

### DEFINITIONS:

**Absence seizure:** Occurring mostly in children, this consists of brief periods of loss of awareness, most often for less than 10 seconds. Some children can experience these types of seizures multiple times during the day which may compromise learning. Absence seizures can be mistaken for day-dreaming. They are no longer called ‘petit mals’.

**Abuse:** (In the context of this policy) refers to physical and/or emotional mistreatment, and/or lack of care of the child. Examples include sexual abuse, the witnessing of family violence and any non-accidental injury to a child.

**Abuser:** A person who mistreats and/or harms a child or young person.

**Active play:** Large muscle-based activities that are essential for a child’s social, emotional, cognitive and physical growth and development.

- Child-initiated active play is developed by the child through exploration of the outdoor environment, equipment and games.
- Adult-guided active play encourages children’s physical development through promoting movement skills in a non-competitive environment.
- Physical activity includes sport, incidental exercise and many forms of recreation.

**Actively working towards:** An educator who is enrolled in a course for a qualification, and provides the Approved Provider with documentary evidence of their commencement in the course, their satisfactory progress towards completion of the course and ongoing evidence that they are meeting all the requirements to maintain their enrolment. Educators who are ‘actively working towards’ an approved diploma-level qualification must also hold an approved certificate III level education and care qualification or have completed the mandatory units of study in an approved certificate III level education and care qualification as determined by the national authority (ACECQA).

**Actual conflict of interest:** One where there is a real conflict between a Committee of Management member’s responsibilities and their private interests.

**Additional needs:** A broad term that can include families and children experiencing disability, a medical condition, a developmental concern, an emotional need (resulting from trauma, abuse or grief), family displacement (due to war or refugee status), domestic violence, mental illness, family separation or divorce.

**Adequate supervision:** (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision

contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

**Adrenaline auto-injection device:** An intramuscular injection device containing a single dose of adrenaline designed to be administered by people who are not medically trained. This device is commonly called an EpiPen® or an Anapen®. As EpiPen® and Anapen® products have different administration techniques, only one brand should be prescribed per individual and their anaphylaxis medical management action plan (refer to *Definitions*) must be specific for the brand they have been prescribed. Used adrenaline auto-injectors should be placed in a rigid sharps disposal unit, or another rigid container if a sharps container is not available.

**Adrenaline auto-injection device training:** Training in the use of the adrenaline auto-injection device that is provided by allergy nurse educators or other qualified professionals such as doctors or first aid trainers, through accredited training institutions or through the use of a self-paced training CD and auto-injection device trainer.

**Adrenaline auto-injector kit:** An insulated container with an unused, in-date adrenaline auto-injection device, a copy of the child's anaphylaxis medical management action plan, and telephone contact details for the child's parents/guardians, doctor/medical personnel and the person to be notified in the event of a reaction if the parents/guardians cannot be contacted. If prescribed, an antihistamine should also be included in the kit. Auto-injection devices must be stored away from direct heat.

**AEDs:** Antiepileptic drugs used for the treatment of many epilepsy syndromes. AEDs do not cure epilepsy but most seizures can be prevented by taking medication regularly one or more times a day. For many people, medication makes it possible to live a normal, active life, free of seizures. Others may continue to have seizures, but less frequently.

**Allergen:** A substance that can cause an allergic reaction.

**Allergic reaction:** A reaction to an allergen. Common signs and symptoms include one or more of the following: hives, tingling feeling around the mouth, abdominal pain, vomiting and/or diarrhoea, facial swelling, coughing or wheezing, difficulty swallowing or breathing, loss of consciousness or collapse (child pale or floppy), or cessation of breathing.

**Allergy:** An immune system response to an external stimulus that the body identifies as an allergen. People genetically programmed to experience an allergic reaction will make antibodies to particular allergens.

**Anapen®:** A type of adrenaline auto-injection device (refer to *Definitions*) containing a single dose of adrenaline. The administration technique in an Anapen® is different to that of the

EpiPen®. The child's anaphylaxis medical management action plan (refer to *Definitions*) must be specific for the brand they have been prescribed.

**Anaphylaxis:** A severe, rapid and potentially fatal allergic reaction that affects normal functioning of the major body systems, particularly the respiratory (breathing) and/or circulation systems **Anaphylaxis action plan:** Refer to the definition for *anaphylaxis medical management action plan* below.

**Anaphylaxis management training:** Training that includes recognition of allergic reactions, strategies for risk minimisation and risk management, procedures for emergency treatment and facilitates practise in the administration of treatment using a adrenaline auto-injection device (refer to *Definitions*) trainer. Approved training is listed on the ACECQA website (refer to *Sources*).

**Anaphylaxis medical management action plan** (sometimes simply referred to as an Action Plan): An individual medical management plan prepared and signed by the child's treating, registered medical practitioner that provides the child's name and allergies, a photograph of the child, a description of the prescribed anaphylaxis medication for that child and clear instructions on treating an anaphylactic episode. The plan must be specific for the brand of auto-injection device prescribed for each child. Examples of plans specific to different adrenaline auto-injector brands are available for download on the Australasian Society of Clinical Immunology and Allergy (ASCIA) website: [www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis](http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis)

**Anti-spyware:** Software designed to remove spyware: a type of malware (refer to *Definitions*), that collects information about users without their knowledge.

**Approved anaphylaxis management training:** Training that is approved by the National Authority in accordance with Regulation 137(e) of the *Education and Care Services National Regulations 2011*, and is listed on the ACECQA website (refer to *Sources*).

**Approved care:** Care given by a service provider that has been approved by the Family Assistance Office to receive Child Care Benefit payments on behalf of eligible families. Most long day care, family day care, before-and-after school care, vacation care, some occasional care and some in-home care childcare services are approved providers. Details are available at [www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/](http://www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/)

**Approved Emergency Asthma Management (EAM) training:** Training that is approved by the National Authority in accordance with Division 7 of the National Regulations, and is listed on the ACECQA website: <http://www.acecqa.gov.au>. EAM training provides knowledge about the underlying causes of asthma, asthma triggers, and the recognition and treatment of an asthma attack.

**Approved first aid qualification:** A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Approved learning framework:** A document that outlines practices that educators and coordinators must use to support and promote children's learning. The *Early Years Learning Framework (Belonging, Being & Becoming)* and the *Victorian Early Years Learning and Development Framework* are approved learning frameworks for use in Victoria (refer to *Sources*).

**Approved Provider:** An individual or organisation that has completed an application form and been approved by the Regulatory Authority as fit and proper (in accordance with Sections 12, 13 and 14 of the National Law) to operate one or more education and care services.

**Approved service:** An education and care service for which a service approval exists. A request for service approval must be made in writing to the Regulatory Authority and include prescribed information including details of the Nominated Supervisor and their written consent to be nominated as such.

**Assault:** An incident where a person causes injury, pain, discomfort or damage to another person. It also includes insult or deprivation of liberty. Assault can be physical or verbal.

**Asthma Action Plan:** A record of information on an individual child's asthma and its management, including contact details, what to do when the child's asthma worsens and the treatment to be administered in an emergency. Asthma Action Plan templates can be downloaded from The Asthma Foundation of Victoria's website: [www.asthma.org.au](http://www.asthma.org.au). A sample plan specifically for use in children's services is provided in this policy as Attachment 2.

**Asthma Child and Adolescent Program (ACAP):** A Commonwealth Government funded, one-hour asthma training program available free of charge to all preschool staff (four-year-old funded program). This training covers asthma management and first aid in an emergency. Asthma Australia recommends that all education staff working on site (teaching and non-teaching) attend an ACAP session. The program also provides resources to parents/guardians and carers of children with asthma.

**Asthma emergency:** The onset of unstable or deteriorating asthma symptoms requiring immediate treatment with reliever medication

**Asthma first aid kit:** Kits should contain:

- reliever medication
- 2 small volume spacer devices
- 2 compatible children's face masks
- record form
- asthma first aid instruction card.

The Asthma Foundation of Victoria recommends that spacers and face masks are for single-use only. It is essential to have at least two spacers and two face masks in each first aid kit, and these should be replaced once used.

**Asthma Friendly Children's Services Program:** A program developed by The Asthma Foundation of Victoria to provide a safer environment for children in kindergarten, childcare, family day care and out-of-school hours care. This program also gives staff the confidence and skills to care for a child with asthma and gives parents/guardians peace of mind. To be recognised as an Asthma Friendly Children's Service, services must address and fulfill five essential criteria, which will be assessed by The Asthma Foundation of Victoria. Upon accreditation, the service will receive a certificate and window sticker. This accreditation is valid for three years.

