



BPK Mandatory Vaccination Policy v1.01

Policy Scope: Mandatory				Quality Areas 2 and 7		
Version	ELAA Template	Authored by	Reviewed by	Approved by	Review Date	Change(s)
1.00	1.0 (June 2022)	BPK Policy officer	Committee of management, staff consultation undertaken - all staff contacted and given opportunity to respond	GD		New policy
1.01	1.0	BPK Policy officer		GD	Sep 22	Updates to ensure volunteers working with kids or in children's space are vaccinated

1. PURPOSE

This policy provides a clear set of guidelines and procedures for Batman Park Kindergarten to:

- To continue to provide a safe work environment for staff and children, and contribute to the safety of the community we work in. In our workplace, our workers interact and have close contact with people who are adversely affected by the health impacts of COVID-19 (specifically children under five years of age, many of whom are not eligible to be vaccinated against COVID-19).¹
- Protect members of staff, volunteers, children, and the community against severe disease (COVID-19). Vaccines have been proven to protect against severe disease from COVID-19 both directly (by direct protection) and indirectly (by prevention of transmission). While protection against infection wanes after the first booster dose, protection against severe disease (rather than all infection) is relatively well maintained, especially in healthy populations.²
- Comply with consultation obligations under *Victorian Occupational Health and Safety* legislation and any other relevant industrial instrument to minimise the risk of COVID-19 in the workplace so far as is reasonably practicable.

2. POLICY STATEMENT

VALUES

Batman Park Kindergarten (employer/approved provider):

This policy sets out Batman Park Kindergarten's position on COVID-19 vaccinations. The purpose of this policy is to manage and prevent the spread of COVID-19 in our workplace and our community. This policy also provides clear communication to our workers and volunteers about being vaccinated against COVID-19 in the workplace. This policy has been developed to follow the principles outlined in the *Victorian Government's Pandemic Management Framework*, specifically the *Pandemic Workplace Order*.

This policy should be read in conjunction with *QA2 – Dealing with Infectious Diseases Policy* and *QA3 – Occupational Health and Safety Policy*.

SCOPE

This policy applies to people working directly with children or in children's spaces, including the approved provider, persons with management or control, the nominated supervisor, persons in day-to-day charge, early childhood teachers, educators, staff (including casual relief teachers and agency staff), students, volunteers, Committee of Management members, parents/guardians acting as volunteers, workers and others attending the programs, activities and services of Batman Park Kindergarten, including during offsite excursions and activities.

Parents or guardians who are engaging in activities that do not involve working in a volunteer capacity at the service premises are not required to comply with this policy, and at no time will children's access be impacted. For example, dropping off or collecting children, attending open days, orientation, and special events. A definition of a 'worker' under this policy is specified under *Definitions*.

3. RESPONSIBILITIES

EMPLOYEES OF THE APPROVED PROVIDER WILL BE RESPONSIBLE FOR:

¹ Australian Technical Advisory Group on Immunisation (ATAGI). 25 March 2022. Response to ATAGI advice about vaccinating 5 to 11-year-olds against COVID-19. Accessed at:

<https://www.health.gov.au/news/atagi-recommendations-on-pfizer-covid-19-vaccine-use-in-children-aged-5-to-11-years>

² Australian Technical Advisory Group on Immunisation (ATAGI). 25 March 2022. ATAGI statement on recommendations on a winter booster dose of COVID-19 vaccine. Accessed at:

<https://www.health.gov.au/news/atagi-statement-on-recommendations-on-a-winter-booster-dose-of-covid-19-vaccine>

- Familiarising themselves with this policy and participating in a consultation meeting/s with their employer (with their nominated representative, if required).
- Remaining up-to-date with their COVID-19 vaccinations (as per ATAGI advice). *Refer to Definitions.*
- Providing a copy of their COVID-19 vaccination information record or medical exemption to the employer;
- Co-operating with any measures that the employer may put in place to limit the spread of COVID-19; and
- Complying with the ongoing hygiene protocols in place and any other directions by management to reduce the spread of COVID-19.

