



COVID-19 Policy and Procedures

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National Quality Standard	Quality Area 2: Children’s Health and Safety; Quality Area 6: Collaborative Partnerships with Families and Communities; Quality Area 7: Governance and Leadership

Table of Contents

Policy Statement	1
COVID-19 Background	2
Policy Aims, Scope, Rationale, Legislative Background	5
Summary of Responsibilities	7
Strategies and Practices	9
Risk Management Strategy	9
Information and Communication.....	11
Attendance Records.....	11
Restrictions on Entry into Heritage.....	11
Exclusion of Staff and Children who are Unwell.....	11
Staffing Arrangements/Working from Home	12
Visitors, Incursions, Deliveries and Contractors	12
Arrangements for Vulnerable Children and Staff.....	12
Mixing of Cohorts/Rooms.....	13
Cleaning and Hygiene.....	14
Service of Food and Water	14
Cough and Sneeze Etiquette	14
Vaccination – Influenza and COVID-19	14
Excursions	14
Physical Distancing	15
Social Events and Meetings	15
Lockdown and Evacuation Arrangements	16
Curriculum and Educational Program	16
Supporting Mental Wellbeing.....	16
Training and Professional Development	17
Managing Enrolments	17
Procedures for when the Service is Required to Close.....	17
Managing the Service as COVID Restrictions Lift	17
Notification Requirements	18
Related Policies, References, Version Control and Change History	18
Appendix 1: AHPPC Recommendations for ECEC Settings.....	21
Appendix 2: COVID-19 Heritage Risk Assessment	23
Appendix 3: COVID-19 Heritage Scenario Planning	28
Appendix 4: Heritage New Virus/Influenza Pandemic Management Plan	35
Appendix 5: COVID-19 Heritage Priorities Checklist	39
Appendix 6: COVID-19 Communication with Families Checklist	42
Appendix 7: COVID-19 Checklist for Families	43
Appendix 8: COVID-19 Physical Distancing Checklist	44
Appendix 9: COVID-19 Staffing Arrangements Checklist.....	48
Appendix 10: ACT Health Service Closure Process: Notification, Decision, Action, Recovery.....	50



Policy Statement

The requirement to wear face masks in the ACT may be put in place at any time. Heritage will regularly check the current status.

<https://www.covid19.act.gov.au/act-status-and-response/face-masks>

In addition, due to the rapidly evolving COVID-19 situation due to the Delta variant, the ACT Government is constantly updating travel directions and stay at home requirements. The Heritage community is asked to regularly check and adhere to the travel advice at:

<https://www.covid19.act.gov.au/updates/covid-19-areas-of-concern>

Federal Government updates and statements

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-news-and-media>

Department of Health updates

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>

ACT Government updates

<https://www.covid19.act.gov.au/>

Safework ACT updates

<https://www.safeworkaustralia.gov.au/covid-19-information-workplaces>

On 11 March 2020, The World Health Organization (WHO) declared the COVID-19 virus outbreak to be a “pandemic”, ie. a Public Health Emergency of International Concern. On 12 March 2020, ACT Health confirmed the first case of COVID-19 in the ACT. On 16 March 2020, a Public Health Emergency was declared in the ACT.

Heritage Early Childhood Centre (Heritage) is committed to providing a safe and healthy environment that minimises the risk of any person at the Heritage service being infected by or spreading the COVID-19 virus.

In recognition of the rapid spread of the disease and the ongoing release of information from government authorities, Heritage will respond swiftly and correctly to advice from The ACT Health Directorate, in line with the latest national health advice and legislative requirements. Currently, the Australian Health Protection Principle Committee (AHPCC) considers early childhood education and care services are essential services and should continue at this time, but with risk mitigation measures in place.¹

Heritage will minimise the risk of exposure of educators and children to the COVID-19 virus by strictly adhering to all government mandates and guidelines from relevant authorities. The service will implement practices to reduce the risk of transmission of the virus including the exclusion of any person (child, educator, staff, parent, contractor, visitor or volunteer) that is suspected to have, or has tested positive for, COVID-19, or has been overseas or to a COVID hotspot in the last 14 days. In addition, Heritage will implement strict hygiene practices in line with existing policies and procedures and increase the frequency of cleaning and disinfecting high-touch areas in line with SafeWork Australia recommendations.

Heritage will provide up-to-date information and advice regarding COVID-19 to parents, families and educators sourced from The Australian Government, The Department of Health

¹ Refer to: Appendix 1: AHPCC Recommendations, ECEC Settings, 3 April 2020



and The ACT Health Directorate as it becomes available. The Heritage COVID-19 Safety Plan will be available on the premises at all times.

Heritage understands that COVID-19 is a notifiable condition under the ACT *Public Health Act 1997*. Confirmed cases will be reported to the Communicable Disease Control (CDC) section as soon as practicable on **(02) 5124 9213 (business hours) or (02) 9962 4155 (after hours)**.

The ACT Health Directorate may contact Heritage in the event of any child, educator, staff member or visitor who has attended the service has tested positive to COVID-19. Contact tracing will be conducted by the ACT Health and further advice provided.

Background

What is COVID-19 (Coronavirus Virus Disease 2019)?

- Coronaviruses are a group of viruses that can affect humans and animals. In humans, coronaviruses can cause mild illness, such as the common cold and gastrointestinal infections, as well as more severe illness, such as that caused by SARS (Severe Acute Respiratory Syndrome) and MERS (Middle East Respiratory Syndrome).
- 'COVID-19' or 'Novel Coronavirus' is caused by a new strain of coronavirus that has not previously been detected in humans. The outbreak was detected in Hubei Province, China in late Dec 2019² and has spread to many countries outside China.
- Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) is the official name of the virus that causes COVID-19.

What are the symptoms?

- Symptoms include, but are not limited to, fever, cough, sore throat, fatigue and shortness of breath. Other symptoms can include runny nose, chills, body aches and headache.

When to Test for COVID-19

- The ACT Government currently advises³ individuals to get tested for COVID-19 if they have any of the following symptoms, no matter how mild:
 - A fever of 37.5 degrees or higher, or recent history of fever such as chills or night sweats, OR
 - Symptoms of a respiratory infection, such as sore throat, cough, runny or blocked nose, or shortness of breath, OR
 - Loss of sense of smell or taste.
- To get tested, individuals can either visit a COVID-19 testing clinic or call their GP for advice. It is only necessary to visit the Emergency Department if symptoms are severe.

Transmission

- COVID-19 is transmitted from someone who is infected with the virus to others in close contact through contaminated droplets spread by coughing or sneezing or by contact with contaminated hands or surfaces.
- According to the update from the WHO (April 2021), these particles range from larger respiratory droplets to smaller aerosols.
- Current evidence suggests that the virus spreads mainly between people who are in close contact with each other, typically within 1 metre (short-range). A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose, or mouth.
- The virus can also spread in poorly ventilated and/or crowded indoor settings, where people tend to spend longer periods of time. This is because aerosols remain suspended in the air or travel further than 1 metre (long-range).
- People may also become infected by touching surfaces that have been contaminated by the virus when touching their eyes, nose or mouth.
- According to the World Health Organisation, data suggests that infected people appear to be most infectious just before they develop symptoms (namely 2 days before they develop

² World Health Organisation, 2019

³ <https://www.covid19.act.gov.au/stay-safe-and-healthy/symptoms-and-getting-tested/when-to-get-tested>



symptoms) and early in their illness. People who develop severe disease can be infectious for longer. While someone who never develops symptoms (asymptomatic) can pass the virus to others, it is not yet clear how frequently this occurs.

- According to Department of Health, the time of exposure to the virus and when symptoms first occur is anywhere from 2-14 days.

Vaccination and Transmission

- Breaking chains of transmission within the community and limiting onward spread is critical to help protect people who may respond poorly to immunisation or may not be able to get vaccinated themselves, such as children, some older people, and some people who are immunocompromised. This also greatly increases the opportunity to achieve some degree of population (herd) immunity, and a faster easing of social restrictions.
- Current vaccines are two-dose vaccines. After the first dose, a good immune response occurs about two weeks of the first dose. The second dose boosts that immune response within a shorter period of time. It is not yet known how long immunity lasts from the current vaccines.
- Evidence shows that COVID-19 vaccines stop a person getting sick or substantially reduce the severity of symptoms. There is also growing evidence that they may reduce the chance of transmitting the virus to others.⁴

Transmission in Early Education and Care Settings (ECEC)

- The role that children play in transmission of COVID-19 remains largely unknown.
- While there has been an absence of outbreaks in Early Childhood Education and Care settings globally, there is clear evidence that children are susceptible to SARS-CoV-2 infection. The Australian Health Protection Principal Committee (AHPPC) continues to closely monitor the evidence as it emerges to inform public health policy.⁵
- The health evidence on school closures from previous respiratory epidemics remains that the costs are often underestimated, and the benefits are overestimated.
- The best available modelling supports the hypothesis that children are infected but relatively asymptomatic.
- If it is assumed that asymptomatic people are less likely to transmit, the modelling indicates that, at present, school closures will have minimal impact on the overall epidemiology of COVID-19 in the Australian setting.⁶
- **Note:** According to The Australian Medical Association, June 2021, **the Delta variant** appears to be more transmissible across all age groups, including children, although more research is needed and there is no change in policy at this time regarding schools and child vaccinations.⁷

Being vaccinated (in accordance with latest Department of Health advice) combined with practising good hand hygiene, avoiding close contact with others (physical distancing) and mask wearing in high-risk settings is the best defence against spreading COVID-19.

Physical Distancing in Early Childhood Education Settings

- On 25 May 2020, The Australian Health Protection Principle Committee (AHPCC) confirmed that **maintaining 1.5 metres between children is not appropriate or practical in education and care services.**
- The advice applies to children interacting with other children, and also to adults providing care or interacting with children in this environment.
- **Adults must continue to undertake physical distancing when interacting with other adults, in areas such as staff rooms and when picking up or dropping off children.**⁸

⁴ <https://theconversation.com/mounting-evidence-suggests-covid-vaccines-do-reduce-transmission-how-does-this-work-160437>

⁵ Education Directorate: <https://www.education.act.gov.au/early-childhood/information-on-novel-coronavirus-covid-19-for-early-childhood>

⁶ Imperial College London: <http://www.imperial.ac.uk/mrc-global-infectious-disease-analysis/covid-19/>

⁷ <https://www.abc.net.au/news/2021-06-28/kids-in-lockdown-covid-delta/100247374>

⁸ Refer to: Appendix 1: AHPPC Recommendations



Policy Aims

The Heritage COVID-19 (Novel Coronavirus) Policy and Procedures aims to maintain a healthy environment for the Heritage community and prioritise health and safety measures to minimise the spread of COVID-19 at the service including:

- Implementing and promoting vigilant hygiene practices that minimise the risk of spreading infectious diseases, including COVID-19.
- Encouraging good health and excluding unwell children/staff, reasonably suspected to have a communicable disease from the service until cleared by a doctor to return.
- Monitoring public health information on COVID-19.
- Implementing all measures recommended by relevant authorities.
- Educating and informing the Heritage community on COVID-19 with current and trusted information.

Scope

It is understood that there is a shared responsibility and accountability between all member of the Heritage community including management, educators, students, volunteers, families and all others involved in proving the Heritage service, to implement the COVID-19 Policy and Procedures as a matter of high priority due to the potential health risks of not doing so.

Rationale

Heritage recognises it has a duty of care to take all reasonable, practicable steps to provide the Heritage community with a safe and healthy work environment that protects their physical and emotional wellbeing under the *Work Health and Safety Act 2011*). In addition, the Heritage COVID-19 (Coronavirus) Policy and Procedures has been *developed to comply with:*

- *Public Health Act 1997 (ACT)* – COVID-19 is a notifiable condition.
- *Education and Care Services National Law Act (ACT) 2010*.
- *Education and Care Services National Regulations (ACT) 2011*.
- National Quality Standard for Early Childhood Education & Care 2011.
- Worksafe ACT – the requirement to report notifiable incidents, including serious illness.
- Latest federal and local government regulations and recommendations.

Legislative Background

Education and Care National Law	
Section 165	Offence to inadequately supervise children.
Section 167	Offence to fail to protect children from harm and hazard likely to cause injury.
Section 169	Offence to fail to have the number of appropriately qualified educators available for the children as prescribed under the national regulations.
Section 174	Offence to fail to notify regulatory authority of serious incidents within 24 hours.
Education and Care National Regulations	
Regulation 168(2)(h)	There must be policies and procedures in relation to health and safety including providing a child safe environment, dealing with infectious diseases, and emergency and evacuation.
Regulation 77	The service must implement adequate health and hygiene practices and safe practices for handling, preparing and storing food.
Regulation 88	Reasonable steps must be taken to prevent the spread of the infectious disease at the service. In an event of an infectious disease at a service ta parent/authorised emergency contact of each child being educated and cared must be notified of the occurrence as soon as practicable.
Regulation 100	A risk assessment must be conducted before an excursion in accordance with regulation 101 and before an authorisation is sought under regulation 102, unless the excursion is a regular outing and a risk assessment has been conducted.



