# CHCSAC003
# Work collaboratively and respectfully with children in school age care

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**Learner guide**

Aspire Version 1.1

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CHCSAC003 Work collaboratively and respectfully with children in school age care

# Contents

## Appendices      95

## Foundation skills      102

# Before you begin

This learner guide is based on the unit of competency *CHCSAC003 Work collaboratively and respectfully with children in school age care* from Version 1.2 of the Community Services Training Package. It is designed to **complement**, not replace, the learning and assessment strategies your trainer or training organisation has put in place.

Your trainer or training organisation must give you information about this unit of competency as part of your training program. Information regarding how this learner guide relates to this unit of competency is included as Appendix 1 in this guide.

## How to work through this learner guide

This learner guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the learner guide you need to read, and which practice tasks and assessment activities you need to complete.

| Feature of the learner guide | Explanation |
|---|---|
| Learning content | Read each chapter in this learner guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake. |
| Examples and case studies | Examples of completed documents that may be used in a workplace are included in this learner guide. You can use these examples as models to help you complete practice/assessment tasks. Case studies highlight learning points and provide realistic examples of workplace situations. |
| Practice tasks | Practice tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which practice tasks to complete. |
| Video clips | Where QR codes appear, learners can use smartphones and other devices to access video clips relating to the content. For information about how to download a QR reader app or accessing video on your device, please visit our website: www.aspirelr.com.au/help. |
| Chapter summary | Key learning points are provided at the end of each chapter. |
| Assessment activities | There is an assessment activity at the end of each chapter. Your trainer will tell you which activities to complete. These activities give you an opportunity to:<br>• check your progress<br>• apply the skills you have learnt<br>• gather evidence to present in an evidence portfolio (see information later in this section)<br>• demonstrate your competency. |

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| Feature of the learner guide | Explanation |
|---|---|
| Foundation skills | Information regarding foundation skills is provided in Appendix 2. As you complete each chapter (and the relevant assessment activity, if you are required to do so), record evidence of how you have applied foundation skills in the table at the end of this learner guide. Remember to keep copies of documents that demonstrate your application of foundation skills. |

# Assessment

The assessment conditions for this unit of competency are:

- Skills must be demonstrated in a regulated education and care service.

- In addition, simulations and scenarios must be used where the full range of contexts and situations cannot be provided in the workplace or may occur only rarely. These are situations relating to emergency or unplanned procedures where assessment in these circumstances would be unsafe or is impractical.

- Simulated assessment environments must simulate the real-life working environment where these skills and knowledge would be performed, with all the relevant equipment and resources of that working environment.

- Assessment must ensure use of:

    – National Quality Framework

    – the relevant approved learning framework under the National Quality Framework.

Your trainer/assessor is responsible for ensuring the learning and assessment material you complete is suitable, and also for making any reasonable adjustments. They may provide you with additional or alternative assessment activities to those presented in this learner guide.

Your trainer may also ask you to compile an evidence portfolio as part of your training program. Under guidance from your trainer, gather relevant evidence (for example, an ongoing learning journal, workplace forms and documents) to demonstrate your competence. Your portfolio will also include evidence relating to how you have developed foundation skills. Information regarding foundation skills is included as Appendix 2 in this learner guide.

# Overview
# The National Quality Framework

The National Quality Framework (NQF) puts in place compulsory, nationwide standards to maintain quality across a range of education and care services for children, including long day care, family day care, preschools and school age care. It incorporates licensing, regulations and quality assurance into a single system operating Australia-wide. Its aim is to enable services to use a unified system to work toward goals of best practice and quality. The NQF is implemented by the Australian Children's Education and Care Quality Authority (ACECQA). You can find out more about the NQF by visiting ACECQA's website at: www.acecqa.gov.au/national-quality-framework. The resources available from this website are also available in any registered early childhood education and care, and school age care service in Australia.

## The National Quality Standard

A key aspect of the NQF is the National Quality Standard (NQS), which aims to ensure high-quality, consistent care across Australia. This standard seeks to improve services by setting the standards for children's development and safety, and providing families with information so they can make informed choices about services.

The NQS includes *My time, our place – Framework for School Age Care in Australia* (MTOP), which provides guidance to school age care educators in implementing quality, responsive programs with a focus on individual strengths, interests and needs.

The NQS consists of seven quality areas, each containing standards and elements, against which children's education and care services are assessed and rated.

The seven quality areas covered by the NQS are:

1. Educational program and practice
2. Children's health and safety
3. Physical environment

4. Staffing arrangements
5. Relationships with children
6. Collaborative partnerships with families and communities
7. Leadership and service management

# My time, our place – Framework for School Age Care in Australia

This learner guide supports MTOP and is linked directly to the beliefs and values it represents. At the commencement of each chapter, there is a table identifying which of the MTOP principles, practices and outcomes are most closely represented within it.

MTOP is based on the view that children's lives involve aspects of belonging, being and becoming:

- Belonging is based on human existence, the questions about who we are and where we belong, identities, relationships and the central core of worth that allows children to learn and enjoy healthy development.

- Being is the art of childhood, all the exploring and building that not only supports the years to come, but also the things happening now.

- Becoming is a result of learning about the values and beliefs upheld by society, intrinsic motivation and attributes. It considers what is required to become an effective member of society.

MTOP comprises three elements – Principles, Practice and Outcomes:

- Principles reflect contemporary theories and research that influence how we implement programs for children. These principles guide our practice.

- Practice is a reflection of your principles. The things you believe about children, their families and how people learn and develop are all exhibited through the practices you implement in your daily program.

- Outcomes have been designed to capture the learning and development that you observe when working with children aged 5 to 12 years. Each child progresses at their own pace to achieve each outcome during their learning and development. The five outcomes are:
  - Outcome 1: Children have a strong sense of identity.
  - Outcome 2: Children are connected with and contribute to their world.
  - Outcome 3: Children have a strong sense of wellbeing.
  - Outcome 4: Children are confident and involved learners.
  - Outcome 5: Children are effective communicators.

# Chapter 1
# Communicating effectively with a range of children in the school age care context

Children attending your service will be in the 5–12 years age range, generally known as the middle childhood stage. Children in this stage have usually developed a large vocabulary and the abilities to manage complex language structures, think, reason and make decisions. They can understand concepts such as time and generally can read, write and use basic numeracy skills.

Children in this stage form values, habits and behaviours that will last through their adolescence into adulthood. They learn how to interact with other people, form lasting friendships, discover interests and hobbies and develop patterns of behaviour, such as how to solve problems. They also learn to make choices about food, drinks and exercise.

It is important you have a good understanding of how to address different children's needs appropriately. It is likely you will work with children who come from a variety of different cultural and linguistic backgrounds, and children who have various abilities and additional needs. Some children may require extra care, while others may be able to participate in your program with little or no extra support.

Good communication is important for developing a sound relationship with the children in your care and has a bearing on how well you meet their needs. You may need to adjust your communication depending on the child's age, developmental stage, ability level and cultural and linguistic background.

In this chapter you will learn about:

1A  Listening to children to understand them as individuals

1B  Using appropriate communication strategies that encourage relationship-building

1C  Acting upon information that children provide about their needs

1D  Using cross-cultural communication strategies to engage with children from diverse backgrounds

1E  Varying communication techniques to include all children

The following table maps this chapter to the National Quality Standard and *My time, our place – Framework for School Age Care in Australia.*

| | National Quality Standard |
|---|---|
| | Quality Area 1: Educational program and practice |
| | Quality Area 2: Children's health and safety |
| | Quality Area 3: Physical environment |
| | Quality Area 4: Staffing arrangements |
| ✓ | Quality Area 5: Relationships with children |
| | Quality Area 6: Collaborative partnerships with families and communities |
| | Quality Area 7: Leadership and service management |
| | **My Time, Our Place – Framework for School Age Care** |
| | **Principles** |
| ✓ | Secure, respectful and reciprocal relationships |
| ✓ | Partnerships |
| ✓ | High expectations and equity |
| ✓ | Respect for diversity |
| ✓ | Ongoing learning and reflective practice |
| | **Practice** |
| | Holistic approaches |
| ✓ | Collaboration with children |
| | Learning through play |
| | Intentionality |
| | Environments |
| ✓ | Cultural competence |
| ✓ | Continuity and transitions |
| ✓ | Evaluation for wellbeing and learning |
| | **Outcomes** |
| ✓ | Children have a strong sense of identity |
| ✓ | Children are connected to and contribute to their world |
| | Children have a strong sense of wellbeing |
| | Children are confident and involved learners |
| ✓ | Children are effective communicators |

## 1A Listening to children to understand them as individuals

Listening to and responding to children helps you to learn more about them as individuals. Through sound communication practices, including using appropriate listening skills, you can better meet the needs of all children in a school age care program. Children communicate in very different ways, so it is important to adapt your listening strategies to suit the individuals you work with.

## Effective communication

Listening is one aspect of how you communicate with others. By using careful and appropriate listening strategies, you can ensure you take in and process all of what a child is sharing. You are then better placed to act on key information and build a sound relationship with the child.

Communication is made up of two main components:

1. Verbal communication – speech and language
2. Nonverbal communication – body language, gestures, body orientation, facial expressions

In most situations, the verbal and nonverbal components of communication correspond closely with each other; for example, a child may smile, and also say they are enjoying an activity. By attending closely to both components of a message, you can obtain greater understanding than if you only attend to one aspect. For example, a child who tells an educator that they are not hungry but who frequently looks at the afternoon tea table is displaying conflicting verbal and nonverbal messages.

Children's abilities to communicate their messages effectively depends on many different factors, including:

- their age
- their developmental stage
- their family background, language expectations and practices
- their language preferences (such as whether they speak English as an additional language and whether they are communicating in their first or an additional language)
- their use of augmentative and alternative communication (AAC)
- environmental factors (such as background noise, distractions and the influences of other children)
- personal factors (such as illness, personal qualities and tendencies, confidence and familiarity).

Learning about children as individuals helps you to work out the best approach to use when communicating with them. Some children respond well to one-on-one communication, whereas others are more comfortable as part of a small or larger group. Some children appreciate a short, to-the-point communication exchange, whereas others enjoy a longer and more-detailed chat.

## Child-focused approach

When using a child-focused approach to care, ensure you actively listen to and gain meaning from both verbal and nonverbal forms of communication. Focus on the individual child and the things that are important to them. Make time for children to communicate with educators, and make it clear to each child that what they say is valued and considered important. Show that the focus is not always on children who speak quickly or are confident and assertive; ensure that those who speak more slowly, struggle with their expressive speech and language skills or are less confident in speaking in a group situation are also heard and valued.

## Active listening

To be an active listener you need to:

- focus your attention on the person communicating with you – resist the urge to multitask while communicating with a child
- ask questions if necessary to clarify information before the conversation moves on
- show you are listening through nonverbal communication – nod, smile, position your body so it is oriented towards the other person and ignore distractions in the environment
- consider cultural differences, such as whether eye contact is appropriate in the situation
- consider the need for appropriate personal space – take a step back if the child appears uncomfortable
- repeat some of the child's words to check you understand the message accurately – this is important to tell the other person you are listening and understand
- take in the nonverbal component of the communication exchange and mentally check whether it matches the verbal component.

By thinking through these points when communicating with a school age child, you can learn about their individual needs and preferences. It is also easier to identify difficulties and address them before they become major problems.

# Listening to children with diverse needs and experiences

Sometimes children communicate in ways that are less familiar to educators in school age care programs. This may be because a child has a disability that affects their communication, because they speak a language other than English or because previous experiences such as trauma or being at risk have affected their willingness and ability to communicate openly with others.

## Children with additional communication needs

Children who have issues that affect their communication may need to be listened to and communicated with in different ways. They may use an alternative form of communication such as:

- signing – a visual language using the fingers and hands
- a speech-generating device – an electronic device that uses a synthetic voice output to speak words or phrases entered with text or symbols by the user
- a communication board or book.

These tools help the child to share information with you. Their communication may be slower and less precise compared to other children of a similar age, but it is vital you take the time to listen closely and learn their particular communication form. 'Listening' may mean you need to listen to a synthetic voice through a machine, read a square on a book or board, or watch while the child enters text or presses symbols.

The communication system may be divided into topics to help the child make word and phrase choices. You may need to learn about some of the topics that are important to a child (such as family members, daily activities, food and drink preferences or pets) so you can be aware of how their particular book or device is structured. The following case study shows how educators communicate with a child who uses an alternative communication device.

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**Case study**

Ben uses a dynamic speech-generating device as part of his daily communication because he cannot communicate verbally. It is a sophisticated electronic device that allows him to move between screens or layers of topics to access built-in frequently used words and phrases, as well as key in text and use word prediction to speed up his communication. When he enters a sentence or question, the device 'speaks' for Ben using a synthetic voice.

The educators at Ben's program have learnt to accommodate his device. Ben's speech pathologist visited the team and showed them how to engage Ben in conversation, ask him questions and support him in finding the best responses. Now the educators are confident

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in asking Ben to share an idea or make a comment in a small group. They also know that Ben finds smaller group interactions more comfortable and that he prefers not to answer questions or make comments in larger groups. The educators have also learnt how to help maintain the device by checking it is positioned securely on Ben's wheelchair tray and protecting it from crumbs and spills during meal times.

## Children who speak English as a second language

Children who speak English as a second language may require extra support during communication exchanges. These children may find it difficult to:

- be precise with their communication in English

- use idioms and colloquialisms in English

- communicate in English about abstract topics

- accurately use particular English language forms such as prepositions and two-word verbs.

People in your service may speak the same first language as children learning English as a second language, and they may be able to provide support to other educators. However, you may need to use an interpreting and translating service to ensure you communicate appropriately with children and their family members.

## Children who are at risk

Children may attend a school age care program because they have been identified as being at risk of abuse or neglect. These children have priority for access to programs. You and your colleagues need to work together to ensure the needs of these children are met effectively.

In general, the same communication principles should apply as for any child. However, it is important to be aware that these children may be more reluctant to share personal information, or may show confusion about what they are permitted to say and to whom. As with any child, adopt a caring, positive approach and ensure that you use careful listening strategies.

It is important to consider your role when interacting with children who have joined a program because they are at risk of abuse or neglect. You need to be fully aware of issues such as disclosure of information, reporting suspicions of abuse and neglect, and policies and procedures for access to the child during education and care sessions. This should be the case for all the children in your care, not only for children who are at risk. Remember that the role of educators is to provide supervision, support and care for school age children in a safe environment. It is the role of other professionals to conduct interviews, provide family support and intervention, obtain evidence about abuse and implement legal proceedings where appropriate. By considering the limitations of your role carefully, you can make good decisions about your communication and interaction with a child who is at risk.

The following case study shows how an educator listens to children to gain an understanding of them as individuals in the school age care environment.

## Case study

Janet is talking to Monique, a 7-year-old who attends 'The Breakfast Club', a before-school program at a primary school. The Breakfast Club provides meals for children who arrive before 8.00 am and regular before-school care and activities for children who arrive after 8.00 am. It is assumed that children who arrive after 8.00 am have eaten breakfast. It is two minutes before 8.00 am and Monique eyes the breakfast table hungrily. Although she is speaking to Janet about her morning, her body is oriented towards the table and she keeps glancing from the table to the clock on the wall.

Janet knows Monique is dropped off at the OSHC program by her mum on her way to work and that their morning routine is often rushed and frantic. She also knows that Monique is fairly quiet by nature and that she doesn't like to make requests of educators or ask for anything different, even if it means she misses out. Often Monique says she has already eaten at home, but today Janet is not sure this is true. She asks Monique if she is hungry. Monique answers, 'Not really', looking again at the clock.

