



COVID SAFE PLAN

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The following **COVID Safe plan** brings together the advice of the Australian Health Protection Principal Committee and Victoria's COVIDSafe principles for business. The advice acknowledges that each early childhood setting is unique as both a place of work for staff and a learning environment for children. Keeping children and staff safe is the risk priority. The following guidance sets out the public health advice and strategies that educators and staff are encouraged to implement to minimise the risks of COVID-19 transmission.

Vaccination against COVID-19 is currently the leading public health prevention strategy that helps to keep Victorians safe in the COVID-19 pandemic. Vaccination for the full ECEC workforce is now mandatory. Right Choice FDC programs serve children between 3 months to 12 years old. Children above 05 years age are now eligible for vaccination. Our service encourages parents to consider COVID-19 vaccination for the protection of their children from COVID-19. Right Choice FDC also provide care for children under 05 years of age who are not eligible for vaccination at this time. Therefore, this guidance emphasizes implementing a combination of COVID-19 prevention strategies to minimise transmission risk to protect people who are not fully vaccinated.

As COVID-19 is a new virus, new scientific research is regularly emerging. Currently, the World Health Organization suggests that COVID-19 can be transmitted by following ways:

Droplet transmission

A person can be infected with COVID-19 by touching respiratory droplets such as saliva or tears from an infected person. These are spread through coughing, sneezing, kissing, talking, or singing.

These droplets can enter your mouth, nose or eyes and cause infection. This can happen by having close face-to-face contact, being within 1.5 metres of someone with COVID-19, or by touching a contaminated surface before touching your face.

Airborne transmission

Saliva or tears from an infected person can stay in the air after they cough, sneeze, talk or even sing. This means that COVID-19 can be spread through these tiny infectious particles suspended in the air. Sometimes, the virus can remain in the air for some time in settings such as in indoor spaces with poor ventilation.

Contaminated surfaces transmission

COVID-19 can spread when secretions or droplets from an infected person land on surfaces. The virus can live on surfaces for hours or days, depending on the temperature, humidity, type of surface, and how much of the virus is present.

If you touch an infected surface, you could become infected by then touching your nose, mouth or eyes. You could also spread the virus from one surface to another and infect other people.

For more information on the science behind COVID-19 see [Facts about coronavirus \(COVID-19\)](#).

A combination of strategies is required to minimise transmission risk. No single strategy completely reduces risk and not every measure will be possible in all educational settings. Where some controls are not feasible, others should be enhanced. Strategies should also be adjusted over time in line with the changing risk of transmission in the community.

Key behaviours required for reducing COVID-19 transmission risk include staying home when unwell, performing regular hand hygiene, and where practical in ECEC settings, maximising physical distancing, particularly between adult members of the ECEC community. Education settings are uniquely placed to integrate these messages into everyday learning and practice.

COVID Safe Behaviour	Action required to mitigate the introduction and spread of COVID-19
<p style="text-align: center;">Vaccination</p>	<ul style="list-style-type: none"> • The Victorian Chief Health Officer has determined that COVID-19 vaccination is a requirement for staff who work in ECEC services. • Educators and ECEC staff are required to be vaccinated against Covid-19, to work at Right Choice FDC. Staff will collect evidence of vaccination for all current and prospective educators.
<p style="text-align: center;">Stay home when unwell</p>	<ul style="list-style-type: none"> • Any unwell staff, educator and child must remain at home and get tested, even with the mildest of symptoms. • Display signs at entry points of your premises reminding people not to enter if they have COVID-19 symptoms, cold/flu symptoms or have been in close contact with a confirmed case. • Use an infrared thermometer and ensure it is available to temperature screen any child who is feeling unwell while in care or at arrival. • Ask people to leave the education and care setting if they display symptoms associated with COVID-19. • Children’s Health care plans, where relevant, should be updated to provide additional advice on monitoring and identification of the unwell child in the context of COVID-19. • Educators to check vaccination certificate of all visitors before entering the service.
<p style="text-align: center;">External drop off</p>	<p>Practice physical distancing and minimise interaction within the service and at entry points:</p> <ul style="list-style-type: none"> • if the physical layout of your service permits it and it is otherwise safe, children are to be dropped off and picked up in ways that do not involve parents entering the premises including the foyer, children’s rooms and play areas. • drop off and pick up is to occur at the entrance of the house. • where pick up and drop off occurs at the entrance, be particularly mindful of the supervision of children and ensuring unaccompanied children do not leave the service.