Regulation 101	A risk assessment for an excursion must identify and assess risks that the excursion may pose to the safety, health or wellbeing of any child being taken on the excursion and specify how those risks will be managed and minimised. Consideration must be given to the proposed route, destination, water hazards and activities, transport to and from the destination, the number of adults and children on the excursion, the number of educators/responsible adults that is appropriate to provide supervision given the risks, whether specialised skills are required, the proposed activities, duration of the excursion, and items to be taken.
Regulation 103	The premises and all equipment and furniture used in providing the education and care service must be safe, clean and in good repair.
Regulation 109	The service must ensure adequate, developmentally and age-appropriate toilet, washing and drying facilities are provided for use by children, and the location and design of the toilet, washing and drying facilities enable safe use and convenient access by the children.
Regulation 158	The service must ensure that a record of attendance is kept including the full name of each child attending the service; the date and time each child arrives and departs; and is signed by one of the following persons at the time that the child arrives and departs: The person who delivers and collects the child from the education and care service premises or the Nominated Supervisor or an educator.
Regulation 173(2)(g)	A notice must be displayed at the service where there is an occurrence of an infectious disease at the premises.
176(2)	Notice must be given in the case of the death of a child, as soon as practicable and within 24 hours of the incident/the time the person becomes aware of the death. For other serious incidents, within 24 hours of the incident/the time the person becomes aware.
National Quality Standard	
Quality Area 2: Children's Health and Safety	Standard 2.1: Each child's health and physical activity is supported and promoted. Element 2.1.2: Effective illness and injury management and hygiene practices are promoted and implemented. Standard 2.2: Each child is protected. Element 2.2.1: At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard. Element 2.2.2: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
Quality Area 6: Collaborative Partnerships with Families and Communities	Standard 6.1: Respectful relationships with families are developed and maintained and families are supported in their parenting role. Element 6.1.3: Families are supported. Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
Quality Area 7: Governance and Leadership	Standard 7.1: Governance supports the operation of a quality service. Element 7.1.2. Systems are in place to manage risk and enable the effective management and operation of a quality service. Element 7.1.3. Roles and responsibilities are clearly defined, understood and support effective decision making and operation of the service.



Summary of Responsibilities

Role	Responsible for:
<p>Approved Provider (Management Committee)</p>	<ul style="list-style-type: none"> • Following, and ensuring the service follows, practices to reduce the risk of being infected or spreading COVID-19 as outlined in this policy. • Regularly checking updates from reliable sources and working with the Director to ensure these are actioned appropriately. • Ensuring that required notifications are made within the defined time frame. • Providing hand washing and sanitising facilities and ensuring these are hygienic, adequately stocked and in good working order. • Ensuring Personal Protective Equipment (PPE), including face masks and gloves is available. • Ensuring staff who are sick with respiratory illnesses stay at home until fully recovered. • Where there is a confirmed case of COVID-19, co-operating with directions from health authorities and maintaining confidentiality. • Making appropriate arrangements so that staff who need to self-quarantine can stay away from work.
<p>Nominated Supervisor (Director / Responsible Person in Charge)</p>	<ul style="list-style-type: none"> • Working with the Management Committee to ensure that current and reliable information is communicated to families and staff and actioned accordingly. • Adhering to quarantine requirements and enforcing self-quarantine as directed by the ACT Public Health Unit. • Notifying the Management Committee immediately if a member of the Heritage community needs to self-quarantine, has a confirmed case of COVID-19, or has recently travelled to an overseas destination or restricted area, or been in close contact with a confirmed case of COVID-19. • Making appropriate arrangements so that staff who need to self-quarantine stay at home. • Assisting the Management Committee to make the required notifications within the defined timeframes. • Arranging for any maintenance or ordering of supplies to ensure there are adequate hygiene and hand washing facilities. • Ensuring tissues, hand sanitiser, PPE and cleaning products are in stock and available for use. • Ensuring the service is kept clean and hygienic and reminding the Heritage community of the Heritage Hygiene and Infection Control Policy and Procedures such as through posters on handwashing and respiratory hygiene. • Ensuring educators strictly following enhanced hygiene procedures as set out in this policy to minimise the risk of being infected by or spreading COVID-19. • Asking staff who are sick with respiratory illness to stay home until recovered and seek medical advice. • If children become sick while at the service, following the Illness and Infection Control Policy and Procedures to ensure they are isolated, and families contacted immediately. • Advising families of sick children to seek medical advice. If they are very unwell, calling an ambulance if require, according to the Illness and Infectious Diseases Policy. • If there is a confirmed case of COVID-19, cooperating with directions from the health authorities and maintaining confidentiality.
<p>Educators</p>	<ul style="list-style-type: none"> • Strictly following the service’s regular and enhanced hygiene and infection control procedures and keeping the service clean and hygienic.



	<ul style="list-style-type: none"> • Assisting in regularly cleaning high-touch surfaces. • Following food preparation and handling procedures in conjunction with regular hand washing. • If children become sick while at the service, following the illness procedures to ensure they are isolated, and families are contacted immediately. • Advising families of sick children to seek medical advice. If they are very unwell, calling an ambulance, in line with the Illness and Infectious Diseases Policy. • Staying home if feeling unwell. • If there is a confirmed case of COVID-19, cooperating with directions from the health authorities and maintaining confidentiality. • Notifying the Nominated Supervisor immediately if required to self-quarantine, have a confirmed case of COVID-19, have recently travelled to an overseas destination or restricted area, or been in close contact with a confirmed case of COVID-19.
<p>Families</p>	<ul style="list-style-type: none"> • Strictly following all regular and enhanced hygiene and infection control practices to minimise the risk of being infected or spreading COVID-19 including cleaning hands with an alcohol-based hand sanitiser or with soap and water on entry and exit and following good respiratory hygiene when coughing or sneezing. • Following the Illness and Infectious Diseases Policy and keeping children home when they are unwell or have any COVID-related symptoms. • Following directions from the ACT Public Health Unit (such as the need to self-quarantine or wearing a mask on entering Heritage) and informing the service if recently travelled to an overseas destination, a hot spot, or have a confirmed case of COVID-19, or been in close contact with a confirmed case of COVID-19. • Immediately collecting their child from the service if requested to do so by staff due to concerns for their health. • Seeking medical attention for their child should they become unwell. • Following hand washing and hygienic food preparation measures at home. • Cleaning and disinfecting high touch surfaces regularly at home (door handles, car seats, mobile phone, toys, dummies).
<p>Students and Regular Family Volunteers</p>	<ul style="list-style-type: none"> • Strictly following all regular and enhanced hygiene and infection control practices to minimise the risk of being infected or spreading COVID-19 including cleaning hands with an alcohol-based hand sanitiser or with soap and water on entry and exit and following good respiratory hygiene when coughing or sneezing. • Staying home if feeling unwell. • Following directions from the ACT Public Health Unit and informing the service if recently travelled to an overseas destination, a hot spot, or have a confirmed case of COVID-19, or been in close contact with a confirmed case of COVID-19. • Bringing relevant issues and concerns to the attention of the Director.



Strategies and Practices

Risk Management

Heritage management will:

- Ensure there is an effective and systematic risk management process in place regarding the COVID-19 virus to identify possible risks and hazards in the learning environment and eliminate or mitigate those risks as far as reasonably practicable.⁹
- Focus on minimising the risk of exposure to COVID-19 as far as is reasonably practicable, recognising that most centre-based early childhood education and care workers are unable to perform their job from home.
- Follow the risk mitigation recommendations of The Australian Health Protection Principal Committee (6 April 2020) to help manage the spread of COVID-19 in early childhood education settings and:
 - Exclude unwell staff, children and visitors.
 - Reduce mixing of children by separating cohorts.
 - Enhance personal hygiene for children, staff and parents.
 - Ensure full adherence to the NHMRC childcare cleaning guidelines and cleaning and disinfecting high touch surfaces at least twice daily, washing and laundering play items and toys.
 - Provide information and posters about COVID-19 are provided including on the vaccination roll out.
 - Recommend influenza vaccination for children, staff and parents.
 - Advise parents of children with a current Medical Condition Management Plan to update this if needed in consultation with their child’s health care professional.
 - Request staff with compromised immune systems seek medical advice whilst working in early education and care during the pandemic.
- Recognise that due to the constant changes in managing the Heritage service during the pandemic, the approach to risk management must be ongoing and fluid.
- Undertake emergency/scenario planning.¹⁰

Scenario 1	The service is directed to close.
Scenario 2	A child or staff member is diagnosed with COVID-19.
Scenario 3	A visitor, child or staff member has been in contact with a confirmed case of COVID-19 in the last 14 days.
Scenario 4	A visitor, child or staff member has a high temperature or respiratory infection symptoms before entering the service.
Scenario 5	A visitor, child or staff member has a high temperature or respiratory infection symptoms while at the service.
Scenario 6	A visitor, child or staff member has returned from overseas or a restricted area in the last 14 days.
Scenario 7	A visitor, child or staff member is incubating COVID-19 and not showing any symptoms.
Scenario 8	An excursion exposes children, staff and visitors to COVID-19.
Scenario 9	The service cannot meet educator-child ratios due to COVID-19 related issues.
Scenario 10	Staff training becomes out of date and difficult during pandemic.

- Constantly re-evaluate priorities in relation to COVID-19,¹¹ and strictly enforce the practices set out in this policy to minimise the risk of contracting or spreading COVID-19.
- Review control measures in consultation with staff members.

Encourage all educators to be immunised against COVID-19 as soon as they are eligible and in line with advice from their G.P.

⁹ Refer to: Appendix 2: Heritage COVID-19 Risk Assessment

¹⁰ Refer to: Appendices 3&4: COVID-19 Scenario Planning; Emergency Plan for New Virus/Influenza Pandemic

¹¹ Refer to: Appendix 5: COVID-19 Priorities Checklist



Information and Communication

In recognition of the rapid and consistent release of information related to COVID-19, Heritage management will refer to reliable authorities and call relevant authorities for advice as required.

Trusted Sources

Helplines

National Coronavirus Health Information Line: 1800 020 080 (24 hrs a day, 7 days a week)
Call 131 450 for translating and interpreting service

Health Direct: 1800 022 222

ACT Government’s COVID-19 Helpline: (02) 6207 7244 (8am and 8pm daily)

ACT Safework Australia helpline: (02) 6207 7244

ACT Regulatory Authority (CECA): (02) 6207 1114 or email ceca ceca@act.gov.au

Online Sources

Statements from Prime Minister, AHPPP and Chief Medical Officer

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-news-and-media>

Australian Government, Department of Health

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>

Australian Government, Department of Education, Skills and Employment – Information for the Early Childhood Centres

<https://www.dese.gov.au/covid-19/childcare>

<https://www.dese.gov.au/covid-19/childcare/covid-19-restrictions-and-early-childhood-education-and-care-sector>

ACT Government

<https://www.covid19.act.gov.au/>

<https://www.covid19.act.gov.au/signs-and-factsheets>

<https://www.covid19.act.gov.au/community/travel>

ACT Health

<https://www.health.act.gov.au/about-our-health-system/novel-coronavirus-covid-19>

ACT Health - COVID-19 Online Infection Control Training

<https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training>

ACT Health, Facebook Page: <https://www.facebook.com/ACTHealthDirectorate/>

ACT Education Directorate, Information for Early Childhood Centres

<https://www.education.act.gov.au/early-childhood/information-on-novel-coronavirus-covid-19-for-early-childhood>

Early Childhood Australia (ECA) – COVID 19 Resources

<http://www.earlychildhoodaustralia.org.au/media/covid-19-resources-early-childhood-services-families/>

Health Direct – ECEC Restrictions Checker

<https://www.healthdirect.gov.au/covid19-restriction-checker/education-and-childcare/act>

SafeWork Australia, Information for the Early Childhood Centres

<https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/early-childhood-education>

https://www.safeworkaustralia.gov.au/sites/default/files/2020-04/early-childhood-education-minimising-the-risk-of-exposure-to-covid-19_0.pdf



Heritage management will:

- Communicate risk management procedures and the latest advice, directions and guidance from relevant authorities to staff and families immediately including through email, newsletters and factsheets, and ensure this is followed.¹² Information provided may include:
 - Symptoms of COVID-19.
 - How the virus is transmitted.
 - Self-isolation and exclusion requirements.
 - Prevention strategies including vaccination, hand hygiene, mask wearing and physical distancing.
 - Contact details for health advice.
 - Child Care Subsidy information.
 - Public Health orders.
- Ensure signs and posters are displayed at the service from relevant authorities such as:
 - https://health.act.gov.au/sites/default/files/2020-03/CV_Good%20hygiene_Poster_Accessible_0.pdf
 - https://health.act.gov.au/sites/default/files/2020-03/CV_Hand%20hygiene_Poster_Accessible.pdf
 - <https://www.covid19.act.gov.au/signs-and-factsheets>
 - <https://www.safeworkaustralia.gov.au/doc/signage-and-posters-covid-19>

Attendance Records

- Heritage management will ensure attendance records are maintained for all children, parents, staff, students, volunteers and visitors at all times, including a contact phone number.
- All visitors to the premises must sign the Visitors Book using their own pen or a sanitised pen provided by Heritage and check in on the “check-in CBR” app.

