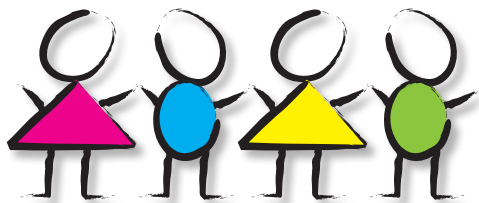


FEBRUARY  
2019



Issue 1

www.silverdalechildcare.com

# Silverdale Child Care Newsletter

www.silverdalechildcare.com.au



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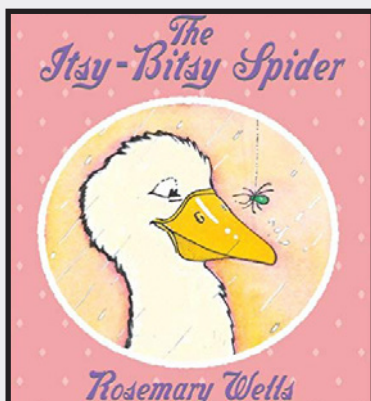
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## BOOK REVIEW

### The Itsy-Bitsy Spider

Rosemary Wells

Adults know this rhyme so well that we barely pay attention to the words anymore. But for our littlest readers, this tenacious little spider is a great introduction to the idea of resilience. Even though the rain knocks her out of the drain, she picks herself up and tries again.



Important  
DATE!

### March

6th: Responsible Pet Ed

(Pet Ed. Kangaroos Only)

21st: Harmony Day

27-29 School Photos

### April

3rd: Wuruniri (\$)

18th: Easter Hat Parade

22nd: Earth Day

### May

13th: Mums Morning Tea

22nd: Nat. Simultaneous  
Reading Time (11am)

### June

18th: Incursion - What I  
did on my Holidays (\$)

\$ = Incursion requiring payment

We recognise the traditional owners of  
this land, the Gandangara people.



Happy Chinese New Year



HELLO



Welcome back to our returning families and a warm welcome to the new families who are joining the service. The children have settled in well. We are proud of our children who have transitioned to the Kangaroos so effortlessly and to our brand new children who have joined us.

## BUILDING RESILIENCE IN CHILDREN

As adults we all respond and react to situations differently, as do our children. Faced with a problem or stressful situation children respond differently. Some children close down, some children yell and scream, some children communicate their concerns and ask questions, some children run away and some children are calm. That's because everyone is different. But building resilience in children is a skill they must have. Resilience can help to reduce stress.

Dr Lyn O'Grady, community psychologist says resilience is just another name for coping mechanisms. She says that it's important to note that children can appear resilient on the outside but not actually be resilient. They may have learned to behave in ways that are acceptable to the adults around them. Sometimes, these children can go under the radar in a school or community setting. A child like this might:

- not openly express their feelings
- put on a front (even though it's obvious they are struggling)
- not fully engage in what's happening around them
- not fully connect with other children and adults in their lives

## STAFFING STRUCTURE 2019

Kangaroos	Monday	Tuesday	Wednesday	Thursday	Friday
	Rebecca	Rebecca	Amy	Amy	Amy
	Joanne	Joanne	Joanne	Joanne	Joanne
Joey's	Hannah	Hannah	Hannah	Hannah	Hannah
	Tim	Ashtonn	Ashtonn	Ashtonn	Ashtonn
	Tarleigha	Tarleigha	Tarleigha	Tarleigha	Simone
	Michelle	Simone	Simone	Michelle	Michelle
Extra Floater	Aleisha	Riley	Aleisha	Aleisha	Aleisha

- tend to give up if things don't go well in the first instance
- not appear confident in dealing with situations themselves (but might not make a fuss about it).

Resilience partly comes from factors internal to the child. A resilient child has social and emotional competencies for their age that help them to name their feelings, manage their emotions, be aware of other people, solve problems, and make good decisions. A child's unique temperament or personality will have some bearing on this. Some children learn social and emotional skills quite easily, whereas other children require more support.

Resilience is affected by external factors too. We know that children are more likely to be resilient when there are supports around them from family, school or community; when they are able to seek help, showing that they understand that they don't have to do everything themselves or have all the answers. If children are surrounded by adults who model resilience – through their own behaviours as well as by explicitly teaching and practising the social and emotional skills - they will be more likely to develop resilience themselves. It can also help for parents to learn to manage their own stress and build their own resilience so they can best support their child. Health professionals can play an active role in this regard.

