

1. NQS

QA2	2.1.1	Wellbeing and comfort - Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation.
	2.1.2	Health practices and procedures - Effective illness and injury management and hygiene practices are promoted and implemented.
	2.1.3	Healthy eating and physical activity are promoted and appropriate for each child
	2.2.1	Supervision - At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QA3	3.1.2	Upkeep – Premises, furniture and equipment are safe, clean and well maintained

2. National Law

Section	167	Offence relating to protection of children from harm and hazards
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3. National Regulations

Regs	77	Health, hygiene, and safe food practices
	78	Food and beverages
	79	Service providing food and beverages
	80	Weekly menu
	88	Infectious diseases
	103	Premises, furniture, and equipment to be safe, clean and in good repair
	106	Laundry and hygiene facilities
	109	Toilet and hygiene facilities
	110	Ventilation and natural light
	112	Nappy change facilities
	168(2)(a)(i)	Education and care service must have policies and procedures in relation to health and safety, including matters relating to nutrition, food and beverages, dietary requirements
	170	Policies and procedures to be followed
	171	Policies and procedures to be kept available
	172	Notification of change to policies or procedures

4. EYLF

LO3	Actively support children to learn hygiene practices.
	Promote continuity of children's personal health and hygiene by sharing ownership of routines and schedules with children, families, and the community.



Discuss health and safety issues with children and involve them in developing guidelines to keep the environment safe for all.
Engage children in experiences, conversations and routines that promote healthy lifestyles and good nutrition
Discuss health and safety issues with children and involve them in developing guidelines to keep the environment safe for all

5. Aim

Our service aims to promote and protect the health, safety, and wellbeing of all of children, educators, other staff, volunteers, students, and families using procedures and policies to maintain high standards of health, safety, hygiene and provide safe food to children. We also aim to reduce the risk of infectious diseases and illnesses spreading and following the relevant laws and regulations and standards (see also *Infectious Diseases Policy*). A holistic and consistent approach to health, hygiene and safe food across the service will help to effectively meet this aim.

6. Scope

The Health, Hygiene and Safe Food Policy and Procedures applies to the approved provider, the nominated supervisor, educators, all other staff, volunteers, students, and families.

7. Intersection with other Policies

- Additional Needs Policy
- Enrolment Policy
- Food, Nutrition and Beverage Policy
- Immunisation and Disease Prevention Policy
- Infectious Diseases Policy
- Incident, Injury, Trauma, Illness Policy
- Medical Conditions Policy
- Physical Activity Promotion Policy
- Record Keeping and Retention Policy
- Relationships with Children Policy
- Staffing Arrangements Policy

8. Definitions

“Classes of food premises” (Victoria only) – Class 1 - where the food being handled or served is to vulnerable people within a hospital, aged care, childcare setting, or by home delivery services that provide meals to people who are unable to prepare meals for themselves, such as Meals-on-Wheels; Class 2 - are premises that handle potentially hazardous foods; Class 3A - are premises that are home-based businesses and accommodation getaway premises that undertake specific food handling activities; Class 3 – predominately those that handle low-risk foods or pre-packaged potentially hazardous foods; Class 4 – predominately handling pre-packaged, low risk foods. Source: Victorian Department of Health

“Food Safety Supervisor” - means a person who: (a) holds a food safety supervisor certificate that has been issued within the immediately preceding period of 5 years; and (b) has the authority and ability to manage and give direction on the safe handling of food. Source: Food Standards Australia and New Zealand Standard 3.2.2A



“Food safety supervisor certificate” - means certification as a food safety supervisor by: (a) a registered training organisation; or (b) an organisation recognised by the relevant authority under the application Act. Source: Food Standards Australia and New Zealand Standard 3.2.2A

“Food safety training course”- means training in food safety that includes training in each of the following: (a) safe handling of food; and (b) food contamination; and (c) cleaning and sanitising of food premises and equipment; and (d) personal hygiene. Source: Food Standards Australia and New Zealand Standard 3.2.2A

“Handling of food” - includes the making, manufacturing, producing, collecting, extracting, processing, storing, transporting, delivering, preparing, treating, preserving, packing, cooking, thawing, serving, or displaying of food. Source: Food Standards Australia and New Zealand Standards

“Health” – the state of being free from illness or injury. Source: Oxford Dictionary

“Hygiene” – conditions or practices conducive to maintaining health and preventing disease, especially through cleanliness. Source: Oxford Dictionary

“Potentially hazardous food” - means food that has to be kept at certain temperatures to: (a) minimise the growth of any pathogenic microorganisms that may be present in the food; or (b) prevent the formation of toxins in the food. Source: Food Standards Australia and New Zealand Standards

“Process” - in relation to food, means activity conducted to prepare food for sale and includes chopping, cooking, drying, fermenting, heating, thawing, and washing, or a combination of these activities. Source: Food Standards Australia and New Zealand Standards

“Ready-to-eat food” - means food that is ordinarily consumed in the same state as that in which it is sold, but does not include: (a) nuts in the shell; or (b) whole, raw fruits; or (c) vegetables that are intended for hulling, peeling or washing by the consumer.

“Serve” - means the act of setting out or presenting food to or for a person to eat that food and includes the following activities: (a) portioning food from a bulk tray or container into single serves and placing it on plates; or (b) presenting food in a bain-marie or other bulk food display unit for self-service; or (c) delivery of plated food.

