



Respect, Responsibility and Integrity

DURACK PRESCHOOL

FAMILY INFORMATION

2021

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Durack NT 0830
PO Box 225 Palmerston NT 0831
Preschool ~ 08 8997 7566
School ~ 08 8997 7555

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Website: <http://durackschool.nt.edu.au>

A Northern Territory Government
Independent Public School

**OUR SCHOOL
OUR FUTURE**

INCREASING SCHOOL
AUTONOMY

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WELCOME

We welcome you and your family to Durack Preschool, an essential part of Durack School and the Durack community.

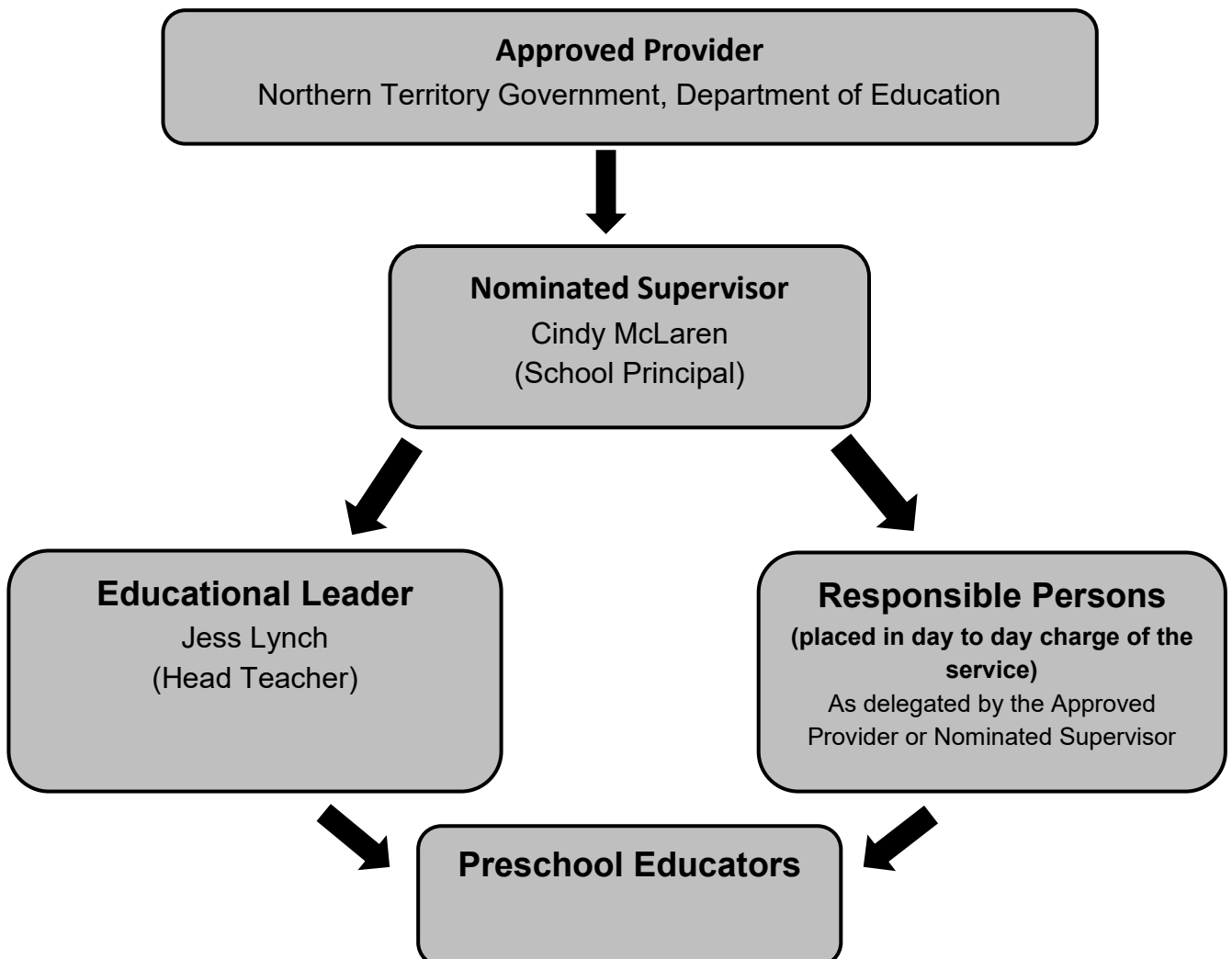
We provide a safe, nurturing and fun environment for children to feel motivated to explore and develop their skills, abilities and attitudes towards their learning, as we help to prepare them for the transition to formal schooling. Our children learn through the implementation of stimulating, hands on experiences, both structured and unstructured, that reflect their current knowledge and interests, and extend their learning.

This booklet contains specific information for Preschool families, and should be read in conjunction with the 2021 Durack School Parent Handbook, which includes general school policies and procedures that apply to both Primary and Preschool families and students.

Our preschool is governed by the Northern Territory Government, Department of Education. The Nominated Supervisor oversees the operations of the service, the financial viability, policy development, staffing, and overall management of the service.

The Educational Leader/Head Teacher oversees the implementation of the educational programs, policies and procedures, and the National Education and Care legislation and standards.

Governance Structure



PRESCHOOL PHILOSOPHY



Durack Preschool Philosophy

We provide a supportive environment that encourages children's learning. Durack Preschool is safe and welcoming, while upholding the school values of



Respect, Responsibility and Integrity.

Quality Relationships

- We recognise families as their child's first teachers.
- We maintain open and respectful communication between children, families and educators.
- We communicate regularly with families regarding the Preschool program and their child's development, accommodating all of our families and their preferred method of communication.

Professional Knowledge

- We maintain knowledge of Early Childhood practices through professional development and professional learning.
- We foster children's self-esteem and encourage children to show the "You Can Do It" values of Confidence, Persistence, Organisation, Cooperation and Resilience.
- We provide equity and cater for the diversity of learners.
- We provide opportunities for children to develop an appreciation of and a desire for learning through play and investigation, child initiated experiences and teacher prepared experiences.