Janet notices there is a discrepancy between Monique's verbal and nonverbal communications. She smiles at Monique and tells her the clock is always running a few minutes fast, so there is plenty of time for breakfast if Monique wants to join the other children, who are just finishing their meals. She tells Monique that she would love some company and suggests they could sit together for a chat while Monique eats. She walks with Monique to the breakfast table and helps her quickly organise some cereal, milk and fresh fruit.

In this case study, Janet uses active listening skills to work out that Monique has not eaten breakfast. She also uses her knowledge of previous interactions and Monique's personality to guide her communication and help Monique feel more comfortable.

## Practice task 1

1. Visit the website for Novitatech (a provider of assistive technology) at: www.novita.org.au/Content.aspx?p=64. Read about augmentative alternative communication (AAC) for people with disabilities and communication needs. Write a short summary to explain what AAC means.

2. Using pictures or symbols, create some cards you could use in a school age care program to communicate with a child who does not use verbal language, but can read simple text and understand pictures and symbols. Create cards for the following phrases:

   a) I am hungry.

   b) I would like a drink.

   c) I would like to use the toilet.

   d) I am finished with this activity.

# 1B — Using appropriate communication strategies that encourage relationship-building

You can build relationships with children by using effective communication strategies that are appropriate to the individual. You should understand the importance communication has at the individual child level and as a key component of the five outcomes within *My time, our place – Framework for School Age Care in Australia* (MTOP).

Communication with children is not just about talking and asking questions. It involves:

- listening carefully
- observing nonverbal communication, such as body language
- following your instincts when you suspect that something in a child's manner or behaviour is not quite right.

## Developing a rapport with children

Developing a rapport with children can take time and patience. Children often need to develop trust and be engaged in a mutually respectful conversation before they can talk openly. Techniques that can help you to build rapport and approach an informative discussion with a child include:

- leading discussions
- questioning
- active listening.

### Leading discussions

Adults can sometimes lead discussions with children individually or in groups to help children feel confident to talk openly. For example, you may sit with a child who is alone in the playground and ask them what they would most enjoy doing next.

Leading discussions can bring issues such as bullying out into the open. Children can be asked in groups to talk about the issue of bullying and be encouraged to express how this type of behaviour makes them feel. Discussions may also lead to how children might go about talking to an adult if bullying occurs.

## Questioning

Questioning children is a useful technique for obtaining information about their needs. Take opportunities to ask leading questions. This is most successful at times when children are relaxed and engaged in an activity. Be careful that your questions do not raise anxieties or concerns in the child that they may not have considered otherwise, such as leading with questions about whether the child has friends or how they feel about a person with a disability.

Children who are reluctant or unable to talk to you openly may react positively to sensitive questioning. Be guided by the child's conversation and try to reflect the child's own thoughts and direction. Open questions that do not lead the child into a specific direction are useful here; for example, 'What are your favourite subjects?' or 'Who do you most enjoy playing with?'

If a child indicates a concern, ask further questions that encourage more specific responses, such as, 'What particular problem can I help you with?' or 'Does it make you sad when other children leave you out of the game?'

## Active listening

Active listening brings a number of high-level skills into your communication with children. It involves showing a child through your words and actions that you care about what they have to say, and encouraging them to say more.

The following techniques contribute to active listening and are useful in drawing out a child's feelings and concerns:

- Using open and closed questioning
- Taking a position close to the child speaking
- Focusing attention on the child speaking
- Suspending opinions and emotions
- Checking understanding and clarifying information

### Using open and closed questioning

Using a combination of different question styles can guide discussions effectively. Closed questions are those that only require a yes or no response. They can be useful for establishing facts or when you require brief information. For example, you might ask closed questions like, 'Do you like that game?' or 'Do you need any help?'

Open questions attempt to extract more than a one-word response. They are useful when encouraging a child to expand on their needs or feelings. For example, you might ask questions like, 'What would you like to do now?' or 'What did you think of that game?'

Alternating between open and closed questions can help establish a deeper rapport with the child, and feels less threatening than using only open or only closed questions.

**Taking a position close to the child speaking**

Children often talk openly when the perceived difference in power and size are minimised. To make a child feel more comfortable with your discussion, sit at the same level as the child; for example, at a table in a chair next to them or on the floor. Reducing the distance between yourself and the child to a close but comfortable level can encourage the child to speak about problems that are more difficult for them to discuss.

**Focusing attention on the child speaking**

Ignoring distractions can be a challenge. In a school age care program, there are often children and educators playing and working around you and numerous, frequent demands placed on your time. It is sometimes difficult to concentrate, but paying close attention to a child who is speaking can encourage a far better quality communication.

When a child is speaking to you, try to maintain eye contact and avoid showing the child signs of being disinterested or too busy to talk to them. Try not to glance at your watch or interrupt them to talk to other educators.

In situations where other children or adults demand your attention, it can be useful to say something like, 'It's a busy time of day right now, but I'm really interested in talking to you about this. Could we sit down together later on when it's quieter and talk about it then?' Always ensure that you keep your promise to the child and find a place to talk that is as free from distractions as possible, and do your best to listen intently to the child. Use body language that shows you are interested in the topic, such as leaning forward and nodding appropriately.

**Suspending opinions and emotions**

A valuable skill to learn when using active listening techniques is to suspend opinions and emotions. Showing strong reactions to something a child tells you can quickly shut down their eagerness to continue talking. For example, a child may feel that they have upset you if you show signs of sadness during a discussion about a member of their family who has died. Children may retreat back into themselves if you show signs of anger when they tell you about being hurt by another child, fearing that you may cause an uncomfortable situation for them.

**Checking understanding and clarifying information**

Check that you understand fully by restating the problem or concern using the child's own words; for example, 'You're saying that you're upset because the other children leave you out, is that right?' Ask further questions where required to ensure you understand and to clarify any areas of confusion.

Summarising what is said towards the end of the conversation confirms to the child that you fully understand their problem and helps them to align their problem to possible solutions you may raise.

# Using appropriate communication techniques to meet diverse needs

It is important to modify your communication techniques to suit the ages and developmental stages of the various children in your care. This can be a challenge, as often you will communicate with children across a wide range of ages and developmental stages, all of whom gain new skills at different rates. There are some important considerations to help guide your communication choices for different groups of children.

## Boys' and girls' communication skills

In general, boys' language skills may develop a little more slowly than girls'. Boys and girls may also play and engage with people in quite different ways, and this may be reflected in their language development. Research tells us that girls generally begin to talk earlier than boys, and that they master more vocabulary earlier. It is wise to consider the language development rates of boys versus girls, as well as the ages of the children in your care. You may need to modify your language expectations slightly for boys compared with girls of similar ages, although there are always individual differences within any group of children.

## Speech and language delays

Some children may have a speech and language delay or difficulty such as verbal dyspraxia or stuttering. Although it is important to use age-appropriate language with these children, it is also vital that you adapt your communication strategies to suit their abilities. For example, you may need to remind a child to use smooth talking or other strategies suggested by their speech pathologist, or you may need to ensure the environment is quiet, calm and free of distractions so you can fully focus your attention on the child's speech.

You may need to provide visual cues or prompts (such as gestures, looking or pointing at an object or holding up an object for the child to see) to reinforce your message if the child has difficulty understanding you accurately. You may need to ask more clarifying questions or use your own judgment and interpretation if a child has trouble explaining what they mean.

It can also be helpful to model calm, quiet and relaxed talking and to maintain an environment that is anxiety-free and promotes relaxed communication. Although anxiety and stress do not cause speech impairments, a child who feels stressed or anxious may have trouble communicating well.

Avoid finishing a child's sentence for them, even if it takes a while for them to say what they want to. It is often tempting to try to hurry things along when you are busy, but this is rarely in the child's best interests and may only serve to frustrate them and lead them to feel they are ineffectual communicators.

You may need to liaise with other professionals as part of your role within a school age care setting. For example, you may need to consult with a speech pathologist, teacher, school vice principal or your service manager about how to support a child with a speech delay. You may need to suggest appropriate referral points for the family of a child who is experiencing difficulties, so that diagnosis and appropriate treatment can be initiated.

## Children who speak English as a second language

Children who are learning to speak two languages at the same time tend to take slightly longer to master both languages than a child only learning one. You may need to rely more on gesturing, using symbols, pointing, using body language and eye contact, observing interactions with other children and blending verbal and nonverbal communication to be effective and ensure that communication is understood.

You may need to use interpreters and translators to communicate with family members and ensure policies and procedures are understood by all.

There may be educators within your program who can communicate in languages other than English, which can make it far easier to communicate on an age-appropriate level with bilingual children. You may decide to pair these educators with groups of children who speak a common language and so build stronger relationships and allow for more accurate communication.

Other strategies that can be useful when working with children learning English as a second language include:

- checking for understanding after speaking for a short time
- reducing the length of your utterances – aim for short, concise questions and sentences rather than longer ones
- using less complex questions and statements
- using more closed than open questions
- observing the child to see if they appear confused or distressed
- observing the child to see if they carry out an action that indicates they have understood, such as following an instruction or request from you
- ensuring you choose age-appropriate topics for discussion and simplifying your language, rather than choosing topics more suitable for younger children simply to make communication easier
- positioning yourself close enough to facilitate clear communication, but not so close that you invade the child's personal space, particularly with children from cultures who may not be comfortable with close proximity
- using technology such as the internet to find out how to translate simple phrases from one language to another; never rely on this alone, as internet sources are not always reliable.

By modifying your language use, you can communicate more effectively at an age-appropriate level with children who are learning English as an additional language. Over time, you should be able to reduce the need for modification as children's language competence increases.

The following case study shows how an educator uses age-appropriate communication strategies to build a stronger relationship with a new child who has a fluency disorder.

**Case study**

Sally is the coordinator of a before- and after-school care program at a community centre. The children who attend come from several nearby primary schools, all located in a low socioeconomic area. Many of the children are from disadvantaged backgrounds and spend large amounts of time away from their family homes attending school and before- and after-school care.

One of the students, Meg, has extreme fluency difficulties and often stutters, although she has not been formally diagnosed with a fluency disorder. She has great difficulty expressing herself clearly and is reluctant to speak in a group situation. She shows frustration when trying to get words out and often stamps her feet and clenches her fists.

Sally knows that Outcome 5, 'Children are effective communicators', from the Framework for School Age Care (MTOP) highlights the importance of 'children interacting verbally and nonverbally with others for a range of purposes'. She is also acutely aware that Meg's ability to do this is severely limited by her fluency difficulties. She believes this hampers Meg's achievements towards all aspects of Outcome 1, 'Children have a strong sense of identity' and, in particular, her ability to develop friendships.

Sally decides on the following five-step course of action:

1. To assign a single educator to focus on building a strong relationship with Meg

2. To consult with Meg's mother about organising a formal assessment of her speech and language skills

3. To create opportunities for small group activities within the program that focus on nonverbal communication and shared goals and outcomes

4. To ensure all educators are informed about appropriate strategies to support children who have fluency difficulties

5. To invite a speech pathologist from the local community health centre to speak at the next team meeting about fluency disorders

## Practice task 2

1. Role-play how you would develop rapport with a new child, Rose, in your service. Imagine that the child is 9 years old and you want to find out about their interests, children they are familiar with and whether they are enjoying the program of activities.

2. MTOP Outcome 1 encourages you to develop a rapport with children like Rose. List two points from the MTOP that are examples of how educators might do this.

# 1C Acting upon information that children provide about their needs

Educators in school age care settings receive information from and about children in a number of different ways. It is important to act on this information appropriately.

## Types of information provided by children

Children generally provide information about themselves and their needs on a regular basis, although sometimes you need to seek this information out. Information provided by children to educators is shared when children use their expressive language skills.

For young children, expressive language may need to be supported and scaffolded and you may need to use your judgment and interpretation to determine likely needs and issues. Older children are more likely to be confident initiating requests and making comments about their daily activities and needs within the service, although every child is different.

Although much of the information provided by children about their needs is fairly simple and straightforward, it is important to ensure all educators attend to this information and support children in having their needs met. For example, if a child shares information that they are very tired after a busy day at school, this needs to be taken into account when planning activities for an afternoon program so that there are quiet, sedentary activities available.

The following table shows some examples of the types of information children may provide to educators about themselves.

| Type of information | Examples |
|---|---|
| Feedback or requests about activities/programs | • Requests for specific activities<br>• Interest in activities being done by another group<br>• Positive or negative reactions to a type of activity or program |
| Preferences | • Certain foods<br>• Activities<br>• Places to play<br>• Tools or equipment to play with<br>• Educators to engage with<br>• Friends to play with<br>• Specific cultural activities or play equipment |

*continued ...*

*… continued*

| Type of information | Examples |
|---|---|
| Dislikes | • Specific foods or drinks<br>• Types of activities<br>• Games<br>• Homework tasks<br>• Playing in a particular location<br>• Engaging with a particular child or group of children |
| Emotions | • Stress<br>• Anxiety<br>• Boredom<br>• Satisfaction<br>• Enjoyment<br>• Excitement |
| Self | • Feelings<br>• Concerns<br>• Worries<br>• News<br>• Daily events<br>• Ideas |
| Needs | • Toileting<br>• Food<br>• Drink<br>• Personal care<br>• Hygiene<br>• Clothing<br>• Health care needs such as asthma or diabetes<br>• Special food needs |
| Family | • Welcoming a new baby<br>• Change to living arrangements<br>• Death of a relative<br>• New person moving into the family home<br>• Change to bedrooms or sleeping plans<br>• Special family events and celebrations<br>• Religious events |
| Relationships | • Closest relationships (parents, primary caregivers, siblings)<br>• Extended family (grandparents, aunts, uncles, close family friends)<br>• Friends (same age and older or younger)<br>• Acquaintances |

*... continued*

| Type of information | Examples |
|---|---|
| School | • Problems during the school day<br>• Homework needs<br>• Difficulties with peers or a teacher<br>• Notes or reminders that need to be shared with parents or caregivers later in the day |
| Holidays | • Holidays being planned<br>• Sharing photos and stories after a holiday<br>• Reading emails and chatting with friends or family on Skype while on holidays<br>• Missing a family member who is away on holiday<br>• Religious or cultural holidays |

# Child-focused practices within the environment

As part of a child-focused approach, you can use information provided by children to help plan and develop appropriate and stimulating activities. Here are some examples of ways you can incorporate information provided by a child to your regular planning routine.

| Method | Explanation |
|---|---|
| Interest books | These can be written by the children, stored in a special library or book corner and read during quiet times or when a child needs some space by themselves. This introduces a literacy component to a program, as well as focusing on individual strengths and abilities in creating books. |
| Digital photo frames | Use digital photos of children participating in activities at the service, ensuring you comply with your service policies for creating and displaying imagery of children (for example, obtaining permission from parents). |
| Cultural displays | Create a display area that shows key information about cultures relevant to your service, such as flags, traditions, foods, music and language information. For example, you may show an Aboriginal flag along with some key words in a local Indigenous language. |
| Choice of toys and play materials | Provide toys and play items that relate to information shared by children. For example, you may provide more sports equipment if children express an interest in sporting activities, or some Aboriginal musical instruments if children share information with you about a family music event as part of their Aboriginal heritage. |
| Timing of snacks | If possible, structure the timing of snack breaks so that very young children (especially prep children) can eat as soon as they arrive, particularly if they express verbally or through their behaviour that they are hungry and tired when they finish school. |

The following case study shows how an educator acts on information that children provide about their needs in the program.

| **Case study** | | |
|---|---|---|
| At the Jumping Kids Centre in Perth, the children are going to see a movie as part of their vacation care program. Here is a list of information provided by children about this activity, along with a response from the educator they speak to. Notice that there is a focus on highlighting strengths and positives in each situation, and that 'no' responses are coupled with positives in some way. | | |
| **Where/when** | **Child's comment** | **Educator's reply and actions** |
| On the bus going to the cinema | I've already seen the movie – can I watch something else? | No, I'm afraid we all need to see the same movie today so we can all be together. But I'm hoping you can sit near me and tell me what's going to happen next! |
| On the way into the cinema | Is it scary? I don't like scary movies. | No, I've checked and I know this movie is rated 'G', so it's okay for children to watch. I'm pretty sure it's a really funny movie! <br><br> The educator smiles at the child and walks next to them on the way in to monitor them for any signs of fear (the child may also be worried about being in the dark in the cinema). |
| On the way into the cinema | Can I sit next to Sam, please? | So long as Sam is okay with that, I don't mind. <br><br> The educator looks at Sam to see what his response is and makes sure he is happy to sit near another child. |
| While sitting waiting for the movie to start | Can we buy popcorn? | Even better – we are going to make our own popcorn later when we get back. Can you help me get it ready? What else shall we make for our snack? <br><br> The educator quietly engages the child in brief discussion to divert attention from thinking about buying the popcorn and keep them entertained before the movie begins. |

## Practice task 3

Keep a record of 10 pieces of information that children share with you about their needs and explain how you acted on the information. Include any service policies that relate to carrying out your actions.