9. Implementation

Our service is committed to implementing adequate health and hygiene practices and safe practices for food handling. This policy and procedures are in place to ensure that we provide a healthy and safe environment for the children at our service.

Specifically:

- Our staff, students and volunteers have the training, skills, and knowledge to maintain hygienic practices and follow strict procedures, including for:
 - bedding equipment
 - Spaces, furniture, equipment – including toys and books
 - Toileting, nappy changing and cleaning of equipment
 - Handwashing
 - Spills such as blood, faeces, vomit, urine
 - Dental care and accidents



- Our service complies with Victoria’s legal and regulatory requirements for food safety and the Australia New Zealand Food Safety Standards Code. We have:
 - Implemented a food safety program
 - Strict procedures for food safety to ensure that all people at our service do not contaminate food; have unnecessary contact with ready-to-eat food; do not spit, smoke, or use tobacco in food preparation/serving areas. Our procedures cover handwashing and food handling hygiene; cleaning and maintenance of food handling areas and equipment; and the preparation, storage, temperature control, and transport of food and drinks, including for food and drinks provided by children’s families.
 - Trained, skilled and knowledgeable food handlers [
 - Systems to maintain records about our compliance with the relevant Food Safety Standards
 - A culture that encourages food safety
 - Procedures to maintain clean, pest free and well-maintained areas and equipment for food storage, preparation, and service
- Our educators work with children and families to promote health and safety issues, encourage good hygiene practices, including hand washing, coughing, dental hygiene and ear care, food safety.
- We have defined the responsibilities of everyone who has a role in ensuring the health, hygiene, and safe food at the service.

10. Health and Hygiene Procedures

- Appendix A – Handwashing procedure and respiratory etiquette
- Appendix B – Cleaning procedure for surfaces, rooms, toys and books
- Appendix C – Cleaning procedure for bedding equipment
- Appendix D – Spills procedure
- Appendix E – Hygienic nappy change procedure
- Appendix F– Hygienic toileting procedure
- Appendix G– Dental hygiene and care and dental accidents procedure

11. Food Safety Procedures

- Appendix H- Food Preparation and Food Hygiene Procedure
- Appendix I- Food Safety, and Transport Procedure
- Appendix J Food Storage Procedure

12. Food Safety Laws

In Victoria, children’s services that handle food are governed by laws and regulations, including:

- Food Act 1984
- Australia New Zealand Food Standards Code
- Education and Care Services National Law and Regulations

You will need to check with Victorian Department of Health’s Food Safety Unit (foodsafety@dhhs.vic.gov.au | 1300 364 352) or your local council which food laws, regulations and standards apply to your service as these vary depending on the type of food your service handles and your business type.



Food Standards Australia New Zealand Standards Code

The Food Standards Code applies to the whole of Australia. It sets the standards for food businesses in regard to food safety and handling. The standards are enforced by local/state/territory agencies. Our service complies with the relevant Standards:

- **Standard 3.2.2A - Food safety management system** (commencing 8 December 2023)
Our service meets this Standard, which requires businesses that handle unpackaged, potentially hazardous food that is ready to eat to implement 'food safety management tools', as described below.

1. Training for food handlers

Anyone who handles unpackaged potentially hazardous food that is used in the preparation of ready-to-eat food to be served to children or adults at our service must have completed a food safety training course;

Food safety training courses those staff/students/volunteers undertake will cover, at a minimum, each of the following topics: a) safe handling of food; and b) food contamination; and c) cleaning and sanitising of food premises and equipment; and d) personal hygiene.

Our service follows best practice and schedules regular refresher training as required for all food handlers. Training is conducted as part of the induction process for new roles and when there are significant changes to the laws and regulations. Our service uses the online I'm Alert and DoFoodSafely (Victorian) free and recognised food safety programs to train our food handlers.

We also keep a record of all the food safety training our staff have undertaken so we can track when refresher training is due and to provide evidence to the regulatory authorities that we are complying with the Food Safety Standards.

13. Information Sharing, Training and Monitoring

All educators, families and children will engage in regular discussions about health, hygiene, and food safety throughout our curriculum. We will work with each child to promote health and safety issues, encourage effective hygiene, food safety and dental care, and maintain a healthy environment that is safe for each child. Regular discussions between educators and children will be integrated throughout the program at appropriate intervals.

At orientation, parents will be provided with information about how to access our policies, including the Health, Hygiene and Safe Food Policy and Procedures. Families are required to supply information about their child's health care needs, including any allergies, on their child's Enrolment Form (see Medical Conditions Policy for more details). We will provide support and resources to families about managing specific health needs, including food allergies, anaphylaxis, and diabetes. If educators have a concern that relates to a child's health, hygiene, or food safety, they will raise it with the child's parents.

Information on health, hygiene, safe food and dental care principles and practices will be displayed in the reception area and drawn to the attention of all parents on a regular basis. Our food handling areas display posters, checklists and instructions that communicate our safe food handling practices and procedures. Posters reminding children and adults at our service about proper handwashing practices are displayed in bathrooms and handwashing stations.