There are some characteristics that we might expect to see in a child who is coping well or is resilient. For instance, they might:

- use positive self-talk for encouragement
- capably express their feelings and

thoughts

- not hide away from strong feelings
- have helpful, age-appropriate strategies to manage their emotions if they are upset
- rearrange their plans to work around an unexpected situation
- use a trial-and-error approach in their daily life
- remain hopeful and keep on trying if something doesn't work out
- know when to stop trying if they decide the effort is not worthwhile
- actively ask for help if they need it.

### STAFF FOR 2019

Above you will see the staffing schedule for 2019. Please know this is subject to change. Michelle will be going on an extended holiday from July to Oct. At this stage we plan to have Tim to replace her.

### DENTAL VISIT

Last year we tried to have Sydney Dental here at the service to provide a dental check up and clean. Unfortunately there was not enough interest. We said we would try again and this year the date is March 26 (the day before school photos). Please find consent form in this newsletter. For many families the service will be free.

### REMINDER OF PROCEDURES

As the new year commences, it is always important to remind parents of a few of our policies and procedures:

- \* Each year we request information about any health issues your child may be experiencing. It is also important that you let us know if your child's health care needs change or if a new health condition develops. Information about allergies and med-

ical conditions such as asthma and diabetes, and other health related issues should be provided to us by parents. **PLEASE COMPLETE THE "UPDATE FORM"** in this newsletter. It is very important that this form is completed, even if details have not changed. **We are regulated to maintain updated photograph permission and excursion permission to visit the back paddock.**

\* Our licensed hours are 7am-6pm. Please do not drop children off before 7am and if a child is collected after 6pm, a \$20 late fee will be applied to your account to cover staff overtime.

\* We are a nut free centre, so please ensure that no products with nuts are brought into the centre.

\* Regarding our health policy, we ask if your child is sick, please refrain from bringing them to the service, this helps to minimise cross infection to other children and staff.

\* If your child has been prescribed a medication such as antibiotics, we ask that your child stay at home until they have been taking the medication for at least 24 hours. This gives the child time to rest, somewhat recover and should they have a reaction to the medication, it is far better that the child is at home than here at the service.

\* The protocol for dealing with any concerns or problems you may have is to initially speak to your child's teacher, as they are with your child the most. Alternatively, you can also make an appointment to see Kasie, email or telephone her. You can also fill out a complaint form which is located on the sign in desk and place it in the fees box.

\*This newsletter is distributed four

times a year via email and through our website. However, each room will provide you with room specific newsletters more regularly.

\* In keeping with our sun safe policies, please ensure children do not wear thongs or singlets to the centre.

\* Please remember that all children need to bring a wide brimmed or bucket hat each day. Caps do not protect the neck, so please no caps.

\* Remember to apply sunscreen to your child in the morning and we will reapply it in the afternoon (there is sunscreen available in the foyer).

\* Children need to bring with them a set of cot sheets for rest time (even if they do not sleep, they will need the sheets for rest).

\* If your child has an asthma plan & keeps their ventolin & spacer here at the service, the ventolin & spacer must be stored in a clear labelled container (e.g. lunch box style). This will minimise the time it takes for us

to sort through children's ventolin & spacers to find the one we need. Furthermore, it ensures a more hygienic practice.

\* If your child is absent for any reason, please telephone us and let us know.

\* Breakfast is served between 7:30-8:00am only.

\* Please ensure that your fees are always up to date. Weekly fees need to be paid on the first day of your child's attendance for the week. If you would prefer to pay fortnightly or in bulk payments, they need to be paid in advance - not in arrears. When fees are in arrears it significantly affects our cash flow and our ability to pay wages and expenses. Thank you for your cooperation.

### SCHOOL PHOTOS

This year school photos will take place on Wednesday, Thursday and Friday 27-29 March.

### RAISING THE DAM WALL

In our last newsletter in November we wrote about the proposed rising of Warragamba wall and the impact that would make on the last remaining Aboriginal heritage. On 12th March there is a special screening of "Raising the Dam Wall" at Warragamba Workers Club. If you're keen to know the real story, you will need to RSVP at the website below [https://www.giveadam.org.au/give\\_a\\_dam\\_warragamba\\_screening](https://www.giveadam.org.au/give_a_dam_warragamba_screening)

### THANK YOU!

Thank you so much again to the Maksimovic family for their donation of art supplies and games, to the Clifford family for the donation of toys, to Senga and the Ingham family for art materials and to the Foad family for the donation of baby equipment and play tents. We really appreciate it! We hope we haven't forgotten anyone!