**Asthma triggers:** Things that may induce asthma symptoms, for example, pollens, colds/viruses, dust mites, smoke and exercise. Asthma triggers will vary from child to child.

**At-risk child:** A child whose allergies have been medically diagnosed and who is at risk of anaphylaxis.

**Attendance record:** Kept by the service to record details of each child attending the service including name, time of arrival and departure, signature of person delivering and collecting the child or of the Nominated Supervisor or educator (Regulation 158(1)).

**Authorised nominee:** (In relation to this policy) a person who has been given written authority by the parents/guardians of a child to collect that child from the education and care service. These details will be on the child's enrolment form.

The National Law and National Regulations do not specify a minimum age limit for an authorised nominee. Each service will need to determine if a person under the age of 18 is able to be an authorised nominee and, if so, what constitutes the minimum acceptable age at that service.

**AV How to Call Card:** A card that the service has completed containing all the information that Ambulance Victoria will request when phoned on 000. Once completed, this card should be kept within easy access of all service telephone/s. A sample card can be downloaded from [www.ambulance.vic.gov.au/Education/Calling-000-Triple-Zero.html](http://www.ambulance.vic.gov.au/Education/Calling-000-Triple-Zero.html)

**Behaviour guidance:** A means of assisting children to self-manage their behaviour. It differs from traditional 'behaviour management' or 'discipline' which generally implies that an adult is 'managing' children's behaviour or using punishment to control children. Behaviour guidance applies to all forms of behaviour, not just behaviours labelled as 'negative'.

**Behaviour guidance plan:** A plan that documents strategies to assist an educator in guiding a child with diagnosed behavioural difficulties to self-manage his/her behaviour. The plan is developed in consultation with the Nominated Supervisor, educators, parents/guardians and families, and other professional support agencies as applicable.

**Blood-borne virus (BBV):** A virus that is spread when blood from an infected person enters another person's bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral hemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risk of contracting a blood-borne virus is negligible.

**Blood glucose meter:** A compact device used to check a small blood drop sample to determine the blood glucose level.

**Bullying:** Repeated verbal, physical, social or psychological behaviour that is harmful and involves the misuse of power by an individual or group towards one or more persons<sup>1</sup>. Bullying occurs when one or more people deliberately and repeatedly upset or hurt another person, damage their property, reputation or social acceptance<sup>2</sup>.

**Chain email:** An email instructing recipients to send out multiple copies of the same email so that circulation increases exponentially.

**Challenging behaviour:** Behaviour that:

- disrupts others or causes disputes between children, but which is part of normal social development
- infringes on the rights of others
- causes harm or risk to the child, other children, adults or living things
- is destructive to the environment and/or equipment
- inhibits the child's learning and relationship with others
- is inappropriate relative to the child's developmental age and background.

**Child:** In Victoria, under the *Children, Youth and Families Act 2005*, a child or young person is a person under 18 years of age.

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<sup>1</sup> [www.bullyingnoway.gov.au](http://www.bullyingnoway.gov.au)

<sup>2</sup> [www.education.vic.gov.au/aboutschool/childhealth/bullying.htm](http://www.education.vic.gov.au/aboutschool/childhealth/bullying.htm)

**Child abuse:** An act or omission by an adult that endangers or impairs a child's physical and/or emotional health and development. Child abuse can be a single incident but often takes place over time. Abuse, neglect and maltreatment (refer to *Definitions*) are generic terms used to describe situations in which a child may need protection. Child abuse includes any and all of the following:

- **Physical abuse:** When a child suffers or is likely to suffer significant harm from an injury inflicted by a parent/guardian, caregiver or other adult. The injury may be inflicted intentionally, or be the consequence of physical punishment or the physically aggressive treatment of a child. Physical injury and significant harm to a child can also result from neglect by a parent/guardian, caregiver or other adult. The injury may take the form of bruises, cuts, burns or fractures, poisoning, internal injuries, shaking injuries or strangulation.
- **Sexual abuse:** When a person uses power or authority over a child, or inducements such as money or special attention, to involve the child in sexual activity. It includes a wide range of sexual behaviour from inappropriate touching/fondling of a child or exposing a child to pornography, to having sex with a child<sup>3</sup>.
- **Emotional and psychological abuse:** Involves continuing behaviour by adults towards children, which erodes social competence or self-esteem over time<sup>4</sup>. It occurs when a person engages in inappropriate behaviours, such as rejecting, ignoring, threatening or verbally abusing a child, or allowing others to do so (Office of the Child Safety Commissioner (OCSC), Victoria).
- **Racial, cultural and religious abuse:** Conduct that demonstrates contempt, ridicule, hatred or negativity towards a child because of their race, culture or religion (OCSC).
- **Neglect:** Refer to definition below.
- **Exposure to domestic/family violence:** When children and young people witness or experience the chronic, repeated domination, coercion, intimidation and victimisation of one person by another through physical, sexual and/or emotional means within intimate relationships (adapted from the Australian Medical Association definition).

**Child Care Benefit (CCB):** A Commonwealth Government payment to help families who use either approved or registered childcare services. All eligible families can receive some Child Care Benefit. Details are available at

[www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/](http://www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/)

**Child FIRST:** A Victorian community-based intake and referral service linked with Family Services. Child FIRST ensures that vulnerable children, young people and their families are effectively linked to relevant services, including Child Protection ([www.cyf.vic.gov.au/family-services/child-first](http://www.cyf.vic.gov.au/family-services/child-first)).

**Child protection:** The term used to describe the whole-of-community approach to the prevention of harm to children. It includes strategic action for early intervention, for the protection of those considered most vulnerable and for responses to all forms of abuse.

**Child Protection Service** (also referred to as Child Protection): The statutory child protection service provided by the Victorian Department of Human Services, to protect children and young people at risk of abuse and neglect. This service also works closely with Family Services (including Child FIRST) to support the assessment and engagement of vulnerable children and families in community-based services ([www.cyf.vic.gov.au/child-protection-family-services/home](http://www.cyf.vic.gov.au/child-protection-family-services/home)).

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<sup>3</sup> Office of the Child Safety Commissioner, Victoria:

[http://www.kids.vic.gov.au/downloads/childsafes\\_organisation.pdf](http://www.kids.vic.gov.au/downloads/childsafes_organisation.pdf)

<sup>4</sup> DHS, Office for Children:

[http://www.dhs.vic.gov.au/\\_data/assets/pdf\\_file/0019/574210/child-sexual-abuse-understanding.pdf](http://www.dhs.vic.gov.au/_data/assets/pdf_file/0019/574210/child-sexual-abuse-understanding.pdf)

**Child sex offender:** Someone who sexually abuses children, and who may or may not have prior convictions.

**Children with additional needs:** Children whose development or physical condition requires specialist support, or children who may need additional support due to language, cultural or economic circumstances (refer to *Inclusion and Equity Policy*).

**Cleaning:** A process that removes visible contamination such as food waste, dirt and grease from a surface. This process is usually achieved by the use of water and detergent. During this process, micro-organisms will be removed but not destroyed.

**Clothing for sun protection:** Clothing that is loose-fitting, made from cool, densely woven fabric and covers as much skin as possible: tops with elbow-length sleeves and, if possible, collars and knee-length or longer-style shorts and skirts. Singlet tops and shoestring tops/dresses do not provide adequate protection in the sun.

**Code of conduct:** A set of rules or practices that establish a standard of behaviour to be followed by individuals and organisations. A code of conduct defines how individuals should behave towards each other, and towards other organisations and individuals in the community (refer to *Code of Conduct Policy*).

**Communicable disease:** A disease capable of being transmitted from an infected person or species to a susceptible host, either directly or indirectly.

**Communication plan:** A plan that forms part of the policy outlining how the service will communicate with parents/guardians and staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of anaphylaxis is enrolled at a service.

**Complaint:** (In relation to this policy) a complaint is defined as an issue of a minor nature that can be resolved promptly or within 24 hours, and does not require a detailed investigation. Complaints include an expression of displeasure, such as poor service, and any verbal or written complaint directly related to the service (including general and notifiable complaints). Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless related to the safety of the children) and issues related to the legal business entity, such as the incorporated association or co-operative.

**Complaints and Grievances Register:** (In relation to this policy) records information about complaints and grievances received at the service, together with a record of the outcomes. This register must be kept in a secure file, accessible only to educators and Responsible Persons at the service. The register can provide valuable information to the Approved Provider on meeting the needs of children and families at the service.