The nominated supervisor will include the Health, Hygiene and Safe Food Policy and Procedures in staff inductions and ensure staff, volunteers and students receive practical training in relation to the requirements, including how to identify and manage related risks. The nominated supervisor also implements an ongoing training program tailored to each staff member’s needs and goals, which are identified through regular performance reviews. Training for food handlers will be conducted in line with our obligations under the Australian New Zealand Food Safety Standard 3.2.2A

The approved provider, nominated supervisor will monitor staff to ensure they are following this policy and procedures. They will act quickly to fix any issues and will give staff any extra support or training they need to comply. Volunteers and students are also required to comply with all service policies and guidelines.

We will keep records of all training and risk assessments we conduct, which can be accessed by staff, students, volunteers, and families.

In any instances where children display any signs of illness or injury, staff, students, and volunteers will refer to the Incident, Injury, Trauma and Illness Policy and Procedures and/or Infectious Diseases Policy.

To uphold the general health and safety of all children using the service, all educators and visitors will follow the Tobacco, Drug and Alcohol Policy.

14. Roles and Responsibilities

All staff, volunteers, students, and families must understand our Health, Hygiene and Safe Food Policy and their role and responsibilities in keeping children safe and well.

Responsibilities	Roles
Ensure our Service meets its obligations under the <i>Education and Care Services National Law and Regulations</i> , including to take every reasonable precaution to protect children from harm and hazards likely to cause injury and to ensure that children are adequately supervised at all times they are in our care.	Approved Provider Nominated Supervisor
Ensure our service meets its obligations under our state/territory food laws and the Australian New Zealand Food Safety Standards Code	Approved Provider Nominated Supervisor Food Handling Staff
Ensure that nominated supervisors and staff members, students and volunteers implement adequate health and hygiene practices and safe practices for preparing and storing food	Approved Provider
Ensure that our service has policies and procedures in place in relation to: health and safety, including matters relating to nutrition, food and beverages, dietary requirements, health, hygiene and food safety. These policies must address the specific areas set out in <i>the National Regulations</i> , relevant state/territory laws and the Food Standards - <i>i.e.</i> , this <i>Health, Hygiene and Safe Food Policy and Procedures</i> needs to be in place.	Approved Provider
Take reasonable steps to ensure that nominated supervisors, staff and volunteers follow, and can easily access, the <i>Health, Hygiene and Safe Food Policy and Procedures</i> , including by: <ul style="list-style-type: none"> • Providing information, training and other resources and support • Providing this <i>Policy</i> at induction • Clearly defining and communicating roles and responsibilities for implementing this <i>Policy</i> • Communicating changes to routines and policies • Monitoring and auditing of staff practices and addressing non-compliance quickly • Regularly reviewing this <i>Policy</i> This <i>Policy</i> must also be available for inspection.	Approved Provider



Health, Hygiene and Safe Food Policy

<p>Notify families at least 14 days before changing <i>Health, Hygiene and Safe Food Policy and Procedures</i> if the changes will:</p> <ul style="list-style-type: none"> • Affect the fees the charged or the way they are collected; or • Significantly impact the service’s education and care of children; or • Significantly impact the family’s ability to utilise the service. 	<p>Approved Provider</p>
<p>Implement the <i>Health, Hygiene and Safe Food Policy and Procedures</i> and ensure that all staff members, students, and volunteers have adequate health and hygiene practices and safe practices for handling, preparing and storing food</p>	<p>Nominated Supervisor</p>
<p>Be aware of and follow the <i>Health, Hygiene and Safe Food Policy and Procedures and</i> maintain adequate health and hygiene practices and safe practices for handling, preparing, and storing food</p>	<p>Educators and Other Staff, Volunteers, Students Families</p>
<p>Ensure our service’s premises, furniture and equipment are safe, clean and in good repair.</p>	<p>Approved Provider (ultimate responsibility) Nominated Supervisor</p>
<p>Ensure that the indoor environment is hygienic and comfortable (not limited to being well ventilated and free from cigarette/tobacco smoke, with adequate natural light, and appropriately heated/cooled).</p> <p>Ensure that our service continues to have adequate and appropriate laundry and hygiene facilities for dealing with soiled clothing and linen, including storage facilities. Ensure that these facilities are maintained in a way that does not pose a risk to children.</p> <p>Ensure that our service continues to have adequate, developmentally, and age-appropriate toilet, washing and drying facilities are provided for use by children being educated and cared for by the service, and that the location and design of the toilet, washing and drying facilities enable safe use and convenient access by the children.</p> <p>Ensure that our service continues to have adequate and appropriate hygienic facilities nappy changing, including at least one properly constructed nappy changing bench and hand cleaning facilities for adults in the immediate vicinity of the nappy change area</p>	<p>Approved Provider</p>
<p>Ensure the appropriate Medical Management Plans, Risk Management Plans and Medical Communication Plans are in place and being followed by educators and other relevant staff, If a child at the service is diagnosed as at risk of anaphylaxis, ensure a notice is displayed in a prominent position (see <i>Medical Conditions Policy</i> for more detail)</p>	<p>Approved Provider (ultimate responsibility) Nominated Supervisor</p>
<p>Implement/follow our <i>Infectious Disease Policy</i> if there is an occurrence of an infectious disease at our service</p>	<p>Approved Provider Nominated Supervisor Other Staff, Students, Volunteers</p>
<p>Ensure that the policy and guidelines are appropriate in practice to our service, identify risks and hazards, and any potential improvements to make to the <i>Health, Hygiene and Safe Food Policy</i>. Report any issues to the appropriate staff member (either approved provider, nominated supervisor, or educators).</p>	<p>Approved Provider Nominated Supervisor Educators and Other Staff, Students, Volunteers Families</p>
<p>Ensure anyone who handles unpackaged potentially hazardous food that is used in the preparation of ready-to-eat food to be served to children or adults at our service has completed a food safety training course; or have adequate skills and knowledge in food safety and hygiene to do that activity correctly and keep food safe.</p> <p>Food safety training courses those staff/students/volunteer undertake must cover, at a minimum, each of the following topics: a) safe handling of food; and b) food contamination; and c) cleaning and sanitising of food premises and equipment; and d) personal hygiene. Ensure records are kept of all the food safety training staff have undertaken.</p>	<p>Approved Provider (ultimate responsibility) Nominated Supervisor</p>