# supine is safest

There is overwhelming evidence that the supine position is safest for babies

### Supine (back) position

- Babies protect their airway by swallowing<sup>1,2</sup>
- In the supine position, swallowing and arousal reflexes allow the baby to clear and protect their own airway<sup>1,2</sup>
- When a baby is on their back, the upper respiratory airways are positioned above the oesophagus. Regurgitated milk (orange lines) is easily swallowed and aspiration of fluid into the airways is less likely to occur<sup>1,2</sup>
- The risk of oesophageal reflux, aspiration and choking is reduced when babies are placed on their backs to sleep<sup>3,4</sup>

### Supine (back) position

### Side position

- The side position is less safe than the supine position and is not recommended<sup>5,6</sup>
- The risk of sudden infant death for side-sleeping babies is between 2 to 4 times higher than for babies who sleep on their back<sup>6,5</sup>
- Babies who are placed on their side have a greater possibility of rolling prone during sleep<sup>5,8</sup>
- Rolls and devices intended to keep babies on their side do not stop infants rolling prone and are not recommended<sup>5,8</sup>

### Prone (tummy) position

- The risk of sudden infant death for prone sleeping babies is approx. 7 times higher than for babies who sleep on their back<sup>8</sup>
- Prone positioning during sleep reduces a baby's physiological and autonomic control mechanisms<sup>4,5</sup>
- Even healthy babies are less likely to arouse during regurgitation or positing of milk and will swallow less frequently when placed prone which significantly reduces airway protective mechanisms<sup>1,2</sup>
- When a baby is placed prone, the oesophagus is anatomically higher than the airway and in very close proximity to the laryngeal opening, increasing the risk of aspiration<sup>1,2</sup>
- Viral infections and certain drugs, particularly sedatives, can compound the effect of being prone<sup>1,2,5,8</sup>

### Back is best for sleep

There is clear anatomical, physiological, and epidemiological evidence to support placing an infant on their back to sleep, from birth.<sup>1,4</sup>

The supine position provides airway protection. Airway protection is significantly reduced in the prone position.

Healthy infants can and do protect their airways when placed supine. Babies are not at increased risk of choking, provided that swallowing and arousal are intact (normal).<sup>1,2</sup>

#### Supine (on back)

In the SUPINE position, regurgitated milk is less likely to enter the Trachea.

#### Prone (on tummy)

In the PRONE position, regurgitated milk can more easily enter the Trachea.



References: (1) Jeffrey H, Megawand A, Page M. (1999) Why the prone position is a risk factor for sudden infant death syndrome. *Pediatrics* 104(2): 283-289. (2) Page M, Jeffrey H. (1998) Airway protection in sleeping infants in response to pharyngeal fluid stimulation in the supine position. *Pediatric Research* 44(5): 691-698. (3) Byard RW, Beal SM. (2000) Fatal gastric aspiration and sleeping position in early childhood. *Journal of Paediatrics and Child Health* 36(4): 403-405. (4) Byard RW, Kossak N. (2003) Sudden infant death syndrome: overview and update. *Pediatric and Developmental Pathology* 6(2): 112-127. (5) Mitchell EA. (2007) Recommendations for sudden infant death syndrome prevention: a discussion document. *Archives of Disease in Childhood* 92(2): 155-159. (6) Oyen N, Markstedt T, Sjaavnen R, Irgens LM, Helweg-0, Larsen K, Alm B, Norvénius G, Wiennergrén G. (1997) Combined effects of sleeping position and prenatal risk factors in sudden infant death syndrome: the Nordic epidemiological SIDS study. *Pediatrics* 100(4): 613-621. (7) Queensland Health. (2008) *Safe infant care to reduce the risk of Sudden Unexpected Deaths in Infancy: Policy statement and Guidelines*. Brisbane: Queensland Health. ISBN: 9781951447295. Available at [www.health.qld.gov.au/piv/documents/crhdhsth20697.pdf](http://www.health.qld.gov.au/piv/documents/crhdhsth20697.pdf). (8) Gilbert F, Santani G, Harden M, Sen S. (2005) Infant sleeping position and the sudden infant death syndrome: systematic review of observational studies and historical review of recommendations from 1940 to 2002. *International Journal of Epidemiology* 34 (4): 874-87.

Poster developer: Professor Jeanine Young ©2009



# SAVE THE DATE TO VACCINATE



On-time vaccination  
is your child's best  
protection against  
serious diseases.



Download the free  
Save The Date  
To Vaccinate app



It's in your hands  
[immunisation.health.nsw.gov.au](https://immunisation.health.nsw.gov.au)

# Joey's Newsletter

Welcome to our first newsletter of 2019! Welcome to all our new Joey friends and their families.

This year we have introduced something new and exciting! We will be looking at a learning topic each month. January was about 'Occupations'. Thank you to the families who shared their occupations with us. From each parents' occupations we were able to create experiences related to these. Some of these included a doctors set up, car paintings, and reading emergency vehicle story books. The Joey's enjoyed doing things related to their families.