Practice good hygiene

- All staff, parents/guardians will sanitise their hands before signing in and out.
- Children wash their hands or sanitise hands after arriving at family day care.
- Liquid soap and running water, or alcohol-based hand sanitiser, is available at the entrance of the residence and throughout.
- Regular cleaning between use of IPADs/phone and shared items for sign in and out of services.
- Ensure adequate supplies of sanitiser, hand soap, papertowels are available.
- Wash hands often with soap and water for at least 20 seconds, after blowing your nose, coughing, sneezing, or using the toilet. If soap and water are not readily available, use a hand sanitizer that contains at least 60 percent alcohol.
- Educators are good role models for children and their parents/carers, so actively talk about why everyone needs to wash their hands and the importance of everyone doing this.
- Avoid touching eyes, nose, and mouth with unwashed hands.
- Cover nose and mouth with a tissue when you cough or sneeze. Tissues should be readily accessible with bins provided in FDC area and in outdoor areas for easy disposal. If you don't have a tissue, cough or sneeze into your upper sleeve or elbow.
- Don't share drink bottles, crockery or cutlery, and avoid using drinking fountains. Children should bring their own water bottle for use (and refilling) at the service.
- Sharing of food should not occur.
- Hand hygiene before and after use of shared equipment is recommended (for example, prior to a new activity).
- Use non-contact greetings between adults (not shaking hands, hugging or kissing).
- Ensure the highest hygiene practices during meal times as per National Health and Medical Research Council(NHMRC) guidance [Staying healthy: Preventing infectious diseases in early childhood education and care services.](#)
- Minimise use of mobile phone if possible. Staff and educators should disinfect their phones regularly.

	<ul style="list-style-type: none"> • Ensure that hand sanitiser is stored out of reach of very young children to avoid accidental ingestion.
<p>Physical distancing</p>	<p>Physical distancing is not practical when providing direct care. In this situation, standard precautions, including hand hygiene, are important for infection control.</p> <ul style="list-style-type: none"> • Use an infrared thermometer and ensure it is available to temperature screen any child who is feeling unwell while in care or at arrival. • Display information at the entrance to encourage 1.5 meters physical distancing. • Greeting parents and children at the front door in the morning and during pick up times will allow for one-on-one communication with families while practicing physical distancing and providing opportunities to consider whether children are showing any signs of being unwell. • Practice physical distancing at all staff meetings. • Standard precautions are advised when coming in to contact with someone for the purpose of providing routine care, assistance or first aid. Also see NHMRC guidance Staying healthy: Preventing infectious diseases in early childhood education and care services. • Always wash hands with soap and water or use a hand sanitiser before and after performing routine care or first aid. • Additional Personal Protective Equipment (PPE), for example face masks, is not required to provide routine care or first aid for children who are well. • To support contact tracing, educators and staff must keep a record of the name, phone number, date and time of visitors who attend their service on visitor record book. • QR code should be available at entrance door. QR code must be scanned by visitors and parents if entering the service.
<p>Wear a mask (adults)</p>	<ul style="list-style-type: none"> • Masks and face coverings provide a physical barrier between individuals, reducing risk of COVID-19 transmission. • Parents/Guardians to wear face masks at drop-off and pick-up times.

	<ul style="list-style-type: none"> • Educators must wear a face mask at the time of drop off and pick up greetings. • If an educator goes on excursion for school/kinder pick up or drop off, a face mask is required. • Children under 2 years must not wear any face covering. • It is not compulsory for educators to wear face masks while teaching or caring for children as they can interfere with their ability to clearly communicate with children. While teaching or caring for children, educators can choose to wear face coverings if they wish. • Coordinators and educators are required to wear face masks during support visits and monthly safety checks. • There may be situations where a face mask is not practical or safe for a person and a face shield may be worn, it should be noted however, that a face mask offers better protection than a face shield. • It is important that masks are used appropriately, following current DH advice at Face masks and coverings, including how to put on, remove, dispose of and/or clean. • Face masks are mandatory for all people aged 12 or older when travelling to and from ECEC on public transport and when in taxis or ride share vehicles. • There are a <u>number of lawful reasons for not wearing a face mask</u>, including for staff and parents/carers who are unable to wear a face mask due to the nature of their disability. This includes staff and parents/carers who have a medical condition, such as a breathing problem, a serious skin condition on the face, or a mental health condition.
<p style="text-align: center;">Keep surfaces clean</p>	<ul style="list-style-type: none"> • Ensure regular environmental cleaning throughout the day, through maintaining full adherence to the NHMRC childcare cleaning guidelines, and: <ul style="list-style-type: none"> ○ cleaning and disinfecting high-touch surfaces at least twice daily (for example, play gyms, tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks). It is not necessary to clean or disinfect surfaces after every use, but they should be cleaned and disinfected as soon as possible if visibly soiled.