<p>Ensure our service is handling food safely by:</p> <ul style="list-style-type: none"> • Overseeing food handling and manage the day-to-day food handling operations at our service • Being responsible for ensuring that our service is handling food safely, and in accordance with the Food Safety Standards, so that food that is unsafe to eat is not served to children at our service • Instructing food handlers, reviewing, and updating food handling procedures, and inspecting and maintaining food handling operations, equipment and spaces. • Managing risks associated with food – eliminating or reducing hazards • Promoting a culture of food safety at the service • Maintain food safety training, skills, and knowledge 	<p>Approved Provider (ultimate responsibility)</p> <p>Nominated Supervisor</p>
<p>Maintain the necessary training, skills, knowledge to handle food safety</p>	<p>Food handling staff, students and volunteers</p>
<p>Practice safe food handling according to our <i>Health, Hygiene and Safe Food Policy</i> and follow any instructions about menu preparation, including if required in a child’s medical management plan</p>	<p>Food handling staff, students and volunteers</p>
<p>Keep abreast of our service’s practices for <i>Health, Hygiene and Safe Food</i> and provide our service with the written advice in the enrolment form regarding the child’s dietary requirements. Communicate to educators any changes to the child’s dietary requirements</p>	<p>Families</p>
<p>Maintain relevant records about our service’s safe food handling practices, in line with the requirements under the Australia New Zealand Food Standard 3.2.2A and with relevant state/territory laws.</p>	<p>Approved Provider (ultimate responsibility) Food Handlers</p>

15. Sources

Education and Care Services National Regulations 2011

Early Years Learning Framework

National Quality Standard

Food Standards Australia New Zealand

Safe Food Australia, 2nd Edition. January 2001

Caring for Children- Food, Nutrition and Learning Experiences 2014

Australian Guide to Healthy Eating

Australian Dietary Guidelines 2013

Infant Feeding Guidelines 2012

Staying Healthy Preventing Infectious Diseases in ECEC services (5th Edition) NHMRC

Food Safety Standards for Australia 2001

Food Standards Australia and New Zealand Act 1991 including: Standard 3.2.2 – Food Safety Practices and General Requirements; Standard 3.2.2A – Food Safety Management Tools; Standard 3.2.3 – Food Premises and Equipment

Food Standards Australia New Zealand Regulations 1994

Food Act 2001

Food Regulation 2002

Food Act 1984

Department of Health Vic: Food Safety



Occupational Health and Safety Act 2004

Occupational Health and Safety Regulations 2007

Dental Injury: Healthdirect Australia

Dental injuries – knocked out, chipped, or cracked teeth: BetterHealth VIC

Use and care of dummies (pacifiers) SESI Health Service NSW

Sterilising bottles, teats, and dummies Qld Health

Bottle feeding with formula: Better Health Vic Govt

Bottle Feeding (cleaning and sterilising bottles and equipment): HealthDirect Australia

16. Review

The Health, Hygiene and Safe Food Policies and Procedures will be reviewed annually, and when there are changes that may affect the maintenance of adequate health, hygiene, or safe practices, by the approved provider, nominated supervisor/s, employees, and families.

Date Reviewed: February 2024

Name of Reviewer: Approved Provider

Signature: AA Neal

Name of Reviewer: Nominated Supervisor

Signature: K Osborn

Appendix A

Hand Washing Procedure and Respiratory Etiquette

Hand washing

Our service will provide the appropriate height basins for children to wash their hands in as well as basins height appropriate for adults. Liquid soap will be provided by all individuals to wash their hands and we will ensure any allergies to soap are identified using the Enrolment Form and catered for appropriately. Along with this, the service will provide either/and/or individual towels, paper towel or an automatic dryer for people to dry their hands. We discourage the ongoing use of antibacterial soap.

All individuals should wash their hands:

- Upon arrival to reduce the introduction of germs.
- Before handling food.
- After handling food.
- After handling raw eggs.
- After handling rubbish and cleaning chemicals.
- After outside activities.
- After doing any dirty tasks such as cleaning or changing nappies.
- After removing gloves.
- After going to the toilet.
- Before and after nappy change procedures.
- After giving first aid.
- Before and after giving each child medication. If giving medication to more than one child between each child.
- Before going home to prevent taking germs home.
- After contact with bodily fluids (e.g. after coughing or sneezing).
- After any episodes of vomiting or diarrhoea.
- Alcohol based hand rubs (60-80% alcohol) can be used if hands are not visibly dirty where running water and soap is not available (such as on excursions) or if hand washing will prevent an educator from maintaining adequate supervision of the children

Below are instructions on how to effectively wash hands. All individuals are to follow this procedure and it should be displayed above every sink.