**Computer virus:** Malicious software programs, a form of malware (refer to *Definitions*), that can spread from one computer to another through the sharing of infected files, and that may harm a computer system's data or performance.

**Conflict of interest:** An interest that may affect, or may appear reasonably likely to affect, the judgement or conduct of a member (or members) of the Committee of Management or subcommittee, or may impair their independence or loyalty to the service. A conflict of interest can arise from avoiding personal losses as well as gaining personal advantage, whether financial or otherwise, and may not only involve the member of the Committee of Management or subcommittee, but also their relatives, friends or business associates.

**Cough etiquette:** The correct way to prevent the spread of infectious organisms that are carried in droplets of saliva is to cough or sneeze into the inner elbow or to use a tissue to

cover the mouth and nose. Place all tissues in the rubbish bin immediately and clean hands with either soap and water or a disinfectant hand rub.

**Country Fire Authority (CFA):** CFA respond to a variety of fire and emergency incidents. They are also involved in a range of other activities including:

- fire safety building inspections
- delivering community awareness, education and safety programs
- post-incident analysis and fire investigation
- fire prevention planning and land use planning at a municipal level.

**Criminal history record check:** A full-disclosure, Australia-wide criminal history record check issued by Victoria Police (refer to *Sources*), or by a police force or other authority of a state or territory, or the Commonwealth. It may also be referred to as a National Police Certificate or Police Records Check.

**Critical reflection:** Reflective practices that focus on implications for equity and social justice (*Early Years Learning Framework*, p45 – refer to *Sources*).

**Culturally and linguistically diverse (CALD):** Refers to individuals and groups who are from diverse racial, religious, linguistic and/or ethnic backgrounds.

**Culture:** The values and traditions of groups of people that are passed from one generation to another.

**Curriculum:** All interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children's learning and development (*Early Years Learning Framework*, p45 – refer to *Sources*; adapted from Te Whariki).

**Defamation:** To injure or harm another person's reputation without good reason or justification. Defamation is often in the form of slander or libel.

**Deferral:** When a child does not attend in the year when they are eligible for a funded kindergarten place, or officially withdraws from a service prior to DET designated date. DET considers that this child has not accessed a year of funded kindergarten and is therefore eligible for DET funding in the following year.

**Department of Health:** The State Government department responsible for the health and wellbeing of Victorians, and with oversight of the administration of the *Food Act 1984*.

**Developmental delay:** A delay in the development of a child under the age of 6 years that:

- a) is attributable to a mental or physical impairment, or a combination of mental and physical impairments, and
- b) is manifested before the child attains the age of 6 years, and
- c) results in substantial functional limitations in one or more of the following areas of major life activity:
  - i) self-care
  - ii) receptive and expressive language
  - iii) cognitive development
  - iv) motor development, and
- d) reflects the child's need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually

planned and  
co-ordinated (*Disability Act 2006 (Vic)*).

**Disability:** In relation to a person, refers to:

- a) a sensory, physical or neurological impairment or acquired brain injury, or any combination thereof, that:
  - i) is, or is likely to be, permanent, and
  - ii) causes a substantially reduced capacity in at least one of the areas of self-care, self-management, mobility or communication, and
  - iii) requires significant ongoing or long-term episodic support, and
  - iv) is not related to ageing, or
- b) an intellectual disability, or
- c) a developmental delay (*Disability Act 2006 (Vic)*).

**Disclaimer:** Statement(s) that seeks to exclude or limit liability and is usually related to issues such as copyright, accuracy and privacy.

**Disclosure:** (In the context of this policy) refers to a statement that a child or young person makes to another person that describes or reveals abuse.

**Discretionary/sometimes food and drink:** Discretionary/sometimes food and drink is high in fat, sugar and salt or a combination of these. They typically have very little nutritional value and are often processed and packaged. Examples of discretionary food and drink include:

- chocolate, confectionery, jelly
- sweet biscuits, high fat/salt savoury biscuits, chips
- high sugar/high fat cakes and slices
- cream, ice cream
- deep fried foods (e.g. hot chips) and pastry-based foods (e.g. pies, sausage rolls and pasties)
- most fast food and takeaway foods
- some processed meats (e.g. sausages, frankfurts/hot dogs, salami, strasbourg, devon, some commercial chicken nuggets and fish fingers)
- soft drinks, fruit juice and fruit drinks, cordial, sports drinks, energy drinks, flavoured milk and flavoured mineral water.

**Dispute resolution procedure:** The method used to resolve complaints, disputes or matters of concern through an agreed resolution process.

**Diversity:** Refers to all characteristics that make individuals different from one another, including race, religion, language, ethnicity, beliefs, age, gender, sexual orientation, level of ability, additional needs, socioeconomic status, educational attainment, personality, marital and/or parental status, family structure, lifestyle and general life/work experience.

**Domestic/family violence:** The repeated use of violent, threatening, coercive or controlling behaviour by an individual against a family member(s) or someone with who they have or have had an intimate relationship, including carers.

**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 with an adequate level of care and protection against foreseeable harm and injury. **Each child:** A phrase used in the *National Quality Standard* when an individualised approach is warranted and educators are required to modify their response to meet the needs of an individual child. An example is ‘each child’s current knowledge, ideas, culture and interests provide the foundation for the program’.

**Early Childhood Intervention Services (ECIS):** These services support families and children experiencing a disability or developmental delay (refer to *Definitions*) from birth to school age. ECIS are funded through the Department of Education and Training (DET) and provided by Specialist Children's Services teams and Early Childhood Intervention agencies.

**Early childhood teacher:** A person with an approved early childhood teaching qualification. Approved qualifications are listed on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Early Start Kindergarten:** A funding program that enables three-year-old Aboriginal and Torres Strait Islander children, and children known to Child Protection to attend a kindergarten program that is planned and delivered by an early childhood teacher for a specific number of hours. Details are available at [www.education.vic.gov.au/ecsmangement/careankinder/earllystart/](http://www.education.vic.gov.au/ecsmangement/careankinder/earllystart/)

**Educational Leader:** The Approved Provider of an education and care service must designate, in writing, a suitably qualified and experienced educator, co-ordinator or other individual to lead the development and implementation of educational programs at the service (Regulation 118). This person must have a thorough understanding of the *Early Years Learning Framework* (or other approved learning framework), be able to guide other educators in their planning and reflection, and mentor colleagues in the implementation of their practice.

**Educator:** An individual who provides education and care for children as part of an education and care service.

**Electronic communications:** Email, instant messaging, communication through social media and any other material or communication sent electronically.

**Eligible child:** A child who meets the criteria outlined in the *Victorian kindergarten policy, procedures and funding criteria*.

**Emergency:** Includes any situation or event that poses an imminent or severe risk to the persons at the education and care service premises e.g. flood, fire or a situation that requires the service premises to be locked down (National Regulations, page 5).

**Emergency epilepsy medication:** Medication that has been prescribed for the treatment of prolonged seizures or a cluster of seizures. The most common type of emergency medication prescribed is buccal or nasal midazolam. Rectal Valium has been used in the past, but is not often prescribed for use as an emergency epilepsy medication. Medication information is included in a child’s Emergency Medication Management Plan, and this must be kept up to date. Only staff who have received child-specific training in the emergency administration of midazolam can administer this medication.

**Emergency Management Plan (EMP):** A written set of instructions to assist the Approved Provider, Nominated Supervisor, educators and staff to deal with incidents or situations that could pose a threat to life, health or property. *Emergency Management Plan Guidelines* and an *Emergency Management Plan* template are available on the DET website (refer to *Sources* below).

**Emergency Medication Management Plan (EMMP):** Completed by the prescribing doctor in consultation with the individual and/or their family/carer. This medication plan must be attached to the individual's Epilepsy Management Plan which has been signed by the child's treating doctor. The preferred template to be used by the prescribing doctor can be found at [www.epinet.org.au](http://www.epinet.org.au)

**Emergency services:** Includes ambulance, fire brigade, police and state emergency services.

**Encryption:** The process of systematically encoding data before transmission so that an unauthorised party cannot decipher it. There are different levels of encryption available.

**Endpoint data storage devices:** Devices capable of storing information/data. New devices are continually being developed, and current devices include:

- laptops
- USB sticks, external or removable hard drives, thumb drives, pen drives and flash drives
- iPods or other similar devices
- cameras with USB drive connection
- iPhones/smartphones
- PCI/PC Card/PCMCIA storage cards
- PDAs (Personal Digital Assistants)
- other data-storage devices (CD-ROM and DVD).