A Supportive Environment

- We provide an environment that is pleasant, warm and welcoming to children, families and educators.
- We ensure our environment caters to individual children's needs where children feel safe, secure, supported and respected.
- We strongly believe that the environment is the third teacher and purposeful in children's learning.
- We encourage children to recognise their own strengths, develop their knowledge, skills and understanding through a child led environment

POLICIES AND PROCEDURES



Durack Preschool has a range of policies and procedures that guide the operation of our service, and promotes consistency in the care and education that is provided.

All policies are available to access at the preschool, or available upon request from the school.

Policies are working documents and are reviewed as appropriate to ensure they remain consistent with legislative changes and best practice. Our policies are guided by the Department of Education and are developed to reflect the individuality of Durack Preschool, and the families who utilise it. We comply with the Education and Care Services National Law requirement to consult with families in relation to any changes to policies or procedures that affect the way in which families access our service.

Policy changes will be drafted and open for comment by families and staff before the School Board considers a final version.

STAY IN TOUCH

Communication

Communication is important in fostering partnerships, and working towards positive outcomes for children. We encourage family input, and aim to keep the lines of communication open between families and preschool staff.

Communication between families and preschool staff may take various forms:

- We use Class Dojo – an application that provides 2 way communication between home and school. Similar in layout to Facebook but only accessible if you are invited to join and it is a totally private group. Children’s images may be shared on this site if on their enrolment form, Section 9 – Additional Consents – Use of Student Photograph and Use of Work by Student have both been ticked YES for ‘School/College/Department Website ‘.
- Other communication forms may be:
 - written letters
 - verbal communication
 - the electronic notice board at the front of the school
 - emails
 - school newsletters
 - the classroom community notice board
 - our schools Facebook page
 - the whole school Dojo.



Parent/Teacher Discussions



- During Term 1 and Term 3 we hold 3 way conferences between parent, teacher and students, this is an opportunity to set goals for your child, and develop strategies that can be implemented both in the class room, and at home. This is a great opportunity for children to “have a voice”, and be involved in decisions that affect them, guiding their own learning.
- We also host an annual open night where families may visit the preschool classroom after school hours for an informal visit. This provides more opportunities for informal discussion, and for families to gain more of an understanding of the things that their child does at preschool.
- Formal Parent/Teaching meetings: should you wish to speak with your child’s teacher in a more formal setting, please do not hesitate to discuss this with your child’s teacher, and set a time.

FAMILY INVOLVEMENT

We encourage family involvement in our preschool environment throughout the year, through volunteering, input into quality improvement and policies, suggestions for the program, etc.

We also do various fundraising events throughout the year to raise money to support the Preschool with things such as purchasing resources, special events, and excursions.



Please talk to the Head Teacher to discuss any way that you would like to be involved.

FAMILY GRIEVANCES AND COMPLAINTS

We believe that families should feel comfortable to air any concerns, and be assured that their issues are listened to, understood, and dealt with consistently in terms of equity and fairness.

Grievances and complaints will be viewed as opportunities to understand other attitudes and views, and will be used as a part of our self-evaluation processes, to help to improve the quality of the preschool program we provide to our community, families and children.

Where a parent has a concern with:

- the preschool program, behaviour management issues, a preschool procedure etc, they should, in the first instance, discuss the complaint with the relevant class teacher. If not satisfied after talking with the teacher – the concern should be raised with the School Principal or Assistant Principal.
- a preschool staff member or other issue - contact the School Principal or Assistant Principal

If the family member is not satisfied with the outcome, they have the right to appeal the decision, or they can contact the regulatory authority:

Quality Education and Care Northern Territory (QECNT)

Department of Education

Ph: 8999 3561

Email: qualityecnt.det@nt.gov.au

Postal: GPO Box 4821

DARWIN NT 0801



PRIVACY AND CONFIDENTIALITY

We will maintain private and confidential files for all staff, children, families, and students/volunteers, maintaining records according to the Australian Privacy Principles (APP) and the requirements under the Educational and Care National Legislation.

Any information relating to preschool students will remain confidential, not divulged or communicate directly or indirectly, to another person other than:

- relevant staff members to the extent necessary for the education and care or medical treatment of the child to whom the information relates
- the parent of a child to whom the information relates (except in relation to information kept in a staff record)
- the Regulatory Authority or authorised officer
- as expressly authorised, permitted or required to be given by or under any Act or law with the written consent of the person who provided the information

For children who:

- transfer to Durack School or other NT Government School, the records are transferred to that school and are kept in accordance with NT DOE policies
- transfer to private schools or Interstate schools the records will be kept securely in the school archives for 7 years. Information will be copied and passed to another school only with written permission from the parent / guardian



For more information regarding the Department of Education (DoE) obligations in relation to protecting your privacy, visit <http://www.education.nt.gov.au/aboutus/foi> or contact a DoE Information Officer on (08) 8901 4907.

ENROLMENT AND ORIENTATION

We implement enrolment and orientation processes that are suited to the needs of individual children and their families, taking in to account the child's age, cultural background, interests, skills and abilities. Children and families will be invited to visit the preschool prior to the child starting, and families are welcome to stay as long as they feel they need, to settle their child into the preschool when they have started attending.

Throughout the orientation process we aim to develop positive and collaborative partnerships with children and families, fostering the child's sense of security and belonging. Our educators will use this time to begin to build relationships with the child and family, discussing the programs, routines, the preschool philosophy, collecting information about the child, and providing the opportunity for children and families to become familiar with our preschool environment and procedures.

Enrolment Procedures

We follow the enrolment procedures as outlined by the Department of Education, these can be found at:

<https://nt.gov.au/learning/primary-and-secondary-students/enrol-your-child-at-school>.



A child is not considered enrolled unless all of the relevant information has been completed, and returned to the school (including the supplementary preschool enrolment form).