## 1D Using cross-cultural communication strategies to engage with children from diverse backgrounds

PC 1.4

In a multicultural country like Australia, you need to be skilled at communicating effectively with children from a range of different cultural backgrounds.

Every family has their own lifestyle and many people who live in Australia have cultural backgrounds based in other countries. Besides English, around 160 different languages are spoken in Australia. The most common include Italian, Greek, Cantonese, Arabic, Vietnamese, German, Mandarin, Spanish and Macedonian.

Depending on your service's location, there may be children enrolled who speak a variety of languages other than English. It is useful to learn about the community languages spoken in your local area, as they are likely to be relevant to your daily work practices. Remember that in some locations, members of the local community may speak one or more Indigenous languages.



Children from a variety of cultural backgrounds will attend your program.

## Implications for school age care

There are several issues you need to consider when working with children whose family members speak languages other than English, or who are not fluent English speakers. You need to develop a range of skills to allow you to work effectively with these children and their families.

### Strategies for encouraging cultural inclusion

Consulting with families and your community is a good start when incorporating culturally diverse activities and approaches into your programs. You should consider cultures that exist both in your local community and within the families of children who attend your service. Talk to families and children about their values and beliefs, so that you do not have to make guesses or respond to stereotypes that could be incorrect or even offensive.

The following are examples of culturally inclusive service provision:

- Take care to use correct pronunciation and spellings of children's names and those of their families, and use the same words for parents and grandparents that the child uses, such as Nonna and Poppa.

- Use books, posters, games, dolls, dress-ups and other materials that represent multiple cultures.

- Include songs and games, cooking experiences and foods from other cultures in activities.

- Avoid stereotypical images by including people from multiple cultures participating in everyday activities, to highlight similarities as well as differences.

- Show differences regularly and incorporate cultural features into activities, rather than simply highlighting difference every now and then in 'special' activities.

- Acquaint children with the diversity that exists in their community by organising excursions to places such as galleries, cultural heritage centres and museums.

Children who do not speak English at home may require additional assistance to understand English. You may find it useful to speak to a child one-on-one, and incorporate plenty of gestures and pictures, rather than relying on verbal instructions that you give to a group of children together. Help the child make choices and learn new words by providing options such as games or food while saying the relevant words in English. A simple board with pictures of common objects or places can be helpful while a child is learning to use English to communicate their needs.

## Interpersonal communication and support

Your skills in listening, observing, clarifying, questioning and leading discussions may need to be modified to allow for the needs of children learning English as an additional language. Remember that most children learn English at a fairly rapid rate due to specific teaching as well as their daily classroom immersion in the language. It is often the case that a child quite quickly becomes a more fluent speaker of English than their parents.

Here are some ideas to try:

- Play 'name games' to help children learn new names within the group.

- Play games that do not rely too heavily on verbal skills.

- Try a cooking activity that uses foods and cooking styles from the children's cultures – this allows them to be the experts and lead the discussion or activity in a topic where they are confident.

- Ask questions that have closed answers (for example, 'Do you want to play this game?') if a child finds open questions confusing (for example, 'What would you like to do next?').

- Use clear, simple sentence structures and ensure you have gained a child's attention before you begin speaking.
- Avoid colloquialisms and idioms, as these do not often translate well across cultures.
- Avoid jokes or sarcasm, as these are often misinterpreted.
- Avoid bias and stereotypes in conversations and discussions with children.

By thinking carefully about what you say as well as how you say it, you can support children learning English to build their own vocabulary and enjoy participating in activities.

## Respect

Respect for other cultures is shown readily through the use of everyday actions and language. Often small actions and words can make an enormous difference to how well-respected and included a person feels. Conversely, sometimes it is easy to cause offence without even realising it.

Take the time to learn about the cultures, traditions and customs of the people who use your service so that this is less likely to happen. If it does, a simple apology may be all that is needed to get things back on track again. Of course, it is also important that other people show respect for you too. You have a right to be treated in a polite and respectful way by other educators, volunteers, children and families.

# Learning more about cultures

You can learn more about supporting children and their families at your service who are from diverse cultural backgrounds in the following ways:

- Professional development – engage an expert to visit a staff meeting or provide an allocation within the training budget for staff to attend a training session on learning about other cultures.
- Local council – the local council can often provide data about community languages, and tell you about members of the council staff who have particular expertise or experience in working with diverse cultures.
- Professional interpreting and translating services – an interpreter or translator is a highly skilled professional who has spent many years training. Services such as the Victorian Interpreting and Translating Service (VITS), the Interpreting and Translating Centre (South Australian Government) and the National Translating and Interpreting Service (TIS) can be useful to access.
- Community organisations – most communities have organisations that support members from diverse cultures, and educate and share information and experiences relevant to those cultures with others in the community. By finding out what organisations exist in your community, you can tap into experiences such as training days, speakers, dance performances, musical productions, shows, food, cooking activities and entertainers, which can all add interest and significant educational value to your program.

# Access and equity

Everyone has a right to access programs such as school age care. Under Australian law, it is never acceptable to deny someone the right to access a program on the basis of their race or cultural background.

Many services have information in their policy documents about the right of access to programs, which refer to the criteria for access set down by the Australian Government. These criteria give priority to children in certain categories such as those with a family member with a disability, a parent returning to work or study, or a child who is at risk. A service may choose to reinforce the importance of fair and equitable access to programs through their vision and mission statements as a way of highlighting the values and beliefs they feel are important.

The YMCA provides school age care. The following example is from the YMCA South East Region (Victoria) Handbook. It shows the positive approach and high importance that the organisation places on respect for diversity within their programs.

## Example

**Our mission**

The YMCA works from a base of Christian values, to provide opportunities for all people to grow in body, mind and spirit.

**Values**

We look to our values to guide all that we do – caring, honesty, respect and responsibility.

**Vision**

Our vision is to build strong people, strong families and strong communities.

**Anti-bias**

The YMCA Outside School Hours Care (OSHC) will not discriminate against any person at any time for any reason under any circumstances. Access to the service is via the waitlist and the criteria as set by the Department of Education and Early Childhood Development (DEECD) and the Family Assistance Office. All children, families, staff and visitors to the service will be treated with respect, dignity and equality. The YMCA OSHC staff work towards actively reducing bias and the negative display of stereotypical images, ideas, behaviours and attitudes. Educators support children with knowledge and understanding, through role-modelling effective and respectful interactions. Throughout the year educators are involved in training to further develop knowledge and resources that will support continuing improvement and quality service delivery. The OSHC service also ensures that the selection of equipment and resources for children's use and play actively promotes and educates respect and equality; displaying images that are not biased, discriminatory or stereotypical towards a person's sex, physical abilities, socioeconomic level, religion, ethnicity or culture.

## Practice task 4

1. Imagine that a new child, Fela, from Nigeria has just started at your service. The new child is a 9-year-old boy with reasonable English language skills. Develop a list of communication and inclusion strategies you could use to help Fela feel included in your program.

2. Which policies of your service relate to access and equity? List the names of these policies and how they link to access and equity.

PC 1.5

## 1E Varying communication techniques to include all children

Some children with additional support needs, such as children with disabilities or health impairments, may require you to alter your communication approach to suit their needs and abilities. There are several ways you can do this. It is important to use an individual approach to ensure you match your communication to the child.

## Individual planning and programming

Some children with additional needs may have individual plans that detail their particular needs. This document may be kept in the child's file, and should be stored appropriately to maintain privacy and confidentiality.

If a copy of the individual plan is not available at your service, it may be kept on file at a disability support organisation that is involved in caring for the child. There are protocols and procedures to be followed to gain access to such information at these organisations. However, if you have the parent or guardian's approval, this is usually a straightforward process.

An individual plan can be helpful in the early stages of getting to know a child, and often includes information such as:

- type of disability
- implications of the disability (that is, what aspects of daily living skills and activity participation may be affected)
- communication methods and strategies
- goals and directions
- personal interests
- contraindications (anything the child should not be permitted to do or should not be offered)
- issues and problems that may occur, including emergency situations
- any action required by educators in particular situations.

Parents and caregivers of children who have additional support needs sometimes have the experience of multiple service providers asking them for the same information many times over. This can be frustrating and time-consuming, so where appropriate, ask them to give permission for agencies to share information.

Some individual plans may only cover health-related information such as asthma, diabetes or epilepsy management. Others may cover areas such as the needs of a child with a physical disability such as cerebral palsy. They may tell you about aspects such as mobility, eating and drinking, communication and toileting assistance. Working together with other educators can ensure that everyone

understands the best way to support the child's additional needs. You may need to ask a parent to attend one of your team meetings to talk to everyone about planning and support needs, so that the right information can be communicated effectively to all educators.

Listening to parents and the child themselves can be a great way of learning the best way to support a child with additional support needs. Remember that family members provide care and support on a daily basis, so they are generally expert at knowing what to do in various situations. They can also tell you if an activity needs to be modified, and if so, how you might do it. Use meeting notes to document any important information that family members share with you about their child, recording information according to your service's policy and in a way that complies with privacy legislation.

Children who require additional support need educators to communicate and interact with them in positive, supportive and encouraging ways to make sure they are included and valued as part of the group. You may need to work with your supervisor or team leader to build your skills in this area, or to spend some time being mentored by an educator who has experience working and communicating with children with additional support needs.

Never avoid communicating with a child with additional support needs simply because it is harder, feels awkward or you are afraid of making a mistake.

## Physical disabilities

Examples of physical disabilities include muscular dystrophy, cerebral palsy and multiple sclerosis. Children who have a physical disability may be limited in their ability to use receptive and expressive communication. They may also be limited in their ability to access tools, equipment and activities in their environment. Different disabilities affect children in different ways. For example, children with cerebral palsy may not be able to use verbal communication effectively, as the muscles used to generate speech can be affected, so their speech can be difficult to understand. They may use other communication methods to interact with people instead.

You may need to learn to use a particular piece of equipment when you work with a child with a physical disability. Examples of these include:

- communication books – these are divided into sections and the child may point or gesture to show you what they mean rather than speaking
- communication boards – these often sit on a wheelchair tray or table top and contain squares that the child can point to, in a similar way to using a communication book
- static speech-generating devices – these are electronic devices that contain buttons the child presses to give a message using a synthetic voice (for example, a 'GoTalk' device)
- dynamic speech-generating devices – these are more complex speech generating devices that provide a greater number of options and have various levels the child can move between to communicate.

As an educator, you need to establish a clear communication method that works well with a child with a physical disability. Focus on key aspects of routines that you engage in frequently, such as food and drinks, toileting support, play areas and activities, cooking tasks, art and craft activities and excursions. Vary this according to your program type and the child's needs and interests.

# Intellectual disabilities

Children with intellectual disabilities may be limited in their ability to use logical thought, process information, recall and retain information, use judgment skills and use abstract thought. Some children may have a mild intellectual disability, whereas other children may have a severe or profound intellectual disability. The degree of disability may affect their ability to communicate with others, build and maintain friendships, participate in activities, follow instructions, remember tasks and understand safety rules.

It is important to focus on a few key areas of support for children with an intellectual disability. By adopting a child-focused approach to care, you can ensure that the child's needs are met effectively. Consider the following areas:

- Friendships and interactions: ensure the child can play appropriately and enjoy their time in your program. Offer additional support for the child to establish and maintain friendships and be close by if extra support is required.

- Safety: be mindful that some children may not understand safety rules or limits, or may forget information you tell them. Some children may not be able to read, so visual information such as pictures or posters can be helpful. You may find it useful to modify your communication by using concrete words rather than abstract ones, and visual cues such as pointing and gestures to support what you say.

- Supervision: some children may require a higher level of supervision than you would normally expect for their age, particularly for tasks where there is a degree of risk, and for personal care tasks such as using the toilet. It may not be appropriate to allow as much independence as you would for other children in the program, but you can try to provide extra supervision in an age-appropriate and unobtrusive way.

# Sensory impairments

A child with a sensory impairment may be visually impaired or hearing impaired. Some children have both types of sensory impairment. Children with a hearing impairment may use signing to communicate or they may lip read. Some children have a cochlear implant or hearing aid to help increase their ability to hear. Some children with a hearing impairment can hear some sounds, while others cannot hear at all.

Children with a visual impairment may use a cane to help with mobility and they may use sight guidance, where they hold the elbow of a support person as they move around unfamiliar locations. Some children with a visual impairment have some vision or can see in particular lights and situations. Some children have no vision at all.

An individual, child-centred approach is vital when working with children with sensory impairments. Remember that young children in particular are often still learning appropriate strategies for communication and interaction with others in a new environment. It can be very challenging for a child with a sensory impairment to learn to move safely around a new place with unfamiliar people.

Strategies for communicating with a child with a hearing impairment include:

- learning some key signs
- facing towards a child who lip reads
- avoiding background noises and distractions when you are interacting.

Strategies for communicating with a child who is visually impaired include:

- avoiding changing the layout of furniture and equipment
- providing physical support when needed, but not without asking first
- using routines and predictable systems for frequently occurring activities
- combining visual tasks with auditory information at all times.

Support for children with sensory impairments is often quite specific to individual needs, so ensure you work with therapists, teachers and parents to offer appropriate activities, routines and support strategies and to ensure your communication style is suitable.

## Planning safety routines

It is important to consider safety routines and emergency information when you are planning for the inclusion of a child with additional support needs in your program. While all program staff should be aware of what to do in an emergency situation and how to communicate information and instructions to children, it is necessary to plan for how to keep children with additional support needs safe as well. Sometimes their needs can be met perfectly well using existing systems for safety; however, there may be times when you may need to alter your communication and actions.

The following is a list of tips you can use when planning safety routines for children with additional support needs.

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## Tips

- Emergency signal – use an emergency signal that is both visual and auditory, and test it to find out how children react when they hear or see it.
- Meeting point – arrange an easy-to-locate meeting point that can be reached by all children, if possible without physical assistance. Choose a location that is on flat ground and is away from traffic and other potential hazards.
- Staff-to-child ratios – in some situations it may be safer to have extra staff on hand, particularly for excursion activities where the risks can be greater and the environment less familiar.
- Risk planning – consider the risks involved in an activity before you begin so that you can plan for them and communicate with children and others about how to avoid or manage them.
- Safe methods – if there is a safer way of doing an activity, do not choose the higher risk option.
- Food and drinks – have a written plan for educators and parents/caregivers that details how food and drink safety is maintained (for example, think about issues such as cross-contamination of foods for children with allergies, and the spread of infection by sharing utensils).
- Anaphylaxis planning – work together as a staff group to develop a plan for managing an anaphylaxis emergency situation, including thinking about how staff will be deployed during the incident and how information and actions are to be recorded.
- Symbols and visual cues – use symbols, pictures and visual cues to increase understanding for children who may not be able to read text, particularly when it comes to emergency procedures, safety information and behavioural expectations.
- Plain English – make sure written information is in plain English and is easy to read, straightforward and not open to misinterpretation.
- Environmental behaviour triggers – some children, such as those with autism spectrum disorder, ADHD or dyspraxia, may show quite different behaviour in certain situations, such as when they are feeling overwhelmed or in response to various triggers. This behaviour can be risky at times, so find out about potential triggers and do your best to avoid them. Parents and caregivers may share information about triggers with you, or you can consult the child's individual plan developed over a period of time working with and observing the child in your program.