**Enrolment application fee:** A payment to cover administrative costs associated with the processing of a child's enrolment application for a place in a program at the service.

**Enrolment application form:** A form to apply for a place at the service.

**Enrolment form:** A form that collects contact details, and personal and medical information from parents/guardians about their child. This is completed after a place has been offered by the service and accepted by the applicant. The information on this form is placed on the child's enrolment record (see below) and is kept confidential by the service.

**Enrolment record:** Contains information on each child, as required under the National Regulations, including contact details, names of authorised nominees (refer to *Definitions*), names of persons authorised to consent to medical treatment or to authorise administration of medication, names of persons authorised to take the child outside the service, details of any court orders, personal and health information including specific healthcare needs, medical management plans and dietary restrictions etc. (Regulations 160, 161, 162). This information is kept confidential by the service.

**Environmental sustainability:** The responsible use and management of the planet's resources to ensure that they remain available and uncompromised for future generations to use and enjoy.

**Epilepsy:** Recurrent seizures (abnormal burst of electrical activity in the brain that scrambles messages) that are unprovoked.

**Epilepsy Management Plan (EMP):** Designed to help people recognise when seizures are occurring, and gives clear directions about appropriate first aid. The plan is developed by the person who has the most knowledge and experience of the individual's epilepsy and seizures, and should be less than 12 months old. The management of epilepsy requires a team approach and the plan should be reviewed and signed by the individual's treating doctor. An Epilepsy Management Plan and Support Package has been designed by The Epilepsy Foundation of Victoria: [www.epinet.org.au](http://www.epinet.org.au)

**EpiPen®:** A type of adrenaline auto-injection device (refer to *Definitions*) containing a single dose of adrenaline which is delivered via a spring-activated needle that is concealed until administration is required. Two strengths are available: an EpiPen® and an EpiPen Jr®, and each is prescribed according to a child's weight. The EpiPen Jr® is recommended for a child weighing 10–20kg. An EpiPen® is recommended for use when a child weighs more than 20kg. The child's anaphylaxis medical management action plan (refer to *Definitions*) must be specific for the brand they have been prescribed.

**Equity:** (In the context of human rights) is the behaviour of acting in a fair and just manner towards others.

**Ethical conduct:** Always act in the best interests of children, their parents/guardians and families, and users of the service.

**Ethical practice:** A standard of behaviour that the service deems acceptable in providing their services.

**Exclusion:** Inability to attend or participate in the program at the service

**Excursion:** An outing organised by the education and care service. The written permission of parents/guardians or a person named on the child's enrolment record as having lawful authority must be obtained before educators/staff take children outside the service premises. Under the National Regulations, the definition of 'excursion' does not include an outing organised by services operating from a school site, where the child/ren leave the service premises with an educator/staff member, but do not leave the school site.

**Excursion/service event charge:** An additional charge required to meet the cost of special events or excursions that occur in response to emerging children's program needs. Events that are planned ahead and are included as an expenditure item in the service's budget do not incur this additional charge (refer to *Excursions and Service Events Policy*).

**Family-centred practice:** Children learn in the context of their families, and families are the primary influence on children's learning and development. Professionals also play a role in advancing children's learning and development and can engage in family-centred practice by respecting the pivotal role of families in children's lives. Early childhood professionals should:

- use families' understanding of their children to support shared decision-making about each child's learning and development
- create a welcoming and culturally-inclusive environment, where all families are encouraged to participate in and contribute to children's learning and development
- actively engage families and children in planning children's learning and development
- provide feedback to families on each child's learning, and provide information about how families can further advance children's learning and development at home and in the community (*Victorian Early Years Learning and Development Framework*, p10).

**Family member:** in relation to a child, means:

- a) a parent, grandparent, brother, sister, uncle, aunt or cousin of the child, whether of the whole blood or half-blood, and whether that relationship arises by marriage (including a de facto relationship), by adoption or otherwise, or
- b) a relative of the child according to Aboriginal or Torres Strait Islander tradition, or
- c) a person with whom the child resides in a family-like relationship, or
- d) a person who is recognised in the child's community as having a familial role in respect of the child.

**Fees:** A charge for a place within a program at the service.

**Firewall:** The primary method of keeping a computer/network secure. A firewall controls (by permitting or restricting) traffic into and out of a computer/network and, as a result, can protect these from damage by unauthorised users.

**First aid:** The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website:

[www.acecqa.gov.au/qualifications/approved-first-aid-qualifications](http://www.acecqa.gov.au/qualifications/approved-first-aid-qualifications)

**First aid kit:** The Compliance Code *First aid in the workplace*, developed by WorkSafe Victoria, lists the minimum requirements for a first aid kit. *First aid in the workplace* is available at [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

**Flash drive:** A small data-storage device that uses flash memory, and has a built-in USB connection. Flash drives have many names, including jump drives, thumb drives, pen drives and USB keychain drives.

**Focal (previously called simple or complex partial) seizures:** Focal seizures (previously called partial seizures) start in one part of the brain and affect the area of the body controlled by that part of the brain. The symptoms experienced will depend on the function that the focal point controls (or is associated with). Focal seizures may or may not cause an alteration of awareness. Symptoms are highly variable and may include lip smacking, wandering behaviour, fiddling with clothes and feeling sick, 'edgy' or strange.

Focal seizures where a person has full awareness were previously called simple partial seizures. Focal seizures where a person has an altered sense of awareness were previously called complex partial seizures. Focal seizures can progress into a generalised seizure.

**Food allergies:** Some foods and food ingredients, or their components, can cause severe allergic reactions including anaphylaxis (refer to *Anaphylaxis Policy*). Less common symptoms of food allergy include infantile colic, reflux of stomach contents, eczema, chronic diarrhoea and failure to thrive in infants. Food allergies are often caused by peanuts, tree nuts, milk, eggs, sesame seeds, fish and shellfish, soy and wheat. For more information on food allergies, visit [www.allergyfacts.org.au](http://www.allergyfacts.org.au)

**Food safety:** (In relation to this policy) ensuring food provided by the service is fit for human consumption.

**Food safety program:** A written plan that details what an individual business does to ensure that the food it sells or handles is safe for human consumption. A food safety program is an important tool for businesses that handle, process or sell potentially hazardous foods, as it helps to maintain safe food handling practices and protect public health. It should identify potential hazards in all aspects of food handling, describe how such hazards can be controlled/monitored, and define appropriate corrective action to be taken when a hazard is found to be under-managed. A food safety program must also include the requirements for appropriate record keeping. Class 4 services are not required to have a food safety program (refer to *Background*).

**Food safety supervisor:** A person who:

- can recognise, prevent and alleviate food handling hazards at a premises
- has a Statement of Attainment from a Registered Training Organisation (RTO) that confirms competency in the required food safety standards
- has the ability and authority to supervise other individuals who handle food at the premises to ensure safe food handling at all times.

Class 4 food premises do not need a food safety supervisor (refer to *Background*). However, they must ensure that staff members have the skills and knowledge needed to safely handle food in their work roles.

**Food Standards Australia New Zealand (FSANZ):** A bi-national Government agency with the responsibility to develop and administer the *Australia New Zealand Food Standards Code* (the Code), which details standards and requirements in areas such as food additives, food safety, labelling and genetically modified (GM) foods. Enforcement and interpretation of the Code is the responsibility of State/Territory departments and food agencies within Australia and New Zealand.

**Freedom of Information Act 1982:** Legislation regarding access and correction of information requests.

**General complaint:** A general complaint may address any aspect of the service e.g. a lost clothing item or the service's fees. Services do not have to inform DET, but the complaint must be dealt with as soon as is practicable to avoid escalation of the issue.

**Generalised seizure:** Both sides of the brain are involved and the person will lose consciousness. A Tonic Clonic seizure is one type of generalised seizure.

**Governance:** The process by which organisations are directed, controlled and held to account. It encompasses authority, accountability, stewardship, leadership, directions and control exercised in the organisation (Australian National Audit Office, 1999).

**Grievance:** A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature e.g. the service is in breach of a policy or the service did not meet the care expectations of a family.

**Harassment:** When someone is demeaning, derogatory or intimidating towards another person. Harassment includes:

- racial taunts
- taunts about sexual orientation or gender identity
- sexual harassment: unwelcome physical, verbal or written behaviour of a sexual nature
- repeated insulting remarks.