When enrolling your child you will need all of the following:

- » birth certificate or equivalent identification
- » proof of address
- » details of any medical conditions
- » emergency contact details
- » immunisation record



Contact Details

Please ensure contact details are **ALWAYS** up to date. Should we need to contact someone in an emergency we must have access to current phone numbers. Please let us know as soon as there are any changes to these details.

PRESCHOOL SESSIONS AND TIMES

Our preschool program provides families with 30 hours of Preschool attendance, over a two week period, as per regulations. This is organized as 2 whole days each week, and a half day on alternating weeks. Children may be enrolled in either the Monday/Tuesday program, or the Thursday/Friday program, depending on the availability of places.



The half day sessions are part of the preschool's planned learning sessions, and attendance is essential for all children enrolled in the program. There are a number of local childcare facilities who drop off and pick up children from our Preschool on these half days.

Session times:

Full days: 8:00am – 2:30pm (M, T, Th, F)

Half days: 8:00am – 12:00pm (W)



Children may be collected by parents or carers a few minutes early to ease congestion and large groups in the preschool, and to enable parents with older students to be able to get to their respective classrooms before the end of the day bell.

VOLUNTARY PARENT CONTRIBUTIONS

Preschool receives strong support from families, through the payment of voluntary parent contributions. This financial support enables us to provide a wider range of resources that contribute to quality outcomes for children.

Contributions are set at \$100 per year, and are payable at the school office.

ARRIVAL AND DEPARTURE OF CHILDREN

Arrival at the Preschool

- Preschool starts at 8:00am, children cannot be received before this time.
- The person delivering the child to preschool must sign them in upon arrival each day.
- Families are encouraged to spend time in the morning, supporting their child to put their belongings away, and begin to explore the environment.
- The person delivering the child to the preschool is required to ensure that the child is received by an educator before leaving.



Preschool children must always be accompanied by an adult into the preschool grounds. Under no circumstances are children to be dropped off on their own without being formally signed in to the service by an adult.

Departure from the Preschool

- Please be prompt when collecting children to ensure they don't worry unnecessarily.
- Only the parents/guardian, or an authorised nominee named in the child's enrolment record are allowed to collect a child from preschool
- The parent/guardian is to inform the school in writing if somebody other than themselves is going to collect their child (including Outside School Hours Care).
- If an unauthorised person arrives to collect a child, we will contact the child's parent/guardian to confirm the authority. If the parent/guardian cannot be contacted, an authorised nominee will be contacted to confirm the authority. If authority is withheld, the child will remain on the premises until an authorised person can be contacted to collect them.



- Where educators are unfamiliar with an authorised nominee, identification will be requested.
- Any person who is forbidden from having contact with the child will NOT be permitted to take the child from the premises. Where there is conflict with such a person, police will be notified, and the child's guardian contacted.
- Before departing the centre with the child, the person collecting the child must sign the child out.

Wet weather

On days when storms coincide with the end of the school day, parents may collect children from school before 2.30pm to help ease congestion in the car park and around the school.

ABSENCES

If your child will be absent from Preschool please notify us as soon as practicable. We can be notified by:

- speaking with a staff member
- sending a message via Class Dojo
- phone and leave a message on our direct phone line: 89 977566
- notify the main school office on 89 977555.

All absences require explanation and are recorded as per NT Department of Education attendance policy.



ILLNESS AND EXCLUSION



Please remember that your child's health is your responsibility. Your child **MUST** be kept away from preschool if they display any signs of:

- Fever
- Eye/body discharge (e.g. sore, boils, conjunctivitis)
- Distress in feeling unwell, unusually upset or fatigued
- Vomiting/diarrhoea (child must be excluded for at least 24 hours after last motion)
- Any signs/symptoms of the diseases/conditions noted in the NHMRC Recommended Exclusion periods – 2013

Children displaying any of the symptoms above will not be accepted by the preschool, or alternatively, we will contact a parent/guardian or authorised nominee to collect the child asap. This procedure is designed to protect all children, educators, families, and other visitors to the preschool.

MEDICAL CONDITIONS

Parents/guardians of children enrolling in preschool who have a medical condition must complete the relevant section on the child's enrolment form, and, depending on the condition, provide a medical management/action plan, provided by a medical practitioner.

Medical conditions include, but are not limited to, asthma, anaphylaxis, and diabetes.

Prior to starting at preschool, a risk minimisation plan will need to be developed, in conjunction with the family, the Head Teacher and Principal. This plan will include:

- the child's details
- details of any medications required
- signs, symptoms and triggers of the illness
- risk minimisation information, the steps to be taken at the service to minimise any risks
- where the medication will be stored
- communication plan, outlining how the family and service will communicate information about the child's medical condition on an ongoing basis.

It is the family's responsibility to notify Preschool staff of any changes to their child's medical condition, and to ensure that they have any relevant medication when attending preschool. If the medical management/action plan and/ or risk minimisation plan indicate that the attendance of a child at Preschool without the prescribed medication presents a risk to the child's health then the child is **not to attend the Preschool**.

ACCIDENTS AND INCIDENTS

Although we do have policies and procedures in place to keep children safe while at preschool, accidents and incidents may still occur during the preschool day.

If an accident/incident occurs, it will be recorded in an Accident and Incident Book. Parents will be kept informed of any accident / incident or sickness that may involve their child and they will be required to sign the record made at Preschool.



If any incident that occurs at preschool is deemed to be a 'serious incident', as described in the Education and Care National Legislation, the Principal will notify the regulatory authority, QECNT, within 24 hours of becoming aware of the incident.