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The following case study shows how educators at a program adjust their communication strategies and their service procedures to ensure children with additional support needs are included and their safety needs are met.

## Case study

A recent emergency evacuation due to a bomb threat (later found to be a false alarm) at Fairyhills Primary Vacation Care Program has highlighted the need for a change to emergency and enrolment procedures. A child with additional support needs becomes confused and highly distressed because he is startled by the loud emergency signal and sudden change to routine that occurs. The child, who has autism spectrum disorder, begins crying, rocking and hitting out at other children and will not move from the vacation care room to the emergency meeting point. This in turn distresses other children and significantly increases the amount of time needed to move all of the children to the meeting point.

*... continued*

The educators meet to discuss the issue and reflect on how the situation could have been better managed. They agree to alter the enrolment pack information to specifically highlight emergency situations and ask parents/caregivers about any triggers known to cause a significant change to behaviour in their children.

They also agree to rehearse emergency evacuations with children on the first day rather than simply discussing them at the start of each program as part of their general introduction. They believe this will decrease stress for children with additional support needs and will increase their ability to quickly and safely move children to an emergency meeting point if needed.

They also decide to adjust their emergency procedures so that a designated highly experienced and skilled educator is responsible for quickly moving towards any children who are identified at enrolment as being likely to experience difficulties during an emergency situation, to provide direct support and assistance. This task will not be assigned to new or temporary educators.

## Practice task 5

1. Obtain a copy of your service's inclusion policy. Read the document carefully and then discuss it with your trainer, supervisor, a classmate or a colleague, with particular focus on the following:

   a) How would you feel if you were a parent of a child with additional support needs – does the way the policy documents are written encourage parents?

   b) Do educators seem to be well-supported in learning more about communicating and working with children with additional support needs?

2. Access your service's emergency evacuation procedure. Find the section referring to children and staff with special needs and note the assistance that the procedure states these people would need. If there are no needs listed, note the information that you would include if a child was visually impaired.

# Chapter summary

1. Listening to and responding to children is one way of learning more about them as individuals.

2. Building strong listening skills can help you to communicate more effectively with children who have additional needs and children from diverse cultural backgrounds.

3. It is important to build relationships over time with the children in your care, using effective and age-appropriate communication strategies.

4. Communication techniques may need to be modified to suit the developmental stages and ages of the various children in your care.

5. Children provide information about themselves and their needs on a regular basis; use good judgment to choose the most appropriate actions to take based on this information.

6. Some information that children provide to you may relate to your statutory obligations about health and safety.

7. It is important to be skilled at using various strategies to communicate effectively with a range of children from different cultural backgrounds.

8. Everyone has a right to access programs such as school age care, regardless of their abilities or cultural background. This right is protected under Australian federal law.

9. You may need to adjust your communication strategies to suit the needs of children with physical, cognitive or sensory disabilities.

10. Some children with additional support needs have individual support plans that describe how to meet their needs, as well as other important information that you might need to know about them.

## Assessment activity 1
## Communicating effectively with a range of children in the school age care context

Your trainer or assessor may require you to complete this assessment activity and will provide you with instructions as to how to present your responses. They may provide alternative or additional assessment activities depending on the circumstances of your training program.

The following table maps the assessment activity for this chapter against the element and performance criteria of Element 1 in *CHCSAC003 Work collaboratively and respectfully with children in school age care*.

| Part | Element | Performance criteria |
|------|---------|----------------------|
| A | 1 | 1.1, 1.2, 1.3, 1.4, 1.5 |
| B | 1 | 1.2, 1.3, 1.4, 1.5 |

## Purpose

This assessment activity is designed to assess your skills and knowledge in communicating effectively with a range of children in the school age care context.

## Requirements

To complete this assessment activity, you need:

- access to a children's services environment
- to answer the questions and submit responses as directed by your trainer/ assessor/training organisation.

## Part A

Answer the following questions based on your own experiences in a school age care environment.

1. A child tells you they do not want to join in an activity, but their body language suggests they are interested in the activity. Describe two strategies that would help you to appropriately support this child.

2. How would you provide information about the activity choices in the program to children who do not speak, read or write very much English?

3. A child in your holiday program stutters frequently. Other children are finishing her sentences for her. List at least three strategies that you could use to assist this child.

4.  The National Quality Standard 1.1 relates to using a child-focused curriculum. Discuss how a child-focused approach enables you to better understand the diverse needs of children. Include where in your service policies a child-focused approach is demonstrated.

# Part B

1.  Write a list of five games or activities you can implement for children in a school age care program that help support and meet the needs of a new child who has recently arrived in Australia from Vietnam. The child is 7 years old and speaks some English. Next to each game, describe how it might be useful for the new child. You may choose to present your information in a table.

2.  A child who has a physical disability tells you they want to learn to cook. Write a description of how you can safely and appropriately modify a cooking activity to suit the needs of the child, who:

    *   is 10 years old

    *   uses a wheelchair for mobility

    *   has limited expressive language skills

    *   has good receptive language skills.

# Record your foundation skills

When you have completed the assessment activity, make sure you record evidence of how you have developed and applied foundation skills. You may use the table at the end of this learner guide for this purpose. Keep copies of material you have prepared as further evidence of your skills. Refer to the information on foundation skills in Appendix 2 of this learner guide for further guidance.

# Chapter 2
# Reflecting an understanding
# of middle childhood

In this chapter, you will learn about how developmental stages can affect how a child operates in a school age care program, and how you should consider this information in your planning and interactions.

During this chapter, you will think about how children's interests and needs are linked to the way you create the program, and how each child's interests and needs set the scene for what comes next.

As an educator, you should know how to structure activities so they are safe and suitable for individuals in your care, and how to analyse children's actions and your own responses to see what has worked well and what has not. By analysing outcomes and situations, particularly when things have not gone as well as you had hoped, you can plan more effectively for future activities. This helps you provide a high quality service to children and families.

In this chapter you will learn about:

2A    Considering children's interests and needs in all your actions and decisions

2B    Evaluating issues and adjusting approaches according to children's abilities and culture

2C    Selecting activities and resources to promote access, equity and diversity and include all children

2D    Establishing guidelines relevant to middle childhood development

The following table maps this chapter to the National Quality Standard and *My time, our place – Framework for School Age Care in Australia.*

| National Quality Standard | |
|:---:|:---|
| ✓ | Quality Area 1: Educational program and practice |
| ✓ | Quality Area 2: Children's health and safety |
| | Quality Area 3: Physical environment |
| | Quality Area 4: Staffing arrangements |
| ✓ | Quality Area 5: Relationships with children |
| | Quality Area 6: Collaborative partnerships with families and communities |
| | Quality Area 7: Leadership and service management |

| My Time, Our Place – Framework for School Age Care | |
|:---:|:---|
| **Principles** | |
| ✓ | Secure, respectful and reciprocal relationships |
| | Partnerships |
| ✓ | High expectations and equity |
| ✓ | Respect for diversity |
| ✓ | Ongoing learning and reflective practice |
| **Practice** | |
| ✓ | Holistic approaches |
| ✓ | Collaboration with children |
| | Learning through play |
| ✓ | Intentionality |
| ✓ | Environments |
| ✓ | Cultural competence |
| | Continuity and transitions |
| ✓ | Evaluation for wellbeing and learning |
| **Outcomes** | |
| ✓ | Children have a strong sense of identity |
| ✓ | Children are connected to and contribute to their world |
| ✓ | Children have a strong sense of wellbeing |
| ✓ | Children are confident and involved learners |
| ✓ | Children are effective communicators |

## 2A Considering children's interests and needs in all your actions and decisions

PC 2.1

Each child has a unique way of looking at the world and will be fascinated by different things. Sometimes interests will occur based on what they know about the world, what their family participates in or what friends enjoy; at other times a child's interest will be determined simply by enjoying participation.

The success of your planned experiences relies heavily on how suitable the experiences are for the children in your care. When choosing experiences, reflect on what you have noticed about the child and link experiences with the children's interests and level of development, so activities are enticing and safe. There must be sufficient play spaces available for children to have a choice of two or three different activities.

## Teachable moments

Spontaneous teachable moments occur throughout the day. A teachable moment is when you recognise a learning opportunity for which you can provide guidance and build on interests. The following are some examples of spontaneous teachable moments:

- A child is watching a bird. You see this as a spontaneous teachable moment to support them to learn what type of bird this is, where it lives and what it eats.
- A child is painting and exploring colours. You see this as a spontaneous teachable moment to talk about how you can mix paint to create different colours.

## Child-initiated learning

Children learn in different ways – through listening, seeing and doing. Child-initiated learning means that the child chooses their activity and learns through this. This may be an informal learning experience that involves play and results in knowledge, or the child may initiate a learning experience where adults participate and guide the learning. The educator's role is to support learning where children are inviting this to occur.

Current pedagogy supports child-initiated learning in middle childhood environments. It is promoted within MTOP under the following listed Practices:

- 'Collaboration with children' involves catering for their interests and abilities and participating as partners in child-initiated learning.
- 'Learning through play' involves respecting the value of play in learning and adding sustained shared conversations and encouragement to think and explore, including providing for teachable moments.

- 'Environments' involve catering for different learning styles and offering possibilities and experiences, knowing that the children will explore from the resources and ideas provided.

- 'Evaluation for wellbeing and learning' involves watching, noticing, observing and recording so that you find out what is next, what the children need and how the program and your pedagogy will adapt based on the knowledge you gain.

## Stages of child development

Children move through a number of distinct stages on their pathway from infancy through childhood and into the adolescent years. It is important for you to have an understanding of the stages of child development as this helps you understand a child's needs. Be mindful that children progress through these stages at different rates, so do not expect all children of the same age to behave in the same way or to be at the same developmental stage.

Children's development occurs in the following areas:

- Cognitive – being able to think, reason, make decisions and choices, use logic, use abstract thinking and recall information

- Emotional – awareness of self and relationships with others, with the focus gradually moving to others in the environment; ability to play alongside, and later with, others; ability to negotiate, take turns and see situations from others' perspectives

- Social – closely related to emotional development; includes the ability to play with others, interact in positive and meaningful ways, and participate in small and larger group activities

- Physical – development of fine and gross motor skills; ability to move in a fluent, smooth and coordinated way; ability to turn, spin, roll and use equipment for physical skills; increases in height and weight, and muscular and bone development

- Psychological – movement from an inwardly focused way of thinking to a more outward focus; the ability to hypothesise, consider alternate perspectives, understand time and space, and sort, organise and classify objects

- Language – movement from sounds without the intention of communicating to intentional communication; increase in size and scope of vocabulary; ability to give structure to communication through sentences, questions, answers and use of tense; ability to take turns, listen and respond; mastery of full range of speech sounds

Of course, many of the features and behaviours you observe in a child relate to more than one area of development. For example, a child performing a reading task with a friend on a computer screen is combining thinking skills (cognitive development), turn-taking and interaction (social skills) and posture maintenance and fine motor skills (physical development).

# Development milestones during middle childhood

Development in the key areas of physical, social/emotional, cognitive and language is rapid during the first years of a child's life and throughout early childhood. By the time a child reaches middle childhood at age 5, development has slowed down and continues steadily until adolescence when it speeds up again. The 5–12 years stage is considered to be a period of consolidation where children have an opportunity to practise and refine the skills they have achieved in earlier childhood.

The following table outlines development in different domains in the 5–12 years stage.

| Age | Physical development | Social/emotional development | Cognitive and language development |
|---|---|---|---|
| 5–12 | Children in this age range are generally physically active, though physical skills may vary. Children of the same age may also differ in height, weight and build. These differences are influenced by genetic background, nutrition and exercise. During this period, children develop greater control over their large muscles, which allows them to enjoy a range of physical skills such as running, hopping and dancing. By 8 years, most children can skip. Girls usually develop fine motor skills (for example, use of small muscle groups such as in their hands) earlier than boys. In the earlier part of this period, most children learn how to catch small balls, manage buttons and zips and tie shoelaces. By age 12, they have well-developed gross and fine motor skills. | Between 5 and 8 years, children are still relatively self-centred and think more about their own needs than those of others. Their social skills are developing and they start to enjoy group activities and interacting with others. As they move through this stage, children begin to develop a moral sense, such as an understanding of honesty and fairness. Friendships become important as children learn to empathise with others and become less egocentric. They start to take responsibility for their own actions and want to be accepted by the peer group. During this period, children begin to develop a sense of self-concept and self-esteem. | Children's ability to speak and express themselves develops rapidly. They use language to ask questions, solve problems, seek information and explain themselves. Their attention span increases and they begin to enjoy sharing thoughts and reactions with others. They begin to understand that others may have different ideas and opinions from theirs. At approximately 7 years, children have the ability to apply logic to concrete or practical problems. Their thinking and reasoning is more logical and organised than in earlier childhood. |

## Analysing information about children to build a child-focused approach

You can use your knowledge of each child's interests and your general knowledge of child development to decide how best to work with individual children. You may find that simply by observing how children move, play and interact with each other and listening to their language, you can make some judgments about how to provide for them. For example, if you have a group of children who are very young and in their first year of school in your program, it is reasonable to assume the following:

- They are aged somewhere around 4 and a half to 6 years old.
- They can generally make themselves understood by others in most situations.
- They can follow simple rules.
- They can manage toileting, dressing and eating independently.
- They require close supervision to remain safe.
- They can play with other children and share toys and activities.
- They cannot catch a tennis ball, tell the time or follow a complex series of instructions.
- They may still misjudge their physical capabilities.
- Their drawings may still lack complexity.
- They are probably only safe using 'child' scissors and cutting equipment, and need close supervision when cutting.
- They cannot always correctly use tense when speaking.
- They generally cannot read independently, beyond more than a very simple text with basic words.
- They become fatigued easily towards the end of the day.
- Family is still a very important focus in their lives.

You will also be aware of some common interests of children at this age. They most likely enjoy:

- dramatic play
- construction activities
- learning how things work
- simple craft and art
- being read to
- puppets
- picture books
- puzzles
- cooking
- small group games and discussions.

Simple art activities are flexible and allow children to choose how they want to participate.

# Identifying children's needs

By analysing the ages of children, whether they are reaching milestones and how they behave, you can decide which sorts of activities and games might suit their needs in a program. For example, for 5-year-olds who are unable to read, you may decide to do a cooking task that uses pictures for each of the recipe stages rather than a text-based recipe. You may decide to watch a movie that is rated 'G' during a holiday program, so it is appropriate for this age group. You may opt for a simple outdoor game with large, soft balls and easy-to-understand rules so everyone can join in safely.