In January we also concentrated on movement and coordination skills. This was about using pencils and textas with their hands, balancing themselves across the balance beam, climbing over the A-Frames and completing knob puzzles. These are all experiences that encouraged the Joey's to use their hands and fingers, their legs and feet as well as their coordination to complete experiences.

As we have headed into February the Joey's have been learning about Road Safety and for our structured learning topic we have been working on thinking, talking and understanding skills. Each learning topic and structured learning topic are displayed with many photos on our display boards too! We would love for you to have a look and see what your child has been doing.

Additionally, we would love all parents to be our Facebook friends in our closed group, **Joey's Scc** is our name. We post our program each day as well as our daily photos on there so we can keep you up to date with what your children are up too! We also post friendly reminders about upcoming events at the centre including incursions, water play days etc.

A big thank you to those families who have returned their parent surveys. If you need another copy of the parent survey please see the Joeys staff and we can print a new one. These surveys are a way to encourage your partnership between us as educators and you the families within our programming and service. We greatly appreciate these surveys. It also informs you of your child's number in which we refer to monthly on the Joeys program which is displayed on our wall as well as on Facebook, so as you can be kept up to date as much as possible with what your child is doing throughout their days here with us.

A friendly reminder that each Joey needs to bring a piece of fruit to share with their friends for afternoon tea. They have been really enjoying oranges, pears, apples and bananas recently.

Happy Birthday to all the Joey's who had birthday's in January and February. We loved sharing their special day with them.

Miss Hannah, Miss Ashtonn, Mr Tim, Miss Michelle, Miss Simone & Miss Tarleigha.





# We are SunSmart - a note for families



Too much UV can cause sunburn, skin and eye damage and skin cancer.

Overexposure to UV during childhood and adolescence is a major factor for future skin cancer risk.

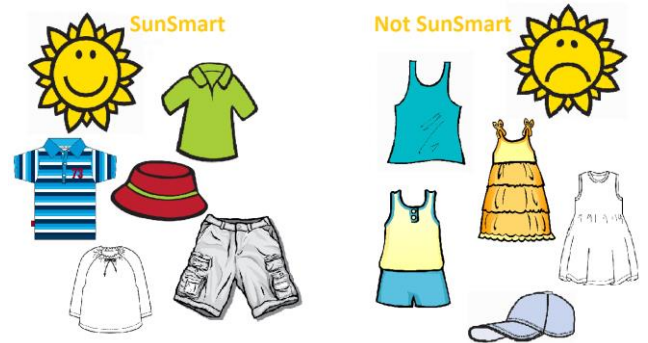
You can't see or feel the sun's UV so don't be fooled. Whatever the weather, if the UV levels are three or more, it's important to **Slip, Slop, Slap, Seek and Slide!**

Our service aims to protect children and staff from too much UV to help minimise future skin cancer risk. We are a registered member of the Cancer Council Victoria's SunSmart Program. Please help support our SunSmart membership by ensuring your child follows the SunSmart measures encouraged by educators.

**During the daily local sun protection times (issued whenever UV levels are three and above), use these 5 SunSmart steps – even if it's cool and cloudy.**

1. **Slip on a shirt** - dress your child in clothing that covers as much skin as possible (e.g. elbow length tops with a higher neckline or collar and longer style shorts or skirts). Densely woven fabrics are best.
2. **Slop on SPF 30 (or higher) broad-spectrum, water-resistant sunscreen** – apply a generous amount of sunscreen at the start of the day and provide permission for sunscreen to be reapplied to your child before they go outdoors. This should be applied every two hours. From 3 years of age, please help your child apply their own sunscreen so they can start to learn independent skills.
3. **Slap on a hat** – one that protects the face, neck and ears such as a broad brimmed, legionnaire or bucket style hat. Peak caps do not offer enough protection and are not recommended by SunSmart. Please help your child remember to bring and wear their approved sun hat.

4. **Seek shade** – choose shady spots for play whenever possible.
5. **Slide on some sunglasses** - if practical and approved by the service. Make sure they are labelled AS 1067 and cover as much of the eye area as possible.



## Sun protection times

Don't just wait for hot and sunny days to use sun protection. Check the sun protection times each day so your family can be protected when they need to be.

Daily local sun protection times and weather details are available on the free SunSmart app or widget, in the weather section of the newspaper and on the SunSmart website at [sunsmart.com.au](http://sunsmart.com.au). Sun protection times can also be found at [the Bureau of Meteorology website](http://the Bureau of Meteorology website) and live UV levels are available from [ARPANSA](http://ARPANSA).