**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.

**Hazard:** A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

**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 Goulburn Region Preschool Association Inc or while engaged in activities endorsed by Goulburn Region Preschool Association Inc.

**Hazardous food:** Food containing dangerous biological, chemical or physical agents, or food in a condition that has the potential to cause adverse health effects in humans.

**Health Care Card:** A Commonwealth Government entitlement providing concessions for low-income earners and other eligible people. Details are available at [www.centrelink.gov.au/internet/internet.nsf/payments/conc\\_cards\\_hcc.htm](http://www.centrelink.gov.au/internet/internet.nsf/payments/conc_cards_hcc.htm)

**Health information:** Any information or an opinion about the physical, mental or psychological health or ability (at any time) of an individual.

**Health Records Act 2001:** State legislation that regulates the management and privacy of health information handled by public and private sector bodies in Victoria.

**Healthy eating:** Eating a wide variety of foods from the five food groups each day. These are:

- fruit
- vegetables and legumes/beans
- grain (cereal) foods, mostly wholegrain
- milk, yoghurt, cheese and alternatives
- lean meat, poultry, fish, eggs, tofu, nuts and seeds and legumes/beans.

Healthy eating also means eating in a way that is socially and culturally appropriate, having regular meals and snacks and eating food to satisfy hunger, appetite and energy needs.

**High-risk foods:** Bacteria that has the potential to cause food-poisoning can grow and multiply on some foods more easily than others. High-risk foods include meat, seafood, poultry, eggs, dairy products, small goods, cooked rice/pasta and prepared salads (such as coleslaw, pasta salads, rice salads and fruit salads). Food that is contained in packages, cans or jars can become high-risk once opened, and should be handled and stored appropriately.

**Hot drink:** Any container holding a liquid that has been heated or boiled, and that remains above room temperature (25°C) for any period of time.

**Hygiene:** The principle of maintaining health and the practices put in place to achieve this.

**Hyperglycaemia (high blood glucose):** Hyperglycaemia occurs when the blood glucose level rises above 15 mmol/L. Hyperglycaemia symptoms can include increased thirst, tiredness, irritability and urinating more frequently. High blood glucose levels can also affect thinking, concentration, memory, problem-solving and reasoning. Common causes include but are not limited to:

- taking insufficient insulin
- consuming too much food
- common illnesses such as a cold
- stress.

**Hypoglycaemia or hypo (low blood glucose):** Hypoglycaemia refers to having a blood glucose level that is lower than normal i.e. below 4 mmol/L, even if there are no symptoms.

Neurological symptoms can occur at blood glucose levels below 4 mmol/L and can include sweating, tremors, headache, pallor, poor co-ordination and mood changes. Hypoglycaemia can also impair concentration, behaviour and attention, and symptoms can include a vague manner and slurred speech.

Hypoglycaemia is often referred to as a 'hypo'. Common causes include but are not limited to:

- taking too much insulin
- delaying a meal
- consuming an insufficient quantity of food
- undertaking unplanned or unusual exercise.

It is important to treat hypoglycaemia promptly and appropriately to prevent the blood glucose level from falling even lower, as very low levels can lead to loss of consciousness and convulsions.

The child's diabetes management plan will provide specific guidance for services in preventing and treating a hypo.

**Illness:** Any sickness and/or associated symptoms that affect the child's normal participation in the activities or program at the service.

**Immunisation status:** The extent to which a child has been immunised in relation to the recommended immunisation schedule.

**Inappropriate person:** A person who may pose a risk to the health, safety or wellbeing of any child attending the education and care service, or whose behaviour or state of mind make it inappropriate for him/her to be on the premises e.g. a person under the influence of drugs or alcohol (Act 171(3)).

**Incident:** Any unplanned event resulting in or having potential for injury, ill health, damage or other loss.

**Incident, Injury, Trauma and Illness Record:** Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. Any incident, injury, trauma or illness must be recorded as soon as is practicable but not later than 24 hours after the occurrence. Details required include the:

- name and age of the child
- circumstances leading to the incident, injury, trauma or illness (including any symptoms)
- time and date
- details of action taken by the service including any medication administered, first aid provided or medical personnel contacted
- details of any witnesses
- names of any person the service notified or attempted to notify, and the time and date of this
- signature of the person making the entry, and time and date of this.

These details need to be kept for the period of time specified in Regulation 183. A sample *Incident, Injury, Trauma and Illness Record* is available on the ACECQA website.

**Inclusion:** The incorporation of children and families into the service to ensure that all individuals have an equal opportunity to achieve their maximum potential.

**Inclusion support agencies:** Funded by the Commonwealth Government to provide advice on inclusive practices in childcare services. Inclusion Support Facilitators are employed to help services access a range of practical support. Further information and eligibility requirements are available at

[www.deewr.gov.au/earlychildhood/programs/childcareforservices/supportfamilyccs/pages/inclusion-support-program.aspx#inclusion\\_support](http://www.deewr.gov.au/earlychildhood/programs/childcareforservices/supportfamilyccs/pages/inclusion-support-program.aspx#inclusion_support)

**Inclusion Support Facilitator (ISF):** Employed by inclusion support agencies and funded by the Commonwealth Government to provide advice on inclusive practices in childcare services. ISFs also help services to access a range of practical support.

**Inclusive practice:** The provision of a flexible, innovative and responsive program that supports the learning needs and meaningful participation of all children attending the service.

**Indigenous Education Program (IEP):** The Commonwealth Department of Education, Employment and Workplace Relations (DEEWR) provides assistance for Aboriginal and Torres

Strait Islander children to attend a kindergarten program. The IEP provides financial assistance to support kindergarten programs through Supplementary Recurrent Assistance (SRA). Contact DEEWR on 1800 800 821 for more information.

**Infection:** The invasion and multiplication of micro-organisms in bodily tissue.

**Infectious disease:** A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

**Infestation:** The lodgement, development and reproduction of arthropods (such as head lice), either on the surface of the body of humans or animals, or in clothing.

**Information Privacy Act 2000:** State legislation that protects personal information held by Victorian Government agencies, statutory bodies, local councils and some organisations, such as early childhood services contracted to provide services for government.

**Injury:** Any physical damage to the body caused by violence or an incident

**Insulin:** Medication prescribed and administered by injection or continuously by a pump device to lower the blood glucose level. In the body, insulin allows glucose from food (carbohydrates) to be used as energy, and is essential for life.

**Insulin pump:** A small, computerised device to deliver insulin constantly, connected to an individual via an infusion line inserted under the skin.

**Integrity:**(In relation to this policy)refers to the accuracy of data. Loss of data integrity may be either gross and evident (e.g. a computer disk failing) or subtle (e.g. the alteration of information in an electronic file).

**Interest:** Anything that can have an impact on an individual or a group.

**Intolerance:** Often confused with allergy, intolerance is an adverse reaction to ingested foods or chemicals experienced by the body but not involving the immune system.

**Ketones:** Occur when there is insufficient insulin in the body. High levels of ketones can make children very sick. Extra insulin is required (given to children by parents/guardians) when ketone levels are >0.6 mmol/L if insulin is delivered via a pump, or >1.0 mmol/L if on injected insulin.

**Ketogenic diet:** A high fat, low carbohydrate, restricted-calorie diet that may be prescribed as additional therapy. This is an effective therapy for some children, although its mechanisms are not well understood. When introducing this diet, a child is usually hospitalised, as such radical dietary changes have the potential to cause serious problems for the child. Once the child is stabilised on a ketogenic diet, they can return home, with the diet managed by the parents/guardians or carers.

**Kindergarten fee deposit:** A charge to secure a place that has been offered in a program at the service. This is deducted from term fees.

**Kindergarten Fee Subsidy (KFS):** A state government subsidy paid directly to the funded service to enable eligible families to attend a funded kindergarten program or funded three-year-old place at no cost (or minimal cost) to promote participation. Details are available at [www.education.vic.gov.au/ecprofessionals/kindergarten/](http://www.education.vic.gov.au/ecprofessionals/kindergarten/)

**Kindergarten Fee Subsidy – Fees Policy:** Provides operational guidelines for services administering the Kindergarten Fee Subsidy and can be found in the *Victorian kindergarten*

policy, procedures and funding criteria available at [www.education.vic.gov.au/ecprofessionals/kindergarten/](http://www.education.vic.gov.au/ecprofessionals/kindergarten/)

**Kindergarten Inclusion Support Services (KISS):** A program offering supplementary assistance to early childhood services to support the inclusion of children who have been diagnosed with developmental concerns, a disability or complex medical needs, into a funded kindergarten program. Services include the Preschool Field Officer Program (refer to *Definitions*) and Kindergarten Inclusion Support Packages (refer to *Definitions*). For more information, visit [www.education.vic.gov.au/ecsmanagement/intervention/services/default.htm](http://www.education.vic.gov.au/ecsmanagement/intervention/services/default.htm)

**Koorie Early Childhood Education Program:** Supports Aboriginal children and their families to access and participate in kindergarten programs. The program consists of three components:

- a statewide co-ordinator who provides support, information and assistance to regional Koorie Engagement Support Officers – Early Childhood Development
- Koorie Engagement Support Officers – Early Childhood Development (refer to *Definitions*)
- the Koorie Preschool Assistants program (refer to *Definitions*).