The following case study shows how an educator considers children's interests and needs based on their age and likely developmental stages when taking actions and making decisions.

| Case study |
|---|

Beth is putting together a timetable for a holiday activity program. She knows most of the children are aged 8–11 years. Here is the timetable she sends to families.

| Day | Activity | Description | How it relates to children's interests | How it relates to children's needs |
|---|---|---|---|---|
| **Monday** | Games, games, games! | Bring your own games from home, or share the fun with some of ours! We'll be playing some old favourites like Celebrity Heads, Connect Four and Uno, as well as heading outdoors for some dancing games and a few sporting activities like cricket, soccer, hide-and-seek and tunnel ball. | Children will choose their favourite games from home and learn about games other children enjoy. | Children will bring games they are familiar with and can participate in successfully. |

*... continued*

| | | | | |
|---|---|---|---|---|
| **Tuesday** | Meet the reptiles | We'll have visitors from the zoo's reptile display! Learn how to hold a turtle, and what to do if you see a snake. Make your own reptile collage or hessian wall hanging, and enjoy cooking some turtle-shaped pancakes. | Many children showed interest in reptiles during the last program when one of the children brought in their pet lizard to show the group. | Children will have a choice of art and cooking levels, and will have the opportunity to ask questions and to come as close to the reptiles as they prefer. |
| **Wednesday** | Movie mayhem! | We're off to the cinema to check out the latest flick! Help us make ice cream creations once we are back at the service. If a movie is not your thing, give our graffiti-style mural a go instead. We will have a group at the centre working hard to paint a new design on the wall of the gardening shed at the back of the primary school. Bring your old clothes for this one – it'll get messy! | Choice of movie or mural to ensure options are provided to meet interests. Movie is G-rated and one that the children have shown interest in. | Choice of activities allows for developmental needs to be catered for, including within each activity as the child can participate to the level they choose and develop new skills if ready. |
| **Thursday** | All things Italian | Thursday is Italian day. Expect everything to be decked out in shades of red, white and green and be ready to play some soccer, make a flag, design your own pizza (gluten-free available) and learn some new Italian words. | Activities are available in a range of areas, allowing each child to pick an area of interest or learn about something new. | Dietary restrictions will be catered for. Activities will span a range of interest areas enabling the children to participate at their level and also challenge themselves. |

*... continued*

| Friday | Let's be creative | Friday is art and craft day, although there is plenty of other stuff to do if art is not your thing. We'll have the tie-dying gear out so bring a white T-shirt or use some of our material pieces, make a badge with our badge-maker, make your own planter box using a hammer and nails, do some beading or try your hand at making an ice-cream-stick house. Wear old clothes in case some activities get messy! | Options are available for those not into art and craft. Art is open-ended and the activities will be flexible to allow children to use their own creativity, or samples will be provided for those who like to work to a model. | Educators will be available to support children, particularly where new skills are being learnt. |
|--------|-------------------|---|---|---|

## Practice task 6

1. Observe the children in your service and identify one child's interest.
   a) How old is the child and what is the child's interest?
   b) How do you know this is the child's interest?
   c) What actions and decisions have been made that link to this interest?
   d) What further actions and decisions could be made that link to this interest?
2. Observe the children in your service and identify one child's needs.
   a) How old is the child and what is the child's need?
   b) How do you know this is the child's need?
   c) What actions and decisions have been made that link to this need?
   d) What further actions and decisions could be made that link to this need?

# 2B Evaluating issues and adjusting approaches according to children's abilities and culture

Variations in children's interests, abilities and cultural background mean you need to think, plan, consider issues, and then adjust your approach to suit individual children.

## Previous experiences

Previous experience has a great deal to do with how a child gains skills, develops interests and moves from one stage of development to the next. However, it is important to remember not to hurry a child through to the next developmental stage if they are not yet ready for it, or to instil an interest in them that is not to their liking.

Experience can help a child to gain skills providing they are developmentally ready to do so. The critical factor is that the experience must be a positive one, as children are generally far more likely to develop if they are given praise, reinforcement, encouragement and support than if they receive criticism, punishment or feel put down despite their best efforts.

In particular, children can work very successfully on developmental needs if these are linked with activities that meet their individual interests. For example, a child who is praised on a regular basis for their efforts at learning to read is more likely to persist with the task. When the books they are reading are linked to an interest, they are even more motivated. These factors in turn provide them with more opportunities to practise their skills, thus leading to gains in their reading abilities over time.

By contrast, a child who is frequently discouraged when they read and receives unfounded criticism of their attempts to read and pronounce new words is more likely to find reading to be a negative experience and will avoid it, especially if they are not interested in the topic of a book. This may lead to less practice and therefore a failure to gain new reading skills.

The following case study shows how educators can assist with a child's experiences and development.

### Case study

Liam is 11 years old and lives in a high-rise building. His teachers are concerned about his motor skill development as he cannot throw or catch over short distances, and does not know how to kick a ball or skip with a rope. His PE teacher has written to his parents to suggest a review by an occupational therapist.

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> The team at the school age care service are asked for their opinion of Liam's motor skills when he is at the program after school. The supervisor reports to Liam's parents that Liam makes attempts at most outdoor activities, but he seems fearful of ball-related activities and is unable to throw or catch a medium-sized ball over a short distance. The team members generally make sure Liam is positioned close to an educator during ball games and that he receives regular opportunities to practise throwing and catching if he chooses to. They often need to modify ball games to maintain Liam's safety, as he would be at risk of injury during a regular unmodified game such as cricket.
>
> The occupational therapist finds that Liam's lack of experience at ball sports and playing with equipment in an outdoor environment have contributed to his lack of gross motor skill development. She recommends that Liam be given more frequent opportunities to practise ball skills in a safe, modified environment such as at the after-school program. This is a successful suggestion, as Liam enjoys playing with other children outdoors and is particularly interested in active play.
>
> By considering Liam's individual needs and interests, the educators at the program are able to support his active participation in the program and build his much-needed gross motor skills.

You can see from this case study that it is important to:

- adjust your approach for individual children to suit their interests and developmental stage
- have a good knowledge of what to expect from children at various developmental stages
- know how to modify an activity to make it safe and appropriate for a child who has limited skills in the area
- know how to modify an activity to make it suit an individual child's interests.

Issues will arise if you ignore a child's interests and needs. A child who is not interested or helped to feel capable may develop behaviour issues or disrupt others, and they may feel resentful for being in a place where they do not feel they belong. The program and other children may suffer as the child makes their feelings known. These possible outcomes demonstrate that there is no benefit in an educator insisting a child participate against their will or because it is easier to have all children follow the same program at the same time. You may also experience the following issues:

- Children who are not encouraged in their attempts at establishing new friendships away from the family home and are persuaded away from showing initiative and attempting new things are more likely to experience self-doubt and inferiority.
- Children who are not given many opportunities to explore the physical world using tools, equipment, toys and games may experience more difficulty understanding the world and its attributes. For example, a child who is never permitted to pour themselves a drink from a jug may struggle to learn that different height and shaped cups hold differing amounts of liquid and that pouring too much or too fast causes the cup to overflow.

- Educators can support children by providing frequent praise, encouragement and opportunities to learn, experience and test out new skills in a safe and supportive environment.

# Safety

Safety is vital in any school age care setting, and childcare regulations require educators to appropriately supervise children at all times to maintain their safety. Educators owe a duty of care to children to make reasonable decisions that protect them and keep them safe.

Some children are more likely than others to attempt higher risk activities such as climbing onto high surfaces or equipment or leaving the facility when they are not meant to. Some children are more likely than others to fail to follow directions or requests, or to challenge rules and expectations. This can be due to:

- the age and developmental stage of the child
- whether the child has a disability, such as a developmental delay, intellectual disability or autism spectrum disorder
- the child's previous experiences
- the presence of other children who may encourage risk-taking behaviour in the group
- your attempts to make the child feel they belong
- family situations or difficulties, such as a separation, moving house or the death of a close relative.

Any of these factors can influence the likelihood of a child to take risks with their own safety or that of others around them. Your duty of care is greater if you have knowledge that a particular child is more likely to take risks or be at risk for some reason. Your safety decisions must always take into account the developmental stage of the child and any other factors that may affect risk-taking and safety. Always use your knowledge of individual children to assess risks in the environment and activities you are planning.

# Cultural background

A child's cultural background can also mean you need to rethink your expectations and adjust your approach in providing care. Cultural background can particularly affect:

- previous experiences the child may have had; for example, trauma from having lived in a battle zone in their previous country
- what activities are appropriate; for example, running a cooking activity that makes allowance for the eating habits of children from different cultural backgrounds
- imagery and visual displays used; for example, displaying posters with images from a wide range of different cultures

- media and screen-based activities; for example, some children may not be permitted to watch television or other screen media
- participation and skills in motor skill activities; for example, some children may have had limited experience at ball sports
- development of friendships within a group of children – it can take time for children to establish friendship groups and form relationships, particularly in a program where children do not attend the same school.

By considering cultural background and talking to families about their expectations of your program, you can do your best to provide activities that are appropriate, interesting and safe for all the children in your care. You may need to offer alternative activities or consider other ways of doing tasks that may not be seen as appropriate for some children. For example, you could offer a cooking activity at the same time as a movie session during a school holiday program.

## Indigenous cultural backgrounds

Children who have an Aboriginal or Torres Strait Islander background may be drawing on a quite different set of experiences, expectations and social structures to your own. Having some knowledge of Aboriginal culture can be useful, and there are often people in your local community with expertise in providing training and information for people working with families from an Indigenous background. Here are some useful points about Aboriginal culture:

- English may be a second or third language for an Aboriginal person.
- Communication and conversation may take a different pattern to what you are used to; for example, Aboriginal people may talk around an issue rather than seek a hard and fast decision as soon as possible.
- Aboriginal society is structured in very particular ways, based on a kinship system where family is the number one priority in all social interactions.
- Aboriginal people avoid viewing images or using the names of people who have passed away.
- Children are typically raised as part of a community group and have a relationship to all the adults within that group.
- Funerals can be planned over a period of weeks and Aboriginal people may be absent for extended periods at this time.

Elders and professionals such as Aboriginal health workers and mental health workers can be vital in helping you and your work team learn about Aboriginal culture. By taking a positive approach and seeking out information about a local culture, you are likely to achieve positive outcomes for Indigenous children.

# Parenting styles

Parents and caregivers differ greatly in the style of parenting they adopt. Parenting styles include:

- authoritarian – higher levels of demand are placed on children with lower levels of responsiveness; the focus is on obedience and discouraging autonomy and independence
- authoritative – higher levels of both demand and responsiveness are shown towards children; a warm environment is coupled with clear boundaries and participation by all family members in decision-making
- permissive – this involves lower levels of demand and control over children, with undefined limits and boundaries, which can lead to children becoming more challenging in behaviour and less able to comply with instructions and directions.

Parenting styles often relate closely to cultural values, with some cultures tending to adopt particular styles in preference to others. For example, many people from a Fijian cultural background tend to view parenting of children as a shared responsibility, and may not hesitate to reprimand or redirect a child from another family if they are misbehaving. However, a family from a different cultural background may view this as interfering in the family's business.

Parenting styles also relate to:

- the parents' experiences of being parented
- levels of parent education
- access to information such as websites on parenting, maternal and child health care and training sessions run by community organisations.

You may find that parenting styles can account for at least some of how children behave and react to situations, particularly those that involve redirecting behaviour or establishing behavioural expectations. You need to remember that children experience different parenting styles at home and this affects how they relate to you in a school age care program. You also need to consider that the parenting styles experienced by children can change over time, such as when a family experiences a break-up or a new adult moves into the family home.

# Focusing on strengths

A strengths-based approach to school age care means making sure you focus on what a child can do well, as well as on the positive elements of a situation. While it is relatively easy to focus on a child's strengths, it can be more challenging to find the positives in a situation involving parenting styles and cultural backgrounds that are significantly different to your own.

Some cultural values and expectations may seem quite at odds with what you are used to. For example, it may seem unusual to you that a child is required to wear a head scarf during the day or that they are not permitted to watch television at all, but in some cultures these may be common expectations of children rather than exceptions.

A strengths-based approach to this sort of situation means focusing on the positives. Think about the benefits that go along with having children in your program who come from a wide range of cultural backgrounds and have had many different experiences. While at times this can make the planning and implementation of activities more challenging, the positive aspects are also easy to identify:

- Children can learn from each other and gain in tolerance, understanding and respect for each other's values and experiences.

- Children grow to be more accepting of individual differences with experience and time.

- Children can share the language, traditions and knowledge that stem from having a different cultural background.

- Different parenting styles give you the opportunity to see first-hand how parenting relates to children's behaviour and performance in particular situations.

As a wider society, we all can benefit from experiencing other cultures and seeing different parenting styles in action. By widening our view of the world, ultimately our society becomes one where individual and family differences are seen as the norm rather than the exception.

The following case study shows how a group of educators evaluate issues and adjust their approach according to children's development and culture.

## Case study

The outside school hours care educators at Magda Waters Primary School have identified a gap in their skills and knowledge when it comes to meeting the needs of families and children from diverse cultural backgrounds. Despite being located in an area with a high proportion of children coming from Aboriginal backgrounds, the educators discover that they do very little to cater to these specific needs. When they look at their enrolment records, they also realise that very few Aboriginal families are using their services. They do have a large number of children from other backgrounds including Malaysian, Vietnamese, Chinese and Thai, but the existing program does not cater very well for these children and their needs.

The educators decide it is time for a change: they want to do more to attract Aboriginal families and cater more effectively for a highly diverse group of children. They organise a series of three training sessions where they bring in trainers from a few different local organisations to help them build some skills based on cultural awareness and set up appropriate programming to support Indigenous families and those from diverse cultural backgrounds.

At the end of the training series, they work together to set some goals and rewrite their policies and philosophy for the program. Feedback from families suggests that they are much happier with the new format of the program and within a few months, there are now four new children enrolled who are from Indigenous backgrounds.

## Practice task 7

Geoff, 8 years, is commencing at your service. He is from an Indigenous background and uses a wheelchair.

1. List the ways your service could currently support Geoff.

2. List the issues Geoff would currently face attending your service.

3. For each issue you listed, identify how the service could adjust to meet Geoff's needs.

## 2C Selecting activities and resources to promote access, equity and diversity and include all children

You should select activities and resources for your program to promote the inclusion of all children and reflect the diversity of backgrounds present within your group.

Activities should be appropriate for the physical and cognitive development of the children in the program and should be easy to modify. Activities that can be performed in more than one way are ideal as this allows children to be individual in their approach.

Remember to offer a choice of activities where possible, as some children naturally prefer more active pursuits, while others prefer more sedentary tasks. You may also find that some children become tired more quickly than others. Sometimes this is related to the child's age, as young children tend to tire more quickly than older children, or because the child has not slept well or has had a busy day at school. Sometimes other factors such as low muscle tone, coordination difficulties or disabilities such as cerebral palsy can cause a child to tire quickly.

## Types of activities in school age care programs

A wide range of activities are planned and delivered for children in school age care programs. Activities can cover many different aspects of children's needs.

### Cultural activities

Cultural activities highlight or focus on particular cultures, and may include cooking, movies, dance or music. For example, you may employ someone to run a session on Aboriginal culture, which may include dancing, music, stories and learning about bush foods and tracking animals. Try to incorporate some cultural activities as part of your everyday plans rather than 'special' sessions, and aim to have aspects of different cultures evident in the program and resources at all times.

### Developmental activities

Developmental activities are those appropriate to the children's ages and developmental stages. They may need to be modified depending on the individuals in your program, and may include activities designed to promote skills within a specific stage of development, particularly for children with additional support needs.

## Life and social skills activities

Life and social skills activities have a life or social skills focus, such as activities where children are involved in cooking or preparing food for the group; interacting and communicating with each other; taking care of the play space; being responsible for a task or a pet; or playing small or large group games. It is reasonable to assume that children in middle childhood are beginning to build valuable life skills such as caring for belongings, organising their own time and tasks, and taking responsibility for some aspects of activity planning.

## Homework support

In some programs, children may be provided with homework support, such as a place where they can do their homework without interruption or where they can access information to help them with their homework tasks.