- Wash hands using running water and soap.
- Rub hands vigorously.
- Wash hands all over ensuring that the back of the hands, wrists, between fingers and under the fingernails are cleaned.
- Rinse hands thoroughly.
- Turn off the tap using a clean piece of paper towel.
- Dry hands thoroughly with clean towel/paper towel or an automatic dryer.
- This should take about as long as singing "Happy Birthday" twice.

Respiratory Etiquette

- Children and adults are encouraged to sneeze or cough into their inner elbow or a tissue
- Used tissues should be disposed of immediately into a pedal bin and hands should be washed and dried
- Children should be taught to blow their own nose if they are developmentally ready. Children and educators should wash and dry hands after blowing noses. Alcohol based hand sanitiser can be used as alternative.

Appendix B

Cleaning procedure for surfaces, rooms, toys, and books

Surfaces and rooms

- Surfaces will be cleaned with detergent after each activity and all surfaces that have frequent contact (e.g. doorknobs, taps, tables) will be cleaned thoroughly daily
- Other surfaces will be washed once a week and when visibly dirty
- Areas contaminated with potentially infectious material (such as blood, vomit, body fluids from an unwell person) will be disinfected after washing (see Spills Procedure at Appendix x)
- Table surfaces will be cleaned and disinfected before and after meals
- Bathrooms – taps, handles, toilets, and knobs - to be cleaned daily and immediately following spills or when visibly dirty

Toys and books

- Mouthed toys/object will be washed daily using warm water and soap, and let to dry in the sun
- Toys will be rotated to allow for washing
- Toy storage areas will be cleaned weekly
- If a toy or book was being used by an unwell child, it should be removed from the room immediately and set aside for washing at the end of the day.

Carpets, rugs, mats, and curtains

- Carpets and mats will be steam cleaned at least every 6 months and vacuumed daily

Appendix C

Cleaning procedure for bedding equipment

To ensure sleeping environments are hygienic, staff will:

- Clean cots bedding equipment with detergent and warm water after each use

Appendix D

Spills procedure

Educators and staff will use a spill kit to immediately clean up spills of blood, urine, vomit, and faeces.

Spill kits will contain:

- disposable gloves
- paper towel
- disposable cloths or sponge
- detergent
- bleach solutions which will be prepared to manufacturer's instructions daily. Any bleach solution which is not used after 24 hours will be discarded.

Blood

To clean up a spot of blood educators and staff will:

- wear gloves
- wipe up blood immediately with a damp cloth, tissue or paper towel
- place the cloth, tissue or paper towel in a plastic bag, seal and put in the rubbish bin
- remove gloves and put them in the rubbish bin
- wash surface with detergent and warm water
- disinfect the surface after cleaning it with detergent and warm water if the spill is known or suspected to be infectious
- wash hands with soap and water

To clean up a small blood spill educators and staff will:

- wear gloves
- place paper towel over the spill and allow the blood to soak in
- carefully lift the paper towel and place it in a plastic bag, seal and put in the rubbish bin
- remove gloves and put them in the rubbish bin
- clean the area with warm water and detergent using a disposable cloth or sponge and place the cloth in the rubbish bin
- wipe the area with diluted bleach and allow to dry
- wash hands with soap and water

To clean up a large blood spill educator will:

- wear gloves
- cover the area with an absorbent agent (e.g. sand) and allow the blood to soak in
- use designated scraper and pan to scoop up the absorbent material and any unabsorbed blood or body fluids
- place the absorbent agent, into a plastic bag or alternative, seal and put in the rubbish bin
- remove gloves and put them in the rubbish bin
- mop the area with warm water and detergent and wash the mop after use
- wipe the area with diluted bleach and allow to dry
- wash hands with soap and water

Faeces, vomit and urine

To clean up faeces, vomit and urine, educators and staff will:

- wear gloves
- cover the area with an absorbent agent (e.g. sand) and allow the blood to soak in
- use designated scraper and pan to scoop up the absorbent material and any unabsorbed body fluids
- place the absorbent agent, into a plastic bag or alternative, seal and put in the rubbish bin
- remove gloves and put them in the rubbish bin
- mop the area with warm water and detergent and wash the mop after use
- wipe the area with diluted bleach and allow to dry



- disinfect the surface after cleaning it with detergent and warm water if the spill is known or suspected to be infectious (e.g. diarrhoea or vomit from a child with gastroenteritis)
- wash hands with soap and water

Nasal discharge

- When cleaning children's noses, educators and staff will use gloves and wash hands after every nose wipe or use an alcohol base hand sanitiser to clean hands
- dispose of dirty tissues immediately in a hands-free/pedal bin

Appendix E

Hygienic Nappy Change Procedure

The procedure for nappy changing will be displayed in the nappy change area.

Toileting occurs at any time of the day and is specific to individual needs. Educators will communicate with parents to develop consistency with their child's toileting habits. Educators must be aware of and consider any special requirements related to culture, religion, or privacy needs.