**Koorie Engagement Support Officers (KESOs):** Employed by the Department of Education and Training (DET) to assist families in accessing the broad range of services and support needed to ensure the best start in life for Aboriginal children from birth through to completion of school. KESOs provide advice and practical support to services that offer funded kindergarten places to ensure the delivery of programs that are respectful of the cultural beliefs and practices of Aboriginal children.

**Koorie Preschool Assistants (KPSA) program:** Implemented by the Department of Education and Training (DET) in partnership with local Aboriginal communities that employ KPSAs and administer the program. KPSAs work in kindergartens to assist teachers to develop and deliver culturally-inclusive and responsive programs for Aboriginal children.

**Late collection charge:** A charge that may be imposed by the Approved Provider when parents/guardians are late to collect their child/children from the program (refer to Attachment 1 – Fee information for families).

**Learning:** A natural process of exploration that children engage in from birth, as they expand their intellectual, physical, social, emotional and creative capacities. Early learning is closely linked to early development.

**Learning framework:** Refer to **approved learning framework** above.

**Learning outcome:** A skill, knowledge or disposition that educators can actively promote in early childhood settings, in collaboration with children and families.

**Learning relationships:** Relationships that further children’s learning and development. Both adult and child have intent to learn from one another.

**Maltreatment:** (In the context of this policy) refers to physical and/or emotional mistreatment, and/or lack of care of the child. Examples include sexual abuse, the witnessing of family violence and any non-accidental injury to a child.

**Malware:** Short for ‘malicious software’. Malware is intended to damage or disable computers or computer systems.

**Mandatory closure:** When services identified as being at high bushfire risk are directed by DET to close on days declared a Code Red Fire Danger Rating day.

**Mandatory reporting:** The legal obligation of certain professionals and community members to report when they believe, on reasonable grounds, that a child is in need of protection from harm.

A broad range of professional groups are identified in the CYFA as ‘mandatory reporters’. Mandated staff members must make a report to Child Protection as soon as is practicable after forming a belief, on reasonable grounds, that a child or young person is in need of protection from significant harm as a result of physical injury or sexual abuse, and the child’s parents/guardians are unwilling or unable to protect the child (*Protecting the safety and wellbeing of children and young people* – refer to *Sources*). To have reasonable grounds to believe a child is in need of protection, a mandatory reporter should believe both that there is risk of significant harm as a result of physical injury or sexual abuse, and that the parents/guardians are unwilling or unable to protect the child (Sections 162(c)(d) and 184 of the *Children, Youth and Families Act 2005* (amended in 2011)). Section 182 of the *Children, Youth and Families Act 2005* (amended in 2011) lists those who are mandated to report. Mandatory reporters must report the abuse/neglect to:

- police, by calling 000, if the offence requires immediate police attention, or
- Child Protection authorities<sup>5</sup>, if they suspect, on reasonable grounds, that a child is suffering abuse or neglect, or wish to discuss their concerns about a child or young person.

**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).

**Mediation:** An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

**Mediator:** A person who mediates, especially one who reconciles differences between disputants.

**Medical attention:** Includes a visit to a registered medical practitioner or attendance at a hospital.

**Medical condition:** In accordance with the *Education and Care Services National Regulations 2011*, the term medical condition includes asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis, and the management of such conditions

**Medical emergency:** An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.

**Medical management plan:** A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child’s specific medical condition, and includes the child’s name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCI) Action Plan.

**Medication:** Any substance, as defined in the *Therapeutic Goods Act 1989* (Cth), that is administered for the treatment of an illness or medical condition

**Medication (prescribed):** Medicine, as defined in the *Therapeutic Goods Act 1989* (Cth), that is:

- authorised by a health care professional
- dispensed by a health care professional with a printed label that includes the name of the child being prescribed the medication, the medication dosage and expiry date.

**Medication (non-prescribed):** Over-the-counter medication, including vitamins and cultural herbs or homeopathic medications that may have been recommended by an alternative health care professional such as a naturopath.

**Medication record:** Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

**Metered dose inhaler (puffer):** A common device used to administer reliever medication.

**Metropolitan Fire Brigade (MFB):** provide a fire and rescue service and are the first to respond to specific medical emergencies. The MFB aims to reduce the incidence and impact of fire and other emergencies on the community. This is achieved through the delivery of educational strategies that assist the community to become more self-reliant, including:

- fire safety building inspections, and checking fire fighting equipment
- delivering community awareness, education and safety programs.

**Midazolam:** Also known as Hypnovel, midazolam belongs to a group of pharmaceuticals called benzodiazepines. Its main purpose is as a sedative or hypnotic, and it is used for medical and surgical procedures. In epilepsy, midazolam is used for emergency management of seizures, as it has the ability to stop the seizures quickly. Once absorbed into the blood, midazolam travels to the brain, attaching to brain receptors that control electrical impulses that are firing at an unusually rapid rate. Midazolam also works by relaxing muscles, which is particularly beneficial in many types of seizures. The effect of midazolam should occur rapidly.

Not all individuals living with epilepsy require emergency medication, but for a small group of people whose seizures are difficult to control, or for people who are isolated from emergency care, midazolam is an excellent medication. It is most commonly administered buccally or nasally.

Midazolam is fast-acting and can be easily administered by family and carers in a variety of settings. Only staff specifically trained to the requirements of a child's Emergency Medication Management Plan can administer midazolam.

**Midazolam kit:** An insulated container with an unused, in-date midazolam ampoule/s, a copy of the child's Emergency Medication Management Plan and Epilepsy Management Plan (which includes a picture of the child), and telephone contact details for the child's parents/guardians, doctor/medical personnel and the person to be notified in the event of a seizure requiring administration of midazolam if parents/guardians cannot be contacted. Midazolam must be stored away from light (cover with aluminium foil) and in temperatures of less than 25°C. EFV Administration flyer – e.g. buccal, gloves, tissues, pen and paper, +/- stopwatch.

**Minor incident:** An incident that results in an injury that is small and does not require medical attention.

**Neglect:** The failure to provide a child with the basic necessities of life, such as food, clothing, shelter, medical attention or supervision, to the extent that the child's health and development is, or is likely to be, significantly harmed (Victorian Department of Human Services).

**Negligence:** Doing, or failing to do something that a reasonable person would, or would not do in a certain situation, and which causes another person damage, injury or loss as a result.

**Neutral detergent:** A cleaning agent available commercially and labelled as 'neutral' or 'neutral pH'.

**No food sharing:** A rule/practice in which a child at risk of anaphylaxis only eats food that is supplied/permitted by their parents/guardians and does not share food with, or accept food from, any other person.

**Nominated staff member:** (In relation to this policy) a staff member nominated to be the liaison between parents/guardians of a child at risk of anaphylaxis and the Approved Provider. This person also checks regularly to ensure that the adrenaline auto-injector kit is complete and that the device itself is unused and in date, and leads practice sessions for staff who have undertaken anaphylaxis management training.

**Nominated Supervisor:** A person who has been nominated by the Approved Provider of the service under Part 3 of the Act to be the Nominated Supervisor of that service, and who has consented to that nomination. Applicants must be 18 years or older, and meet the minimum requirements for qualifications, experience and management capability required under the National Regulations (National Regulations 46–49) and the Victorian Regulations (Victorian Regulation 87). Applicants for a Nominated Supervisor are assessed by the Regulatory Authority. The Nominated Supervisor has day-to-day responsibility for the service in accordance with the National and/or Victorian Regulations. All services must have a Nominated Supervisor.

**Notifiable complaint:** A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety, or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DET within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DET for confirmation. Written reports to DET must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Notifiable incident:** An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

**Nutrition:** The process of providing or obtaining the food necessary for health and growth.**Offender:** A person who mistreats and/or harms a child or young person.