Restrictions on Entry into Heritage

Heritage management will be aware of, and remind families and educators to follow, the travel restrictions imposed by the Australian Government in response to COVID-19 at <https://www.covid19.act.gov.au/community/travel>

The following people will not be permitted to enter the Heritage premises:

- Those who have returned from overseas (unless from a country where there is a travel bubble arrangement in place allowing quarantine-free travel) or who have been in a geographical area with elevated risk (hot spot) in the last 14 days.
- Those who have been in contact with a confirmed case of COVID-19 in the last 14 days. (A contact is defined as anyone who has been in contact with a known case, including the 24 hours before the case became symptomatic).
- High risk people, including the elderly, when there is an outbreak in the ACT.
- Those with a fever or symptoms of acute respiratory infection symptoms (e.g. cough, sore throat, persistent runny nose, shortness of breath) – see below.

Exclusion of Children and Staff who are Unwell

- If an enrolled child or staff member develops COVID-19 symptoms, the parent/guardian of the child or the staff member will be advised to call a General Practitioner for an assessment or call Healthdirect.
- As per the Illness and Infectious Diseases Policy, children and staff who are unwell and are reasonably suspected to have a communicable disease will be excluded from the service until they are cleared by a doctor to return.

Healthdirect on 1800 022 222

<https://www.healthdirect.gov.au/coronavirus-covid-19-childcare-school-exclusions-faqs>
<https://www.healthdirect.gov.au/symptom-checker/tool/basic-details>

- Families must not bring their child to Heritage if:

¹² Refer to: Appendices 6 & 7: COVID-19 Communication with Families Checklist; Checklist for Families



- They have had a temperature/fever or vomiting in the last 24 hours.
- Have had diarrhoea in the last 36 hours (48 hours if there is more than one case at the service).
- Started a course of antibiotics in the last 24 hours.
- They have been given medication for a fever prior to arriving at Heritage.
- They appear unwell and unable to participate in normal activities or require additional attention.
- If a child becomes unwell while at the service:
 - Educators/staff will respond to their individual needs and provide comfort and care in an area away from other children as per the Illness and Infectious Diseases Policy until the child's family arrives to collect the child, preferably within 30 minutes.
 - If the child's temperature is **37.5°C or above and the child is displaying other symptoms**, parents/emergency contacts will be contacted and required to **collect their child, preferably within 30 minutes**.
 - During heightened COVID-19 risk periods, all items/resources touched by the child will be cleaned and disinfected to avoid possible cross contamination. Educators will wear disposable gloves and a face mask to avoid possible contamination while supervising the sick child and cleaning any touched items and surfaces. **Refer to:** Section on Cleaning and Hygiene.

Heritage management reserves the right to refuse entry to staff, parents, family members or visitors if an instance of COVID-19 is suspected due to the symptoms being displayed.

Staffing Arrangements/Working from Home

- Where possible, staff will be encouraged to work from home during heightened risk periods, e.g. bookkeeper, and appropriate working from home arrangements will be organised.¹³
- Adequate supervision of children will be maintained at all times as per legislative requirements and quality standards.¹⁴
- The Director will ensure arrangements are in place to manage increased levels of staff absences and for replacing those who may arrive at work sick.
- Heritage management may apply for a temporary staffing waiver if they cannot meet the legislated qualification requirements due to COVID-19. (**Note:** Existing regulations have provisions in place for the replacement of qualified staff and early childhood teachers if they are absent or not working directly with children. Regulations 264 and 265).
- Heritage management will contact the **ACT Regulatory Authority (CECA) by phone on (02) 6207 1114 or email ceca@act.gov.au** for advice as required.

Visitors, Incursions, Deliveries and Contractors

- All visitors must sign the visitor book on arrival/departure and check in on the "check-in CBR" app.
- During heightened COVID-19 risk periods, non-essential visits to Heritage will be cancelled or postponed.
- Heritage management will ask contractors and delivery services to use electronic paperwork where possible and minimise physical interaction.
- Staff will wash their hands or utilise hand sanitise after touching deliveries.

Arrangements for Vulnerable Children and Staff

The Director will:

- Advise families to seek medical advice for children who are deemed highly vulnerable to adverse outcomes should they be infected with COVID-19, regarding their attendance at Heritage during the pandemic.
- Advise parents of children with a current Asthma Action Plan to update this if needed in consultation with their child's health care professional.
- Request staff with compromised immune systems to seek medical advice.

¹³ Refer to: Appendix 9: Staffing Arrangements Checklist

¹⁴ Refer to: Rationale



Mixing of Cohorts/Rooms

- Where practicable, Heritage will reduce the mixing of staff and children from different rooms, and stagger meal and play times.

Cleaning and Hygiene

- Staff and children will strictly follow the Hygiene and Infection Control Policy to maintain a clean and hygienic environment on the premises.
- Liquid soap and running water or alcohol-based hand sanitiser (with a minimum alcohol content of 70%) will be available at the main entrance and throughout the service, including near rubbish disposal.
- Staff and children will:
 - **Wash their hands thoroughly and often, for 20 seconds, or use alcohol-based hand sanitiser, including when they arrive and leave the centre, before and after eating, and after toileting and rubbish disposal etc.**
 - **Hands will be dried on a paper towel and the towel placed in the bin, or, on the case of Sanitizer, allowed to air-dry.**¹⁵
 - Children will be supervised while washing their hands.
- Routine environmental cleaning will be increased in frequency such as on high-touch surfaces such as door handles, tables, light switches, hard-backed chairs, remote controls, play gyms, bathroom areas, and any toys/surfaces which may have been mouthed or in contact with bodily fluids. Surfaces will be cleaned and then disinfected to remove germs as set out in the Hygiene and Infection Control Policy.
- Staff will be reminded to shower daily, wash their clothes daily, avoid touching their face, handshakes or other close physical contact, to dispose of tissues appropriately, and cover coughs and sneezes with an elbow or tissue.
- Staff will wear gloves when cleaning and wash their hands or use alcohol-based hand Sanitizer before and after wearing gloves.
- Amenities including staff room, communal areas, bathrooms and showers will be industrially cleaned by a professional cleaning service at least daily.
- Play items and toys, including washable plush toys, will be washed and laundered as per the Hygiene and Infection Policy, ensuring they are washed on the highest temperature setting according to the manufacturer's instructions and dried completely before use.
- Staff will be encouraged to regularly clean personal items such as phones and glasses and ensure work-station equipment such as keyboards are cleaned and wiped frequently using isopropyl alcohol wipes.
- Heritage will reduce the number of touch points for staff. For example, by removing any magazines from the centre staff room and keeping doors open where possible.
- Heritage will provide closed bins for workers to hygienically dispose of waste and rubbish, such as used tissues, immediately after use.
- Recirculated air conditioning will be limited or reduced.
- Face masks will be worn by persons over the age of 12 in accordance with mandates from The ACT Health Directorate.

Cleaning where exposure is possible

- During heightened COVID-19 risk periods, all items/resources/surfaces touched by a child who becomes unwell at the service with a high temperature or other COVID-19 symptoms, will be cleaned and disinfected to avoid possible cross contamination.
- Cleaning and disinfecting will commence as for an outbreak of gastroenteritis as set out in the Illness and Infectious Diseases Policy, and will include the following steps:
 - Put on gloves and mask
 - Make up a fresh container of correctly diluted detergent and warm water.
 - Immerse a cloth, wring it out, and clean the area vigorously to loosen germs.
 - Rinse away germs with clean water.
 - Dry the surface and disinfect the clean and dry area
- Further advice regarding infection control cleaning will be sought from The ACT Health Communicable Disease Control Unit should there be concern regarding the exposure of COVID-19 at the service.

¹⁵ Refer to: Procedures in Hygiene and Infection Control Policy



Service of Food and Water

- Educators will follow strict food preparation and handling procedures in accordance with the Food Safety Policy (Food from Home) and HACCP Plan (Food made on Premises).
- Heritage will follow any direction from The ACT Health Communicable Disease Control Unit in relation to changes in food preparation procedures.
- Supervision of children's hygiene practices at mealtimes will be increased to ensure correct handwashing before and after eating and that food is not shared.

Cough and Sneeze Etiquette

- All staff and children will be educated to avoid touching their eyes, nose and mouth with unwashed hands and to avoid close contact with others.
- All staff and children will strictly follow the procedures for coughing and sneezing. They must cough or sneeze into their elbow or directly into a tissue, then throw the tissue in a bin and immediately wash hands with soap and water or, if water is not available, they must use hand sanitiser.
- Educators must use disposable tissues to wipe noses, eyes or mouths and dispose of them in the bin provided immediately after use and wash their hands immediately.
- If children have thick nasal discharge or a persistent runny nose that requires constant wiping from educators, they will be sent home until their nasal discharge has stopped and the child has returned to health.

COVID-19 and Influenza Vaccination for Children, Staff and Families

- Heritage strongly recommends that all staff and families receive a COVID-19 vaccination as soon as they are eligible and in line with the guidance from their G.P.
- Heritage management will encourage staff and families to obtain seasonal flu vaccination as appropriate and advise to leave a 7-day gap before having the COVID-19 vaccine.¹⁶

Excursions

Excursions and incursions will be restricted during the heightened risk period of the COVID-19 pandemic and risk assessments will be conducted prior to excursions that take into account:

- The latest advice from the authorities including information about the use of public spaces and outdoor gatherings on the ACT Government COVID-19 website.
- Those at high risk such as those with medical conditions.

Outdoor Excursions

Heritage understands there is currently no limit on all outdoor gatherings in the ACT and children may attend outdoor public spaces including parks, nature reserves and playgrounds.

Educators will:

- Implement additional health and hygiene practices, including hand washing and/or hand sanitising, and disinfecting (wiping) touching points on equipment prior to playing, when children attend public playgrounds, as required.
- Reflect on intentional teaching opportunities and ways that can support children to talk about appropriate risk management and hygiene prior to attending local parks and playgrounds, such as researching washroom facilities in the area and preparing hygiene kits that include antibacterial wipes for wiping equipment, and rubbish disposal options.

Indoor Excursions

- Heritage will consider the purpose of the excursion and conduct a comprehensive risk assessment to determine the health, safety and wellbeing risks to children, educators, parents and members of the community.
- Heritage will follow the ACT Regulatory Authority's (CECA) advice to limit excursions to indoor environments such as shopping centres and libraries, at this time.

¹⁶ <https://www.health.gov.au/news/updated-atagi-advice-on-administering-seasonal-influenza-vaccines-in-2021>



Physical distancing

- On 25 May 2020, the AHPPC provided further clarification to complement the AHPPC's statement for education and care services. The AHPPC confirmed **maintaining 1.5 metres between children is not appropriate or practical in education and care services, nor is**
- The advice applies to children interacting with other children, and also to adults providing care or interacting with children in this environment.
- However, it advises that **adults must continue to undertake physical distancing when interacting with other adults, in areas such as staff rooms and when picking up or dropping off children.**¹⁷

Heritage will ensure physical distancing is employed where reasonably practicable in relation to staff using the attached checklist.¹⁸ Management will:

- Direct staff to space an appropriate distance apart to continue performing their duties, acknowledging that staff will have to come into contact with children.
- Encourage office staff, where reasonably practical, to use separate areas or separate themselves as much as possible from one another
- Encourage staff and visitors to physically distance themselves through increased signage and information.
- Encourage the use of outdoor space as much as possible.
- Stagger staff breaks and encourage staff to physically distance themselves in break rooms and when using shared spaces.
- Limit the number of visitors to the centre by cancelling incursions and non-essential training etc. during heightened risk periods.
- Discourage the use of public transport by staff if possible, or if not feasible, recommending that workers:
 - Travel at off peak times.
 - Wash hands with soap and water for at least 20 seconds, or sanitise hands with an alcohol-based hand sanitiser before and after travelling on public transport.
 - Maintain physical distancing measures during any trip.

During heightened COVID-19 risk periods, Heritage will consider:

- Encouraging parents not to come into the service.
- Requiring all staff to wear face coverings when not working directly with children in areas of the service.
- Restricting the number of educators using the staff room at any one time.
- Increase ventilation within the Service.
- Ensuring cots, mats, cushions etc are positioned at least 1.5 metres apart.
- Seating children at opposite ends of a table when playing and eating.
- Avoiding children self-serving food from a shared plate.
- Avoiding any situation when children are required to queue such as for bathrooms or using equipment.

Social Events and Meetings

- Social events and tours of the service by prospective families will not go ahead during a COVID-19 heightened risk period.
- COVID-safe risk assessments will be undertaken for group celebrations and the service will abide by any restrictions for groups size, square-metre allowance and other measures and communicate these to families.
- Meetings will be restricted during the heightened risk period taking into account the latest advice from authorities regarding physical distancing and limits on indoor gatherings of people.
- Zoom will be utilised as an option for Committee meetings to allow office holders and ordinary members to participate remotely.

¹⁷ Refer to: Appendix 2: AHPPC Recommendations

¹⁸ Refer to: Appendix 9: Physical Distancing in ECEC - Considerations and Checklist



Lockdown and Evacuations Arrangements

- Evacuation and lockdown rehearsals will be adjusted to accommodate social distancing where practicable during heightened risk periods. This includes rehearsals taking place in smaller groups or talking the procedure through with children as an interim measure.
- Any adjustments to lockdown and evacuation rehearsals will be documented.