VOLUNTEERS, CONTRACTORS AND STUDENTS WORKING DIRECTLY WITH CHILDREN OR IN CHILDREN'S SPACES WILL BE RESPONSIBLE FOR:

- Providing a copy of their COVID-19 vaccination information record before attending the premises for the first time.
- Providing any updates to their COVID-19 vaccination status to the approved provider as soon as practicable.

THE APPROVED PROVIDER WILL BE RESPONSIBLE FOR:

- Providing copies of this policy to all new and existing workers;
- Providing workers with further information about the COVID-19 vaccine requirements when requested;
- Ensuring employees comply with this policy as a lawful and reasonable direction;
- Maintaining records of workers who have received or declined the COVID-19 vaccination;
- Receiving acceptable evidence of workers having received the COVID-19 vaccine;
- Assessing requests for medical exemptions and/or other exemptions to this policy in a procedurally fair and confidential manner, with consideration to federal and state anti-discrimination legislation and the *Fair Work Act 2009 (Cth)*.
- Providing new workers with information about the COVID-19 vaccine before commencing employment and where to obtain the vaccine;
- Notifying all visitors, including parent volunteers of the COVID-19 vaccination policy, and verifying vaccination record details;
- Developing and recommending strategies to enhance and improve COVID-19 vaccination rates for the service, including revisions to this policy.

KEY RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teachers, educators, and all other staff	Parents/guardians	Contractors, volunteers, and students
Notify new and existing staff of mandatory vaccination requirements					
Provide copies of the COVID-19 vaccine policy to all new existing workers (including parent volunteers, and students on placement).	√	√			
Provide new employees with a copy of the COVID-19 vaccine policy prior to the commencement of employment.	√	√			
Notify visitors of mandatory vaccination requirements					
Notify all visitors, and parent volunteers of the COVID-19 vaccine policy and verifying vaccination record details. <i>Tradespeople are not required to comply with this policy.</i> <i>This applies to all people working directly with children.</i>	√	√	√		
Receive vaccination records and maintaining a vaccination database					
Receive acceptable evidence of workers COVID-19 vaccination information or medical exemption.	√	√			
Maintain records of workers who have received or declined the COVID-19 vaccination in a secure location on premises.	√	√			
Notify workers who are due for a booster COVID-19 vaccination according to Government guidelines.	√	√			
Provide an up-to-date vaccination record					

Provide a copy of their COVID-19 vaccination information record before attending the premises for the first time.	√	√	√		√
Review this policy					
Reviewing this policy as needed.	√	√	√	√	

4. DUTY TO CONSULT – IMPORTANT

Consultation under the *Occupational Health and Safety Act 2004 (Vic)* is an imperative step in implementing this COVID-19 vaccination policy for an early childhood education and care service. The obligation of the approved provider is to consult with its employees to ensure the following before making this direction and implementing this policy. During consultation employees must be:

- provided with information relating to the reasons, rationale and data supporting the proposal to introduce this policy, and provided with a copy of the risk assessment or informed of the analysis that determined that assessment;
- employees are provided with a reasonable opportunity to express their views, or contribute ideas or suggestions in relation to the decision-making process or the risk assessment or rationale that underpinned the decision to introduce this policy; and
- Health and Safety Representatives are involved as required by OH&S legislation and, where practicable, mechanisms such as health and safety committees are used, including nominated supervisor (Centre Director) and Committee of Management Vice President as support person.

Note: As volunteers are not workers or independent contractors, the duty to consult does not apply. The Employer must ensure, however, that so far as reasonably practicable volunteers are not exposed to risks to their health and safety. Consultation with volunteers may therefore be valuable in assisting the Employer to meet this duty.

WORKERS UNABLE TO RECEIVE THE COVID-19 VACCINATION

The direction for workers to be vaccinated will be implemented consistently with our obligations under applicable health and safety and anti-discrimination laws. For some workers, there may be medical reasons why they cannot receive the COVID-19 vaccination, including because of a disability.

A worker who has not been able to receive the COVID-19 vaccination (and does not have an acceptable medical exemption certificate) may not be able to undertake duties where a lawful and reasonable direction to be vaccinated is in place in accordance with this policy.