Further information contact SunSmart  
P: 03 9514 6419  
E: [sunsmart@cancervic.org.au](mailto:sunsmart@cancervic.org.au)  
W: [sunsmart.com.au](http://sunsmart.com.au)

# Kangaroo's News

Dear Parents,

Everyone has settled back into the daily centre routine really well. The new Kangaroos have enjoyed being in the big room and learning new skills such as self-serving morning tea, having room duties and the biggest highlight, bringing in their own lunch boxes!

## Parent Surveys

The information from your survey will help the staff to get to know your child better and plan activities according to their likes and needs. If you have not yet filled out and returned your parent survey please do so as soon as possible. If you require a new survey please let us know.

**Parent input/weekend forms** can be found next to the program (and in this newsletter),

we would appreciate you filling them in regularly or private messaging photos/videos to us. This is a great way for us to be aware of your child/family's interests and to include them into our weekly program.

## Facebook

Our secret Facebook page is up and running, you can find us at 'Kangaroos Scc', then we will invite you to join the secret group 'Kangaroos 2019'. Once you have accepted our invite you will be able to see our posts. As well as daily photos and programs, we will often post reminders, upcoming events and useful information about what we are doing at the centre.

## Family Photo

To help the children develop their sense of belonging and identity we would really like a family photo of each child to display in our room. These can be private messaged to us via our Kangaroos Facebook page.

## Structured Learning

Each month in the Kangaroos room we will be focusing on a different country or discussion topic, a list of our 'learning plan' is displayed in the locker room near the program. Please take the time to see what our upcoming topics are and feel free to add any input to further assist us in teaching your children.

This month we have been focussing on an 'all about me' topic, where we have been spending time with the children, getting to know their likes, dislikes and hobbies. We have been drawing self portraits, making face puzzles and drawing pictures of our families. As February begins we have been working on developmental check lists which we will revisit in June to record your child's progress and development. Some activities we have been engaging in are counting, tracking and tracing, ball skills, threading and story recall. These check lists will be placed in your child's portfolios in June, but if you have any questions about your child, please do not hesitate to ask your child's focus educator.

## What to bring each day:

- Wide brimmed hat
- Change of summer and winter clothes
- A fitted and flat cot sheet for rest time
- A drink bottle with water only
- A lunch box for afternoon tea that contains a piece of fruit and healthy snack such as Saos, rice cakes, yoghurt, cheese and crackers. Please no lollies, chips or chocolate and no nut products as the centre is a nut free zone.
- Apply sunscreen before arriving at the centre (sunscreen is most effective if applied 20mins before sun exposure). We will reapply sunscreen in the afternoon.
- Please ensure that everything your child brings to the centre is clearly labelled with their name.

Many thanks, Miss Amy, Miss Rebecca and Miss Joanne





# News from the Kitchen

Welcome to our SCCC families for 2019. Another year has started and sadly, summer is fast coming to an end. All of summers beautiful fruits and vegetables will slowly make way for a new winter menu and seasonal produce.

Mary, our local produce supplier will start bringing in her amazing buckets of vegetables for me to create winter warmers and cold and flu busters for your children. Any family favourites you know your children love for winter would be a great new addition to the menu.

If your child has an allergy, I'm happy to work around that and modify a recipe to make it allergy friendly.

For our fussy eaters, the educators always offer positive and encouraging words to entice and excite an interest in the food that is shared at the lunch table. You'll be surprised what your children eat at school with their peers, as opposed to at home with their family. I have curries, chillies and other flavoursome favourites that have been on the menu rotation for quite a while. Anything you want to suggest or see added would be fantastic. So pop in and see me.

For the Joeys, just a reminder to bring in a fresh piece of fruit everyday you are here. I whip up a fabulous fruit salad with your contribution for the children to share at afternoon tea.

For the Kangaroos, a piece of fruit included in your lunch-box is to be eaten first before any other food choices are eaten is required. Please no processed snacks.

All children are to bring in a drink bottle with WATER only each day. We only have water and milk at the service and would like to promote swig swish and swallow to clean teeth after eating.

Thank you  
Miss Lynda.