Nappy changing and toileting will only be carried out by educators following the nappy changing procedure. At times it may be necessary for a student to carry out the nappy change procedure as part of practical education requirements, and a trained educator must always be present to monitor this situation and ensure the procedure is being followed adequately. If a parent is present and helping their child (toileting in the bathroom), it is required that an educator accompany any other children needing to use the bathroom at the same time.

Additionally, the service will follow hygienic nappy change practices at all times using the following procedure -

- Nappy changing will be done only in the nappy change area which will be properly stocked with paper towels or towels, plastic bags, fresh nappies, clean clothes, rubbish bin with sealed lid lined with plastic. Always prepare change area first: put on gloves, place paper towel, wipes and bag to dispose of nappy.
- Nappy changes occur frequently and as needed throughout the day. At all times one hand must be kept on the child to prevent them falling from the change table.
- Assist the child up to the nappy change table.
- Remove the dirty nappy: Clean and dry the child's bottom using wipes, wiping from front to back. Remove paper towel from the change table.
- Seal the soiled nappy, paper towel and wipes into plastic bag (use two if soiled) and place into lined pedal bin. Place any soiled clothing into a bag and seal ready for returning to the family (see instructions below). Remove gloves before touching any clean clothing or the clean nappy. Remove gloves by peeling them back from your wrists, turning them inside out as you go. Place gloves in bin.
- Dress the child and wash and dry the child's hands, take the child away from change area. Wash your hands.
- Clean the nappy change surface after each use. Put on clean gloves and clean surface with neutral detergent and warm water. Wipe dry with paper towel. Dispose of gloves and paper towel in bin. Wash your hands. Disinfect after the last nappy change in a series of nappy changes.
- After each nappy change the child's and educator's hands will be washed and the change table cleaned.
- At the end of each day the nappy change area will be disinfected.
- The service only uses disposable nappies.
- Items returned to a child's home for laundering will have soiling removed and will be stored securely and not placed in the child's bag in contact with personal items.

Appendix F

Hygienic Toileting Procedure

The procedure for toileting will be displayed in the toileting area.

Toileting occurs at any time of the day and is specific to individual needs. Educators will communicate with parents/guardians to develop consistency with their child's toileting habits. Educators must be aware of and consider any special requirements related to culture, religion or privacy needs.

At times it may be necessary for a student to assist children in the area of toileting as part of practical education requirements, and a trained educator must always be present to monitor this situation and ensure the procedure is being followed adequately. If a parent is present and helping their child (toileting in the bathroom), it is required that an educator accompany any other children needing to use the bathroom at the same time.

Additionally, the service will follow hygienic toileting practices at all times using the following procedure -

- Educators will at all times encourage the child to be independent in their toileting habits and provide assistance as and when needed.
- It is better to use the toilet when toilet training for effective hygiene and infection control factors.
- The service will ensure that toilets and hand washing facilities are easily accessible to children.
- Children will be encouraged to flush toilets and wash hands after use.

Disposable gloves should be used for any of these stages in the toileting procedure:

- Help child to remove clothing if needed.
- Help child onto toilet if needed.
- Help the child to wipe themselves, encouraging them to wipe front to back.
- Encourage the child to flush the toilet themselves.
- Encourage the child to wash and dry hands on single sheet of paper towel, and then to leave the bathroom.

If the child has soiled or wet their clothing:

- Remove any wet/soiled clothing and seal in a bag for washing. It must be double-bagged.
- Clean and dry the child.
- Remove your gloves and wash hands, do not touch the child's clean clothing.
- Put on new gloves and dress the child, wash, and dry the child's hands. Have them leave the bathroom.
- Clean any spills following procedure for cleaning spills of body fluids.
- Remove and dispose of gloves, wash, and dry your hands.
- Items returned to a child's home for laundering will have soiling removed and will be stored securely and not placed in the child's bag in contact with personal items.

Appendix G

Dental hygiene and care and dental accidents procedure

Dental Hygiene and Care

- The service will arrange for dental health professionals to attend the service to discuss good dental health practices and guidelines with educators, children, and family members.
- Educators should actively seek to be positive role models for children and families in attendance at the service.
- Educators form positive relationships with family members and children to discuss and encourage good dental health practices and ensure the continuity of care of each child. Information should be made available to family members and educators in their home language.
- The service integrates educative information and guidelines on good dental health practices into the daily routine. This should include information on tooth brushing, tooth friend snacks and drinks and going to the dentist and/or dental health professionals.
- The service will actively encourage good dental health practices including eating and drinking habits, tooth brushing and going to the dentist and/or dental health professionals.
- Children will be encouraged to drink water to quench their thirst and remain hydrated.
- Children will be encouraged to rinse their mouths with water to remove food debris after every meal or snack. Educators will supervise such practices.
- Family members should be informed without undue delay any incident or suspected injury or issue with their child's dental health which may include teeth and gums, gum swelling, infection in the mouth, or problems, pain or discomfort the child has with chewing, eating, or swallowing food or drink.
- Educators will be aware of dental first aid and receive appropriate professional development opportunities where appropriate.

Dental Accidents

If a dental accident occurs at the service, it will be managed as an emergency and injury forms will be completed.