UNVACCINATED WORKERS

REQUIREMENTS FOR CURRENT EMPLOYEES

It is a condition, and inherent requirement, of an employee's employment that they are, and remain, vaccinated against COVID-19 unless a valid medical exemption applies. A person is a medically exempt person if they have met the requirements of a medical exemption (*refer to Definitions*) upon advice from their treating medical practitioner (*refer to medically exempt persons in Definitions*). For the purposes of this policy, vaccination against COVID-19 means a full primary course of a COVID-19 vaccine and a COVID-19 booster shot.

Employees who continue to remain unvaccinated (including a Booster vaccination) without a valid medical exemption will be asked to continue their specified period of leave without pay as determined by the employer. Employees who refuse to become fully vaccinated against COVID-19 (including any required booster vaccinations), may have their employment terminated.

REQUIREMENTS FOR NEW EMPLOYEES

As a condition of accepting employment with the Employer, all new employees will be required to provide acceptable evidence that they are vaccinated against COVID-19 unless a valid medical exemption applies.

REQUIREMENTS FOR VOLUNTEERS

Volunteers working directly with children must be fully vaccinated.

For the purposes of this policy, vaccination against COVID-19 means a full primary course of a COVID-19 vaccine and a COVID-19 booster shot. Volunteers must provide either proof of vaccination or acceptable medical exemption certificate, as outlined in this policy. Unvaccinated volunteers without a valid medical exemption will not be allowed to work directly with children. (*refer to Definitions*).

Volunteers who do **not** need to work directly with children and will not be entering the children's space do not need to be vaccinated.

5. VACCINATION STATUS RECORDS

Workers and volunteers who work directly with children or in children's spaces must provide either proof of vaccination or acceptable medical exemption certificate, as outlined in this policy.

Workers and volunteers have the right to privacy with regard to their vaccination status. Volunteer vaccination records will be sighted before entry to the premises and no permanent record will be kept. Records of staff vaccination status will be kept, and the employer will comply with privacy obligations. In particular the employer will not disclose any information about an individual's personal, vaccination or health status, except:

- where required for operational or safety reasons
- where required at law or in accordance with a public health order
- on a need to know basis (such as, to designated members of the Committee of Management or where it is necessary to confirm vaccination status).

Where information on vaccination status is not provided, the approved provider will treat the worker as if the worker is unvaccinated.

STORAGE OF VACCINATION STATUS RECORDS

Any vaccination records required to be kept by Batman Park Kindergarten are kept in hardcopy in a locked filing cabinet onsite.

Vaccination records are to be stored in accordance with the *Privacy and Confidentiality Policy* and kept on each staff record:

- Disclosure of a staff member's vaccination status without consent is permitted if the collection of this information is required or authorised by Australian law.
- Prior consent from staff is not required if collecting and storing vaccination information for the purposes of complying with the Directions under the *Public Health and Wellbeing Act 2008 (Vic)*
- Private sector organisations who have lawfully collected vaccination information can access the employee records exemption in the *Privacy Act 1988 (Cth)*
- The Australian Privacy Principles under the *Privacy Act 1988 (Cth)* will not apply when information is collected and held in an employee record and directly related to the employment relationship.

Only nominated person/s appointed by the approved provider/Committee of Management/employer (i.e., Human Resources, nominated supervisor, director, Admin Officer) can be permitted access to confidential vaccination records.

MEDICALLY EXEMPT PERSONS

Any worker who has a medical condition or other reason that prevents them from receiving the COVID-19 vaccination should contact the Committee of Management President on president@bpk.org.au at their earliest opportunity. In these circumstances, the approved provider

will require the worker to provide acceptable certification (*refer to Definitions*) to demonstrate that they are a medically exempt person (*refer to Definitions*).

This evidence which may include a medical certificate from their treating medical practitioner advising that they are unable to receive a dose, or a further dose, of any COVID-19 vaccine that is available in Australia for a nominated period of time. Any collection of personal information will be in accordance with privacy laws and the *Privacy and Confidentiality Policy*.

TEMPORARILY MEDICALLY EXEMPT PEOPLE

As per advice from the Australian Technical Advisory Group on Immunisation, dated 29 April 2022, [1] workers may be considered for a temporary medical exemptions due to a COVID-19 infection within the previous four months. To be eligible for a temporary medical exemption, a worker may seek certification on their Australian Immunisation Register (AIR) after their treating medical practitioner has completed the medical exemption (IM011) form or provide alternative acceptable certification (refer to Definitions). Any collection of personal information will be in accordance with privacy laws and the Privacy and Confidentiality Policy.