QUALITY OF SERVICE



The National Quality Framework

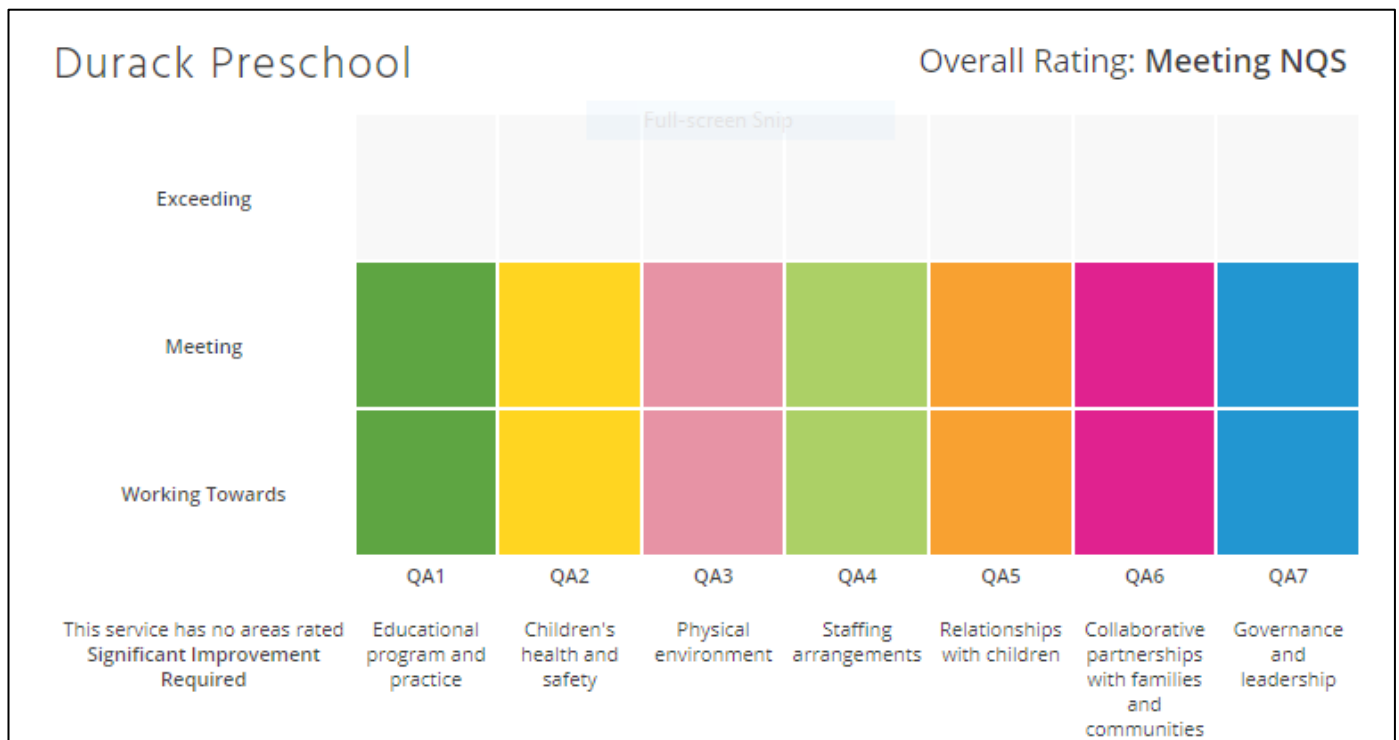
The National Quality Framework (NQF) provides a national approach to regulation, assessment and quality improvement for early childhood education and care and outside school hours care services across Australia.

Services covered by the National Quality Framework are assessed and rated against the seven quality areas of the National Quality Standard and the Education and Care Services National Regulations. The assessment and rating process aims to drive continuous quality improvement for services and provide families with better information for making choices about their children's education and care. The overall rating for a service is determined by the combination of the ratings achieved in each Quality Area.

Durack Preschool was assessed in 2019 and received an overall rating of 'Meeting'. Below is the rating for each of the seven quality areas.

More information about the NQF can be found at <http://www.acecqa.gov.au/>

Our Current Rating:



EDUCATIONAL CURRICULUM AND LEARNING

Our Educational Leader mentors and guides our educators throughout the implementation of our preschool program. Our programs are underpinned by the Northern Territory Preschool Curriculum, and reflect the principles, practices and learning outcomes of the Early Years Learning Framework, promoting a vision of best practice for young children's learning.

Early Years Learning Framework

The major focus of the EYLF is to build secure, respectful and reciprocal relationships which are essential in developing a strong sense of wellbeing in children. When these trusting relationships are built, children develop the skills and understandings they need to interact positively with others, to appreciate their differences and similarities as learners and to value collaboration and teamwork.



The three pivotal values and beliefs of the EYLF are belonging, being and becoming;

Figure 1: The Early Years Learning Framework (EYLF) and the Preschool Curriculum



Belonging – acknowledging children’s interdependence with others and the basis of relationships in defining identities. Within early childhood, a child’s sense of belonging can relate to how comfortable a child is within the setting, having a sense of trust and security with educators

Being – recognises the significance of the here and now in children’s lives. It is about the present and children knowing themselves, understanding that they are accepted for who they are and knowing that others care about them.

Becoming – reflects the process of rapid and significant change that occurs in the early years as young children learn and grow. It emphasises learning to participate fully and actively in society.

For more information visit:

<https://www.acecqa.gov.au/nqf/national-law-regulations/approved-learning-frameworks>

Northern Territory Preschool Curriculum

The Northern Territory Preschool Curriculum has been designed to strengthen and support children’s educational opportunities in the preschool year by enhancing learning opportunities in all learning areas such as literacy and numeracy. It is based on the values of the EYLF with the priority being to engage children’s learning through their interests and valuing the importance of family and community priorities and contexts. It guides educators to have an informed and clear understanding of what children are capable of doing and how they develop effectively through play based learning and intentional/explicit teaching.

For more information visit:

<https://education.nt.gov.au/support-for-teachers/nt-preschool-curriculum>

Play based learning

Play provides opportunities for children to learn as they discover, create, improvise and imagine. When children play, they have opportunities to develop social groups, test out ideas, challenge others people’s way of thinking and build new understandings. We will provide an environment and collaborate with children to develop programs that promote play and learning opportunities.