Did you know? <b>HEALTHY EATING</b>	Did you know? <b>HEALTHY EATING</b>	Did you know? <b>HEALTHY EATING</b>	Did you know? <b>HEALTHY EATING</b>	Did you know? <b>HEALTHY EATING</b>
<p>A child aged 2-3 years requires <b>1 serve</b> of meat or meat alternatives a day and a child aged 4-8 years requires <b>1½ serves</b> a day.</p> <p>One serve of meat looks like: 65 grams (palm sized) cooked lean meat (beef/lamb/pork/kangaroo/veal) 80 grams (hand sized) cooked lean chicken/turkey 1 small can of fish 2 eggs 170g tofu 1 cup legumes/beans</p>	<p>A child aged 2-3 years requires <b>2½ serves</b> of vegetables a day and a child aged 4-8 years requires <b>4½ serves</b> a day.</p> <p>One serve of vegetables looks like: 1 cup salad vegetables ½ cup cooked vegetables ½ medium potato or sweet potato 1 medium tomato ½ cup peas, cooked lentils, canned beans</p>	<p>A child aged 2-8 years requires <b>1½-2 serves</b> of dairy a day.</p> <p>One serve of dairy looks like: 1 cup (250ml) milk 2 slices (40 grams) of cheese 200g yoghurt 120g ricotta cheese 1 cup (250ml) calcium fortified soy milk</p> <p>Choose reduced fat products for children over 2 years.</p>	<p>A child aged 2-8 years requires <b>4 serves</b> of grain foods a day.</p> <p>One serve of grain looks like: ½ cup cooked pasta 1 slice of bread ½ cup cooked rice ¾ cup wheat cereal flakes 1 crumpet/English muffin</p> <p>Try and opt for wholegrain too as it helps children feel fuller for longer!</p>	<p>A child aged 2-3 years requires <b>1 serve</b> of fruit a day and a child aged 4-8 years requires <b>1½ serves</b> a day.</p> <p>One serve of fruit looks like: 1 medium apple/banana/orange 2 small apricots/plums/kiwi fruit 1 cup of diced fruit 30 grams dried fruit (eg 2 dried apricots)</p>
				

# Get active each day



Being active and eating nutritious food helps you to keep fit, healthy and feeling full of energy.

Everyone, not just kids and teens, should be active every day in as many ways as possible.

Not being active can lead to an 'energy imbalance'. That's when the energy we get from the food we eat is more than what our bodies use up. This unused energy can cause excess weight gain and health problems.

Being active also helps you learn and develop important skills such as running, throwing and catching, which are a part of many games and sports.

Trying something new can be a challenge - just remember that it can take time to get good at a new game or sport. Taking part with friends or family and having fun is what counts!

## Moderate activities

Walking fast  
Bike riding  
Skateboarding  
Dancing  
Playing on park equipment

## Vigorous activities

Organised sports (football, netball, soccer)  
Running or chasing friends  
Swimming laps  
Skipping  
Nippers

## How much activity is needed each day?

Kids aged between 5 and 12 years need at least 60 minutes (1 hour) of moderate and vigorous activity every day. It's even better to be active for a couple of hours but you don't have to do it all at once – doing different activities throughout the day all adds up.

## What does moderate and vigorous activity mean?

Moderate activities make your heart beat faster and your breathing become quicker than when you're sitting down. Vigorous activity really makes you huff and puff. Over to the right are some examples of each type of activity.

## 10 ways physical activity can help you

- ★ Your body grows properly, giving you strong bones, muscles, lungs and heart
- ★ Improves your flexibility, balance and coordination so you can move well
- ★ Improves your running, throwing, jumping, catching and kicking skills, which are part of many sports
- ★ Makes you feel happy and full of energy
- ★ Keeps you staying healthy and maintaining a healthy weight
- ★ Helps you feel relaxed and confident
- ★ Helps you sleep well at night
- ★ Improves your posture
- ★ Keeps your mind alert
- ★ Allows you to have fun with friends and make new ones.

# SCHOOLIES NEWS

Welcome back to 2019 everyone. Didn't the school holidays fly by? I'm happy to welcome our newest kindy additions to our B and A school care service. I have six new little ones this year which I'm absolutely loving.

As you would have received a small note in your front pockets in the foyer regarding games for the bus, I've had a couple of parents get back to me with some ideas which is much appreciated. If you haven't yet seen me or would like to give some feedback, I'm always in the kitchen or just pop something in the suggestions box next to the staff room door if I miss you.

For our Holy Family school children, I'll endeavour to leave here by 8.20 in the morning to ensure they are at school for the morning bell. Warragamba families, if possible it would be appreciated if your children could be here by 8.20 to help with the bus routine. If you're running late, a quick call would help me organise any changes that need to be made.

The children are showing a keen interest in LEGO across the board. If you plan on throwing out any, or know of anyone throwing some out, we would love to take it off your hands. Any small toys the children want to bring to school would be best put in a zip-lock bag and left in their school bags to ensure they aren't left at childcare before or after school. There's nothing worse than a lost toy I can't find for your children.

So again, welcome to another school year. I look forward to all the fabulously wonderful stories your children share with me on the school bus and all the fun times we have together.