[1] ATAGI expanded guidance on acute major medical conditions that warrant a temporary medical exemption relevant for COVID-19 vaccines. 29 April 2022. Accessed at:

<https://www.health.gov.au/resources/publications/atagi-expanded-guidance-on-temporary-medical-exemptions-for-covid-19-vaccines>

6. BACKGROUND AND LEGISLATION

BACKGROUND

Batman Park Kindergarten has a duty of care to ensure, so far as is reasonably practicable, the work health and safety of our workers and children in our care. It is a requirement that all employees are up-to-date on their vaccinations (including a third booster dose). The employer reserves the right to update this requirement should further booster doses be recommended.

LEGISLATION AND STANDARDS

Relevant legislation and standards which formed the basis of this policy:

- *Guidance for the Pandemic (Workplace) Order 2022 (No. 8)* – (Vic), <https://www.health.vic.gov.au/covid-19/workplace-order>.
- *Fair Work Act 2009* (Cth)
- *Occupational Health and Safety Act 2004* (Vic)
- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Public Health and Wellbeing Act 2008* (Vic).

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
- Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au

7. DEFINITIONS

Definitions that relate specifically to this policy are listed below.

Acceptable certification:

An acceptable certification for the purpose of this policy includes:

- a current COVID-19 digital certificate issued by Services Australia and displayed through the Medicare App, Service Victoria App or equivalent smartphone wallet that states that the person is unable to receive a dose, or a further dose, of any COVID-19 vaccine that is available in Australia; or
- a printed version of their COVID-19 digital certificate; or
- a current Immunisation History Statement displayed through the Medicare App, that states that the person is unable to receive a dose of a COVID vaccine that is available in Australia (whether that person has already received one or two doses of a COVID vaccine); or
- a printed version of their Immunisation History Statement; or
- Evidence to satisfy the employer of a medical exemption (medically exempt person or temporarily medically exempt person) as issued by their treating medical practitioner (e.g. a medical certificate).

Anti-discrimination legislation: *means*

- [Age Discrimination Act 2004 \(Cth\)](#)
- [Disability Discrimination Act 1992 \(Cth\)](#)
- [Racial Discrimination Act 1975 \(Cth\)](#)
- [Sex Discrimination Act 1984 \(Cth\)](#)
- [Equal Opportunity Act 2010 \(Vic\)](#)

Booster vaccination: A person has received a booster dose if they have received:

- a second dose of a COVID-19 vaccine after receiving one dose of a one-dose COVID-19 vaccine; or
- a third dose of a COVID-19 vaccine after receiving two doses of a two-dose COVID-19 vaccine including different types of two dose COVID-19 vaccines.

COVID-19: means a contagious disease caused by severe acute respiratory syndrome coronavirus 2.

COVID-19 vaccine: a one dose COVID-19 vaccine or a two dose COVID-19 vaccine as described in the [Guidance for the Pandemic \(Workplace\) Order 2022 \(No. 8\)](#).

- One dose COVID-19 vaccine means 'COVID-19 Vaccine Janssen' (Janssen-Cilag);
- Two dose COVID-19 vaccine means any of the following:
 - Vaxzevria (AstraZeneca);
 - Comirnaty (Pfizer);
 - Spikevax (Moderna);
 - Coronavac (Sinovac);
 - Covishield (AstraZeneca/Serum Institute of India);
 - Covaxin (Bharat Biotech);
 - BBIP-CorV (Sinopharm);
 - Sputnik V (Gamaleya Research Institute);
 - Nuvaxovid (Biocelect on behalf of Novavax);

COVID-19 PCR test: a COVID-19 polymerase chain reaction test.

COVID-19 rapid antigen test: a COVID-19 rapid antigen test.

Early childhood education or care services: means onsite early childhood education and care services or children's services provided under the:

- [Children's Services Act 1996](#) including limited hours services, budget based funded services, occasional care services, early childhood intervention services, mobile services and (if applicable) school holiday care programs; or

- [Education and Care Services National Law Act 2010](#) and the [Education and Care Services National Regulations 2011](#) include long day care services, kindergarten/preschool, and family day care services, but do not include outside school hours care services.