	<ul style="list-style-type: none"> ○ disinfect shared objects between uses where possible. ○ washing and laundering 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. ● Consider adjusting how families, staff and children interact within the built environment to reduce contact with certain surfaces. For example, a simple measure such as educator opening the door to the service will reduce the need for multiple people to touch the door handle. ● Use no-contact infrastructure (for example, use door jambs to avoid opening/closing doors as much as possible). ● Clean shared sign-in equipment (tablets, phones, pens) regularly and between users where possible.
<p>Increasing ventilation and air quality in ECEC services</p>	<ul style="list-style-type: none"> ● Use following strategies to increase ventilation and air purification and reduce the risk of COVID-19 transmission. These include: <ul style="list-style-type: none"> ● Opening doors and windows ● Using fans ● Appropriate use of mechanical ventilation; and ● Maximising outdoor areas and programming. ● Increase fresh air flow into indoor spaces by ensuring doors that open from the room into the service’s outdoor play area are always open, along with windows if practical and weather allows. ● Keep all windows, doors and vents open as much of the day as possible and when unoccupied, if practicable. ● Keep openings clear of any obstruction to air flow. Door jambs should be used to keep doors open. ● Aim to open windows and vents that are higher or towards the ceiling during poor or windy weather. ● Take measures to maintain thermal, noise and other comfort, such as through clothing and seating arrangements. ● Monitor the VicEmergency App for risk warnings and advice on thunderstorm asthma, smoke and other events reducing outside air quality. In cases of poor outdoor air quality, windows and doors should be closed and air conditioners set to re-circulate – action to protect

	<p>children during periods of poor outdoor air quality (such as smoke, thunderstorm asthma events) takes priority.</p> <ul style="list-style-type: none"> • The use of enclosed spaces with little or no ventilation should be minimised.
<p>Consideration around activities/experience set up</p>	<ul style="list-style-type: none"> • Implement small group play, staggered mealtimes and indoor/outdoor play opportunities whenever possible. • Consider the setup of the room and the placement of the activities and limit the number of whole group activities. A greater range of activities will encourage children to spread out more broadly. • Rather than having group times where everyone is sitting on the mat, consider using informal opportunities to engage with the children/read books/do storytelling with small groups of children at a time. • For younger children, particularly consider the rotation of toys more often and increase the frequency of cleaning and disinfection of toys. Sharing of toys that have been placed in mouths should be monitored and avoided. • Where possible, arrange or plan outdoor play to minimise mixing.
<p>Covid Safe Orientation Parent/Carer attending service and enrolment</p>	<ul style="list-style-type: none"> • Parents will be offered an opportunity to visit after working hours or on Sunday, when there is no child present in care. • Only one adult/parent is allowed to visit for orientation purpose. • Parents will be offered a quick visit no more than 15 min. • Parents will discuss further information with educator via phone or video call. • Parent must scan the QR code on arrival before entering the care premises. • Parent and educator must wear mask during orientation visit. • Parent must use hand sanitiser before entering the care service • Parent to minimise touching surfaces wherever possible • Avoid interaction in enclosed space. Back yard area is a good option for discussion if required. • 1.5m distance rule will be applied during the visit. • Paperwork will be emailed to parents to complete and sign if required after visit. <p>NOTE: Educators should refuse any visitor to attend their premises, if educator observe visitor may be sick with flu, fever, cough, sore throat or any other covid symptoms.</p>

<p>Providing instruction, training and supervision in respect to COVID-19</p>	<ul style="list-style-type: none"> • All educators and staff to complete COVID 19-infection control course and refresh every 12 to 18 months. This course is available on Department of Education and Trainings’ website. • Nominated supervisor to ensure educators and staff are aware of their responsibility to protect families, children, and the public. • Service staff will regularly consult with educators on health and safety matters relating to Covid-19 on a regular basis. • Continue to reflect on current control measures in place to eliminate or minimize the risk of exposure and review as required. • Routinely communicate and consult with all staff about any modifications or updates to current policies or procedures that are in place to account for the pandemic conditions – (COVID Safe Plan, Children Health and Safety Policy, Control of Infectious Diseases Policy, Hygiene and Infection Control Policy) • Provide educators with written advice on how to manage Covid-19 risks. • Display signs around the workplace/premises advising of risk control measures. For example, covering coughs, not to enter workplace if unwell. • Provide children with age appropriate information and reminders about personal hygiene
<p>Respond to COVID-19 risk</p>	<ul style="list-style-type: none"> • It is important that any child who becomes unwell while at an ECEC-must return home immediately and get tested, with a designated space(s) made available on ECEC premises to support isolation where required. • The symptoms to watch out for are: <ul style="list-style-type: none"> ○ fever ○ chills or sweats ○ cough ○ sore throat ○ shortness of breath ○ runny nose ○ loss or change in sense of smell or taste. ○ In certain circumstances headache, muscle soreness, stuffy nose, nausea, vomiting and diarrhea may also be considered. • It is critical that any child who becomes unwell while at