Creating



The Wheels on the Bus!



# NEW PATIENT FORM

## ELIGIBILITY

YES	
NO	

office use only

School/Childcare name: \_\_\_\_\_

Grade: \_\_\_\_\_

### Section 1 - Patient Information

First Name: ONLY LEGAL NAME \_\_\_\_\_

Surname: ONLY LEGAL NAME \_\_\_\_\_

Date of Birth: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 \_\_\_\_\_

Contact Number: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: 

--	--	--	--

Email: \_\_\_\_\_

### Section 2 - Dental History

When was the last visit? \_\_\_\_\_

Purpose of the visit: \_\_\_\_\_

### Section 3 - Medical History

Y	N
---	---

If 'YES' please specify below

Known Allergies

--	--

\_\_\_\_\_

Current medication/s

--	--

\_\_\_\_\_

Current/past medical condition/s

--	--

\_\_\_\_\_

### Section 4

**medicare**

Medicare Number 

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IRN - Individual Reference Number 

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Expiry Date 

M	M	Y	Y	Y	Y
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### Section 5

**must tick below (please read the below carefully)**

Check Medicare (CDBS) eligibility for dental treatment - **IF ELIGIBLE**, provide the following.

- Intra and extra oral examination
- Scale, clean and polish (removal of stains and debris)
- Fissure sealants
- Fluoride

IF **NOT ELIGIBLE** - provide **FREE** comprehensive oral examination

IF **NOT ELIGIBLE OPTIONAL PAYMENT** - Provide the following treatment for **ONLY \$59**  
**[claimable through health Insurance]**

- Scale, clean and polish
- Removal of deposits, debris and stains
- Fluoride





**CHILD DENTAL BENEFITS SCHEDULE  
BULK BILLING PATIENT CONSENT FORM**

**I, the patient / legal guardian, certify that I have been informed:**

- of the treatment that has been or will be provided from this date under the Child Dental Benefits Schedule;
- of the likely cost of this treatment; and
- that I will be bulk billed for services under the Child Dental Benefits Schedule and I will not pay out-of-pocket costs for these services, subject to sufficient funds being available under the benefit cap.

*I understand that I/the patient will only have access to dental benefits of up to the benefit cap.*

*I understand that benefits for some services may have restrictions and that Child Dental Benefits Schedule covers a limited range of services. I understand I will need to personally meet the costs of any services not covered by the Child Dental Benefits Schedule.*

*I understand that the cost of services will reduce the available benefit cap and that I will need to personally meet the costs of any additional services once benefits are exhausted.*

**Patient's Medicare Number**

**Patient/legal guardian signature**

**Patient's full name**

**Full name of person signing**

**Date**

**This form is valid up to 31 December of the calendar year for which it is signed.**

**VOID**



# IMPORTANT INFORMATION UPDATE FORM

**CHILD'S FULL NAME:** ..... **SEX:** Male / Female  
**DATE OF BIRTH:** .....  
**ABORIGINAL OR TORRES STRAIT ISLANDER DESCENT:** YES / NO  
**ADDRESS:** .....

## PARENTS

**FATHERS FULL NAME:** ..... **OCCUPATION:** .....  
**HOME ADDRESS:** ..... **PHONE:** .....  
**NAME & ADDRESS OF WORK:** .....  
**WORK PHONE:** ..... **MOBILE:** .....

**MOTHER'S FULL NAME:** ..... **OCCUPATION:** .....  
**HOME ADDRESS:** ..... **PHONE:** .....  
**NAME & ADDRESS OF WORK:** .....  
**WORK PHONE:** ..... **MOBILE:** .....

## FAMILY

**NAMES OF SIBLINGS AND AGES:** .....  
.....  
**NAMES OF PEOPLE IN THE HOME AND RELATIONSHIP TO THE CHILD:** .....  
.....

## EMERGENCY CONTACTS *(people authorised to pick up your child from the centre)*

**FULL NAME:** ..... **FULL NAME:** .....  
**ADDRESS:** ..... **ADDRESS:** .....  
**TELEPHONE:** ..... **TELEPHONE:** .....

## MEDICAL CONTACTS

**CHILD'S DOCTOR:** ..... **TELEPHONE:** .....  
**ADDRESS:** .....

## PHOTOGRAPHS

I \_\_\_\_\_  give OR  do not give permission for the centre to use photographs of my child \_\_\_\_\_ in the centre website, newsletters, newspaper articles or promotional material (e.g. advertising flyer).

Signed \_\_\_\_\_

## EXCURSION PERMISSION TO VISIT PADDOCK AT REAR OF CENTRE

I \_\_\_\_\_  give OR  do not give permission for my child \_\_\_\_\_ to leave the licensed premises to visit the vegetable garden, worm farm, chickens or go for a picnic at the parcel of centre owned land beside the building.