Curriculum and Educational Program

- The Health and Hygiene Program will be run through all rooms and be revisited regularly, including keeping a healthy body and practicing good hygiene and how hygiene practices for children is their best defence against COVID-19.
 - Posters to demonstrate correct handwashing methods will be referred to and educators will model techniques.
 - Information provided to children about COVID-19 will be age appropriate and sensitive to their emotional wellbeing. Educators will both acknowledge children's concerns and be open to discussions about COVID-19.
 - Educators will inform children about the virus and emphasise preventative measures such as handwashing, use of tissues, cough and sneeze techniques and limiting touching other children's faces.
- Educators will initiate discussions with children about the importance of hygiene throughout the day, particularly at mealtimes and other transitions.
- Educators understand play practices that could spread germs such as play dough and clay play and will ensure children have their own portion and/or discard it after play.
- Children voices will be considered in evaluating programs and policies and are evident through jottings/observations during the Health and Hygiene Program.
- Children's emotional well-being will be closely monitored by educators and any concerns communicated with parents and families. Children's questions will be respected and supported.
- Educators will utilise a variety of resources to support children's understanding of COVID-19. Examples include The Department of Health's videos:
 - [Help Stop the Spread](#)
 - [Social Distancing](#)
 - [ABC Kids Playschool's Hello Friends \(COVID-19 Special\)](#)
 - [Little J and Big Cuz: Everybody Wash'em Now](#)

Supporting Mental Wellbeing

- Heritage management will utilise relevant resources and tools to recognise and support the mental health and wellbeing of the Heritage community, such as:
 - [Be Your Early Learning](#)
 - [Emerging Minds](#)
 - [Talking to children about the COVID-19 Pandemic](#)
 - [Talking to children about traumatic events or worries about the future](#)
 - [Beyond Blue](#)
 - [ACT Health](#)
- In the event of the service being closed as a precaution to limit the spread of the COVID-19 virus, information will be provided to parents/families to help explain the situation to young children such as through email, newsletters and the Heritage website.
- Staff working from home will be supported to take breaks regularly and to stretch. Refer to: [https:// headspace.org.au/headspace-centres/maitland/new-blog-post-3/](https://headspace.org.au/headspace-centres/maitland/new-blog-post-3/) www.safework.nsw.gov.au/resource-library/six-simple-stretches

Training and Professional Development

- Heritage educators will be supported in professional learning to help children deal with trauma related to COVID-19 through resources, webinars and online modules, eg Emerging Minds, beYou – see above.
- Heritage management will cancel non-essential training and explore on-line options.¹⁹

¹⁹ ACT Health On-line Infection Control Training <https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training>



- SafeWork Australia advises that any face-to-face training should only be held only with spacing requirements implemented and adequate ventilation.
- If unable to fulfill training requirements under the National Regulations, the Director will contact the **Information and Enquiries team at the Early Childhood Directorate on 1800 619 113** for advice.

Managing Enrolments

- Heritage will continue to prioritise children of ANU families with an existing enrolment prior to the Early Childhood Education and Care Relief Package, and who are vulnerable or have parents who are essential workers.

Procedures for When the Service is Required to Close

The Heritage Management Committee understands they may make the decision to close the service or they may be directed by ACT Health or CECA to do so, for example if there is confirmed case of COVID-19 in the or Heritage community or wider community.

- CECA will determine closures on a case-by-case basis, including assessing any risks to the health, and welfare of staff and children.
- If a confirmed case of COVID-19 is identified at Heritage, a representative of ACT Health's Chief Health Officer will contact Heritage immediately. Heritage management will work closely with ACT Health to commence the notification, decision, action and recovery phase for the service.²⁰ CECA will provide assistance as required.
- If the Management Committee closes Heritage because of a confirmed COVID-19 case on the premises, or as a precaution, it must abide by National Regulation 88 which requires education and care providers and services to:
 - Ensure that reasonable steps are taken to prevent the spread of the infectious disease at the service.
 - Ensure that a parent or an authorised emergency contact of each child being educated and cared for is notified of the occurrence as soon as practicable.
 - Follow directions from ACT Health regarding cleaning of the premises.
 - Ensure all notification requirements are carried out – see below.

Procedures

- Families will be notified immediately of closure via email and/or phone and will continue to be informed as to when the service is expected to re-open as advised by ACT Health.
- The service will receive a “deep clean” to ensure all areas are cleaned and disinfected as per Safe Work cleaning guidance.
- From 13 July 2020, should the Service be directed to shut down due to COVID-19, or a fire, flood or other local emergency, standard local emergency procedures will be followed.
 - Activating a period of local emergency allows families access to additional absences if the initial 42 absence days per child per financial year have been used.
<https://www.dese.gov.au/child-care-package/ccp-resources-providers/help-emergency>
 - Additional absence days claimed due to COVID-19 related reasons, do not require a medical certificate.
- If the Service is advised or directed to close on public health advice as a result of COVID-19, out of pocket fees (Gap Fees) will be waived. (Effective 30 June 2021 until 31 December 2021).

Managing the Service as COVID Restrictions Progressively Lift

- Heritage will re-evaluate the situation regularly and prioritise the health and safety of children, educators and families.²¹
- Heritage will continue to communicate health and safety priorities and procedures to families on a regular basis and ensure all staff are aware of the vigilance to keep everyone safe on a daily basis.

²⁰ Refer to: Appendix 3: Heritage Scenario Planning; Appendix 11: ACT Health Service Closure Process: Notification, Decision, Action, Recovery

²¹ Refer to: Attachment 8: COVID-19 Priorities Checklist



Notification Requirements

Notification for a Confirmed Case of COVID-19

Notifying the ACT Health Communicable Disease Control Unit

- A confirmed case of COVID-19 is notifiable to and ACT Health’s Communicable Disease (CDC) Control Unit.
- If a child or staff member is diagnosed with COVID-19, the Director will notify the CDC Unit as soon as practicable and within 24 hours on **phone: 02 5124 9213** during business hours or by **paging (02) 9962 4155 after hours**.
- The service will remain diligent in reporting responsibilities and any directions provided to the service by the Ministry of Health.

Notifying the ACT Regulatory Authority

- A confirmed case of COVID-19 is deemed to be a Serious Incident under the Education and Care National Law and Regulations.
- If a child or staff member is diagnosed with COVID-19, the Director will notify the ACT Regulatory Authority as soon as practicable and within 24 hours using the [National Quality Agenda IT System \(NOAITS\)](#) or through direct contact via **phone: 02 6207 1114 or email: ceca@act.gov.au**

Notifying Worksafe ACT

- A confirmed case of COVID-19 is notifiable to Worksafe ACT.
- If a child or staff member is diagnosed with COVID-19, the Director will notify Worksafe ACT as soon as practicable and within 24 hours via **phone: 6207 3000 or email: worksafe@act.gov.au**

Notification of closure

- The service must notify:
 - The ACT Regulatory Authority (CECA) within 24 hours of any closure via the NQA IT System.
 - Work Safe ACT.
 - The ACT Department of Education, Skills and Employment (DESE).
- In addition, the services that need to temporarily close for COVID-19 related reasons must now also report closures (and re-openings) via the Provider Entry Point (PEP).
https://proda.humanservices.gov.au/prodalogs/login/pages/public/login.jsf?TAM_OP=login&ERROR_CODE=0x00000000&URL=%2F&OLDSESSION=

Related Policies

Name	Location
Creating Inclusion and Equity Policy	Policy Manuals in Main Office, Staff Programming Room
First Aid for Incidents, Injury, Illness and Trauma Policy	
Emergency and Evacuation Policy	
Excursions and Incursions Policy	Heritage Website, Members Section
Hygiene and Infection Control (incl. Toileting) Policy	
Illness and Infectious Diseases Policy	
Medical Conditions Policy	
Privacy and Confidentiality Policy	
Work Health and Safety Policy	



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Useful Websites

HealthDirect. *COVID-19 Childcare Exclusion FAQ and Symptom Checker*

- <https://www.healthdirect.gov.au/coronavirus-covid-19-childcare-school-exclusions-faqs>
- <https://www.healthdirect.gov.au/symptom-checker/tool/basic-details>

Version Control and Change History

Version Number	Approval Date	Approved by	Author and Amendments
1	March 2020	Director	New policy in response to COVID-19 pandemic including Risk Assessment
2	December 2020	Director	Updated references and procedures to reflect latest advice from relevant federal and local government authorities, including the AHPPC, ACT Health, CECA and ACT Safework. Updated all links. Added Appendices – Checklists. Created COVID-Safe Plan folder consisting of: COVID-19 Policy and Procedures and all attachments/checklists and links to relevant authorities.
3	June 30 2021	Director	Updated in response to new mask mandate, 28 June 2021. <ul style="list-style-type: none"> • Parents and visitors to an education and care service will be required to wear a mask when on the premises. Educators will be required to wear a face mask when on excursion. Educators will need to wear a face mask for face-to-face engagement with the community. Other updates: <ul style="list-style-type: none"> • Summary of Responsibilities moved to beginning. • Updated information from WHO on transmission via aerosols. • Updated information from AMA on transmission in children of Delta virus. • Added procedures for closing service. • Added Heritage will ensure attendance records are maintained for all children, parents, staff, students, volunteers and visitors at all times, including a contact phone number. Visitors must sign the visitors book using their own pen or a sanitised pen provided by Heritage. • Added Heritage strongly recommends that all staff and families receive the COVID-19 vaccination as soon as eligible. • Added activating a local emergency allows families access to additional absences if the initial 42 absence days per child per financial year have



			<p>been used. Additional absence days claimed due to COVID-19 related reasons, do not require a medical certificate.</p> <ul style="list-style-type: none"> • Added if the service is advised or directed to close on public health advice as a result of COVID-19, out of pocket fees (Gap Fees) will be waived. (Effective 30 June 2021 until 31 December 2021). • Added Health Direct COVID-19 FAQ, Restrictions Checker and Symptom Checker.
4	July 2021	Director	<p>Mask mandate removed. Added general advice regarding mask mandates.</p>



Appendix 1: AHPPC Statements on Early Childhood Education and Care Services

25 May 2020

- The Australian Health Protection Principal Committee (AHPPC) published a statement on Early Childhood and Learning Centres (ECLC) on 6 April 2020.
- In accordance with the previous statement, AHPPC recommends that unwell staff, children and visitors do not attend. Children, staff and parents should use appropriate hand and respiratory hygiene and centres should use an enhanced cleaning regimen.
- AHPPC does not believe that the 'venue density rule' of no more than 1 person per 4 square metres is appropriate or practical in ECLC, nor is maintaining 1.5m between children. This extends to rooms, corridors and outdoor play areas. This advice applies to children interacting with other children, and also to adults providing care or interacting with children in this environment.
- AHPPC continues to note that there is very limited evidence of transmission between children; population screening overseas has shown very low incidence of positive cases in school-aged children. In Australia, less than 1% (0.8%) of confirmed cases have been in children under 5 years of age as at 15 May 2020.
- AHPPC advises adults to continue to undertake physical distancing when interacting with other adults, in areas such as staff rooms and when picking up or dropping off children.
- This clarification complements AHPPC's statement on Early Childhood and Learning Centres (ECLC).
- AHPPC has noted that the document on ECLCs is broad and that decisions on how to apply the guidance should be made by each jurisdiction with consideration of their local epidemiology and context.

<https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-statement-on-early-childhood-and-learning-centres>

6 April 2020

The AHPPC considers ECLC are essential services and should continue at this time, but with risk mitigation measures in place. These should include:

- Exclusion of unwell staff, children and visitors.
- Reduced mixing of children by separating cohorts (including the staggering of meal and play times).
- Enhanced personal hygiene for children, staff and parents.
 - make sure liquid soap and running water, or alcohol-based hand sanitiser is available at the entrance of the facility and throughout
- Full adherence to the NHMRC childcare cleaning guidelines, in addition:
 - clean and disinfect high-touch surfaces at least daily (e.g. play gyms, tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks)
 - wash and launder play items and toys including washable plush toys as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely
- Excursions other than to local parks should be discouraged, public playground equipment should not be used.
- Influenza vaccination for children, staff and parents.
- Alternative care arrangements should be considered for those children highly vulnerable to adverse outcomes should they be infected with COVID-19. AHPPC recommends parents seek medical advice for these children.

Restrictions on entry into ECLC

The following visitors, contractors and staff should not be permitted to enter the facility:

- Those who have returned from overseas in the last 14 days.
- Those who have been in contact with a confirmed case of COVID-19 in the last 14 days.
 - A contact is defined as anyone who has been in contact with a known case, including the 24 hours before the case became symptomatic.
- Those with fever or symptoms of acute respiratory infection (e.g. cough, sore throat, runny nose, shortness of breath) symptoms.



