrying children on their hip. ○ Transfer heavy items to smaller containers to reduce weight.
 - Ensure two or more staff help with the lifting or moving of heavy or awkward equipment or furniture.
 - Heavy goods need to be stored on lower levels to avoid the necessity of lifting them above shoulder height.
- When lifting staff must:
 - Place their feet apart in a striding position in line with their hips. ○ Keep their back straight. ○ Bend from their knees.
 - Brace their stomach muscles. ○ Hold child or object close to their body.
 - Move their feet, not their spine, to stand up and lift using their legs not back.
 - Prepare to move in a forward direction.

Attachment 3: Other risk minimalisation procedures

INFECTION CONTROL

Good hygiene practices for both staff and children are encouraged by DSCCC and are important for assisting in infection control and prevention of disease transmission. The most common ways of controlling infection are hand washing, immunization, careful cleaning, disinfecting and exclusion of infected staff and children.

Children are involved in discussions that are developmentally appropriate, regarding rules of hygiene and dental care.

The Centre provides parents with information regarding practices and principles of good hygiene and dental care.

HAND WASHING

Hand washing with soap and warm running water is encouraged for staff and children.

For staff this is necessary:

- Before preparation, serving or eating food
- After each nappy change and after assisting with toileting
- After handling animals
- After cleaning tasks
- Whenever cross infections from body fluids is possible (e.g. administering medicines, applying first aid, wiping of mouth or nose.) For children this is necessary:
- Before preparation, serving or eating food
- After toileting
- After handling animals.

Toilets and hand washing facilities are accessible to children. Children are actively encouraged to flush toilets and wash their hands after going to the toilet. Paper towel is provided in each of the children's bathrooms.

EQUIPMENT CLEANING

- Toys and equipment are disinfected on a regular basis and as required at other times.
- Tables and chairs are cleaned daily and at all working bees.
- Change table mats are disinfected each day and after each nappy change.
- Children's bedding is washed at least once per week, after soiling and each individual child has their own bedding.
- The Centre is cleaned daily after hours by contract cleaners.

NAPPIES

- The change bench must be disinfected and wiped with paper towels (disposed of when finished) after each child to prevent cross infection.

Staff must wash their hands after each nappy change and after assisting each child with toileting.

- Soap, hand sanitiser and disposable gloves are provided for staff use during these routines.
- Nappy buckets should have a closed lid at all times and must be emptied at the end of each day, moved to laundry and soaked overnight. The change mats and benches must be kept free of residue and sand etc at all times.
- Children must never be left unattended on a change bench as accidents happen very quickly. One hand is to be kept on the child at all times, eg: when reaching for wipes, etc.
- During this time, staff should ensure optimum hygiene practices are maintained.
- Please refer to the detailed procedures in the nappy change area.

TOILET TRAINING

To ensure good hygiene practices for both staff and children during the toilet training process, Toilet Training guidelines have been put in place.

BLOOD SPILLS

- If treating an open bleeding wound, disposable gloves are to be worn.
- Wash any part of the body with soap and water that comes into contact with blood or body fluids immediately after exposure. Flush eyes with saline solution and mouth with clean water if necessary.
- Open cuts and sores on children and staff must be covered with band-aid/bandage.
- The blood spills kit and clean chux are to be used to stop bleeding and soiled material disposed of immediately after use.

STRESS MANAGEMENT

Stress is a normal part of life. Ongoing stress within the workplace can cause a range of physical or emotional symptoms. It is important for individuals to manage their stress levels.

As a staff team it is important that regular communication between meetings is made to prevent a build up of minor problems becoming major issues. Staff need to work as a supportive team. This could simply mean being ready to listen sympathetically, offering moral support or praising a co-worker when something they have planned for has been successful.

Ongoing and constructive strategies need to be developed to prevent stress related illnesses occurring. Prevention rather than cure is a necessary attitude.

If staff are feeling any signs of stress they should speak to the Director so strategies and arrangements can be made to prevent and control this.

CHEMICAL HAZARDS

A chemical register is kept on the premises together with Material Safety Data Sheets for each chemical used.

Chemicals are stored appropriately, properly labelled and are inaccessible to children. Staff and contract cleaners are informed of appropriate ways of handling the chemicals on the premises. Any chemical spills will be immediately cleaned up by staff.

During centre opening hours, staff will use the "Back to Basics" range of products, which are non-hazardous.

Cleaners using stronger substances will work outside of the hours children are present at the centre.

Potentially dangerous products such as bleach will be used sparingly and, where possible, before children arrive at the centre.

During the day, staff will use warm soapy water only to clean tables and chairs. When required to clean other items and surfaces staff will do so in accordance with the hygiene policy.

Chemicals and material database are to be checked once a year.

Please refer to Food Safety Program for other detailed information on chemical hazards and handling.

Environmental Hazards

MAINTENANCE OF BUILDING AND EQUIPMENT

- Regular inspections of the Centre will be conducted to identify hazards or risks. Any problems identified will be documented and passed on to the Director or OH&S Officer.
If staff identify maintenance problems during the course of their daily inspection, they will document the problem and pass this on to the Director or OH&S Officer who will contact the Management Committee.
- If the problem needs urgent attention, being an immediate risk to staff, children or visitors to the Centre, the Director or OH&S Officer will put in place temporary measures to ensure the staff and children's safety and then contact the appropriate person to repair the problem.
- Repairs that do not present an immediate risk to children, staff or visitors will be assessed by the OH&S Officer and passed on to the appropriate person to repair the problem (eg: Council).
- Repairs will be carried out in accordance with the OH&S Policy and will be documented in the OH&S records.

CARE OF EQUIPMENT

- All staff are required to care for Centre equipment in an appropriate manner and to ensure that it is clean and safe.
- Broken equipment should be removed and placed in the staff yard, handed to the OH&S officer, discarded or identified for repair.
- Staff are required to inform the OH&S Officer of any broken equipment.
- Equipment must be stored in the appropriate places.
- The sandpit must be covered and checked daily.
- To ensure safety from dangerous objects, the outside grounds and equipment must be checked each day prior to the children going outside.

Procedure if a syringe is found in or around the grounds of DSCC:

- Wear rubber / latex gloves when handling a syringe for disposal.
- Take the disposal unit to the syringe; keep other staff and children clear of the area, to decrease the risk of needle stick injury.
- Never attempt to recap the needle.

Disposal kits/containers and other information are available from the Moreland City Council.

STINGING AND BITING INSECTS / POTENTIALLY DANGEROUS PLANTS

- Staff will endeavour to be aware of biting and stinging insects in the environment.
- Staff will endeavour to remove and not introduce potentially dangerous plants to the centre environment.

Staff will take appropriate precautions to control the potential hazards to children and themselves.

- The Centre must be regularly checked for insects and their nests, webs, etc.
- Children are educated at an appropriate level to the dangers of biting and stinging insects.
- There will be at least one member of staff at the centre at all times who has completed Allergy Management Training and all staff shall be familiar with the centre's Anaphylaxis Policy.

CHILDREN AT RISK OF ANAPHYLAXIS

- Staff and parents shall be familiar and compliant with the DSCC Anaphylaxis Policy.
- A staff member shall be appointed as Anaphylaxis Liaison and will ensure, alongside the OH&S representative, that regular risk management assessments are conducted.
- For further details and information on roles & responsibilities refer to the DSCC Anaphylaxis Policy.

SMOKING

- Smoking is not permitted anywhere within the Centre, playgrounds or anywhere else on the premises.
- 'No Smoking' signs must be displayed at the front gate and throughout the workplace.