We plan experiences to ensure that children are given the opportunity to achieve the learning outcomes as outlined in the EYLF:

Learning Outcome 1: Children have a strong sense of identity

Learning Outcome 2: Children are connected with and contribute to the world

Learning Outcome 3: Children have a strong sense of wellbeing

Learning Outcome 4: Children are confident and involved learners

Learning Outcome 5: Children are effective communicators

EXPERIENCES EMBEDDED IN OUR CURRICULUM

Below are some experiences that are embedded in our curriculum to support children's learning and transitions to the school environment. Our Head Teacher will discuss the curriculum in further detail throughout the orientation processes, and answer and questions that may arise.

NT Maths Games & NT Science Games

These games have been developed by The University of Melbourne to support the implementation of the Northern Territory Preschool Curriculum. The games build on and extend the Northern Territory LearningGames® and in so doing, acknowledge that families are children's first teachers. The games are designed to assist preschool teachers enacting differentiated teaching and learning while maintaining Important learning objectives for individual children that are informed by observation-based evidence.

Internal Excursions

Preschool children will take part in weekly internal excursions into the main school in order to participate in library, sensory motor and assembly activities.

**By signing page 1 and marking the relevant box on the Supplementary Preschool Enrolment Form, parents give permission for their child to participate in internal excursions into the main school.*



Library – Each Monday and Thursday:

Children attend the school library and may borrow one book to take for reading at home. This is an opportunity for social learning, beginning to understand the rules and expectations of the school environment.

A library bag is included in the Preschool Resource Pack that is purchased from the front office. We will distribute library bags before our first library visit. Library books are changed each week.

Sensory Motor Play:

Once a week, children visit the school to participate in sensory motor activities that are set up in the school assembly area. These skills are essential to develop the ability to participate in classroom activities and promote academic achievement.

Assembly:

For children who attend Thursday/Friday sessions, every second Friday morning a school assembly is held in the school hall. This helps with the children's sense of belonging in the school environment, as they participate which other members of the school community.

Preschool children will attend each fortnight, and families are welcome to come along. There may be occasions throughout the school year where children may receive an award at assembly. Parents will be informed in advance if/when this is going to happen.

Water Play - Each Tuesday and Friday (pending restrictions)

Our outside session will include water play. On these days children will have access to supervised play in the pool, wet sand play and other wet and messy activities. Please send your child with:

- bathers
- sun top/old T shirt
- a towel
- a plastic bag

Sun tops (rashies)/ T-shirts are essential to meet sun safe requirements. Please ensure ALL items are clearly named.



**By signing page 1 and marking the relevant box on the Supplementary Preschool Enrolment Form, parents give permission for their child to participate in water play.*

WHAT TO BRING EACH DAY

Each family is responsible for delivering their child to preschool with the following items:

A packed lunch box

Your child will require recess **AND** lunch when they attend whole day sessions. It is suggested that children have at least two or three items to eat for recess that they would normally eat at home, along with a sandwich and another item for lunch.



At Preschool children are always on the go and need to have enough food to satisfy themselves at eating times. It is better to pack a little extra something than have your child go hungry.



PLEASE DO NOT SEND LOLLIES /CHOCOLATE ITEMS.

As we are a healthy eating school we encourage healthy eating choices. Lunch boxes are kept in the classroom fridge, therefore insulated lunchboxes are not necessary. Please name lunchboxes in at least 2 places as well as all individual containers.

Allergy awareness

We provide an ALLERGY AWARE environment and are egg and nut free. Specific restrictions other than eggs and nuts will be communicated to families by preschool staff as the need arises.

We ask you to be mindful when making lunches and if possible to avoid any notified allergy foods.



Water

Cold water is available from bubblers at all times and children are encouraged to bring a labelled water bottle to drink from throughout the day. Children are expected to drink water at recess and lunch times.

Sun Safe

Please ensure your child has a NAMED school hat with them **every day**. The preschool has a very strict “No Hat, No Play” in the sun policy. Children without a hat are not permitted to leave the shade of the veranda during outside playtimes.

Please apply sunscreen to your child before they start the Preschool day.



Footwear

Children are to wear suitable footwear to preschool. Shoes that children can take on and off independently are required. NO THONGS please.

Jumpers

The classroom can become quite cool and children will require a jumper/jacket for preschool. School jackets are available from the front office or a **BLUE** jumper/jacket of your choice may be worn.

Please note: all personal items should be clearly labelled with your child's name.

Our educators will not take responsibility for toys and personal items bought from home.



We look forward to a productive year with your child here at Durack Preschool.

Should you have any questions regarding anything set out in this booklet or any other matter that may impact on your child's time at Preschool, please feel free to make contact with preschool staff.

Appendix 1: Useful contact information

Child Care Finder website

<https://www.childcarefinder.gov.au/>

Providing an online child care portal containing information on different types of care and how to get assistance with the cost of child care. You will also find links to other useful websites about children's health and wellbeing, parenting and family support services:

ACECQA - Australian Children's Education and Care Quality Authority. www.acecqa.gov.au/

An independent statutory authority providing national leadership in promoting quality and continuous improvement in early childhood education and care and school age care in Australia:

Child Abuse/Child Protection Hotline.....

1800 700 250

For any person who believes that a child is being, or has been abused or neglected – it is required by law that these concerns are reported

Child Abuse Prevention

1800 688 009

Offers information, referral and ongoing support to those affected by child abuse, concerned about the welfare of a child, or needing family or parenting support (Australia wide)

Kids Help Line.....

1800 551 800

Free, private and confidential, telephone and online counselling service specifically for young people aged between 5 and 25.

Mental Health Support....

1800 682 288

For emergency inquiries from anyone experiencing a mental health crisis or concerned about someone's well-being.

Dawn House Incorporated....

8945 1388

Offering a women's shelter, domestic violence counselling, and domestic violence community education

SIDS & Kids NT....