## Recreational activities

Recreational activities form the basis of most programs and can include small and large group games, outdoor activities and informal recreation activities. For example, children in the middle stage of childhood may enjoy board games, parachute games, a mini sports round robin competition, treasure hunts or learning to use orienteering equipment such as a map and compass within a secure environment. Including recreation activities from other cultural groups can be a useful way of helping to engage children from various cultures.

Recreation and sporting activities can be group or team based, and you can assume that children in middle childhood can understand the rules of a game once explained. Children can manage equipment such as balls and bats, although you should ensure that they can do so safely. You may need to provide soft equipment or modify the rules depending on the individuals in your group. You may also need to explain and demonstrate some skills, as not all children are familiar with a wide range of sporting activities at this stage. Remember that non-competitive sports and games can also be fun.

# Modifying activities

There are many different ways of modifying the activities in your program to ensure they are appropriate for all children and inclusive of all needs. The following table shows you some of the ways you can modify activities to suit the needs of children with disabilities and children from diverse cultural backgrounds.

| Activity | Modify for inclusion | Modify for diversity |
|---|---|---|
| Watching a movie | Choose a movie that has captioning available so that dialogue can be read on the screen by a child who has a hearing impairment. | Make sure you have permission from parents or caregivers, as some children may not be permitted to watch movies or television.<br><br>Consider the appropriateness of movies that you select, so they are suitable for all children present. |
| Cooking | Use assistive technology such as a switch or power link device to modify for a child with a physical disability.<br><br>Attach sponge grips to utensils so they are easier to hold.<br><br>Roster on additional educators when running difficult activities.<br><br>Increase font size for recipes, or use a recipe that has pictures and graphics so it is easier for everyone to read. | Make sure you cook foods from a variety of cultural backgrounds; for example, sushi rolls, fried rice, pizza, hummus, pasta dishes or salads.<br><br>Use healthy recipes and choose or adapt these to address the needs of children with allergies or celiac disease, or children with food preferences such as vegetarians or vegans. |
| Painting a mural | Add a sponge grip to a paintbrush or use a roller so it is easier for a child who has problems with grip.<br><br>Consider the height of the mural and make sure everyone can reach it easily.<br><br>Use a variety of materials and textures that are designed to appeal to all children.<br><br>Do not make the design too complex and keep instructions simple and easy to follow. | Think about the design you choose and make sure it is appropriate. Allow the children to choose from two or three ideas.<br><br>Children may enjoy creating a mural with a cultural theme that is relevant to them.<br><br>Murals that reflect Aboriginal culture or flags, or contain symbols and images that portray all the children in your program can be enjoyable and appropriate for everyone. |
| Gardening/ planting vegetables | Raise the height of garden beds so they can be reached from a wheelchair.<br><br>Be clear about safety instructions such as wearing gloves and a mask when handling potting mix.<br><br>Make sure anything planted is safe, and avoid riskier plants such as rhubarb where part of the plant can be toxic if eaten. | Use a website such as Babel Fish to translate key words such as the names of plants and vegetables into relevant community languages. |

# Mealtimes

In a program where meals are served, you need to consider how to do this in a way that is inclusive of children with additional support needs and those from diverse cultural backgrounds. Here are some ideas:

- Offer a wide range of foods and remember that children from some cultures may not be used to eating certain foods; for example, cereal with milk or toast for breakfast.

- There may be religious restrictions on food preparation, such as halal and kosher requirements.

- Provide some foods that can be eaten with the fingers as well as foods that require cutlery and other utensils.

- Provide adaptive equipment for eating as needed, such as bowls with raised edges or spoons with sponge grips attached.

- Children from some cultures, as well as those with an intolerance to lactose, may not drink milk, so it is important to offer alternatives.

- Some children may take far longer to eat breakfast than others, so make sure you allow for this.

- Consider how to budget for the additional cost of adaptive equipment, as well as a wider variety of food choices, as these can be expensive.

It may be important to meet with your supervisor and other educators, and in some cases to liaise with parents, caregivers and specialists, to ensure you adequately meet the nutritional and other needs of children who eat meals during a program. Professionals such as inclusion support workers can offer advice and assistance in preparing and serving meals for children with significant disabilities.

The following case study shows how an educator selects activities and resources to promote access, equity and diversity and include all children.

### Case study

Mary has been asked to modify the activities for a holiday program run at a local primary school. In particular, she needs to make sure the activities meet the needs of Trevor, a 10-year-old boy with autism spectrum disorder. Mary is worried because she knows that an excursion has been planned for the day he will attend, and she knows that Trevor finds being out in busy environments with lots of noise and movement to be quite challenging. Here are Mary's ideas:

**Conduct a risk assessment for the day's activities:** consider situations where an accident or injury may happen and what steps can be taken to avoid these.

**Supervision:** increase the ratio of educators to children by asking a support worker to attend for the day to provide one-on-one care for Trevor.

**Environment:** ask the support worker to help provide a calm and relaxed environment for Trevor by avoiding situations where there are high levels of noise and activity.

*continued ...*

*... continued*

**Triggers:** a distressed and agitated response from Trevor can be triggered by him having too many people sitting close to him, so he will have his own seat on the bus and sit near the edge of the group rather than in the centre when they are all together.

**Behaviour support:** make sure that all staff attending the excursion are aware of the strategies to support Trevor in managing his behaviour, including speaking calmly to him, avoiding triggers, providing adequate warning before a change in activity or location, and encouraging him to use his communication book to make requests, ask questions or make comments.

By thinking through the activities for the day as well as how Trevor may experience these activities in comparison to other children, Mary can plan for these and ensure Trevor has an enjoyable and positive experience on the excursion.

## Practice task 8

Read the scenario, then answer the question that follows.

### Scenario

You are working at a school age care service that has an established program of activities for a mixed group of children aged 7–12. You have been running activities for the whole of term one, but at the start of term two a new child, Bishr, from Iraq, has joined the program. Bishr is 10 years old and has limited English language skills, but he is learning fast.

How would you vary established activities to ensure Bishr feels included in the group? You can use the categories of activities in the modifying activities table or choose four of your own.

## 2D Establishing guidelines relevant to middle childhood development

As children progress through middle childhood, they begin to develop social skills and become less self-focused. After 8 years of age, most children begin to develop an understanding of honesty and fairness. They become a lot more involved in forming friendships and interacting with others. However, social involvement comes with the need to understand that there are social responsibilities and expectations of what is acceptable behaviour.

## Developing guidelines

Children in the middle childhood stage are learning a lot about their own behaviour and how it can affect other people. At this stage, children can manage and modify their own behaviour and take on feedback given to them by other people. They can take turns and see situations from someone else's point of view. They are less self-absorbed than children in the early childhood stage and have more sophisticated thinking, reasoning and linguistic skills.

Children at this stage can consider the needs of the group as well as their own. It is reasonable to develop an agreed set of guidelines or expectations of behaviour, and for children to have input into consequences that apply when rules are broken. It is also reasonable to encourage children to discuss problems that arise and work together to find a solution.

### Appropriate and inappropriate behaviours

Many school age care services have a set of guidelines that specify what is appropriate and inappropriate behaviour. The guidelines usually include what happens when a child's behaviour goes outside the set boundaries and the processes to be followed. The role of families or carers in behaviour support is also spelt out.

When developing behaviour guidelines, it is important to make clear what is acceptable as well as unacceptable. Write behaviour expectations in terms of what you would like children to do rather than simply being a list of what not to do, as this gives children examples of acceptable behaviour. They should be given the chance to critically look at appropriate and inappropriate behaviours and the different effects they have on others.

Lead discussions with children to help their understanding of how different behaviours can affect others. You can give children a role in setting out play and safety limits and identifying suitable consequences for when those limits are breached. This gives you the opportunity to include the children's views in guidelines or rules for the service. The guidelines should list behaviours that are not acceptable; for example, not following directions from educators, abusing equipment, yelling and swearing. They should also outline the consequences

for inappropriate behaviour; these are usually related to the type of breach. For example, if a child's rough play causes another's schoolbag to empty on the floor, it would be appropriate for that child to pick up everything and put it back in the bag. In cases involving violence or bullying, the consequences would be more serious.

## Guiding children's behaviour

One of the ways that children learn social skills in middle childhood is by watching and learning from the adults around them. In your role as educator, one of the most effective methods to guide children is to model appropriate behaviour. Another key element in guiding behaviour is to build genuine relationships with the children in your care. Section 1B looked at communication strategies that encourage relationship building. In addition to those skills, you should consider:

- being aware of individual children's relationships, interests and needs
- involving children in discussions about desirable behaviour and in setting limits and rules
- modelling positive communication and behaviour
- discussing emotions with children and acknowledging their feelings
- having appropriate expectations of children's behaviour
- giving explanations to children when behaviour limits are enforced
- preventing conflicts and inappropriate behaviour rather than punishing children when these occur
- encouraging children to negotiate and find solutions during disagreements
- providing adequate equipment and space, and organising the environment to promote harmonious play.

To build genuine relationships with children, you need to build trust and respect and treat them all fairly.

## Safety and risk management

Safety and risk management considerations for children in middle childhood can include a greater degree of responsibility, because children of this age can usually:

- remember a sequence of instructions (usually at least two to three instructions at a time)
- think, reason and make judgments that are reasonable
- understand the consequences of their actions
- respond to requests that they see as being reasonable
- challenge and question rules and requirements
- be physically capable of more complex and difficult tasks
- independently manage personal care, toileting and routine daily tasks.

By encouraging children to take responsibility for themselves and their actions, you are less likely to have problems with safety and risk management in your program.

Of course, it is still important to closely supervise and monitor all children in your program at all times, regardless of their age and stage of development. One of the best ways of providing appropriate supervision for children at this age is to be closely involved in their activities. You can do this by participating directly in a game or sporting activity, joining in a conversation with a group of children or participating in an art and craft activity. Supervision is often easier when you are close at hand and directly involved in the same tasks as the children. This allows you to monitor situations discreetly and be ready to divert or distract when needed, and to take action if you feel a child could be at risk.

The following case study shows how an educator uses guidelines relevant to middle childhood development to complete an activity plan.

**Case study**

Jo works for an organisation that provides after-school care at many different schools and other locations. His organisation uses a template so that all educators provide the same information in the same way. He fills in the template to complete an activity plan, as follows.

| Program name: Soccer clinic and indoor art | | | Educator in charge: Jo Toskin | |
|---|---|---|---|---|
| Time of program start: 3.45 pm | | | Time of program finish: 6.00 pm | |
| **Activity name** | **Description** | **Risks or dangers** | **Minimising risk strategies** | **Equipment needed** |
| Soccer drills and skills | Pairs kick to kick, dribble around cones, learn to stop the ball with their foot and how to use inside of foot, kicking for goal | Two children running for same ball (collision risk), impact of ball into body, falls or trips | Space children out well, use the whole court, divide group in half with other half indoors doing art then swap groups, establish 'stop and look' signal | Mid-sized soccer balls (10 for group) Coloured cones to define area |

*... continued*

| Indoor art activities – various | Station tasks on table tops with colouring in, noodle photo frames and plasticine for independent play and creation | Inappropriate use of art supplies, tipping of stools or tables | Supervision and direct involvement of educator in activities | Plasticine, pencils, crayons, coloured pens, glitter, non-toxic glue, noodles |
|---|---|---|---|---|
| Snack time | Children to share fruit snacks and savoury snacks on platters and help themselves to water from jug | One child is on a gluten-free diet | Do not use foods containing gluten on the snack table to avoid risk of cross-contamination or accidental consumption | Summer fruits, rice crackers, cheese sticks, cucumber and carrot sticks, hummus dip, water jug, cups and plates |

## Practice task 9

Develop an activity plan using a table similar to the following, showing the activities you might provide during an after-school activity program. Consider the activities, risks and dangers, risk minimising strategies and equipment needed. For each activity, provide one guideline that you would expect the children to follow. Ensure you express the guideline in a way that tells the children what they can do rather than what they cannot do. For the purposes of this activity, consider the children to be aged between 8 and 12 years old.

| Program name: | | | Educator in charge: | | |
|---|---|---|---|---|---|
| Time of program start: | | | Time of program finish: | | |
| **Activity name** | **Description** | **Risks or dangers** | **One guideline** | **Minimising risk strategies** | **Equipment needed** |
| | | | | | |
| | | | | | |
| | | | | | |

# Chapter summary

1. Children move through several distinct stages of development, which should be monitored and considered in your interactions and program-planning activities.

2. Development includes the areas of physical, psychological, cognitive, language and psychosocial development.

3. Children's interests and strengths should dictate the activities represented in your program.

4. You can use your knowledge of child development and the interests of individuals to help you decide how best to work with children.

5. Safety and risk management considerations for children in the middle stage of childhood are quite different to those that apply for children in the early years.

6. Children in middle childhood can take some responsibility for risk management themselves, so a collective approach to the issue of risks can be effective.

# Assessment activity 2
# Reflecting an understanding of middle childhood

Your trainer or assessor may require you to complete this assessment activity and will provide you with instructions as to how to present your responses. They may provide alternative or additional assessment activities depending on the circumstances of your training program.

The following table maps the assessment activity for this chapter against the element and performance criteria of Element 2 in *CHCSAC003 Work collaboratively and respectfully with children in school age care.*

| Part | Element | Performance criteria |
|---|---|---|
| Whole activity | 2 | 2.1, 2,2, 2.3, 2.4 |

## Purpose

This assessment activity is designed to assess your skills and knowledge in reflecting an understanding of middle childhood.

## Requirements

To complete this assessment activity, you need:

- access to a children's services environment
- to answer the questions and submit responses as directed by your trainer/ assessor/training organisation.

Access the program of activities currently being provided at your service. Reference the program to answer the following questions. You will need to liaise with your supervisor and/or educational leader. You may need to view observation records, program evaluations and background information about children.

If any of the following points are not evident on the program of activities, develop an example yourself.

1. List the activities on the program that are included because they reflect a child's or group of children's interests. For each activity you list, explain how the educators established that this was an interest.

2. Identify any developmental needs that are being catered for on the program. For each developmental need you identify, explain how the educators established that this was a need. Comment on how each need identified is linked with an activity that represents the child's interests. If this link is not evident, explain how you might adapt the activity to reflect this.

3. Choose one activity and explain how it is adjusted to meet different needs, interests and abilities within the service. Include the guidelines that are linked to this activity.

4. Identify one activity on the program that is related to sharing cultural aspects. Explain this activity. How does this activity relate to the children?

## Record your foundation skills

When you have completed the assessment activity, make sure you record evidence of how you have developed and applied foundation skills. You may use the table at the end of this learner guide for this purpose. Keep copies of material you have prepared as further evidence of your skills. Refer to the information on foundation skills in Appendix 2 of this learner guide for further guidance.

# Chapter 3
# Working within the framework of school age care

When you are working with children, you must make sure you understand the standards, policies and procedures that will govern your work.

This chapter looks at areas, such as legislation and regulatory frameworks, that apply to working with school age children. You will learn about what is expected of you in the school age care industry and what defines 'best practice'. You will also learn about the importance of duty of care and how this should be applied to all aspects of your work, and how to identify and report children who you believe are at risk.

As a new educator in the industry, you may need to spend some time learning about your job role and how your work sits alongside that of other members of your team. Over time you will establish professional relationships with other educators and begin to understand the boundaries that exist between yourself and the children you provide care for, as well as their families and caregivers. You can then take more responsibility for the tasks involved in your professional role and work more independently.