Appendix 2: Heritage COVID-19 RISK ASSESSMENT

Identified Hazard	Legal Requirements	Risk: COVID-19 entering and spreading in our Centre	Preliminary Risk Assessment Likelihood/ Consequences	Measures in Place for Preventing the Spread of Infectious Diseases and Additional Measures for COVID-19 Manage the Risk with Control Measures and Apply Government Directives and Updates	Risk with measures in place L/M/H
<p>COVID-19 Potential to cause harm</p> <p>What is COVID 19 (Coronavirus)?</p> <ul style="list-style-type: none"> Coronaviruses are a group of viruses that can affect humans and animals. In humans, coronaviruses can cause mild illness, such as the common cold and gastrointestinal infections, as well as more severe illness, such as that caused by SARS (Severe Acute Respiratory Syndrome) and MERS (Middle East Respiratory Syndrome). There is an outbreak of a new strain of coronavirus called 'novel coronavirus' or 'COVID-19' that has not previously been detected in humans. The outbreak of novel coronavirus was detected in Hubei Province, China in late Dec 2019²² and has spread to many countries outside China. 	<p>Comply with Education and Care Services Law 2010 and Regulations 2011</p> <p>S165 – Offence to inadequately supervise children S167 – Offence relating to protection of children from harm and hazards.</p> <p>R77: Health, hygiene and safe food practices.</p> <p>R88: Infectious diseases</p> <p>(1) steps are taken to prevent the spread of the infectious disease at the service.</p> <p>S174(2)(a) and R176(2)(a). Notifying the regulatory authority within 24 hours of becoming aware of a serious incident</p>	<p>A person/child can incubate COVID-19 and spread the disease through direct contact with people and surfaces.</p> <p>Other people touch surfaces contaminated by the infected person and then touch eyes, nose or mouth.</p>	<p>Potential to infect others in the service.</p> <p>Likelihood: Possible Consequences: Major Risk: High</p>	<p>Health and hygiene practices for staff, children and visitors enhanced and strictly implemented, including increasing routine cleaning for high touch surfaces, and regularly disinfecting/sanitising surfaces including computer workstations and phones.</p> <p>Washing hands frequently is the single most effective way to reduce the spread of germs that cause respiratory disease. Alcohol-based hand gel is a suitable alternative if used and stored safely around children.</p> <p>All persons must wash or disinfect their hands with hand sanitizer when entering the building.</p> <p>Educators must actively supervise children to ensure they are adequately washing their hands regularly throughout the day as per the Health and Hygiene program which was run throughout the Centre at the peak of COVID-19.</p> <p>Recommend that children, staff and parents be vaccinated for influenza (in accordance with the latest Health Department advice).</p>	<p>Potential to infect others in the service.</p> <p>Likelihood: Low Consequences: Moderate Risk: Low</p> <p>Assessment Still possible that a case may occur at Heritage however with the COVID-19 Policy supported by the Heritage Health and Hygiene program, Hygiene and Infection Control Policy and Illness and Infectious Diseases Policy in place, as well as regularly reviewing the COVID-19 Risk Assessment, the risk is</p>



<ul style="list-style-type: none"> The length of time that a person is infectious is not yet confirmed. There is emerging information that some people may be infectious for a short period before they develop symptoms or have very minimal symptoms. 	<p>R100 -102 - Risk assessment for excursions R103 - Premises, furniture and equipment to be safe, clean and in good repair R115 – Premises designed to facilitate supervision. R168 (20) (h)-Providing a safe environment</p> <p>Comply with Workplace Health and Safety Act 2011</p> <p>Division 1- consultation, co-operation and co-ordination between duty holders Division 2 - Duty to consult workers Nature of consultation. When consultations required.</p> <p>Requirement to report notifiable incidents to Worksafe ACT</p> <p>Comply with Government’s updated regulations and recommendations. If you are sick stay home.</p>			<p>Staff, parents or children infected with flu type symptoms including acute respiratory infection, cough, sore throat, shortness of breath must stay home from Heritage and seek immediate medical attention. Adults, children and staff must not enter the premises while feeling unwell.</p> <p>If children have thick nasal discharge or persistent runny nose that requires constant wiping from educators, they will be sent home until their nasal discharge has stopped and the child has returned to health.</p> <p>Staff and families are informed that if they have symptoms or are diagnosed with COVID-19, that they inform the service promptly by phone/ email.</p> <p>Infected staff or children must stay away from Heritage until the public health authority confirms it is safe to return. Staff and children will be required to provide evidence they are clear of the virus before returning to Heritage. Heritage will follow existing protocols for cleaning and disinfection, and will increase the frequency of disinfecting of door handles and other commonly touched surfaces during the day as stated in our COVID-19 Policy and Procedures. Outdoor equipment will be disinfected weekly.</p> <p>Staff reminded to avoid touching their face, handshakes or other close physical contact, and to dispose of tissues appropriately, and cover coughs and sneezes with an elbow or tissue.</p>	<p>significantly lowered and gives Heritage the best chance at staying healthy and virus free during the COVID-19 pandemic.</p>
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				<p>Educators are aware of play practices that could spread germs such as play dough and clay play and will ensure children have their own portion and/or discard it after play.</p> <p>Excursions, incursions, social events, meetings and service tours will be restricted during heightened risk period taking into account the latest advice from authorities regarding social distancing and limits on indoor gatherings of people.</p> <p>Children’s Voice Health and Hygiene Program is run throughout the Centre and revisited regularly – including keeping a healthy body and practicing good hygiene. Education of healthy practices for children is their best weapon against COVID-19.</p> <p>Children voices are evident through jottings/observations during this program.</p> <p>Nominator Supervisor to keep up to date with daily directives and recommended practices and any government changes and pass on information, where necessary, to stakeholders. This is to ensure that all staff, families and where necessary, children are informed of the most up to date information on COVID-19</p> <p>Latest Statements from Prime Minister, AHPPP and Chief Medical Officer https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-news-and-media Federal Department of Health:</p>	
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Risk Matrix										
						Consequence				
						Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	Almost certain	Moderate	High	High	Extreme	Extreme				
	Likely	Moderate	Moderate	High	Extreme	Extreme				
	Possible	Low	Moderate	High	High	Extreme				
	Unlikely	Low	Low	Moderate	High	High				
	Rare	Low	Low	Low	Moderate	High				

Appendix 3: Heritage COVID-19 Scenario Planning (adapted from CELA template)

Potential Emergency Situation 1: The Service is directed to close by CECA

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
The service can no longer provide education and care	<ul style="list-style-type: none"> • Correct communication does not occur in the event the service is closed. • Correct communication does not occur when the service reopens. • Cleaning and disinfection procedures are not implemented. 	Unlikely	Severe	<ul style="list-style-type: none"> • The service implements a process to rapidly communicate with staff (including relief staff), visitors, families, the ACT Regulatory Authority and the local public health unit. This will be implemented with regards to the Privacy and Confidentiality Policy and Procedures. • A 101 Notification of Incident will be submitted through the NQA ITS within 24 hours. • When the service is re-opened, a notification will be submitted through the NQA ITS. • The service will follow existing protocols for cleaning and disinfection for outbreaks of gastrointestinal illness/gastroenteritis outbreaks. This will include the following steps: <ul style="list-style-type: none"> ○ Put on gloves ○ Make up a fresh container of correctly diluted detergent and warm water (spray bottles are not recommended). ○ Immerse a cloth, wring it out, and clean the area vigorously to loosen germs. ○ Rinse away germs with clean water ○ Dry the surface to make it harder for germs to survive or grow ○ After this process, disinfect the clean and dry area, following the manufacturer's instructions.

Potential Emergency Situation 2: A child or staff member at the service is diagnosed with COVID-19

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
Potential to infect others at the service	<ul style="list-style-type: none"> • Others touch surfaces contaminated by the infected person and then touch eyes, nose or mouth. • Visitors, staff or children come into contact with the COVID-19 virus. 	Possible	Severe	<ul style="list-style-type: none"> • Recommend that children, staff and parents be vaccinated for influenza and COVID-19 (in accordance with the latest Health Department advice) • Staff or children infected must stay away from the service and seek immediate medical attention. • Staff and families are informed that if they have symptoms or are diagnosed with COVID-19, that they inform the service by phone or email.



	<ul style="list-style-type: none"> • There is insufficient communication with health authorities and others at the service. • Infected persons are allowed back to the service without clearance. 			<ul style="list-style-type: none"> • Staff or children infected must stay away from the service until the public health authority confirms it is safe to return. • Staff will be required to provide evidence they are clear of the virus before returning to work. • Heritage will implement a process to rapidly communicate with staff (including relief staff), visitors, families and the local public health unit in line with the Privacy and Confidentiality Policy and Procedures. • Heritage will follow the procedures in the Hygiene and Infection Control Policy for cleaning and disinfection for outbreaks of gastroenteritis. This will include the following steps: <ul style="list-style-type: none"> ○ Put on gloves ○ Make up a fresh container of correctly diluted detergent and warm water (spray bottles are not recommended). ○ Immerse a cloth, wring it out, and clean the area vigorously to loosen germs. ○ Rinse away germs with clean water ○ Dry the surface to make it harder for germs to survive or grow ○ After this process, disinfect the clean and dry area, following the manufacturer’s instructions.
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Potential Emergency Situation 3: A visitor, child or staff member has been in contact or has been informed by the public health authority they have been in contact with a confirmed or probable case of COVID-19 in the last 14 days (including close contact in the 24 hours before the person became unwell).

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
<p>The person/ child is incubating COVID-19</p>	<ul style="list-style-type: none"> • The person is infected and enters the service before being declared safe to do so. • Visitors, staff or children come into contact with the COVID-19 virus. • Surfaces are contaminated. 	Possible	Severe	<ul style="list-style-type: none"> • A visitor, child or staff member who has been in contact with a confirmed case of COVID-19 in the last 14 days (including close contact in the 24 hours before the person became unwell) is not permitted to enter the service until the public health authority confirms it is safe to return. • Heritage will implement a process to rapidly communicate with staff (including relief staff), visitors, families and the local public health unit. Privacy and Confidentiality Policy and Procedures. • Heritage will follow the procedures in the Hygiene and Infection Control Policy for cleaning and disinfection for outbreaks of gastroenteritis. This will include the following steps: <ul style="list-style-type: none"> ○ Put on gloves

				<ul style="list-style-type: none"> ○ Make up a fresh container of correctly diluted detergent and warm water (spray bottles are not recommended). ○ Immerse a cloth, wring it out, and clean the area vigorously to loosen germs. ○ Rinse away germs with clean water ○ Dry the surface to make it harder for germs to survive or grow ○ Disinfect the clean and dry area, following the manufacturer’s instructions.
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Potential Emergency Situation 4: A visitor, child or staff member has a fever or symptoms of acute respiratory infection (cough, sore throat, runny nose, shortness of breath) before entering the service.

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
The person/ child is incubating COVID-19	<ul style="list-style-type: none"> • The person comes into the service. • Others are infected with COVID-19 • Visitors, staff or children come into contact with the COVID-19 virus. • Surfaces are contaminated. 	Possible	Severe	<ul style="list-style-type: none"> • A visitor, child or staff member who has a fever or symptoms of acute respiratory infection (cough, sore throat, runny nose, shortness of breath), is not permitted to enter the service. • Families and staff are informed of the procedure to notify if they have any symptoms by email or phone before entering the service. • Heritage will follow the procedures in the Hygiene and Infection Control Policy for cleaning and disinfection for outbreaks of gastroenteritis.

Potential Emergency Situation 5: A visitor, child or staff member has a fever or symptoms of acute respiratory infection (cough, sore throat, runny nose, shortness of breath) while at the service.

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
The person/ child is incubating COVID-19	<ul style="list-style-type: none"> • Others are infected with COVID-19 • Visitors, staff or children come into contact with the COVID-19 virus. • The person with symptoms is not isolated or sent home. • Symptoms are not reported appropriately. • Surfaces are contaminated. 	Possible	Severe	<ul style="list-style-type: none"> • If a visitor, child or staff member presents with symptoms while at the service, policies and procedures relating to illness and infectious disease are followed. • All staff will report to the Responsible Person if: <ul style="list-style-type: none"> ○ they are experiencing any symptoms; ○ they have been, or have potentially been, exposed to a person who has been diagnosed with COVID-19 or is suspected to have COVID-19 (even if have not yet been tested), or they have undertaken, or are planning to undertake, any travel. • All staff will report to the Responsible Person if they observe another worker displaying any symptoms.



				<ul style="list-style-type: none"> The child’s family will be contacted to collect them as soon as possible and the child will be cared for in an area that is separate from other children at the service. A space has been identified to isolate staff/children who may become sick. Visitors or staff with symptoms will stop work and be sent home immediately. Heritage will follow the procedures in the Hygiene and Infection Control Policy for cleaning and disinfection for outbreaks of gastroenteritis.
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Potential Emergency Situation 6: A visitor, child or staff member returns from overseas/restricted areas in the last 14 days.

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
The person/ child is incubating COVID-19	<ul style="list-style-type: none"> Persons who have travelled within the last 14 days are allowed to attend the service before self-isolating. Visitors, staff or children come into contact with the COVID-19 virus. 	Unlikely	Severe	<ul style="list-style-type: none"> Anyone returning from overseas/restricted areas in the last 14 days is not permitted to enter the service. The service will remind them if they develop flu-like symptoms, they should call their doctor to arrange testing, call HealthDirect on 1800 022 222, or go directly to a COVID-19 clinic or emergency department.