8948 5311

Provides 24 hr bereavement support by volunteers support services to families who have experienced the sudden and unexpected death of a child from conception up to 18 years.

Parentline.....

1300 301 300

Providing support, counselling and parent education, and referral, tailored to meet each callers' needs

Our Family, Our Kids.....

8944 2000

A home visiting program providing a range of services including support, counselling and child development information.

Multicultural Council of the NT.....

89459122

The peak body dedicated to advocacy and representing the interest, concerns and aspirations of Territorians from culturally and linguistically diverse (CALD) backgrounds

Family Relationship Centre.....

89231400 or 1800 650 276

Provides information and referral for families at any stage of their relationship. Also provides Family Dispute Resolution for separating or separated families, to help parents resolve conflict and develop workable arrangements for their children.

A SIMPLIFIED VERSION OF THE UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD.



Article 1 Everyone under 18 years of age has all the rights in this Convention.

Article 2 The Convention applies to everyone whatever their race, religion, abilities, whatever they think or say, whatever type of family they come from.

Article 3 All organisations concerned with children should work towards what is best for each child.

Article 4 Governments should make these rights available to children.

Article 5 Governments should respect the rights and responsibilities of families to guide their children so that, as they grow up, they learn to use their rights properly.

Article 6 Children have the right to live a full life. Governments should ensure that children survive and develop healthily.

Article 7 Children have the right to a legally registered name and nationality. Children also have the right to know their parents and, as far as possible, to be cared for by them.

Article 8 Governments should respect a child's right to a name, a nationality and family ties.

Article 9 Children should not be separated from their parents unless it is for their own good. For example, if a parent is mistreating or neglecting a child. Children whose parents have separated have the right to stay in contact with both parents, unless this might harm the child.

Article 10 Families who live in different countries should be allowed to move between those countries so that parents and children can stay in contact, or get back together as a family.

Article 11 Governments should take steps to stop children being taken out of their own country illegally.

Article 12 Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account.

Article 13 Children have the right to get and to share information, as long as the information is not damaging to them or to others.

Article 14 Children have the right to think and believe what they want and to practise their religion, as long as they are not stopping other people from enjoying their rights. Parents should guide children on these matters.

Article 15 Children have the right to meet with other children and young people and to join groups and organisations, as long as this does not stop other people from enjoying their rights.

Article 16 Children have the right to privacy. The law should protect them from attacks against their way of life, their good name, their family and their home.

Article 17 Children have the right to reliable information from the media. Mass media such as television, radio and newspapers should provide information that children can understand and should not promote materials that could harm children.

Article 18 Both parents share responsibility for bringing up their children and should always consider what is best for each child. Governments should help parents by providing services to support them, especially if both parents work.

Article 19 Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents, or anyone else who looks after them.

Article 20 Children who cannot be looked after by their own family must be looked after properly by people who respect their religion, culture and language.

Article 21 When children are adopted the first concern must be what is best for them. The same rules should apply whether children are adopted in the country of their birth or if they are taken to live in another country.

Article 22 Children who come into a country as refugees should have the same rights as children who are born in that country.

Article 23 Children who have any kind of disability should receive special care and support so that they can live a full and independent life.

Article 24 Children have the right to good quality health care, clean water, nutritious food and a clean environment so that they will stay healthy. Richer countries should help poorer countries achieve this.

Article 25 Children who are looked after by their local authority rather than their parents should have their situation reviewed regularly.

Article 26 The Government should provide extra money for the children of families in need.

Article 27 Children have the right to a standard of living that is good enough to meet their physical and mental needs. The government should help families who cannot afford to provide this.

Article 28 Children have the right to an education. Discipline in schools should respect children's human dignity. Primary education should be free. Wealthier countries should help poorer countries achieve this.

Article 29 Education should develop each child's personality and talents to the full. It should encourage children to respect their parents, their cultures and other cultures.

Article 30 Children have the right to learn and use the language and customs of their families, whether or not these are shared by the majority of the people in the country where they live, as long as this does not harm others.

Article 31 Children have the right to relax, play and to join in a wide range of leisure activities.

Article 32 Governments should protect children from work that is dangerous or that might harm their health or education.

Article 33 Governments should provide ways of protecting children from dangerous drugs.

Article 34 Governments should protect children from sexual abuse.

Article 35 Governments should make sure that children are not abducted or sold.

Article 36 Children should be protected from any activities that could harm their development.

Article 37 Children who break the law should not be treated cruelly. They should not be put in a prison with adults and should be able to keep in contact with their family.

Article 38 Governments should not allow children under 15 to join the army. Children in war zones should receive special protection.

Article 39 Children who have been neglected or abused should receive special help to restore their self-respect.

Article 40 Children who are accused of breaking the law should receive legal help. Prison sentences for children should only be used for the most serious offences.

Article 41 If the laws of a particular country protects children better than the articles of the Convention, then those laws should override the Convention.

Article 42 Governments should make the Convention known to all parents and children.

The Convention on the Rights of the Child has 54 articles in all. Articles 43-54 are about how adults and governments should work together to make sure that all children get all their rights.

Go to www.unicef.org/crc to read all the articles.



Recommended minimum exclusion periods

ADAPTED FROM STAYING HEALTHY | 5TH EDITION | 2013

Condition	Exclusion of case	Exclusion of contacts ^a
Campylobacter infection	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Cryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Glandular fever (mononucleosis, Epstein Barr virus [EBV] infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded. Contact a public health unit for specialist advice
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	Immunised and immune contacts are not excluded For non-immunised contacts, contact a public health unit for specialist advice. All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours ^b	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Worms	Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred	Not excluded

^a The definition of 'contacts' will vary according to the disease—refer to the specific fact sheet for more information.

^b If the cause is unknown, possible exclusion for 48 hours until cause is identified. However, educators and other staff who have a food handling role should always be excluded until there has not been a loose bowel motion for 48 hours.