**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.

**Oral health:** A standard of health of the oral and related tissues that enables an individual to eat, speak and socialise without active disease, discomfort or embarrassment and that contributes to general wellbeing.

**PDA(Personal Digital Assistants):** A handheld computer for managing contacts, appointments and tasks. PDAs typically include a name and address database, calendar, to-do list and note taker. Wireless PDAs may also offer email and web browsing, and data can be synchronised between a PDA and a desktop computer via a USB or wireless connection.

**Pediculosis:** Infestation of head lice that is transmitted by having head-to-head contact with another person who has head lice. Pediculosis does not contribute the spread of any infectious diseases and outbreaks of this condition are common in schools and childcare facilities.

**Perceived conflict of interest:** Arises where a third party could form the view that a Committee of Management member's private interests could improperly influence the performance of their duties on the Committee of Management, now or in the future.

**Perpetrator:** A person who mistreats and/or harms a child or young person.

**Personal information:** Recorded information (including images) or opinion, whether true or not, about a living individual whose identity can reasonably be ascertained **Play-based learning:** A context for learning through which children organise and make sense of their social world as they engage actively with people, objects and representations.

**Portable storage device (PSD) or removable storage device (RSD):** Small, lightweight, portable easy-to-use device that is capable of storing and transferring large volumes of data. These devices are either exclusively used for data storage (for example, USB keys) or are capable of multiple other functions (such as iPods and PDAs).

**Potential conflict of interest:** Arises where a Committee of Management member has private interests that could conflict with their responsibilities.

**Preschool Field Officers (PSFOs):** Employed by local government authorities or other agencies to assist children with additional needs to access and participate in funded kindergarten programs. The PSFO service is part of the Kindergarten Inclusion Support Services (refer to *Definitions*) program.

**Preschool Field Officer Program:** An early intervention, outreach service that is universally available within state-funded preschools for any child with developmental concerns. The primary role of the Preschool Field Officer Program is to assist children with additional needs to access and participate in funded kindergarten programs.

**Privacy Act 1988:** Commonwealth legislation that operates alongside state or territory Acts and makes provision for the collection, holding, use, correction, disclosure or transfer of personal information.

**Privacy breach:** An act or practice that interferes with the privacy of an individual by being contrary to, or inconsistent with, one or more of the information Privacy Principles (refer to Attachment 2: *Privacy principles in action*) or any relevant code of practice.

**Private interests:** Includes not only a Committee of Management member's own personal, professional or business interests, but also those of their relatives, friends or business associates.

**Public Records Act 1973 (Vic):** Legislation regarding the management of public sector documents.

**Puffer:** The common name for a metered dose inhaler.

**Reasonable grounds:** A person may form a belief on reasonable grounds that a child or young person is in need of protection after becoming aware that the child or young person's health,

safety or wellbeing is at risk and the child's parents/guardians are unwilling or unable to protect them. There may be reasonable grounds for forming such a belief if:

- a child or young person states that they have been physically or sexually abused
- a child or young person states that they know someone who has been physically or sexually abused (sometimes the child may be referring to themselves)
- someone who knows the child or young person states that the child or young person has been physically or sexually abused
- a child shows signs of being physically or sexually abused (see details in Appendix 2 of *Protecting the safety and wellbeing of children and young people* – refer to *Sources*)
- the person is aware of persistent family violence or parental substance misuse, psychiatric illness or intellectual disability that is impacting on the child or young person's safety, stability or development
- the person observes signs or indicators of abuse, including non-accidental or unexplained injury, persistent neglect, poor care or lack of appropriate supervision
- a child's/young person's actions or behaviour may place them at risk of significant harm and the parents/guardians are unwilling or unable to protect the child.

**Recommended minimum exclusion period:** The period recommended by the Department of Health for excluding any person from attending a children's service to prevent the spread of infectious diseases through interpersonal contact. The exclusion table published by the Department of Health can be accessed at <http://docs.health.vic.gov.au/docs/doc/Minimum-Period-of-Exclusion-from-Primary-Schools-and-Childrens-Services-Centres-for-Infectious-Diseases-Cases-and-Contacts>

**Registered care:** Care provided by nannies, grandparents, relatives or friends, individuals working within kindergartens, occasional care services and outside school hours care services that are registered with the Family Assistance Office. Eligible families can receive some reimbursement of costs when using a registered care provider. Details are available at [www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/](http://www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/)

**Regular outing:** (In relation to education and care services) means a walk, drive or trip to/from a location that the service visits regularly as part of its educational program, and where the circumstances covered by the risk assessment are the same on each trip. If the excursion is a regular outing, an authorisation from parents/guardians is only required to be obtained once every 12 months. A new authorisation is required if there is any change to the circumstances of the regular outing

**Relaxation/rest:** A period of inactivity, solitude, calmness or tranquillity.

**Reliever medication:** This comes in a blue/grey metered dose inhaler containing salbutamol, a chemical used to relax the muscles around the airways to relieve asthma symptoms. This medication is always used in an asthma emergency. Reliever medication is commonly sold by pharmacies as Airomir, Asmol, Epaq or Ventolin.

**Respect:** Value the rights, religious beliefs and practices of individuals. Refrain from actions and behaviour that constitute harassment or discrimination.

**Responsible Person:** The Approved Provider (if that person is an individual, and in any other case the person with management or control of the service operated by the Approved Provider) or a Nominated Supervisor or Certified Supervisor who has been placed in day-to-day charge of the service in accordance with the National Regulations.

**Resuscitation flowchart:** Outlines the six steps involved in resuscitation: danger, response, airways, breathing, compression and defibrillation. The Australian Resuscitation Council provides flowcharts for the resuscitation of adults and children free of charge at [www.resus.org.au/flowcharts.htm](http://www.resus.org.au/flowcharts.htm)

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

**Risk assessment:** (In the context of this policy) a risk assessment must identify and assess any hazard that poses a risk to a child's health, safety and/or wellbeing while on an excursion, and specify how these risks will be managed and/or minimised (Regulation 101). Risk assessments must consider:

- the proposed route and location of the excursion
- any water hazards (refer to *Water Safety Policy*)
- any risks associated with water-based activities (refer to *Water Safety Policy*)
- transport to and from the proposed location of the excursion (refer to *Occupational Health and Safety Policy*)
- the number of adults and children participating in the excursion
- the number of educators or other responsible adults who will be providing supervision given the level of risk, and whether or not specialised skills are required (e.g. lifesaving skills)
- the proposed activities, and the impact of this on children with varying levels of ability, additional needs or medical conditions
- the proposed duration of the excursion, and the impact of this on children with varying levels of ability, additional needs or medical conditions
- any items/information that should be taken on the excursion e.g. first aid kit, emergency contact details for children, medication for children with known medical conditions (such as asthma, anaphylaxis and diabetes) and a mobile phone.

A sample Excursion Risk Management Plan is provided on the ACECQA website at <http://acecqa.gov.au/storage/Excursion%20risk%20management%20plan.pdf>

**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.

**Risk management:** A structured approach to managing uncertainty related to a threat; a sequence of activities including the identification, assessment and prioritisation of risks followed by co-ordinated and economical application of resources to minimise, monitor and control the probability and/or impact of those risks.

**Risk minimisation:** The practice of developing and implementing a range of strategies to reduce hazards for a child at risk of anaphylaxis, by removing, as far as is practicable, major allergen sources from the service.

**Risk minimisation plan:** A service-specific plan that documents a child's allergy, practical strategies to minimise risk of exposure to allergens at the service and details of the person/s responsible for implementing these strategies. A risk minimisation plan should be developed by the Approved Provider/Nominated Supervisor in consultation with the parents/guardians of the child at risk of anaphylaxis and service staff. The plan should be developed upon a child's enrolment or initial diagnosis, and reviewed at least annually and always on re-enrolment. A sample risk minimisation plan is provided as Attachment 3.

**Sanitising:** A process that destroys micro-organisms. Sanitising a surface can reduce the number of micro-organisms present. The process of sanitisation usually involves ensuring a surface is thoroughly cleaned with both heat and water, followed by the use of chemicals.

**Scalds:** Burns by hot fluids, steam and other hot vapours.

**Security:** (In relation to this policy) refers to the protection of data against unauthorised access, ensuring confidentiality of information, integrity of data and the appropriate use of computer systems and other resources.

**Seizure record:** An accurate record of seizure activity, which is important for identifying any seizure patterns and changes in response to treatment.