Potential Emergency Situation 7: A visitor, child or staff member is incubating COVID-19 and is not showing any symptoms.

Hazards	Risks	Likelihood	Risk Rating	Control Strategies
The person/ child is incubating COVID-19 and spreads the disease through direct contact with people and surfaces.	<ul style="list-style-type: none"> Others are infected with COVID-19. Visitors, staff or children come into contact with the COVID-19 virus. Surfaces are contaminated. Hygiene practices are not thorough or consistent. Staff are not adequately consulted or trained 	Possible	Severe	<ul style="list-style-type: none"> It is recommended that children, staff and parents be vaccinated for influenza and COVID-19 (in accordance with the latest Health Department advice). Staff are provided with closed bins to hygienically dispose of waste and rubbish immediately after use. Staff are provided with cleaning agents and trained to clean down and disinfect equipment immediately after use. Enhanced hygiene practices for staff, children and visitors are implemented. <ul style="list-style-type: none"> Washing hands frequently is the single most effective way to reduce the spread of germs that cause respiratory disease. Alcohol-based hand gel is a suitable alternative if used and stored safely around children. Staff will

	<p>in order to understand and fully implement procedures, changes and decisions.</p> <ul style="list-style-type: none"> • There is a lack of cleaning and hygiene products to support essential measures being implemented fully and consistently. • There is insufficient environmental cleaning. • Children do not implement increased hygiene practices. • There are insufficient plans to support staffing arrangements to implement practices and procedures. • Physical distancing practices are not in place. 		<p>also avoid touching their face, handshakes or other close physical contact, dispose of tissues appropriately, wash body and clothes thoroughly every day and cover coughs and sneezes with an elbow or tissue.</p> <ul style="list-style-type: none"> • Alcohol based hand sanitiser with a minimum alcohol content of 70%, is available at entry and rubbish disposal points. • Recirculated air conditioning is limited or reduced. • Where possible touch points are reduced such as by leaving access doors open where possible. • Children are provided with increased hand washing guidance. • Staffing arrangements consider the need for increased cleaning and hygiene practices. This includes more regular and thorough hand washing, cleaning of high touch surfaces and restocking of necessary resources. • The service ensures there is robust infection control and cleaning and routine environmental cleaning procedures in place. Including: <ul style="list-style-type: none"> ○ frequently touched surfaces and objects such as doors, windows, tables, benchtops, nappy change areas and toys are cleaned and disinfected frequently using appropriate detergent and disinfectant solutions, and ○ that people cleaning the workplace wear gloves and use alcohol-based hand sanitiser before and after wearing gloves. ○ personal items such as phones and glasses and workstation equipment such as keyboards are cleaned and disinfected frequently (e.g. using isopropyl alcohol wipes) ○ amenities including kitchens, lunchrooms, common areas, change rooms, toilets, showers, are cleaned industrially and the frequency of this cleaning increased. • The service implements strategies (where possible) to limit movement of children staff and families between groups at the service. • Handwashing facilities are kept clean, properly stocked and in good working order. • Staff are kept informed of service procedures, actions to take and symptoms to be concerned about. Clear guidance is provided to ensure expectations are understood and followed. • Staff are consulted on health and safety matters relating to COVID-19 and provided an opportunity to express views before decisions are made. • Staff are reminded of their duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others. • Where possible, staff will work from home.
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			<ul style="list-style-type: none"> • Staff are aware of appropriate hygiene measures and that they should not attend the service if unwell. • Signs and posters are placed around the service to remind staff and others of the measures to take to stop the spread of COVID-19. • Deliveries and contractors are: <ul style="list-style-type: none"> ○ Cancelled or postponed wherever possible. ○ Given clear instructions on requirements when on site/ ○ Assisted by a minimal number of staff who use hand sanitiser after handling any goods/ ○ Encouraged to implement contactless methods wherever possible / ○ Encouraged to use electronic paperwork to minimise physical interaction. • Physical distancing measures are implemented, including: <ul style="list-style-type: none"> ○ Calculating the area of each room, and the number of staff and children in attendance each day and directing staff to space an appropriate distance apart to continue performing their duties, acknowledging that staff will have to come into contact with children. ○ Encouraging staff and visitors to physically distance themselves through increased signage and information. ○ Encouraging the use of outdoor space as much as possible. ○ Staggering staff breaks and encouraging staff to physically distance themselves in break rooms and when using shared spaces. ○ Limiting the number of visitors to the centre (e.g. cancel incursions and non-essential training). ○ Discouraging use of public transport by staff if possible, or if not feasible, recommending that workers: <ul style="list-style-type: none"> ▪ travel at off peak times ▪ wash hands with soap and water for at least 20 seconds, or sanitise hands with an alcohol-based hand sanitiser before and after travelling on public transport, and ▪ maintain physical distancing measures during any trip.
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Potential Emergency Situation 8: Planned excursions expose visitors, staff and children to COVID-19.				
Hazards	Risks	Likelihood	Risk Rating	Control Strategies
External surfaces and others outside of service may be infected	<ul style="list-style-type: none"> Visitors, staff or children come into contact with the COVID-19 virus. 	Possible	Severe	<ul style="list-style-type: none"> All planned activities cancelled outside the service, except to outdoor public spaces including parks, nature reserves and playgrounds, during the COVID-19 pandemic.

Potential Emergency Situation 9: The service cannot meet educator to child ratio's due to COVID-19 related issues.				
Hazards	Risks	Likelihood	Risk Rating	Control Strategies
Supervision is insufficient to maintain children's health and safety.	<ul style="list-style-type: none"> The service breaches the Education and Care Services National Regulation and Law. Children's health and safety is at risk. Staffing arrangements are insufficient to implement increased measures in relation to COVID-19. 	Possible	Severe	<ul style="list-style-type: none"> Plans are in place for increased levels of staff absences and those who may arrive at work sick. The service will contact the ACT Regulatory Authority to explain the situation and receive direction.

Potential Emergency Situation 10: Staff training becomes out of date and maintenance of this during the COVID-19 pandemic is challenging.				
Hazards	Risks	Likelihood	Risk Rating	Control Strategies
Staff training is not in line with regulations.	<ul style="list-style-type: none"> The service breaches the National Regulation and Law. Staff are inadequately trained to respond to emergency situations. Children's health and safety is at risk. 	Possible	Moderate	<ul style="list-style-type: none"> The health, safety and wellbeing of the children will remain a priority. Other methods of delivery, such as online training, will be explored. If it is not possible to complete a specific qualification, because of work placement COVID-19 control measures, training will be commenced, and work placement will be completed as soon as reasonably practicable. This means that the individual will have a record of commencing the course but will only receive a certificate upon completion of the work placement.



Appendix 4:

Heritage New Virus/Influenza Pandemic Management Plan

Stage 1 – Preparedness - No novel strain detected (or emerging strain under initial detection)

- Review pandemic planning arrangements and update contact lists for staff, families, local services, ACT Regulatory Authority and local Government Emergency Management Coordinators.
- Reinforce basic hygiene measures:
 - Provide children and staff with information about the importance of hand hygiene
 - Check supplies of liquid soap and alcohol-based hand sanitizer are adequate
 - Remind staff and children about covering their cough with a tissue or their inner elbow to prevent the spread of germs.
 - Careful disposal of used tissues.
- Apply appropriate exclusion guidelines for children, educators and other staff with flu-like illness.
- Check staff are up to date with immunisations for seasonal influenza.
- Re-enforce personal hygiene messages with educators, staff and children.
- Convey seasonal influenza messages as directed by ACT Health.
- Encourage educators, staff and families to access the [smartraveller](#) website prior to international travel.
- Ensure service continuity plan is in place which:
 - Identifies minimum requirements and key educators/staff for continued operation, including planning for the absence of the Director.
 - Considers strategies to enable continued operations if pandemic impacts a large number of Heritage staff.

Stage 2: Response Stage – Standby Sustained community person-to-person transmission detected overseas

- At the time of the overseas detection:
- Ensure pandemic plan is up to date including emergency numbers and key contacts.
 - Ensure contact lists of staff, children, families, local services and Local Government Emergency Management Coordinators are up to date.
 - Prepare to enact pandemic response section with stakeholders and Incident Management Team
 - Reinforce basic hygiene measures:
 - Provide children and staff with information about the importance of hand hygiene.
 - Check supplies of liquid soap and alcohol-based hand sanitizer are adequate.
 - Remind staff and children about covering their cough with a tissue or their inner elbow to prevent the spread of germs.
 - Careful disposal of used tissues.
 - Ensure germicidal wipes are available for staff to clean administrative areas, telephones etc.
 - Ensure hygiene information posters are up to date, communicated and displayed.
 - Consider providing information sessions for staff and families to communicate:
 - The status of the situation.
 - In the case of influenza pandemic, the risk of influenza and how to identify pandemic influenza symptoms and cases of possible influenza based on the current, up to date case definition by the Chief Health Officer.



- Best practice hygiene measures.
- Considerations and measures for vulnerable children.
- Access and follow advice of ACT Chief Health Officer, Commonwealth Chief Medical Officer and Commonwealth Department of Health advice and distribute consistent messaging to staff, children and families.
- Encourage staff and families to obtain seasonal flu vaccination as appropriate (especially those people/families at a greater risk of infection).
- Utilise sample letters from the Department of Education and ACT Education Directorate to inform families of the current situation.
- Encourage staff and families to access the [smartraveller](#) website prior to international travel.
- Ensure service continuity plan:
 - Identifies minimum requirements and key staff for continued operations (including planning for the absence of the director).
 - Considers workforce strategies to enable continued operations, if pandemic impacts a number of staff.

Response Stage – Initial Action
Description – Cases detected in Australia - Information about the disease is scarce

- Incident Management Team to implement the service’s response as appropriate to advice from the Department of Health and ACT Education Directorate and
- Reinforce basic hygiene measures:
 - Provide children and staff with information about the importance of hand hygiene.
 - Check supplies of liquid soap and alcohol-based hand sanitizer are adequate.
 - Remind staff and children about covering their cough with a tissue or their inner elbow to prevent the spread of germs.
 - Careful disposal of used tissues.
- Ensure germicidal wipes are available for staff to clean staff administrative areas, telephones etc.
- Follow and distribute information and advice from ACT Education Directorate and ACT Health in accordance with instructions, including information about:
 - The status/situation
 - Personal hygiene measures
 - Containment measures including any plans for closure if applicable to staff and families using templates developed by the Department of Education or ACT Education Directorate.
- Communicate the risk and how to identify cases based on current, up to date case definition by the Chief Health Officer.
- The appropriate containment strategy will vary depending upon the level of clinical severity as determined by the Department of Health.
- Management of service staff:
 - Encourage staff who develop flu-like symptoms during a pandemic to stay away from work until completely well.
 - Ensure staff who develop influenza-like illness to leave immediately and seek medical attention.
- Follow the advice of the ACT Education Directorate and ACT Health regarding service closures and exclusion periods for infectious diseases.
- Identify a designated area to quarantine sick children away from others until they can be taken home by families.
- Inform families of their obligations regarding early childhood development during closures.
- Encourage staff and families to access the smartraveller website prior to international travel.



- Implement service continuity plan to promote adequate staff supply and capacity to continue service, by:
 - Prioritising functions to ensure adequate availability to deliver the education and care service.
 - Implementing contingency strategy, which may include employing replacement educators/staff and/or modifying programs
- In the event the service closure cannot be avoided, notify the ACT Regulatory Authority as required under *Education and Care Services Regulations 2011*.
- Inform staff of their obligations during service closures.

Response Stage – Targeted Action
Description – Cases detected in Australia
- enough is known about the disease to tailor measures to specific needs

- Incident Management Team to implement the service’s response as appropriate on advice from the ACT Education Directorate and ACT Health.
- Reinforce basic hygiene measures:
 - Provide children and staff with information about the importance of hand hygiene.
 - Check supplies of liquid soap and alcohol-based hand sanitizer are adequate.
 - Remind staff and children about covering their cough with a tissue or their inner elbow to prevent the spread of germs.
 - Careful disposal of used tissues.
- Ensure germicidal wipes are available for staff to clean staff administrative areas, telephones etc.
- Follow and distribute information and advice from ACT Education Directorate and ACT Health in accordance with instructions, including information about:
 - The status/situation
 - Personal hygiene measures
- Containment measures including any plans for closure if applicable to staff and families using templates developed by the Department of Education/ACT Education Directorate.
- Communicate the risk and how to identify cases based on current, up to date case definition by the Chief Health Officer.
- The appropriate containment strategy will vary depending upon the level of clinical severity as determined by the ACT Health.
- In particular, the:
 - Need to restrict public access to the premises, and the need for social distancing measures (e.g. cancelling social events) will be communicated if the clinical severity requires this).
 - Need for appropriate use of PPE according to clinical severity.
- Management of service staff:
 - Encourage staff who develop flu-like symptoms during a pandemic to stay away from work until completely well.
 - Ensure staff who develop influenza-like illness to leave immediately and seek medical attention.
- Follow the advice of the ACT Education Directorate and ACT Health regarding service closures and exclusion periods for infectious diseases.
- Identify a designated area to quarantine sick children away from others until they can be taken home by families.
- Encourage educators, staff and parents/carers to access the smartraveller website prior to international travel.
- Notify the ACT Regulatory Authority of service closure or any serious incidents and circumstances that pose risk to the health, safety or wellbeing of a child attending the service.