Adapted from SA Health Communicable Disease Control Branch: <http://www.dhs.sa.gov.au/pehs/branches/branch-communicable.htm>. Note that exclusion advice is consistent with Series of National Guidelines (SoNGs) where available.



Appendix 4

National Immunisation Program Schedule 1 July 2020



Childhood vaccination (also see influenza vaccine and additional vaccination for people with medical risk conditions)			
Age	Disease	Vaccine Brand	Notes
Birth	<ul style="list-style-type: none"> Hepatitis B (usually offered in hospital) 	H-B-Vax® II Paediatric or Engerix B® Paediatric	Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
2 months Can be given from 6 weeks of age	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib) 	Infanrix® hexa	Rotavirus vaccine: First dose must be given by 14 weeks of age.
	<ul style="list-style-type: none"> Rotavirus 	Rotarix®	Meningococcal B vaccine: All Aboriginal and Torres Strait Islander children from 6 weeks of age, with a three year catch-up program for Aboriginal and Torres Strait Islander children aged less than 2 years old until 30 June 2023. Refer to the Australian Immunisation Handbook (the Handbook) for dose intervals.
	<ul style="list-style-type: none"> Pneumococcal 	Prevenar 13®	
	<ul style="list-style-type: none"> Meningococcal B (Indigenous children) 	Bexsero®	
4 months	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib) 	Infanrix® hexa	Rotavirus vaccine: The second dose must be given by 24 weeks of age.
	<ul style="list-style-type: none"> Rotavirus 	Rotarix®	
	<ul style="list-style-type: none"> Pneumococcal 	Prevenar 13®	
	<ul style="list-style-type: none"> Meningococcal B (Indigenous children) 	Bexsero®	
6 months	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib) 	Infanrix® hexa	Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required for Indigenous children living in WA, NT, SA, Qld, and all children with specified medical risk conditions for pneumococcal disease. Refer to the Handbook .
	<ul style="list-style-type: none"> Pneumococcal (All children with specified medical risk conditions) 	Prevenar 13®	
	<ul style="list-style-type: none"> Pneumococcal (Indigenous children living in WA, NT, SA, Qld) 	Prevenar 13®	Meningococcal B vaccine: An additional (3rd) dose of Bexsero® is required for Indigenous children with specified medical risk conditions for meningococcal disease. Refer to the Handbook .
	<ul style="list-style-type: none"> Meningococcal B (Indigenous children with specified medical risk conditions) 	Bexsero®	
12 months	<ul style="list-style-type: none"> Meningococcal ACWY 	Nimenrix®	
	<ul style="list-style-type: none"> Measles, mumps, rubella 	M-M-R® II or Priorix®	
	<ul style="list-style-type: none"> Pneumococcal 	Prevenar 13®	
	<ul style="list-style-type: none"> Meningococcal B (Indigenous children) 	Bexsero®	
18 months	<ul style="list-style-type: none"> <i>Haemophilus influenzae</i> type b (Hib) 	ActHIB®	Hepatitis A vaccine: First dose of the 2-dose hepatitis A vaccination schedule if not previously received a dose. The second dose is now scheduled at 4 years.
	<ul style="list-style-type: none"> Measles, mumps, rubella, varicella (chickenpox) 	Priorix-Tetra® or ProQuad®	
	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough) 	Infanrix® or Tripacel®	
	<ul style="list-style-type: none"> Hepatitis A (Indigenous children in WA, NT, SA, Qld) 	Vaqta® Paediatric	
4 years	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough), polio 	Infanrix® IPV or Quadracel®	Pneumococcal vaccine: Administer first dose of 23vPPV at age 4 years, followed by second dose of 23vPPV at least 5 years later. Refer to the Handbook for risk conditions .
	<ul style="list-style-type: none"> Pneumococcal (All children with specified medical risk conditions) 	Pneumovax 23®	
	<ul style="list-style-type: none"> Pneumococcal (Indigenous children living in WA, NT, SA, Qld) 	Pneumovax 23®	Hepatitis A vaccine: Not required if previously received 2 doses (first dose at age ≥12 months) at least 6 months apart.
	<ul style="list-style-type: none"> Hepatitis A (Indigenous children in WA, NT, SA, Qld) 	Vaqta® Paediatric	

Adolescent vaccination

(also see influenza vaccine and additional vaccination for people with medical risk conditions)

Age	Disease	Vaccine Brand	Notes
12–13 years (School program)	<ul style="list-style-type: none"> Diphtheria, tetanus, pertussis (whooping cough) Human papillomavirus (HPV) 	Boostrix® Gardasil®9	HPV vaccine: Observe Gardasil®9 dosing schedules by age and at-risk conditions. 9 to <15 years: 2 doses, 6 months minimum interval. ≥15 years and/or have certain medical conditions: 3 doses, 0, 2 and 6 month schedule. Only 2 doses funded on the NIP unless a 12–<15 year old has certain medical risk factors.
14–16 years (School program)	<ul style="list-style-type: none"> Meningococcal ACWY 	Nimenrix®	

Adult vaccination

(also see influenza vaccine and additional vaccination for people with medical risk conditions)

Age	Disease	Vaccine Brand	Notes
50 years and over	<ul style="list-style-type: none"> Pneumococcal (Indigenous adults) 	Prevenar 13® and Pneumovax 23®	Pneumococcal vaccine: Administer a dose of 13vPCV, followed by first dose of 23vPPV 12 months later (2–12 months acceptable), then second dose of 23vPPV at least 5 years later.
70 years and over	<ul style="list-style-type: none"> Pneumococcal (non-Indigenous adults) 	Prevenar 13®	
70–79 years	<ul style="list-style-type: none"> Shingles (herpes zoster) 	Zostavax®	Shingles vaccine: All people aged 70 years old with a five year catch-up program for people aged 71–79 years old until 31 October 2021.
Pregnant women	<ul style="list-style-type: none"> Pertussis (whooping cough) 	Boostrix® or Adacel®	Pertussis vaccine: Single dose recommended each pregnancy, ideally between 20–32 weeks, but may be given up until delivery.