Health and safety representative: has the same meaning as in the [Occupational Health and Safety Act 2004 \(Victoria\)](#). **Infectious disease:** An infectious disease designated by the Communicable Disease Section Department of Health Victoria (DH) as well as those listed in Schedule 7 of the [Public Health and Wellbeing Regulations 2019](#).

Medical contraindication: means one of the following contraindications to the administration of a COVID-19 vaccine (within the same meaning of the [Guidance for the Pandemic \(Workplace\) Order 2022 \(No. 8\)](#)).

- anaphylaxis after a previous dose;
- anaphylaxis to any component of the vaccine, including polysorbate or polyethylene glycol;
- in relation to AstraZeneca:
 - history of capillary leak syndrome; or
 - thrombosis with thrombocytopenia occurring after a previous dose;
- in relation to Comirnaty or Spikevax, myocarditis or pericarditis attributed to a previous dose of either Comirnaty or Spikevax;
 - where a person is in the process of completing a Federal Department of Health approved COVID-19 vaccine clinical trial;
- the occurrence of any other serious adverse event that has:
 - been attributed to a previous dose of a COVID-19 vaccine by an experienced immunisation provider or medical specialist (and not attributed to any another identifiable cause); and
 - been reported to State adverse event programs and/or the Therapeutic Goods Administration.

Medically exempt person: A person is a medically excepted person if the person holds an acceptable certification that the person is unable to receive a dose, or a further dose, of any COVID-19 vaccine that is available in Australia due to:

- a medical contraindication;
- an acute medical illness (including where the person has been diagnosed with COVID-19); or
- another specified reason as determined by their treating medical practitioner.

Temporarily medically exempt person: As per advice from the Australian Technical Advisory Group on Immunisation, dated 29 April 2022,³ workers may be considered for a temporary medical exemption due to a COVID-19 infection within the previous four months.

To be eligible as a temporarily medically exempt person for the purposes of this policy, a worker may seek certification on their Australian Immunisation Register (AIR) after their treating medical practitioner has completed the medical exemption (IM011) form or provided another form of acceptable certification (*refer to Definitions*). An Infection needs to be confirmed via polymerase chain reaction (PCR) or rapid antigen test (RAT) to the worker's treating medical practitioner, not the employer. RAT results should only be accepted where the

³ ATAGI expanded guidance on acute major medical conditions that warrant a temporary medical exemption relevant for COVID-19 vaccines. 29 April 2022. Accessed at: <https://www.health.gov.au/resources/publications/atagi-expanded-guidance-on-temporary-medical-exemptions-for-covid-19-vaccines>

result has been reported to the relevant jurisdiction reporting system (where possible). The employer will not accept a RAT or PCR test result alone, without acceptable certification, as evidence of a temporary medical exemption.

Medical practitioner: within the same meaning of the [Guidance for the Pandemic \(Workplace\) Order 2022 \(No. 8\)](#) includes:

- a general practice registrar on an approved 3GA training placement; or
- a public health physician; or
- an infectious disease physician; or
- a clinical immunologist; or
- a general practitioner who is vocationally registered; or
- a general practitioner who is a fellow of the Royal Australian College of General Practitioners (RACGP); or
- a general practitioner who is a fellow of the Australian College of Rural and Remote Medicine (ACRRM); or
- a paediatrician; or
- a medical practitioner who is a fellow of the Royal Australasian College of Physicians;

Pandemic: is an epidemic occurring worldwide, or over a wide geographic area and affecting a large proportion of the population.

Standard precautions: work practices that achieve a basic level of infection prevention and control. Using standard precautions aims to minimise and, where possible, eliminate the risk of transmission of infection, particularly those caused by blood-borne viruses. Standard precautions include but are not limited to: hand hygiene, cleaning equipment and the environment, respiratory hygiene and cough etiquette and appropriate use of Personal Protective Equipment (PPE).

Worker: means for the purposes of this policy:

- any person who is employed by an education operator to work in an education facility (including teachers, early childhood educators and educational support staff).
- staff of any other entity who attends an education facility.
- volunteers that attend an education facility and that work directly with children, students, or staff (including parent helpers and the Committee of Management);
- students on placements at an education facility
- education staff directly employed by an agency.