For baby teeth:

- Do not try and replace the tooth in child's mouth
- If unsure whether the tooth is an adult or baby tooth, store tooth in milk, sterile saline or child's saliva as outlined below (enough to cover the whole tooth.)
- Seek dental advice as soon as possible (i.e. immediately) and ensure staff or the parent takes the tooth/tooth fragment to the dentist with the child.

For permanent teeth:

- If tooth is dirty, gently rinse the tooth/tooth fragments in clean milk, or if unavailable, sterile saline or child/adult's saliva (e.g. get them to spit into cup) for a few seconds to remove excess dirt and blood. Do not rinse with water.
- Handle the tooth by its crown (the white enamel top part of the tooth), not its root and be careful not to rub off the endothelial fragments on the root of the tooth as these are needed for the tooth to take if replaced by the dentist.
- If child/adult can be relied on not to swallow their tooth, replace tooth back into the socket. (Ensure the tooth is replaced the correct way round, in its original position, using the other teeth next to it as a guide). Hold the tooth in place by gently biting on a clean handkerchief or gauze pad.
- If unable to reinsert the tooth, get the child/adult to hold the tooth inside the mouth next to the cheek or place the tooth in clean milk, sterile saline, or wrap in plastic wrap with some of the person's saliva if these unavailable. Do not store in water. Do not transport the tooth in a tissue or cloth as this will dry the tooth out.
- Seek dental advice as soon as possible and ensure you or the family takes the child to the dentist with the tooth/tooth fragments within 30 minutes, as the root endothelial layer begins to deteriorate after 30 minutes.
- If the tooth has been in contact with dirt or soil, advise the family that tetanus prophylaxis may be required and advise them to consult with both their dentist and doctor.

Appendix I

Food Preparation and Food Hygiene Procedure

Our service will follow appropriate food preparation hygiene techniques to meet the requirements of the *Food Standards Australia New Zealand Code*, including:

- Wash hands before and after food preparation.
- Cleaning food preparation area before, during and after use.
- Use colour-coded chopping boards to prevent cross contamination of raw food.
- Ensuring that individuals preparing food know, follow, and adhere to the appropriate hygiene procedures. This includes:
 - Washing their hands according to our service's procedure
 - Avoiding unnecessary contact with ready-to-eat foods (e.g. salads, cooked meats)
 - Not changing nappies before preparing food
 -
- Clean children's dining tables with soap and water and dry before serving food using paper towels
- .
- Clean children's dining tables with soap and water and dry after meal times using paper towels
- Showing and discussing with children the need for food hygiene in both planned and spontaneous experiences.
- Clean fridge weekly.
- Clean oven monthly.
- Clean cupboard interiors bi-monthly or more frequently if necessary.
- Cover all food with cling wrap or foil when needed.
- Ensure all foods are stored in the correct manner.

Health of food handlers

Our service has a legal responsibility to ensure that food handlers who are suffering from or are a carrier of a food borne disease do not engage in any food handling activities.

If a food handler has any of the following symptoms, they must immediately inform nominated supervisor); seek medical attention and not return to food handling duties until they have been symptom free for 48 hours:

- diarrhea
- vomiting
- sore throat with fever
- fever
- jaundice

If a food handler has been diagnosed with any of the following diseases, they must not touch food or food contact surfaces and they cannot return to food handling duties until they have a medical certificate clearing them:

- Hepatitis A
- Norovirus
- Typhoid fever
- Shigellosis
- Staphylococcal or Streptococcal disease

Appendix J

Food Safety and Transport Procedures

Food Safety

We will, to the best of our ability, educate and promote safe food handling and hygiene in the children and families by:

- Provide food safety information from Safe Food Australia and our state/territory's regulator
- Encouraging parents to continue our healthy eating message in their homes. This information will be provided upon enrolment and as new information becomes available.
- Encouraging educators to present themselves as role models. This means maintaining good personal nutrition and eating with the children at meal times.
- Providing nutrition and food safety training opportunities for all educators including an awareness of other cultures food habits.

Temperature Control

The bacteria that commonly cause food poisoning grow rapidly between 5°C and 60°C, this is commonly referred to as the "temperature danger zone". The time potentially hazardous food can be safely held is known as the 2-hour/4-hour rule:

0-2 hours – Eat it, use it or keep it at or below 5 °C, or at or above 60 °C.

2-4 hours – Eat it or use it

More than 4 hours – Throw it away

Cooking temperature – Potentially hazardous foods such as meat, poultry, eggs, seafood, cooked rice and pasta, must be cooked to an internal temperature above 75 °C. Once these foods have been cooked this internal temperature, they can be reheated once to a temperature above 60 °C.

- Use a thermometer to make sure fridge is below 5°C. Don't overload refrigerators, as this reduces cooling efficiency.
- Fridges and freezers need to be cleaned regularly and fridge door seals checked to be in good repair.
- The operating temperature of the fridge and freezer need to be checked regularly and a record kept of this.

Perishable food

- All perishable food for children brought from home will be immediately placed in the refrigerator provided in the service. Ensure insulated bags are unzipped to allow cool air to circulate before placing in the fridge.
- Don't leave perishable foods in the temperature danger zone for longer than 2 hours.
- Keep cold food in a fridge/freezer, below 5°C until you are ready to cook or serve, e.g. if you are serving salads keep them in the fridge until ready to serve.
- Only take refrigerated ingredients such as milk, cheese, eggs out of the fridge as you need them, so they stay cool. Return them to the fridge as soon as you have finished using them.