In this chapter you will learn about:

3A    Applying industry standards and best practice approaches

3B    Ensuring duty of care is applied to all job functions

3C    Following your organisation's policies and procedures

3D    Establishing a professional relationship and boundaries with children and their families

3E    Identifying and reporting children at risk according to policy

3F    Applying ethical decision-making in your role

The following table maps this chapter to the National Quality Standard and *My time, our place – Framework for School Age Care in Australia.*

| National Quality Standard |
|---|
| ✓ Quality Area 1: Educational program and practice |
| ✓ Quality Area 2: Children's health and safety |
| ✓ Quality Area 3: Physical environment |
| ✓ Quality Area 4: Staffing arrangements |
| ✓ Quality Area 5: Relationships with children |
| ✓ Quality Area 6: Collaborative partnerships with families and communities |
| ✓ Quality Area 7: Leadership and service management |

| My Time, Our Place – Framework for School Age Care |
|---|
| **Principles** |
| ✓ Secure, respectful and reciprocal relationships |
| ✓ Partnerships |
| ✓ High expectations and equity |
| ✓ Respect for diversity |
| ✓ Ongoing learning and reflective practice |
| **Practice** |
| ✓ Holistic approaches |
| ✓ Collaboration with children |
| Learning through play |
| ✓ Intentionality |
| ✓ Environments |
| ✓ Cultural competence |
| ✓ Continuity and transitions |
| ✓ Evaluation for wellbeing and learning |
| **Outcomes** |
| ✓ Children have a strong sense of identity |
| ✓ Children are connected to and contribute to their world |
| ✓ Children have a strong sense of wellbeing |
| ✓ Children are confident and involved learners |
| ✓ Children are effective communicators |

## 3A Applying industry standards and best practice approaches

Industry standards set out what is expected of educators and service providers in the school age care sector. This information is included in the legislation and the National Quality Framework (NQF) documents.

Best practice is a term used to describe the processes and practices used by the best performing service providers in the industry. These processes and practices are used as a reference point by industry bodies when they create standards. For example, the standards developed by the Australian Children's Education and Care Quality Authority (ACECQA) for *My time, our place – Framework for School Aged Care* (MTOP) are based on industry best practices.

## Staying up to date in a time of change

It is important that you remain up to date with changes that occur to legislation, industry standards and quality practices. While you do not need to have an in-depth knowledge of all the legislation that applies to your sector, it is important to understand the rules, regulations and expectations that apply to your job role. It is also important that you know where to go for further information. In many situations, you can ask your supervisor or more-experienced colleagues for advice.

There are a variety of options for gaining up to date information. Some examples include:

- ACECQA's email newsletter – go to www.acecqa.gov.au and click on 'Subscribe to newsletter'.
- Early Childhood Australia WebWatch – email webwatch@earlychildhood.org. au with 'Subscribe' in the subject.

You should also look up the relevant professional bodies, such as:

- National Out Of School Hours Services Association (NOSHSA) – an alliance of the peak out of school hours services associations in each state and territory in Australia
- Australian Community Children's Services (ACCS) – the peak body representing Australia's not-for-profit, community-owned children's services and those who support the right of children to access these services
- Local state- or territory-based out of school hours care and family day care industry organisations.

These organisations can provide you with information, fact sheets and information sessions to help you remain up to date with changes that may affect your work in the sector. By attending face-to-face training sessions and workshops, as well as joining online activities such as webinars (seminars over the internet), you can continue to learn about industry standards and best practice approaches after your initial training is completed.

Developing a professional network is also an important tool for ensuring you remain up to date and continue to use a best practice approach in your work with children. For example, you may join a network such as LinkedIn that can help you remain in contact with people you know through professional networks. By being active in forums such as this, you can engage with other professionals, contribute to discussions and learn from more-experienced educators.

## National Quality Standard

The National Quality Standard (NQS) lists seven quality areas that apply to working with children in registered children's services settings. The areas covered under the National Quality Standard are as follows:

1. Educational programs and practice

2. Children's health and safety

3. Physical environment

4. Staffing arrangements (including the number of educators educating and caring for children)

5. Relationships with children

6. Collaborative partnerships with families and communities

7. Leadership and service management

As an educator, you have an important role to play in helping your service achieve excellence in these areas. You need to work collaboratively with other team members and take a positive approach in planning for and documenting the processes used in the service to meet each of the quality areas.

The NQS is part of the National Quality Framework (NQF), which also includes a national regulatory system. This system applies to registered services across Australia. A national assessment and rating system forms an important part of the NQF.

The following case study shows how an educator applies industry standards and best practice approaches to working with children in school age care.

| Case study |
| --- |
| Gill works in a community in South Australia where there are many Aboriginal families. She wants to learn about Aboriginal culture and how her service can encourage more children from Aboriginal backgrounds to attend their school holiday programs. At the moment, the program is attended very infrequently by Aboriginal children, and Gill worries that their service does not appear welcoming to Aboriginal families and does not use displays or purchase resources that may appeal to people from Aboriginal cultures. |

*continued ...*

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Gill visits the website for an organisation called Inclusive Directions to help her learn more about industry best practice. She finds useful information sheets on topics such as preparing a reception or display area, purchasing resources and making choices about cultural celebrations such as Christmas. Gill's supervisor is impressed with her initiative and asks her to put together a folder of information based on what she has learnt to share with others at their next team meeting. She tells Gill that her initiative in this area has contributed greatly to their ability to provide a best practice approach.

## Practice task 10

1. Visit the website for Inclusive Directions at: www.directions.org.au/resources. Identify five resources you think would be useful for your service. For each resource, explain why you believe it is useful.

2. Using the Inclusive Directions resource 'Planning for a multicultural OSHC Environment Checklist', write two paragraphs explaining how you might work toward best practice in your service based on your assessment of the service against the checklist.

3. Describe one method you will use to remain up to date with the National Quality Framework and information on other legislation and regulations relevant to registered school age care services. Include why you have chosen this method and how you access information.

PC 3.2

# 3B Ensuring duty of care is applied to all job functions

As an educator providing care for school age children, you need to have a good understanding of your duty of care and how it applies to your job role.

## Duty of care

Duty of care is a legal term that means you are required to provide reasonable care for the children you are responsible for. You need to make reasonable decisions that are in line with the expectations of your job and your level of experience and seniority in the workplace. Duty of care means taking appropriate action to avoid risks that are known to exist as well as risks that are unforeseeable. Your duty-of-care responsibilities alter depending on:

- the ages of the children in your care
- other factors known about each child, such as whether they have a disability or are unable to read or speak English
- previous experiences with each child, such as a known history of leaving the centre unaccompanied and without permission.

In these situations, your duty-of-care responsibilities increase to allow for your expectations about any risks that may occur. Conversely, some factors may serve to decrease your duty-of-care responsibilities. For example, it is reasonable to assume that most children aged 5 to 12 years can follow rules and behaviour expectations more easily than younger children.

There are some situations where you are generally not considered to have a duty-of-care responsibility. These include when:

- a child is not enrolled in your program or in your care
- you are not working
- a child becomes the responsibility of another appropriate person, such as a paramedic or doctor (although in some cases you may have a shared duty of care).

It is important to be clear about situations where you owe a duty of care to children and where you do not.

## Breaching duty of care

Some situations may arise where you may appear to have breached the duty of care to a child. By breaching your duty-of-care responsibilities, it could be suggested that you have acted in a negligent way. To demonstrate negligence, three factors usually need to be determined:

1. That you owed a duty of care to the child

2. That an injury or loss of some kind occurred

3. That your actions or lack of actions contributed to the injury or loss (for example, if a child leaves your care without you realising and is hit by a car on a nearby road)

By understanding what it means to breach your duty of care, you can also understand the importance of clearly identifying which children are in your care, at what times and in what situations. A nearby child who is injured by falling from play equipment where you happen to be with your group, but who is not enrolled in your program, is not under your duty of care and therefore their treatment or support is not your professional responsibility. A child who is a part of your program, has been signed into your program and then injures themselves during that program, is under your duty of care.

Your duty-of-care responsibilities link closely to the policies and procedures of your organisation. Policies and procedures are covered in section 3C of this learner guide.

## Duty of care and children's health and safety

Duty of care relates to your responsibilities for the health and safety of children. The following table discusses four important areas of children's health and safety, as well as some possible responsibilities and actions that might be required. Note that your responsibilities and your organisation's responsibilities will vary. Your organisation may approach situations in a different way, and your job role may include different responsibilities to those listed here. There are many more areas of child health and safety that you may need to consider in your work.

| Child health and safety | Your responsibilities | Responsibilities of your organisation |
|---|---|---|
| Anaphylaxis | • Participate in anaphylaxis management training sessions.<br>• Follow your service's policies and procedures carefully; in particular, its anaphylaxis management policy.<br>• Follow the child's current anaphylaxis medical management action plan, which will have been prepared by the child's doctor.<br>• Call for an ambulance.<br>• Contact the child's parent/ guardian or other emergency contact.<br>• Write down the time that you gave the adrenaline autoinjector on the child's hand or on the case of the used autoinjector and give it to the ambulance personnel when they arrive. | • At enrolment, identify children with allergies, particularly those who have experienced anaphylaxis previously and regularly update any information.<br>• Ensure each of these children has in their file an anaphylaxis medical management plan.<br>• Ensure all educators are aware that a child has allergies and that they have access to the child's medical plan and medication.<br>• Ensure all educators undergo training sessions about avoiding and dealing with anaphylaxis.<br>• Ensure all educators have read and have access to the program's policies and procedures for anaphylaxis.<br>• Ensure anaphylaxis medications are kept in stock and up-to-date at all times (if provided by the service). |
| Asthma | • Participate in asthma management training sessions.<br>• Follow policies and procedures for managing an asthma emergency and for helping children with medication.<br>• Know how to access asthma management plans for individual children.<br>• Carry out cleaning tasks such as damp mopping or vacuuming if these are part of your job role.<br>• Know how to identify potential triggers for asthma such as dust, smoke or pollen.<br>• Maintain a positive and encouraging environment that promotes active participation of children with asthma wherever possible. | • At enrolment, identify children diagnosed with asthma.<br>• Have an asthma management kit readily available.<br>• Keep asthma records in a central location.<br>• Have policies and procedures in place to manage an asthma emergency.<br>• Have policies and procedures in place for storing and administering medication.<br>• Ensure all educators are aware of children who suffer from asthma and where their medication and medical plans are stored. |

*... continued*

| Child health and safety | Your responsibilities | Responsibilities of your organisation |
|---|---|---|
| Epilepsy | • Know how to access individual records and action plans for children who have epilepsy.<br>• Know what to do if a child has a seizure, regardless of whether they are known to have epilepsy or not.<br>• Understand and follow procedures for the administration of medication and first aid, as well as completing workplace forms as required. | • Identify children diagnosed with epilepsy at enrolment.<br>• Have policies and procedures in place for managing an epileptic seizure and for storing and administering medication.<br>• Keep epilepsy records in a central place.<br>• Ensure all educators are aware of children who suffer from epilepsy and where their medication and medical plans are stored. |
| Children at risk | • Be alert to indicators that may suggest a child is at risk or is being harmed in some way.<br>• Report children at risk as required in your state or territory.<br>• Liaise with your supervisor as appropriate in situations where you believe a child may be at risk.<br>• Collect clear and objective records explaining concerns and store these confidentially. | • Provide training and support for educators.<br>• Have policies and procedures in place for identifying children at risk and acting on this knowledge.<br>• Be clear about expectations, responsibilities and management lines.<br>• Document a commitment to the welfare of all children in vision, mission and values statements, policies, procedures and parent information books.<br>• Enrol children at risk at the service as a first priority. |

## Appropriate risk management

By identifying risks, you can structure the environment and the activities in such a way as to minimise the effect of a risk or remove it completely. Your organisation should have policies and procedures in place about safety and risk management in the workplace. Your supervisor can give you more information about risk management and safety in your particular work environment. Remember that you have a legal responsibility to provide a duty of care to all children in your program.

Children in middle childhood can take some responsibility for risk management themselves, so a collective approach to the issue of risks can be effective. Talk to children about safety and hazards. Through this conversation, you will gain an understanding of how much they know about safety already. You may find that children can identify some risks themselves and know what actions would be reasonable to avoid these risks.

## Risk assessment

Risk assessment is the process used to identify hazards and assess their likelihood of occurring and the seriousness of the consequences if they do. You need to think carefully about the equipment children use, the amount of space required, the movements of children within the area and how many educators are available for supervision. Also consider the implications of having children in your group who have additional support needs.

For example, if you are planning a recreation activity outdoors where children will be playing a game such as 'Rob the nest', (where children compete in small teams to collect balls from other teams as well as from a central point) there are several things you should consider:

- How many children will be playing the game
- Where you should place equipment so children do not run into each other when reaching for it
- What might happen if one child runs headfirst into another
- The type of surface the children will play on; for example, will they graze themselves if they fall or is a softfall or grassed area available?
- Whether sun protection an issue
- The location of other features in the environment, such as walls or tripping hazards

If you know from experience that children have run into one another or hit their heads during this game, it is important that, as part of your duty-of-care responsibilities, you predict the risk and take actions to minimise or avoid it completely. By using a risk management approach, you can identify that the major risks for this game are children running into each other as they hurry to get equipment and balls for their team. Therefore, to avoid this risk occurring, you will need to use clear instructions combined with a stop signal you can use to stop the game at any point if needed. Remember that your stop signal should be visual as well as auditory so that it can be understood by all children.

## Work health and safety

Duty of care also applies to work health and safety (WHS) and the responsibilities of educators, supervisors and managers. It is important that you understand the health and safety policies and procedures of your workplace. Examples of health and safety procedures include:

- the procedure for cleaning a room or area, as well as selecting cleaning products and equipment
- the procedure for checking play equipment safety before it is used by children
- the procedure for identifying potential risks before an excursion
- the procedure for managing an emergency situation, such as a major injury.

Clear and logical procedures mean that everyone knows and understands their roles in performing both routine and unexpected tasks.

Several key responsibilities for educators are included under WHS legislation. You have a responsibility to act in a way that does not put yourself or others at risk of injury or illness. You also have a responsibility to follow lawful safety instructions such as those given during an emergency evacuation from a building. You should never tamper with safety equipment or ignore safety warning signs. For example, you should never try to use a piece of equipment that has been tagged as being unsafe.

The following case study shows what can happen when an educator does not understand their duty-of-care responsibilities.

### Case study

Joel is in charge of a group of school age children going to see a movie as part of a school holiday program. Before the movie, Joel takes the group to a nearby children's playground so they can have a snack and play. While they are there, Joel notices a young boy has wandered away from his father, who is talking on his mobile phone. The boy is walking down a path towards a lake at the far end of the park, well away from the playground. Joel is worried that the child may fall into the lake and is cross that the father is not paying attention to his child.

Joel believes that, as an educator, he owes a duty of care to all children. With this belief in mind, he leaves his own group, who are happily playing on the play equipment. He runs after the child and stops him. It takes him a few minutes to persuade the young boy to return to his father, as the boy is very interested in the ducks he can see on the lake. By the time Joel brings the young boy back to his father and spends some time talking to him about the situation, 10 minutes have passed.

When he returns to his own group, Joel is horrified to discover that one of the girls is missing. The other children tell Joel that a man who they believed to be the girl's uncle arrived at the playground and took her with him in his car. Joel needs to immediately follow the procedure for dealing with a missing child situation, including notifying his manager and the police.

In this case study, Joel did not understand that his duty-of-care responsibility was only to the children enrolled in his program, and not to the boy at the playground with his father. Although Joel acted in an understandable way from an ethical point of view, by doing so he put his own group of children at significant risk. If the missing girl was taken by someone who was not her uncle, it is possible that some harm may come to her and Joel could be seen to be negligent. This is because he owed a duty of care to the girl. If some form of harm or injury resulted, it could be directly attributed to Joel's failure to provide adequate duty of care.