- Implement service continuity plan to ensure adequate staff numbers and capacity to continue service, by:
 - Prioritising work functions to ensure staff availability to deliver an early childhood service.
 - Implementing a contingency strategy, which may include employing replacement staff and/or modifying programs.

Response Stage – Stand Down
Description – The public health threat can be managed within normal arrangements and monitoring for change is in place

- Be aware that multiple waves of the virus may occur.
- Replenish PPE (if required).
- Implement service continuity plans for resumption of full business capacity which may involve:
 - Restoring staff capacity.
 - Following procedures for re-opening of service (if applicable).
 - Providing support, including counselling (if required).
 - Monitoring cumulative effects of pandemic and identifying and supporting those who may need assistance.
- Director/Responsible Person in Charge to de-activate Incident Management Team and conduct final debrief(s).
- Utilise the sample letters developed by the Department of Education or the ACT Education Directorate to communicate status of situation to staff and parents/carers, including support that may be available.
- Review the effectiveness of the Influenza Pandemic Emergency Management Plan and update as appropriate, involving relevant staff and others, particularly as multiple waves of the virus may occur.
- Communicate the updated status to educators, staff and families including support that may be available.
- Continue to encourage educators, staff and parents/carers to access the smartraveller website prior to international travel.



Appendix 5: COVID-19 Priorities Checklist

Heritage will re-evaluate the situation regularly and prioritise the health and safety of children, educators and families. Heritage will continue to communicate health and safety priorities and procedures to families on a regular basis and ensure all staff are regularly reminded of the vigilance required to keep everyone safe.

Situation	Current Advice
Current service provision	<ul style="list-style-type: none"> • Services should be open unless directed to shut by ACT Health or the ACT Regulatory Authority. • The department is urging services to accept all children who present to them needing care who are healthy and well. • If services need to temporarily close, it is the expectation that services will continue to provide education support to children and families and demonstrate how funding is being utilised. • The AHPPC recommends alternative care arrangements should be considered for those children highly vulnerable to adverse outcomes should they be infected with COVID-19. AHPPC recommends parents seek medical advice for these children. • The following visitors and staff (including visiting workers) should not be permitted to enter the facility: <ul style="list-style-type: none"> ○ Those who have returned from overseas in the last 14 days. ○ Those who have been in contact with a confirmed case of COVID-19 in the last 14 days. A contact is defined as anyone who has been in contact with a known case, including the 24 hours before the case became symptomatic. ○ Those with fever or symptoms of acute respiratory infection (e.g. cough, sore throat, runny nose, shortness of breath) symptoms.
If Directed to close	<ul style="list-style-type: none"> • Follow the directions of authorities and refer to your COVID-19 emergency risk assessment where you should have control measures in place for this situation including required notifications. • Assist families to locate alternative care using childcare finder.
Physical Distancing	<p>Management has a duty of care to staff and all others at the workplace. SafeWork Australia continues to recommend:</p> <ul style="list-style-type: none"> • Adult to adult interactions remain 1.5 metres apart and, wherever possible, there is 4 square metres of space per person. • Adults do not need to undertake physical distancing when interacting with or providing care to children. • Children do not need to undertake physical distancing. However, consider separating children into small groups throughout the premises and utilising both indoor and outdoor spaces during the day will make it easier for adults to maintain their distance from other adults. • Consider staggered pick up and drop off times, perhaps allocating times to certain groups and minimising parent time spent in the service. • Consider how to encourage physical distancing between parents and guardians at the service. • Consider signage and hygiene practices for all staff, children, families, and visitors. • Use other methods of communication with families such as phone, email, and apps.



<p>Interactions with Children</p>	<ul style="list-style-type: none"> Services must consider the way routines and plans are structured to help workers maintain distance from each other. This may include: <ul style="list-style-type: none"> Staggering play and mealtimes to limit big groups. Changing group times to be smaller and located outside. Utilising the outdoor spaces as much as possible throughout the day. Spacing furniture well apart, with consideration to safe passageway and emergency exits.
<p>Staffing Arrangements</p>	<ul style="list-style-type: none"> If services are unable to meet the regulatory requirements in relation to staffing (qualifications and ratios), management must contact the The ACT Education Directorate 002) 6207 1114 or email ceca@act.gov.au for support. Waivers will be considered but adequate supervision requirements will apply.
<p>Sickness</p>	<p>Safework Australia recommends:</p> <ul style="list-style-type: none"> Anyone who is unwell should not be in the workplace. If anyone develops symptoms at work such as fever, cough, sore throat or shortness of breath, they must be asked to seek medical advice. If, after seeking medical advice, a staff member is confirmed as having COVID-19, the ACT Public Health Unit will trace and contact the people the infected staff member was in close contact with and provide them with instructions to quarantine. If someone is at the workplace or has recently been at your workplace, and there are reasonable concern about their health, follow the steps here: https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/early-childhood-education If a child becomes sick, follow policies and procedures on illness and infectious disease. If a child presents with symptoms, contact the child’s family to collect them as soon as possible.
<p>Cleaning and hygiene</p>	<ul style="list-style-type: none"> Continue to follow vigilant cleaning practices, as detailed in the Heritage COVID-19 risk assessment control measures. Ensure PPE and hygiene products are supplied and in date. Continue to implement enhanced personal hygiene for children, staff and parents.
<p>Notifications</p>	<p>Ensure correct notifications in the relevant timeframes to are made to:</p> <ul style="list-style-type: none"> The ACT Regulatory Authority (CECA) The ACT Health Authority – CDC Section Safework ACT
<p>WWVP Checks</p>	<ul style="list-style-type: none"> As per changes made by the Office of the Children’s Guardian, all Working with Children Checks that were due to expire from 26 March 2020 to 26 September 2020 have been extended for six months.
<p>Excursions</p>	<ul style="list-style-type: none"> The Education Directorate advises that any planned activities outside of the service are cancelled.
<p>Immunisation</p>	<ul style="list-style-type: none"> It remains the AHPPC recommendation that staff at early childhood education and care services should be vaccinated for influenza, however it is not a requirement under the National Law and Regulations.



<p>Spot visits and A&R</p>	<ul style="list-style-type: none"> • These activities are still continuing with best practice hygiene measures in place. • The department of education recommends communicating COVID-19 practices with any authorised officers to assist in minimising risks.
<p>Maintaining professional development</p>	<ul style="list-style-type: none"> • The Education Directorate encourages services to explore other methods of delivery, such as online training, to maintain currency. • For training required under the regulations, contact training providers to explore ways to complete this training. If unable to fulfill these requirements, contact the Information and Enquiries team at the Early Childhood Directorate on 1800 619 113. • SafeWork Australia advises that any face-to-face training be held only with spacing requirements implemented and adequate ventilation.
<p>External visitors</p>	<ul style="list-style-type: none"> • SafeWork Australia advice continues to be: <ul style="list-style-type: none"> ○ Reduce visitors to the absolute minimum. ○ Cancel incursions. ○ Exclude high risk people, including elderly, from entering your service.
<p>Travel Restrictions</p>	<ul style="list-style-type: none"> • It is important that as some restrictions ease, such as travel within states, that services maintain precautions to avoid spreading COVID-19. <ul style="list-style-type: none"> ○ Anyone arriving in Australia from overseas must enter into quarantine for 14 days. ○ Families traveling back from certain states and hotspots will need to quarantine. https://www.covid19.act.gov.au/community/travel ○ If you have staff who travel on public transport to work, recommend they download the CovidSafe app and consider shifts to allow for off-peak travel where possible. Ensure good hand hygiene and physical distancing practices during and after transport.
<p>Staying up to date</p>	<ul style="list-style-type: none"> • Due to the changing nature of restrictions and advice, it is imperative to remain updated from relevant authorities and sources as new information is released and: <ul style="list-style-type: none"> ○ Regularly reflect on and adjust policies, procedures and communications as needed based on the latest advice. ○ Be aware that changes may need to be made to increase vigilance, as well as to ease practices, based on advice from trusted sources

Source: Community Early Learning Australia (CELA), June 2020



Appendix 6: Communication with Families Checklist

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY
QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

- Access trusted sources of information on a daily basis to keep informed and knowledgeable, including Australian Department of Health, ACT Regulatory Authority CECA, ACT Health and Safework ACT.
- Consult with and communicate the latest information with educators from reliable sources of knowledge.
- Develop a COVID-19 policy and communicate and implement this diligently.
- Share up to date information with families consistently through various communication methods: Heritage website, email and notices.
- Share COVID-related contact numbers and websites with families, including: The National Coronavirus Health Information Line (1800 020 080)
- Reinforce exclusion guidelines in relation to COVID-19 frequently, particularly as they change, via different modes of communication: Heritage website, email and notices.
- Set up a hand-sanitiser in the entry for families to use on arrival and request they take children to wash their hands immediately before they begin play. Repeat at departure.
- Through various communication channels, advise parents about the procedure for notifying Heritage if families fall into any of the exclusion categories.
- Display signage informing families of the exclusion criteria in relation to COVID-19, and how to inform the service in a timely and confidential manner if they meet the criteria.
- Inform families about COVID risk management procedures including:
 - Increased hand washing with the children, staff and visitors throughout the day as well as before and after eating and toileting, and when sneezing.
 - Intentional teaching on wash hands effectively and cough and sneeze hygiene.
 - Increased routine environmental cleaning, particularly on high touch surfaces.
 - Diligent implementation of the latest advice and direction from relevant authorities.
 - Strict food safety procedures that ensure hygienic standards are implemented.
 - Enforcing required exclusion for families/children/staff in a confidential manner.
 - Ensuring the service is well stocked with sanitiser, tissues, gloves and disinfectant.
- Check on family's wellbeing, ask if there is anything you can do to help support them.
- Provide families with contact numbers/referrals to support agencies if they require additional help relating to their mental wellbeing and access to basic necessities.
- Work with families to share practices that they can also implement in their homes to maintain health and hygiene.
- Be aware of children with medical conditions and provide support and consistent communication to work in partnership and respond to any changing health needs.



Appendix 7: COVID Checklist For families	
Support your child's understanding of how and why some things are changing	<ul style="list-style-type: none"> <input type="checkbox"/> Considering your child's age and development, talk with them about how things may be done differently, such as greetings with others. <input type="checkbox"/> Considering your child's age and development, discuss why these changes are necessary. <input type="checkbox"/> Empower each child to come up with alternatives. You can say, "I can see you are sad you cannot have your friend over, what can we make for them instead?" <input type="checkbox"/> Be available to your child so that they can share any concerns or understandings with you, it gives you a chance to let them take the lead and not raise things unnecessarily. <input type="checkbox"/> Acknowledge your child's feelings and reassure them that they can come to you at any time. <input type="checkbox"/> Remind them of their right to feel safe, and that these changes at the moment are to keep them safe.
Support your service's physical distancing practices	<ul style="list-style-type: none"> <input type="checkbox"/> If your child is sick, do not send them to Heritage. <input type="checkbox"/> Sanitise your hands when entering Heritage and follow any other hygiene practices the service has in place. <input type="checkbox"/> Try and limit the number of adults dropping off and collecting your child at any one time. <input type="checkbox"/> Try to make your drop offs and pickups as quick as possible. Email or phone the service if you would like to have a conversation. <input type="checkbox"/> If you are contacted because your child is unwell, make arrangements immediately to collect them. <input type="checkbox"/> Discuss with the service any concerns you may have so that you can come to a mutual agreement that still maintains everyone's health and safety.
Follow social distancing at home	<p>The Department of Health recommends:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Practice good hand and sneeze/cough hygiene. <input type="checkbox"/> Avoid handshaking and kissing. <input type="checkbox"/> Regularly disinfect high touch surfaces, such as tables, kitchen benches and doorknobs. <input type="checkbox"/> Increase ventilation in the home by opening windows or adjusting air conditioning. <input type="checkbox"/> Visit shops sparingly and buy more goods and services online. <input type="checkbox"/> Consider whether outings and travel, both individual and family, are sensible and necessary. <input type="checkbox"/> Protect vulnerable family members, such as over 65s or people with a chronic illness, including, if practicable, finding alternative accommodation. <input type="checkbox"/> Consider how you are caring for sick people: <ul style="list-style-type: none"> <input type="checkbox"/> Care for the sick person in a single room if possible. <input type="checkbox"/> Keep the number of carers to a minimum. <input type="checkbox"/> Keep the door to the sick person's room closed and, if possible, a window open. <input type="checkbox"/> Both the sick person and the people caring for them should wear a surgical mask when they are in the same room.



Appendix 8: Physical Distancing Checklist

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY

- The table below provides options for how physical distancing can be implemented at Early Childhood Education and Care Services in order to maximise the safety of staff and children.
- Physical distancing is a key measure in limiting the transmission of COVID-19.
- The topic of physical distancing in early education settings has led to heated discussion and incredulity as educators question whether it is possible.
- It is important for services to be aware of the advice from authorities in order to make informed decisions and **implement control measures that are reasonably practicable**.