But does not include (while recommended):

- a person attending an education facility outside of the education facility's normal operating hours, where the facility is hired, leased, operated or controlled by a community group; or example: workers attending an education facility for community sporting activities outside of normal operating hours.
- a person attending an education facility outside of the education facility's normal operating hours for the purposes of polling activities for an election conducted by the Australian Electoral Commission or Victorian Electoral Commission, provided no children or students that attend the educational facility are present. Example: a candidate for a state or federal election attending an educational facility for a site visit outside of normal operating hours
- staff of the Department of Education and Training who attend an education facility (such as allied health personnel or Authorised Officers);
- a person providing healthcare services at an education facility.

Work premises: means premises in which work is undertaken, including any vehicle whilst being used for work purposes, but excluding a person's ordinary place of residence.

Up-to-date: A person is up-to-date on their vaccination status, as defined by the Australian Technical Advisory Group on Immunisation (ATAGI) in their clinical guidance for the [use of COVID-19 vaccines](#) (10 February 2022):⁴

- **Individuals aged 16 years and over:** have previously been considered up-to-date with COVID-19 vaccination after completing an appropriate primary course of a Therapeutic Goods Administration (TGA) approved or recognised vaccine. To optimise protection from the Omicron SARS-CoV-2 variant, individuals should receive a booster dose 3 months after completion of their primary schedule. A person will be considered 'overdue' if a booster has not been received within 6 months of completing their primary schedule.
- **Severely immunocompromised individuals aged 5 years and over:** require a 3rd primary dose of a COVID-19 vaccine from 2 months (and no later than 6 months) after dose 2 to remain up-to-date. Those who are aged 16 years and over are recommended a booster (4th) dose, 3 months after dose 3 of their primary vaccination course. However, for the purpose of being up-to-date in the AIR (which does not contain any information on medical conditions) only a total of 3 doses will be counted as being up-to-date in this subgroup.
- **Individuals who have had prior COVID-19,** including asymptomatic SARS-CoV-2 infection, still require completion of the above vaccination schedule, but can defer receipt of the next dose for up to 4 months following their infection.

8. SOURCES AND RELATED POLICIES

SOURCES

- Australian Government COVID-19 website - <https://www.australia.gov.au/>
- Australian Government Department of Health - <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-restrictions>
- SafeWork Australia - <https://www.safeworkaustralia.gov.au/covid-19-information-workplaces>
- WorkSafe Victoria : <https://www.worksafe.vic.gov.au/consultation>
- Victorian Equal Opportunity and Human Rights Commission: <https://www.humanrights.vic.gov.au/>
- Australian Technical Advisory Group on Immunisation (ATAGI) statements: <https://www.health.gov.au/committees-and-groups/australian-technical-advisory-group-on-immunisation-atagi>

RELATED POLICIES

- Dealing with Infectious Diseases
- Occupational Health and Safety
- Code of Conduct
- Privacy and Confidentiality

⁴ Australian Technical Advisory Group on Immunisation (ATAGI). ATAGI statement on defining 'up-to-date' status for COVID-19 vaccination. 10 February 2022. Accessed at:

<https://www.health.gov.au/committees-and-groups/australian-technical-advisory-group-on-immunisation-atagi>

EVALUATION AND REVIEW

Information regarding the COVID-19 pandemic is subject to change given the evolving nature of the pandemic and the Government's response to it. We encourage all workers to regularly keep up to date with Government advice, particularly when restrictions are in place.

In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to child safety concerns
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required (recommended at every three to six months due to the nature of this policy).
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (Regulation 172 (2)).

COVID-19 risk assessment

This risk assessment has been prepared to clarify Batman Park Kindergarten’s COVID-19 risk mitigation strategy. These measures are largely based on advice provided by the Victorian Government and ATAGI, but have been tailored to the BPK environment and its specific risk profile to best protect staff, children and families.