Additional vaccination for people with medical risk conditions

Age/risk condition	Disease	Vaccine Brand	Notes
All people with asplenia, hyposplenia, complement deficiency and those undergoing treatment with eculizumab	<ul style="list-style-type: none"> Meningococcal ACWY Meningococcal B 	Nimenrix® Bexsero®	Meningococcal vaccines: Refer to the Handbook for dosing schedule. The number of doses required vary with age.
People ≥5 years with asplenia or hyposplenia	<ul style="list-style-type: none"> <i>Haemophilus influenzae</i> type b (Hib) 	Act-Hib®	Hib vaccine: A single dose is required if the person was not vaccinated in infancy or incompletely vaccinated. (Note that all children aged <5 years are recommended to complete Hib vaccination regardless of asplenia or hyposplenia)
People <12 months of age with conditions that increase their risk of pneumococcal disease	<ul style="list-style-type: none"> Pneumococcal 	Prevenar 13® and Pneumovax 23®	Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required at 6 months of age, followed by a routine booster at 12 months (all children), then a first dose of 23vPPV at age 4 years, followed by second dose of 23vPPV at least 5 years later. Refer to the Handbook for risk conditions .
People ≥12 months of age with conditions that increase their risk of pneumococcal disease	<ul style="list-style-type: none"> Pneumococcal 	Prevenar 13® and Pneumovax 23®	Pneumococcal vaccine: Administer a dose of 13vPCV at diagnosis followed by 2 doses of 23vPPV. Refer to the Handbook for dose intervals and risk conditions .

Funded annual influenza vaccination

(Refer to annual ATAGI advice on seasonal influenza vaccines)

Children 6 months to less than 5 years of age

People 6 months and over with specified medical risk conditions

People 65 years and over

Pregnant women

All Aboriginal and Torres Strait Islander people 6 months and over

All people aged less than 20 years are eligible for free catch-up vaccines. The number and range of vaccines and doses that are eligible for NIP funded catch-up is different for people aged less than 10 years and those aged 10–19 years.

Adult refugees and humanitarian entrants are eligible for free catch-up vaccines. Refer to NIP catch-up fact sheets.

State/Territory

Australian Capital Territory
New South Wales
Northern Territory
Queensland
South Australia
Tasmania
Victoria
Western Australia

Contact Number

(02) 5124 9800
1300 066 055
(08) 8922 8044
HEALTH (13 4325 84)
1300 232 272
1800 671 738
1300 882 008
(08) 9321 1312



IN RELATION TO CHILDREN, I WILL:

- act in the best interests of all children
- create and maintain safe, healthy, inclusive environments that support children's agency and enhance their learning
- provide a meaningful curriculum to enrich children's learning, balancing child and educator initiated experiences
- understand and be able to explain to others how play and leisure enhance children's learning, development and wellbeing
- ensure childhood is a time for being in the here and now and not solely about preparation for the future
- collaborate with children as global citizens in learning about our shared responsibilities to the environment and humanity
- value the relationship between children and their families and enhance these relationships through my practice
- ensure that children are not discriminated against on the basis of gender, sexuality, age, ability, economic status, family structure, lifestyle, ethnicity, religion, language, culture, or national origin
- negotiate children's participation in research, by taking into account their safety, privacy, levels of fatigue and interest
- respect children as capable learners by including their perspectives in teaching, learning and assessment
- safeguard the security of information and documentation about children, particularly when shared on digital platforms.



IN RELATION TO COLLEAGUES, I WILL:

- encourage others to adopt and act in accordance with this Code, and take action in the presence of unethical behaviours
- build a spirit of collegiality and professionalism through collaborative relationships based on trust, respect and honesty
- acknowledge and support the diverse strengths and experiences of colleagues in order to build shared professional knowledge, understanding and skills
- use constructive processes to address differences of opinion in order to negotiate shared perspectives and actions
- participate in a 'lively culture of professional inquiry' to support continuous improvement
- implement strategies that support and mentor colleagues to make positive contributions to the profession
- maintain ethical relationships in my online interactions.



IN RELATION TO FAMILIES, I WILL:

- support families as children's first and most important teacher and respect their right to make decisions about their children
- listen to and learn with families and engage in shared decision making, planning and assessment practices in relation to children's learning, development and wellbeing
- develop respectful relationships based on open communication with the aim of encouraging families' engagement and to build a strong sense of belonging
- learn about, respect and respond to the uniqueness of each family, their circumstances, culture, family structure, customs, language, beliefs and kinship systems
- respect families' right to privacy and maintain confidentiality.



IN RELATION TO THE PROFESSION, I WILL:

- base my work on research, theories, content knowledge, practice evidence and my understanding of the children and families with whom I work
- take responsibility for articulating my professional values, knowledge and practice and the positive contribution our profession makes to society
- engage in critical reflection, ongoing professional learning and support research that builds my knowledge and that of the profession
- work within the scope of my professional role and avoid misrepresentation of my professional competence and qualifications
- encourage qualities and practices of ethical leadership within the profession
- model quality practice and provide constructive feedback and assessment for students as aspiring professionals
- mentor new graduates by supporting their induction into the profession
- advocate for my profession and the provision of quality education and care.



IN RELATION TO COMMUNITY AND SOCIETY, I WILL:

- learn about local community contexts and aspirations in order to create responsive programs to enhance children's learning, development and wellbeing
- collaborate with people, services and agencies to develop shared understandings and actions that support children and families
- use research and practice-based evidence to advocate for a society where all children have access to quality education and care
- promote the value of children's contribution as citizens to the development of strong communities
- work to promote increased appreciation of the importance of childhood including how children learn and develop, in order to inform programs and systems of assessment that benefit children
- advocate for the development and implementation of laws and policies that promote the rights and best interests of children and families.