Measure	Things to consider/implement
Conduct a risk assessment	<p>SafeWork Australia states: You must, as far as is reasonably practicable, <u>ensure all adults have 4 square metres of space each and maintain a physical distance of 1.5 metres between each adult in all areas of the facility.</u> This includes staff facilities/kitchens/break rooms/ playrooms. <u>You do not need to include children in implementing physical distancing measures.</u> However, you may find that separating children into small groups and utilising both indoor/outdoor spaces during the day makes it easier for staff (and other adults) to maintain their distance from each another.</p> <p>The Australian Health Protection Principle Committee states: AHPPC does not believe that the ‘venue density rule’ of no more than 1 person per 4 square metres is appropriate or practical in Early Childhood Learning and Care, nor is maintaining 1.5m between children. This extends to rooms, corridors and outdoor play areas. This advice applies to children interacting with other children, and to adults providing care or interacting with children in this environment.</p> <p>Considerations:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Which routines/environments present physical distancing challenges to children, educators, and families? (mealtimes, a sick child, toileting, group times, drop off/pick up times, emergency drills, incursions/excursions). <input type="checkbox"/> How can practices/environments be adjusted to manage/eliminate the issues? <input type="checkbox"/> How can Heritage best manage the numbers of adults and children in each space at one time?
How can educators be supported to physical distance?	<ul style="list-style-type: none"> <input type="checkbox"/> How are staff supported to stay at home if they are sick or to stop work immediately and go home if they become unwell while at work? <input type="checkbox"/> Where it is reasonably practical, consider how staff rosters can support physical distancing. <ul style="list-style-type: none"> <input type="checkbox"/> Educators who feel they may be at risk, e.g., those with an underlying medical condition or high risk, may need to be assigned work from home tasks. <input type="checkbox"/> Can meetings be held via video conferencing/phone call? Can they be deferred or, if essential, held outdoors? <input type="checkbox"/> Can staff have staggered, start, finish and break times? <input type="checkbox"/> Can certain tasks be moved off-site? For example, programming and planning. <input type="checkbox"/> Can staff be separated into dedicated teams and work the same shift or work in a particular area? Can these dedicated teams have access to their own meal areas or break facilities?



	<ul style="list-style-type: none"> <input type="checkbox"/> Educators are role models and can promote physical distancing while at the service: <ul style="list-style-type: none"> <input type="checkbox"/> Consider how staff and visitors are encouraged to physically distance themselves through signage and information. <input type="checkbox"/> How are educators encouraged to use good hand hygiene if they need to move from room to room? <input type="checkbox"/> Are staff using alternative greetings to handshaking? <input type="checkbox"/> Consider where staff can have their lunch breaks and how the scheduling of these avoids a group gathering at the same time in the lunchroom. <input type="checkbox"/> Ensure office spaces are only occupied by one staff member per four square meters of space and, where possible, staff use separate offices. <input type="checkbox"/> Consider discouraging the use of public transport by staff if possible, or if not feasible, recommend they: <ul style="list-style-type: none"> <input type="checkbox"/> travel at off peak times; <input type="checkbox"/> wash hands with soap and water for at least 20 seconds, or sanitise hands with an alcohol-based hand sanitiser before and after using public transport; <input type="checkbox"/> maintain physical distancing measures during any trip or wear a mask.
<p>How do procedures around entry into and exit reduce the amount of people coming in?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consider ways to prevent parents gathering at the same time. <input type="checkbox"/> Consider having an educator greet parents at the door and record children's attendance. <input type="checkbox"/> Educators may be able to help children say goodbye to their parents at the front door to reduce more people than necessary entering the building. The same can occur at home time, with the educator signing the child out and taking them to the parent. <input type="checkbox"/> Consider communication methods to staff and families about the requirement to not enter if they have a fever or symptoms of acute respiratory infection or contact with a confirmed case of COVID-19 in last 14 days. <input type="checkbox"/> Can the number of visitors to the centre be limited to the absolute minimum (e.g. cancel incursions and non-essential training)? <input type="checkbox"/> Exclude people from entering who are in the high-risk category for coronavirus (COVID-19), including: <ul style="list-style-type: none"> <input type="checkbox"/> The elderly and those with pre-existing medical conditions. <input type="checkbox"/> Those who have returned from overseas or a hotspot in the last 14 days. <input type="checkbox"/> Those who have been in contact with a person known to have coronavirus in the last 14 days, including in the 24 hours before the person became symptomatic. <input type="checkbox"/> Those with fever or symptoms of acute respiratory infection (e.g. cough, sore throat, runny nose, shortness of breath). <input type="checkbox"/> While it is not a requirement of entry for visitors to have been vaccinated against influenza, staff should encourage visitors to be vaccinated. <input type="checkbox"/> Plan for deliveries and contractors to: <ul style="list-style-type: none"> <input type="checkbox"/> Be cancelled/postponed wherever possible. <input type="checkbox"/> Be provided with clear instructions on requirements when on site. <input type="checkbox"/> Be assisted by minimal staff who use hand sanitiser after handling goods. <input type="checkbox"/> Implement contactless methods if possible. <input type="checkbox"/> Use electronic paperwork to minimize physical interaction.



<p>How can routines support physical distancing?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consider limiting visits to other rooms at the service. <input type="checkbox"/> Consider how routines can separate classes across different areas during play times. <input type="checkbox"/> Ensure all areas within the service are available to children. For example, if a room is reserved for group times or rest, this can be made available as an extra play space. <input type="checkbox"/> Ensure cots and beds are well-spaced. <input type="checkbox"/> Ensure that standard precautions are advised when coming into contact with a child for the purpose of providing routine care and/or assistance (for example, the use of gloves for first aid, nappy changing, toileting, feeding). <input type="checkbox"/> Consider where a child will wait who is exhibiting or experiencing symptoms compatible with coronavirus, such as fever, cough or sore throat. Can they be isolated with suitable supervision until collected by a parent/carer?
<p>What procedures are in place at mealtimes to support physical distancing?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Has the routine altered to provide progressive or staggered mealtimes? <input type="checkbox"/> Do children have various spaces to eat? Mats/ tables with minimum chairs, spaced apart? <input type="checkbox"/> Has supervision of hygiene practices at mealtimes increased to ensure correct handwashing before and after eating? <input type="checkbox"/> Has supervision at mealtimes increased to ensure that food is not shared? <input type="checkbox"/> Do educators initiate discussions with children about hygiene, particularly at mealtimes? <input type="checkbox"/> Are transitions into mealtimes planned to ensure that children are not waiting in groups? <input type="checkbox"/> Have hygiene practices around mealtimes been increased, including the collection and cleaning of plates and cutlery and the cleaning of tables, chairs, mats, floor?
<p>How can the use of the outdoor environment be maximised?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Can an indoor/outdoor program for the whole day be implemented? <input type="checkbox"/> Can routine times such as transitions, groups and mealtimes be relocated outdoors? <input type="checkbox"/> How can you increase ventilation to facilitate more fresh air?
<p>How are planned experiences inclusive and engaging yet still supportive of physical distancing?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Consider group sizes for planned group times. <input type="checkbox"/> Can the number of children in the group be decreased and the frequency of group time increased? <input type="checkbox"/> Can group times be more informal with one or two children at a time? <input type="checkbox"/> How can spaces be created that support fewer children engaging at any one time, e.g., having 2 chairs at a table rather than 4 and placing those 2 chairs as far apart as possible? <input type="checkbox"/> How can children be encouraged to space out when sitting together? Consider using visual cues such as stars or cushions to sit on or games such as flapping arms like a bird and not touching anyone else or imagining they have a big space bubble around them. <input type="checkbox"/> Are there sufficient numbers of experiences spread out to support children engaging in activities in small groups? Perhaps create a floor plan of your environments and map out experiences to see that they are well spaced. <input type="checkbox"/> Can some resources be separated into smaller areas – such as books and blocks?



<p>How can the educational program reinforce physical distancing practices?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Talk with children about greetings around the world that do not involve touching, use this National Geographic article for inspiration: www.nationalgeographic.com/travel/2020/03/ways-people-around-world-say-hello-without-touching-coronavirus/ <input type="checkbox"/> Learn a new song about saying hello, such as Hello to all the Children of the World. How many ways can we say hello without touching? www.youtube.com/watch?v=2nYjGy_ZUG8 <input type="checkbox"/> Watch Greetings Around the World - can the children stand up when one does not require touching, and sit down when one does? www.youtube.com/watch?v=nANhSfCGAs4 <input type="checkbox"/> Risk assess with children to empower. Share decision making regarding the environment and why there are some differences. Can the children come up ideas? <input type="checkbox"/> Assess the level of information you share with children to make sure it is appropriate to their age and development. <input type="checkbox"/> Can physical distancing be facilitated with the use of technology? Consider safe and secure ways for children to say hello to their friends who are staying home. <input type="checkbox"/> Create a personal space social story.
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Appendix 9: Staffing Arrangements – Checklist

QUALITY AREA 4: Staffing Arrangements
QUALITY AREA 7: Governance and Leadership

Scenarios

- With reduced participation across all service types, scenarios may arise where fewer educators are required to work at Heritage or may do so on a rotational basis.
- A number of educators may have health issues or symptoms that prevent them from attending work.
- In the event of a prolonged forced closure, some staff may be working from home.

Step	Checklist	Notes
Current priorities	<ul style="list-style-type: none"> <input type="checkbox"/> Provision of education to all enrolled children. <input type="checkbox"/> Health and safety of staff, children, and families <input type="checkbox"/> Maintaining financial viability. <input type="checkbox"/> Keeping staff employed and actively engaged. <input type="checkbox"/> Strategic planning for future provision of the service. <input type="checkbox"/> Progressing operational priorities such as policy review, A&R, L&D needs of the team. 	
Service considerations	<ul style="list-style-type: none"> <input type="checkbox"/> What tasks are involved? <input type="checkbox"/> How can these tasks be completed? <input type="checkbox"/> Where can these tasks be completed? Remotely or at the service? <input type="checkbox"/> Are there timeframes for the tasks? <input type="checkbox"/> Who has the appropriate skills, knowledge and working environment to successfully undertake these tasks? <input type="checkbox"/> How do I plan with consideration to employees considered “high risk”? <input type="checkbox"/> Can I rotate staff across the tasks and how will this be done? For example, team “A” and team “B”, team “work from home” and team “work in the service”. 	
Consider how to resource those who are working remotely	<ul style="list-style-type: none"> <input type="checkbox"/> What are the technical expectations? <input type="checkbox"/> What type of technology is needed? <input type="checkbox"/> Does the educator have the right tools to complete the work? What equipment (hardware and software) can they borrow and what are they expect them to provide? <input type="checkbox"/> Will the educator need support to access phone coverage? 	
Set expectations	<ul style="list-style-type: none"> <input type="checkbox"/> How will schedules and work goals be set and who will set them? <input type="checkbox"/> How will the educator maintain accountability? <input type="checkbox"/> How will the educator record their hours? 	
Consider work, health and	<ul style="list-style-type: none"> <input type="checkbox"/> Does the educator have access to a workstation suitable for the tasks required? 	<input type="checkbox"/>



<p>safety in the home office</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Does the educator have a chair that provides adequate support and movement? <input type="checkbox"/> Is the environment safe, healthy, comfortable, well-lit, adequately ventilated? <input type="checkbox"/> Will educators be making a lot of calls? <input type="checkbox"/> Have you considered a headset? <input type="checkbox"/> Does the educator have access to first aid? 	
<p>Review security and confidentiality</p>	<ul style="list-style-type: none"> <input type="checkbox"/> What security measures will be taken to protect information taken out of service? <input type="checkbox"/> Does the Privacy and Confidentiality Policy have a provision for working from home? 	
<p>Put a focus on wellbeing</p>	<ul style="list-style-type: none"> <input type="checkbox"/> How will educators be supported to self-care and take appropriate breaks regularly? Refer to: https:// headspace.org.au/headspace-centres/maitland/new-blog-post-3/ <input type="checkbox"/> Provide educators with ideas to stretch during their breaks. Refer to: www.safework.nsw.gov.au/resource-library/six-simple-stretches 	
<p>Enable open and frequent communication</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Is there an agreement with the educators regarding their responsibilities under any new arrangements? <input type="checkbox"/> How will open and frequent communication be ensured and what are your expectations around educator’s response time to this? <input type="checkbox"/> Are regular progress meetings planned? <input type="checkbox"/> What collaborative tools are needed to facilitate and maintain connections and measure work productivity? E.g., <ul style="list-style-type: none"> <input type="checkbox"/> Trello: https://trello.com/home <input type="checkbox"/> Slack: https://slack.com/intl/en-au/ <input type="checkbox"/> Microsoftteams: https://products.office.com/en-au/microsoft-teams/group-chat-software <input type="checkbox"/> Zoom: https://zoom.us/ <input type="checkbox"/> A combination of Zoom for conferencing and training, Microsoft teams for daily briefings, debriefings, chats and video catchups, and Trello can be used to collate resources and manage projects could be utilized. 	<p><input type="checkbox"/></p>



Appendix 10

ACT Health Service Closure Process: Notification, Decision, Action, Recovery



ACT education and care notification decision action and recovery response for confirmed case of COVID-19