1. Identified Hazard or Threat	2. Description of Risk	3. Risk Rating			4. Treatments to be Implemented Measures to be taken by our service to eliminate or reduce impact of the risk	5. Revised Risk Rating After implementing Treatments		
		Likelihood	Consequence	Risk Level		likelihood	Consequence	Risk Level
Widespread infection	Close contact between children and staff in the service, the physical nature of caring for children (cuddles, helping with hygiene needs - such as nose blowing and hand-washing etc.), the nature of children’s play (close proximity, toy sharing etc.) and a significant amount of time in indoor environments means the potential for infection spreading is significant. This is exacerbated by the fact that children in our service are too young to be eligible to be vaccinated. Widespread infection exacerbates risks listed below.	Likely	Major	High	<ul style="list-style-type: none"> Children wash hands at arrival and departure, and as required during session Basic hygiene measures are in place and posters are displayed in centre There is convenient access to water and liquid soap in all bathrooms. RAT tests made freely available and families encouraged to test regularly before sending children to kinder Sick children will be sent home and unable to return until symptoms cleared. A GP letter can be provided for lingering symptoms, (such as a cough), confirming child is well enough to attend. In the event of a positive covid-19 RAT test, a negative RAT result or mandatory isolation requirements will need to be met before returning. Parents/Guardians informed of every positive COVID-19 diagnosis who contact in their child’s room (anonymised), the date 	Possible	Moderate	Medium

					<p>of exposure and period of time they were in contact</p> <ul style="list-style-type: none"> • Parents/Guardians emailed notifying them of isolation requirements for unwell children or close contacts (updated in line with government guidelines) • Drop-off/pick-up procedures adjusted to improve safety, including hand sanitiser and spare masks available for families, children's bags packed and ready for departure to avoid overcrowding in the locker area and entry staggered to reduce crowding • Ventilators installed in indoor spaces • Staff and volunteers working with children required to be fully vaccinated or have valid medical exemption - vaccination has been shown to reduce severity and transmissibility of COVID-19, as the majority of children in the service cannot be vaccinated all adults working with the children must be vaccinated or have a valid medical exemption • Follow additional recommended government guidelines for management and control of COVID-19 including cleaning • Staff and children educated about covering their cough (into crook of elbow) to prevent the spread of germs <p>other?</p>			
Risk to staff wellbeing	Staff are in close proximity to each other and children for extended periods each day. Working with children is highly physical. COVID-19 can frequently be	Likely	Moderate	Medium	<ul style="list-style-type: none"> • Thorough hygiene and infection management measures in place (as above) • Staff (including agency staff and relief teachers) and volunteers 	Possible	Moderate	Low

	asymptomatic in young children, putting staff at risk of infection before the illness is detected in the child.				<p>working with children required to be fully vaccinated or have valid medical exemption</p> <ul style="list-style-type: none"> • Staff supported to use sick leave if feeling unwell 			
Disruption to services	<p>Widespread infection or extensive staff absence due to infection could prevent services operating as normal, possibly including cancelling sessions.</p> <p>Over reliance on agency staff/substitute teachers to cover staff absences may also be disruptive/unsettling for children in the service.</p>	Likely	Moderate	Medium	<ul style="list-style-type: none"> • Thorough hygiene and infection management measures in place (as above) • Staff (including agency staff and relief teachers) and volunteers working with children required to be fully vaccinated or have valid medical exemption • All efforts made to engage consistent relief teachers/agency staff to allow children to develop a relationship with them and reduce anxiety about different people being in the rooms 	Possible	Moderate	Low
Risk of serious illness or death in vulnerable people (staff, children and family members)	While COVID-19 infections in children are typically relatively mild there is a serious risk to people with other health conditions/risk factors, or who are immunocompromised. There is a risk that infections contracted within the service may be spread to other vulnerable members of families, staff or the community.	Possible	Major	High	<ul style="list-style-type: none"> • Thorough hygiene and infection management measures in place (as above) • Families and staff notified of all exposures affecting them (as above) • Staff (including agency staff and relief teachers) and volunteers working with children required to be fully vaccinated or have valid medical exemption 			

					<ul style="list-style-type: none"> • Infected children and staff required to be absent from centre until isolation period finished, and information about isolation and close contact requirements shared with staff and families (as above) 			
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This risk assessment and related policies will be reviewed as changes to government advice are announced and as issues are identified as part of regular staff meetings.