	<p>an early childhood service returns home and receives medical review to see if COVID-19 testing is recommended.</p> <ul style="list-style-type: none"> • Designate an appropriate space for children who develop symptoms to be isolated. • Anyone with COVID-19 symptoms must be isolated and/or return home immediately and get tested, following the advice contained in Managing illness in schools and early childhood services during the coronavirus (COVID-19) pandemic. Children should be supervised appropriately while they await collection by a parent or carer as soon as possible. • The symptomatic individual and educator must wear a surgical face mask. Face masks should not be used in situations where an individual is unable to safely or practically tolerate a mask (for example, a child with complex medical needs including existing respiratory needs, or a child less than two years). Staff unable to wear a face mask should avoid the direct supervision or care of unwell children where possible. • If an educator is unsure whether a child is unwell, it is advisable in the first instance to contact the parent/carer to discuss any concerns about the health status of the child and, taking a precautionary approach, request the parent/carer to collect their child if concerns remain. Educator could take the temperature of the child, where appropriate to support decision making, ensuring hand hygiene is performed before and after. • Keep other children away from the allocated isolation area. Ensure to disinfect the area of isolation after parent collect the child from the service. Disinfect and clean the toys wherever it is possible. • Advise the parent of the unwell child, that the child must be tested for COVID-19 and stay home until they receive a negative test result and their symptoms have resolved. Educator will do the same if unwell. • Health care plans, where relevant, should be updated to provide additional advice on monitoring and identification of the unwell child in the context of coronavirus (COVID-19). • Urgent medical attention should be sought where indicated. Educator should inform nominated supervisor ASAP and should call an ambulance as they usually would if the child needs urgent medical attention or educator is concerned.
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Responding to an incident of COVID 19 in workplace

While services are implementing risk mitigation strategies, we should be prepared in the unlikely event a child or staff member is confirmed to have coronavirus (COVID-19). Below is an outline of the process should this occur, and steps service will take now to prepare:

1. DHHS will notify the service of a confirmed case or a parent will notify the service/ educator of a confirmed case. The Department of Health and Human Services (DHHS) will advise if the service needs to close or can remain operating.
2. Service will inform families if required to close.
3. Lodge a notification. Right Choice FDC will notify DET within 24 hours through the National Quality Agenda ITSystem (NQA ITS) or call 1300 307 415.
4. Educator will use Rapid Antigen Testing if there are no symptoms.
5. Educator and Right Choice FDC will advise parents of close contact children in care to use Rapid Antigen Testing for their children.
6. Educator and Right Choice FDC will arrange thorough cleaning and disinfecting of the care facility and resources.
7. Parent/carer of a positive child must share communication from DHHS with Right Choice FDC to confirm the number of days child will quarantine or further advice from DHHS.

Steps to take if there are symptoms of coronavirus at a family day care educator’s residence:

1. Contact parents of children in care to collect their children.
2. Stop providing education and care and inform the Right Choice FDC immediately.
3. Seek medical advice and testing.
4. Isolate at home until test results have been received.
5. Rapid Antigen Testing is recommended if there are no symptoms.
6. Any child or staff who returns a positive Rapid Antigen Test result must isolate, notify the ECEC service and immediately get a standard PCR test.
For more information about how to use these tests, visit [rapid antigen self-tests](#).
7. If the family member of an educator is tested negative but advised by DHHS to isolate due to close contact, educator cannot provide care to children until the family member completes isolation.

All educators and families have a responsibility to inform Right Choice Family Day Care if they:

- Have recently overseas and interstate travel.
- Have a family member has tested positive to Covid-19.
- Are a close contact of anyone who has tested positive to Covid-19.
- Have temperature above 38°C, feeling unwell, cold or flu symptoms, persistent cough, difficulty breathing, fever.

Educators will not be permitted to work or provided services if they fit in any of the above criteria.

I acknowledge and understand my responsibilities, and have implemented this COVID Safe Plan in the workplace.

Name: _____

Signature: _____

Date: _____