Fruit and vegetables

- Wash fruit, vegetables and salad ingredients thoroughly in clean, drinking-quality water just before preparing and serving.
- Peel, trim or remove the skin or outer leaves, if applicable, Removed bruised or damaged bits. Be especially careful when preparing rough skin fruit (such as strawberries or rock melon – these have been linked to foodborne illnesses) and make sure to thoroughly wash the skin of these fruits.

Raw egg products

- Eggs can contain salmonella and there is a risk of illness when they are eaten raw or lightly-cooked
- Check eggs are fresh and have not past their used by dates, are clean, free from dirt/feathers and have no visible cracks
- Check eggs have been stamped with the producer's unique identifier
- Store eggs in the fridge



- Wash your hands before and after handling eggs
- Don't use cracked or dirty eggs
- Cook thoroughly
- If making batters with eggs such as pikelets and pancakes, make sure the batter is cooked all the way through
- Don't let children lick bowls or mixing spoons
- Our service does not serve foods that contain raw/lightly cooked eggs and only uses commercially prepared mayonnaise and other sauces that contain egg products

Food Allergens

- Follow our *Medical Conditions Policy*, which provides details on managing food allergies. Always follow medical management plans in place.
- Inspect food labels for the presence of allergens and request allergen information from supplier if food is unlabelled
- Use separate utensils and areas for storage, preparation and service of allergen-free food
- Separate allergen and allergen free food and store in sealed containers
- Make sure that utensils, equipment and work benches are cleaned and sanitised before preparing allergen free food

Cooking with Children

We sometimes include cooking experiences in our service's programming for the children. When these experiences are carried out, educators that are supervising will be vigilant to ensure food preparation remains a hygienic and safe experience. The relevant points from the above food preparation procedure will be followed during the children's cooking experiences.

Examples of the types of activities children will participate in during cooking experiences include:

- Helping choose what to cook.
- Measuring and weighing ingredients.
- Stirring or mixing ingredients.
- Washing salad, vegetables or fruit.
- Setting the tables.

To ensure food safety:

- Follow all our usual procedures for food safety
- Ensure children wash and dry hands before and after cooking
- Don't let children lick bowls or utensils (e.g. when making cakes, muffins, pikelets etc.)
- Make sure food with eggs has been cooked all the way through to the middle before children taste them
- Only take refrigerated ingredients such as milk, cheese, eggs out of the fridge as you need them, so they stay cool. Return them to the fridge as soon as you have finished using them

Play Dough

To reduce the risk of spreading infections, educators will:

- Store play dough in an airtight container
- Make a new batch of play dough at the beginning of the week and dispose of at the end of the week
- Discard play dough immediately if there is an outbreak of vomiting and / or diarrhoea/infectious disease.

Purchasing food

- Food must be purchased from reputable and trusted suppliers/shops only
- Only purchase food that is in good condition (e.g. packaged food must be clean, intact and undamaged, fresh produce is clean, fresh and undamaged, cold food must be at 5 °C or below, hot food at 60 °C or above, frozen food must be hard frozen)
- Check food has not expired

Appendix K

Food Storage Procedure

In order to implement safe food storage practices to the highest possible standard, staff will access, and amend their practices to, the latest known information. This information will be passed onto families.

Staff will then implement these standards in the service by inspecting food items when first brought into the service to ensure they are in good order - for example, not in damaged packing, within their used by date period and at a correct temperature. Staff will then see that they are appropriately stored as per the following:

- All foods (dry, cold, and frozen) will be used by the FIFO rule (first in, first out). This will allow a rotation of food to make sure older stock is used first.
- Store dry foods in sealed, air-tight containers.
- Store according to the manufacturer's instructions.
- Store food – including play dough ingredients - on shelving off the floor, separately from chemicals.
- Any food removed from its original container must be stored in a container that is labelled with the product's name, the used by date, ingredients, and the date it was opened.
- Ensure the food storage area is well cleaned, ventilated, dry, pest free and not in direct sunlight.
- Prevent pests by cleaning spills as quickly as possible and removing garbage/waste frequently.
- If pest activity is observed, notify the nominated supervisor who will contact the pest controller.
- Throw away any food that has been exposed to chemicals, or that is old, damaged, unlabeled or past its expiry date.

For cold storage, the following applies:

- All foods are wrapped, covered, dated (used by date and date it entered the service) and labelled
- Foods are stored at the correct temperature depending on the product. Cold foods need to be stored at less than 5 degrees (C) and frozen foods at minus 18 degrees (C).
- Store foods on shelves.
- Store raw and cooked foods separately from other food. NEVER store raw foods on top of cooked foods or fruit and vegetable as juices may drip down and contaminate.
- Store food once it has sufficiently cooled down. Foods cool quicker in smaller, shallow containers.
- Leave space around food containers that are cooling in the fridge – do not stack and do not overcrowd
- Only store the cooked and cooled food in the fridge for 48 hours. Freeze within 48 hours of cooking.
- Fridges and freezers need to be cleaned regularly.
- The operating temperature of the fridge and freezer need to be checked regularly and a record kept of this.
- Avoid overloading fridges and freezers
- Ensure insulated bags are unzipped prior to placing in the fridge.