**Seizure triggers:** Seizures may occur for no apparent reason, but common triggers include: forgetting to take medication, lack of sleep, other illness, heat, stress/boredom, missing meals and dehydration. Flashing or flickering lights can trigger seizures in about 5% of people living with epilepsy

**Sensitive information:** Information or an opinion about an individual's racial or ethnic origin, political opinions, membership of a political party, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association, membership of a trade union, sexual preference or practices, or criminal record. This is also considered to be personal information.

**Serious incident:** An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DET) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

**Service event:** A special activity, event, visitor or entertainment organised by the education and care service that may be conducted as part of a regular session at the service premises or as an excursion.

**Shade:** An area sheltered from direct and indirect sun, such as a large tree, canopy or artificial cover. As recommended by Cancer Council Victoria, where possible, shade will provide a minimum of 94% protection against UV radiation.

**SIDS (Sudden Infant Death Syndrome):** The unexpected and unexplained death of an infant, usually occurring during sleep.

**SIDS and Kids:** The National SIDS Council of Australia, dedicated to eliminating SIDS and providing support for bereaved families. SIDS and Kids is considered to be the national authority on safe sleeping practices for infants and children. A branch of SIDS and Kids is located in each state and territory, and can provide resources and assistance (refer to *Sources*).

**Social Networking:** Face Book, Twitter or other forms of electronic social interaction

**'Sometimes' foods and drinks:** Food and drink items that are high in fat, sugar and salt, and that contain minimal vitamins, minerals or fibre.

**Spacer device:** A plastic device used to increase the efficiency of delivery of reliever medication from a puffer. It should always be used in conjunction with a puffer device and may be used in conjunction with a face mask.

**Spam:** Unsolicited and unwanted emails or other electronic communication.

**Staff record:** Must be kept by the service and include details of the Nominated Supervisors, the educational leader, other staff members, volunteers and the Responsible Person. The record must include information about qualifications, training and details of the *Working with Children* Check (Regulations 146–149). A sample staff record is available on the ACECQA website: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**State Emergency Service (SES):** Volunteer-based organisation responding to emergencies and working to ensure the safety of communities around Victoria.

**State of emergency:** A situation in which the government is granted special powers, by constitutional or legal provision, to deal with a perceived threat to law and order, or public safety.

**Student:** A person undertaking a practicum placement as part of a recognised early childhood qualification. This student will be supported by an educational institution in the completion of their placement

**Sunglasses:** Sunglasses are optional. If worn, it is recommended that glasses are a close fitting, wrap-around style that meet the Australian Standard 1067 (Sunglasses: Category 2, 3 or 4) and cover as much of the eye area as possible.

**Sunscreen:** SPF 30+, broad-spectrum, water-resistant sunscreen. Sunscreen should be reapplied every two hours, even when labelled 4 hours water resistance. Monitor the expiry date and store in a cool, dry place.

**SunSmart:** The name of the program conducted by Cancer Council Victoria to promote an awareness of the need to provide sun protection: [www.sunsmart.com.au](http://www.sunsmart.com.au)

**Sunhat:** To protect the neck, ears, temples, face and nose, SunSmart recommends broad-brimmed, legionnaire or bucket-style hats. Baseball caps and visors offer little protection to the cheeks, ears and neck, and are not recommended.

**Supervision:** see **adequate supervision** in *Definitions* above.

**Support:** Work in a co-operative and positive manner.

**Tonic Clonic seizure:** A convulsive seizure with loss of consciousness, muscle stiffening, falling, followed by jerking movements. These types of seizures are no longer called ‘grand mals’.

**Trauma:** An emotional wound or shock that often has long-lasting effects or any physical damage to the body caused by violence or an incident.

**Type 1 diabetes:** An autoimmune condition that occurs when the immune system damages the insulin producing cells in the pancreas. Type 1 diabetes is treated with insulin replacement via injections or a continuous infusion of insulin via a pump. Without insulin treatment, type 1 diabetes is life threatening.

**Type 2 diabetes:** Occurs when either insulin is not working effectively (insulin resistance) or the pancreas does not produce sufficient insulin (or a combination of both). Type 2 diabetes accounts for 85 to 90 per cent of all cases of diabetes and usually develops in adults over the age of 45 years, but is increasingly occurring in individuals at a younger age. Type 2 diabetes is unlikely to be seen in children under the age of 4 years.

**Unauthorised person:** (in relation to this policy) is a person who is **not** a parent/guardian, family member, authorised nominee, emergency services or medical personnel, or a person who holds a current Working with Children Check card.

**Unique identifier:** A symbol or code (usually a number) assigned by an organisation to an individual to distinctively identify that individual while reducing privacy concerns by avoiding use of the person's name.

**USB interface:** Universal Serial Bus (USB) is a widely used interface for attaching devices to a host computer. PCs and laptops have multiple USB ports that enable many devices to be connected without rebooting the computer or turning off the USB device.

**USB key:** Also known as sticks, drives, memory keys and flash drives, a USB key is a device that plugs into the computer's USB port and is small enough to hook onto a key ring. A USB key allows data to be easily downloaded and transported/transferred.

**Vicnet:** An organisation that provides a range of internet services to libraries and community groups (including kindergartens, as part of a government-funded project), including broadband and dial-up internet and email access, website and domain hosting, and website design and development. Vicnet delivers information and communication technologies, and support services to strengthen Victorian communities. For more information, visit [www.kindergarten.vic.gov.au](http://www.kindergarten.vic.gov.au)

**Victorian Institute of Teaching (VIT):** The statutory authority for the regulation and promotion of the teaching profession in Victoria, established as part of the Victorian Institute of Teaching Act 2001. All teachers in Victorian government schools, Catholic schools and independent schools are required to be registered with the VIT in order to practise in their profession.

**Victorian kindergarten policy, procedures and funding criteria:** Sets out the Department of Education and Training (DET) operational requirements for early childhood services in receipt of state government funding for the provision of a four-year-old kindergarten program.

**Virus:** A program or programming code that multiplies by being copied to another program, computer or document. Viruses can be sent in attachments to an email or file, or be present on a disk or CD. While some viruses are benign or playful in intent, others can be quite harmful: erasing data or requiring the reformatting of hard drives.

**Voluntary (non-mandated) notification:** A notification to the Child Protection Service by a person who believes that a child is in need of protection. Section 183 of the *Children, Youth and Families Act 2005* (amended in 2011) states that any person who believes, on reasonable grounds, that a child is in need of protection, may notify a protective intervener of that belief and of the reasonable grounds that the belief is based on. Under this part of the Act, notifications are made out of moral obligation, rather than legislative obligation. The person making the notification is not expected to prove the abuse, and the law protects the anonymity of the person making the notification.

**Voluntary parent/guardian contribution:** A voluntary payment for items not directly related to the provision of the children's program. Attendance at the service is not conditional on this payment.

**Volunteer:** A person who willingly undertakes defined activities to support the education and care programs at a children's service in an unpaid or honorary capacity. These activities may include direct contact with children, administrative tasks, or preparing materials or food.

**Water hazard:** (in relation to this policy) can lead to drowning or non-fatal drowning incidences. Drowning hazards include large bodies of water such as swimming pools, rivers, creeks, dams and ponds. Smaller bodies of water, including nappy buckets, water containers, pet water bowls and poor drainage which allows water to collect can also present drowning hazards for young children.

**Working directly with children:** For the purposes of the National Regulations, working directly with children is defined as being physically present with children and directly engaged in providing them with education and/or care.

**Working with Children (WWC) Check:** The check is a legal requirement for those undertaking paid or voluntary child-related work in Victoria and is a measure to help protect children from harm arising as a result of physical or sexual abuse. The Department of Justice assesses a person's suitability to work with children by examining relevant serious sexual, physical and drug offences in a person's national criminal history and, where appropriate, their professional history. A WWC Check card, notice or document (valid for five years), is granted to a person under working with children legislation if:

- they have been assessed as suitable to work with children
- there has been no information that, if the person worked with children, they would pose a risk to those children
- they are not prohibited from attempting to obtain, undertake or remain in child-related employment.

**WorkSafe Victoria:** The manager of Victoria's workplace safety system. WorkSafe Victoria's responsibilities are to:

- help avoid workplace injuries occurring
- enforce Victoria's occupational health and safety laws
- provide reasonably priced workplace injury insurance for employers.

**Young person:** In Victoria, under the *Children, Youth and Families Act 2005*, a child or young person is a person under 18 years of age.