Signed: \_\_\_\_\_

## MEDICAL CONDITIONS UPDATE

If your child has asthma or anaphylaxis, we MUST have a health management plan on the premises signed by a Doctor with their prescribed medication.

Name:

DOB:

Age:

Medical Condition:

Medication required:

First Aid Required:



# CHILDREN'S HEALTH AND SAFETY

Please make yourself aware of our policies which are located in the foyer in a folder.

No one is happy when their child catches a bacterial or viral infection from child care, so it is in everyone's best interest to keep sick and contagious children at home and follow the following basic precautions.

The centre does not have separate facilities for the care of sick children. Parents are asked not to send sick children to the centre. More importantly, staff/child ratios prevent staff from providing the degree of individual care and comfort that an unwell child deserves. Staff will ask you to collect your child if it is felt that they are 'physically unwell'. This includes displaying symptoms of fever, mucous discharge from nose or ears, rashes and/or general lethargy.

## **Please Do Not Send Your Child If He/She Has:**

**Diarrhoea** - A child who has an acute period of watery stools should be kept home and not return to the centre until he/she has been free of diarrhoea for 24 hours. If, however your child has an allergy or condition which regularly causes diarrhoea, please inform staff at the time of enrolment.

**Vomiting** - A child who is vomiting should be kept home until vomiting has stopped for 24 hours.

Micro-organisms that cause vomiting and diarrhoea are highly contagious and will spread quickly throughout the centre.

**Fever** - A child with a fever of more than 38°C should be kept home as this indicates that the child is unwell. It is advised that the child should have a normal temperature for 24 hours and his/her activity level and appetite have returned to normal before returning to the Centre.

**Unexplained Rash** - A child with unexplained rash needs to be seen by a Doctor to diagnose the cause of the rash. If the rash is not contagious the child will be allowed to return to the centre on presentation of a medical certificate.

**Chicken Pox** - A child with chicken pox should be excluded until fully recovered or for at least five days after the eruption first appears - a clearance certificate from the Doctor is required before recommencement to the centre.

**Conjunctivitis** - A child should be excluded until discharge from eyes has ceased, usually 48 hours after commencing prescribed eye drops (please note that over the counter drops are not as effective in treating the symptoms of conjunctivitis).

**Hand, Foot and Mouth Disease** - A child should be excluded until all blisters have dried - a clearance certificate from the Doctor is required before recommencement to the centre.

**Head Lice** - If a child has live head lice present, they are to be excluded from the Centre until treatment has commenced and all live lice and eggs have been removed (the most important part of the treatment is the removal of eggs with a comb; -treatment alone does not remove the lice and eggs).

*Source: NHMRC 'Staying Healthy in Childcare' - Dept of Health and Family Services.*

## **ASTHMA, ANAPHYLAXIS & DIABETES**

If a child suffers from asthma, anaphylaxis or diabetes, upon enrolment, parents must supply the Centre with a '**Medical Conditions Action Plan**' from the child's doctor. Details required must include symptoms and signs, triggers, name of medication, how to administer medication and an emergency action plan.

Any medications such as pumps, inhalers, insulin or epipens etc., should be clearly labelled with the child's name.

This medication can either be kept at the Centre or brought in each day your child attends and handed to staff.

## **24 HOUR EXCLUSION POLICY**

Where medication has been prescribed to a child, the child must not attend the centre for 24 hours.

This is a precaution against a reaction to the medicine and to minimise the spread of infection.

## **IMMUNISATIONS**

Your child's immunisation must be up to date, and your child's immunisation book will need to be shown to Administration Staff at the time of enrolment and when new information has been added. Immunisations must be kept up to date while your child is at the Centre.

## **MEDICATIONS**

To protect your child from incorrect administration of medications, strict policies have been developed.

Children may only be given medications at the centre if:

1. The medication was prescribed by a medical practitioner and is in the original container labelled by the pharmacy, with the child's name, the dosage and within the use-by date.
2. Parents complete and sign the Medication Form authorising staff to administer the medication. Medications will not be given if parents fail to complete the medication form.
3. Over the counter type medications (e.g. Dimetapp) will only be given when a medical practitioner prescribed it and it is in the original container labelled by the pharmacy, with the child's name, the dosage and within the use-by date.
4. Medications must be stored in the locked area within the kitchen. Please see a staff member to assist you if need be. **NO MEDICATIONS ARE TO BE LEFT IN YOUR CHILD'S BAG.**



# Every child has the right to feel safe



**#bechildwise**