## Practice task 11

1. Refer to the case study about Joel. What might Joel have done to ensure his duty-of-care responsibilities to the children in the program and his concerns for the young child near the lake are both met?

2. Provide an example of when you have applied duty of care.

## 3C | Following your organisation's policies and procedures

PC 3.3

Organisational policies and procedures govern much of the work you do with school age children. These sit alongside legislation and relevant frameworks such as the National Quality Framework (NQF) and the *My time, our place – Framework for School Age Care* (MTOP). It is important that organisational policies and procedures are consistent with relevant legislation and framework documents. For example, an organisation must ensure its health and safety policies and procedures are aligned with relevant state or territory legislation and federal legislation.

## Information flow and decision-making

In many workplaces, there is a hierarchical approach to the flow of information and decision-making. The titles given to various documents may vary. In general, this hierarchy moves from a big-picture approach through to a small-picture, highly specific one. Here is an example:

**Vision statement**

↓

**Values**

↓

**Policies**

↓
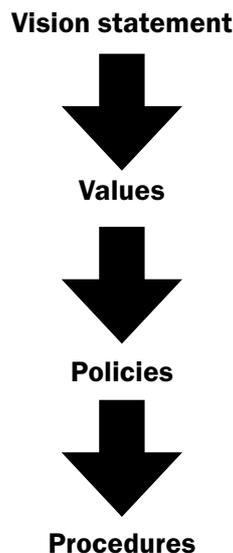
**Procedures**

Much of your day-to-day work draws on documented policies and procedures, so it is important that you understand them and are familiar with how they relate to the overall values and direction of your organisation. Often when you begin work for a new organisation, you will be given an induction pack or other written information to help you as you start your new job. If you are not given a copy of the vision and values statement for your organisation, ask for one. You can ask your supervisor, manager or someone from the human resources department.

Policies and procedures that relate directly to your work will generally be explained to you. This may happen during a meeting after you are employed, perhaps as part of an induction process.

It is important to always check that you are using the latest version of a policy or procedure. In many cases these documents are stored electronically on an intranet system. If you are using a paper version or if you print copies from the intranet, make sure you find out whether the copy you have is the most up-to-date version.

## Policies

Workplace policies give information about what the organisation as a whole believes is important or should happen in particular situations. Policies can be derived from the organisation's vision, mission and values statement or may be required under legislation. Policies are written statements that explain the requirements for various situations that can arise in your day-to-day work practices. Policies relate closely to procedures, with policies providing a framework to inform the procedures.

The following are policies that a registered children's service must provide to meet Education and Care Services National Regulation 168:

- Nutrition, food and beverages, dietary requirements
- Sun protection
- Water safety, including safety during water based activities
- Incident, injury, trauma and illness
- Dealing with infectious diseases
- Dealing with medical conditions
- Emergency and evacuation
- Delivery and collection of children
- Excursion
- Child safe environment
- Staffing including code of conduct, determining the responsible person and participation of students and volunteers
- Interactions with children
- Enrolment and orientation
- Governance and management including confidentiality
- Acceptance and refusal of authorisations
- Payment of fees and provision of statements
- Dealing with complaints

# Procedures

Workplace procedures give information about how a specific task or set of tasks should be completed. Procedures often take the form of a step-by-step set of instructions or a flow chart. Procedures can be quite detailed, particularly when they are for a complex task.

Here are some examples of workplace procedures:

- Enrolment procedure
- Activity planning procedure
- Program evaluation procedure
- Emergency evacuation procedure
- Missing child procedure
- Food-handling and food service procedure
- Induction of new staff procedure
- Risk identification and management procedure
- Incident response procedure
- Application for leave procedure

You can see from this list that procedures, like policies, relate sometimes to your work with children and sometimes to broader workplace issues. Some procedures require you to work closely with other team members. Some procedures are related to your own employment.

## Workplace forms

Many workplace procedures have associated forms. These allow for the uniform collection of information and data, and ensure that record-keeping is done in a planned and controlled way. Forms may be electronic or print documents. They should be stored securely once completed to protect privacy and comply with privacy legislation.

The following are some examples of workplace forms, along with the procedures they are linked to:

- Leave form – application for leave procedure
- First-aid action form – first-aid procedure, incident reporting procedure
- Time sheet – time sheet lodgement procedure
- Parent permission form for off-site excursion – activity planning procedure, informed consent procedure

There will often be a code or a note on policies, procedures and forms to indicate when there are related documents. For example, the first-aid policy may contain a note that indicates that the related documents are the first-aid procedure, first-aid form and incident report form.

The following case study shows how a work team follows their organisation's policies and procedures.

### Case study

The team at Sunny Ridge Outside School Hours Care are proud of their status as an asthma-friendly service. They have worked hard to develop policies and procedures that keep the children who have asthma safe and promote their participation and inclusion in activities wherever possible. Some of the policies they have developed include:

- providing foods that do not contain known or likely allergens
- providing an alternative indoor activity on days of high pollen counts
- providing an alternative indoor activity on days of extreme weather conditions
- displaying asthma first-aid action plans around the centre
- having a safe cleaning policy that requires cleaners to use low-allergen cleaning products, damp-dust all hard surfaces twice weekly and damp-mop the floor twice weekly.

These policies, together with an active training program and constant monitoring and attention paid by educators to all children who are known to have asthma, help Sunny Ridge to provide best practice care.

### Practice task 12

Collect a copy of a workplace policy that relates to a child safe environment.

1. List the procedures and forms the policy refers to.

2. Identify a situation where you have taken responsibility for a procedure related to this policy. Provide a copy of the procedure and any forms that needed to be completed.

## 3D Establishing a professional relationship and boundaries with children and their families

While establishing a professional relationship with children and their families is important, you also need to ensure you put appropriate boundaries in place.

# Building professional relationships

It can be challenging to build just the right sort of relationship with a child. On the one hand, it is important to develop a close relationship that respects the child's rights to play and explore and be an individual. On the other hand, it is important to retain some distance so that children do not confuse a professional relationship with a personal one.

MTOP provides many suggestions for how you as an educator can help a child meet the outcomes contained within the framework. By using these ideas and developing your own along with your work team, you can help to build an appropriate professional relationship with children. One of the principles that underpins the framework is the development of 'secure, respectful and reciprocal relationships'. The framework notes that educators who 'are attuned to children's thoughts and feelings support the development of a strong sense of wellbeing and social competencies' (pg 10).

The framework also suggests that the following qualities are important in building respectful and trusting relationships with children:

- Fairness
- Humour
- Sympathy
- Understanding

Of course, it is also important to incorporate these qualities into your everyday dealings with managers, other staff, parents, caregivers and volunteers.

# Being a partner in play

Seeing yourself as a partner in play can be a useful way of ensuring you interact appropriately with children in the middle childhood years. You can do this by playing alongside children and finding real meaning and value in the things they do. This model allows you to observe closely, provide high quality supervision and engage and communicate in a meaningful way.

The 'partner in play' model requires you to be able to take a step back from the play when needed. There are times when you will need to step out of the play role and take on a different role or perform other tasks that are a part of your duties and responsibilities. At these times, it is important to disengage respectfully from the children you are playing with by politely explaining you need to take a break while you attend to something else.



Involving yourself in play is an effective way to maintain supervision and engage with children.

# Maintaining boundaries

It can be challenging to maintain appropriate boundaries when it comes to interacting and working with children and their families. However, it is vital that you do so. Appropriate boundaries mean that you always remember that you are an educator in a workplace. This carries with it both rights and responsibilities.

## Rights

As a worker, you have certain rights. Many of these are protected by legislation at a federal or state/territory level. Some rights are also documented in workplace policies. For example, your workplace will have a policy about workplace bullying and harassment. By ensuring you maintain appropriate professional boundaries, you also act to protect your own rights in the workplace.

Here are some practical examples of why it is important to maintain boundaries to protect your own rights:

1. You may be entitled to a meal break or rest break at certain intervals. It is not acceptable for you to go without a meal or rest break because a parent cannot meet with you at any other time.

2. You should be able to expect to go home on time at the end of your shift. Your workplace should have a policy that strongly promotes parents and caregivers collecting their children on time at the end of the session.

3. It is reasonable to expect that you will not be hurt or injured in the course of your work. It is not acceptable for a child to hurt you because they do not know the appropriate way to communicate with you when they are upset or cross.

## Responsibilities

As a worker, you also have certain responsibilities. You need to carry out the tasks and responsibilities outlined in your job description and follow instructions given to you by your supervisor or team leader, providing that these are reasonable and lawful. You need to exercise your duty-of-care responsibilities appropriately and provide care, supervision and support to the children attending your program. By ensuring you maintain appropriate professional boundaries, you also ensure you can meet your responsibilities adequately.

Here are some examples of maintaining boundaries in order to meet workplace responsibilities:

- You should treat all children in a fair and equitable manner. It is not acceptable to build an overly close relationship with one child and neglect your relationship with the other children in the group.

- You should always comply with your workplace policies regarding food handling and food sharing. It is not acceptable to permit one child who you know well to bring in a cake from home as a special treat.

- You should ensure that you respect the rights of children and families to privacy and confidentiality at all times, including when you are not at work, so do not talk about a family's problems with your friends.

# Finding out more about boundaries and professional relationships

The issue of maintaining an appropriate professional relationship with children you get to know well over an extended period is a difficult one. Many educators experience this difficulty, and it is important to talk about it and learn from the experiences of others. You may find it helpful to discuss this issue in a team meeting. You may find that other people in your workplace are experiencing the same problem as you.

Remember that your supervisor or team leader has a responsibility to support and guide you, particularly in difficult situations. Rather than simply persevering with a situation that is difficult, it is far better to talk about the problem openly. A frank, careful discussion can help you to make the best decisions and ensure you always behave in an ethical and appropriate way.

The following case study shows how an educator establishes professional relationships and boundaries with the children and families she works with.

## Case study

Shemira works in a small coastal community. She knows most of the families who use their program quite well. As well as working in the outside school hours care program, Shemira is an active member of the tennis club, the Probus group and Rotary. Shemira finds that it can sometimes be difficult to maintain her professional boundaries and ensure she is always viewed as an educator when she is at work. She has developed some of her own strategies to help with this. Shemira suggested to her team leader that all educators should wear a red polo shirt, which has their logo on the front and the words 'Staff' in capital letters on the back. This makes it easy for children to identify an educator quickly when they need to. It also serves as a useful reminder to children and families that Shemira is working.

## Practice task 13

Imagine that you are a supervisor for a group of new and inexperienced educators in an outside school hours care program. Write a tip sheet that you could give these educators to explain some of the difficulties they may encounter in establishing professional relationships and appropriate boundaries in their work. Tailor the information you provide and the language you use to suit your workplace. Use a simple, clear writing style. Remember that a tip sheet is an informative and brief document, often consisting of a series of bullet points.

# 3E — Identifying and reporting children at risk according to policy

Identifying and reporting children at risk can be a confronting and challenging issue for educators in any setting.

The term 'at risk' can mean different things to different people. In most situations it is taken to mean that the child is at risk of harm in some way; that is, that harm has occurred in the past and the child is believed to be at risk of it occurring again or that the harm is currently occurring. Harm is generally seen as meaning that child abuse is occurring or has occurred.

Deciding what constitutes a child being at risk means applying a combination of your own views and values and relevant legal and policy information that exists in the area of child protection. Some examples of the types of abuse that may mean a child is seen as being at risk include:

- sexual abuse
- physical abuse or violence
- neglect or failure to provide care
- witnessing abuse or violence, such as the child witnessing physical violence between parents
- emotional or psychological abuse.

## Possible indicators of child abuse

There are many indicators that could lead you to believe that a child is being abused or harmed in some way. These indicators fall into three categories:

- Verbal reporting or disclosure – the child may tell you they are being abused or harmed, often with the expectation that you will do something about it.
- Behavioural indicators – the child may show through their behaviour that there is a problem. For example, they may choose to wear long sleeves and pants even when the weather is hot, may steal food, may be absent from care for an unexplained or unexpected period of time, may show little emotion when injured, may seem particularly wary or fearful of a parent or both parents, or may demonstrate sexual behaviour inappropriate for their age.
- Physical indicators – the child may present with bruising, fractures, burns, a pattern of old and new injuries, untreated or poorly treated injuries or illnesses, poor hygiene or be frequently hungry.

You can see from these points that it can be easy to misinterpret a situation, mistake an injury or illness for abuse, or not realise that a child is being abused. You can also see how open the indicators are to value judgments and cultural and familial differences in parenting and providing care for children.

For these reasons it is important to make careful and considered decisions about reporting child abuse suspicions. This certainly does not mean that you should ignore indicators or fail to act on your suspicions; it simply means being careful, precise and thorough when you do act.

# Reporting children at risk

Mandatory reporting means compulsory reporting of child abuse to the state or territory's child protection agency by certain people. Mandated people can include doctors, nurses, teachers, police officers, community service workers, educators and others whose work involves providing services for children. In some states and territories, these people can be fined for failing to report child abuse.

There are different rules in the various states and territories about the mandatory reporting of children at risk. The rules differ in terms of what must be reported and who is mandated to make reports. However, in all cases it is recognised that everyone has a moral obligation to report if they hold a reasonable view that abuse is occurring or a child is at risk.

Reporting children at risk can be both a legal requirement and an organisational one. For example, you may work in a state or territory where you are not legally required to make a report about a child at risk, but you may still have organisational responsibilities to do so. It is important to be clear about the organisational policies and procedures that apply in your own workplace. You also need to be clear about how these policies and procedures align with your legal responsibilities. Your supervisor can give you further information about reporting children at risk that is specific to your workplace.

Who you make a report to is different in each state and territory of Australia. The following table shows the name of the statutory body to whom a mandatory report should be made. Familiarise yourself with the details of the relevant body for your own location.

| State/territory | Agency name |
| --- | --- |
| Australian Capital Territory | Office for Children, Youth and Family Support – Department of Disability, Housing and Community Services |
| New South Wales | Community Services, Department of Family and Community Services NSW |
| Northern Territory | Children, Youth and Families – Department of Health and Families |
| Queensland | Department of Communities (Child Safety Services) |
| South Australia | Families SA – Department of Families and Communities |
| Tasmania | Child Protection – Department of Health and Human Services |
| Victoria | Child Protection and Family Services – Department of Human Services |
| Western Australia | Department for Child Protection |

The information that may be important in reporting a child at risk includes:

- the child's name

- a description of the situation and your concerns

- physical, behavioural or verbal indicators that you have noticed

- the current whereabouts of the child

- what you know about the child's family and cultural background

- your knowledge of any other agencies or organisations currently involved with the child or their family

- other considerations, such as whether the child has a disability or whether the family can communicate in English.

Remember that it is not your responsibility to prove that abuse is occurring or has occurred. In a situation where you are required by law to make a report, you are simply making the authorities aware of your beliefs and suspicions. Proving that abuse has occurred is the responsibility of other professionals. You should never feel concerned that you may be incorrect and that others may think less of you for making a report. The system of mandatory reporting exists to protect children from harm, and this should be seen as a shared moral and ethical responsibility for all members of society.

## Conflicting views

Sometimes a situation may arise where you hold different views to those of your supervisor about a potential child abuse situation. If this occurs, it is your first responsibility to follow your legal requirements. If you know that you are legally required to make a report, then this generally overrides instructions from your supervisor to do otherwise.

Remember that your job role and job description require you to follow workplace policies and procedures, as well as lawful instructions from your supervisor. The requirement to make a mandatory report of child abuse takes priority over an instruction from your supervisor to not make the report.

## Confusing indicators

Many of the possible indicators of child abuse are quite non-specific. For example, many children present from time to time with bruises, scrapes and scratches. Obviously this does not mean that every child who has a bruise is being abused. The challenge lies in differentiating between an indicator that can be readily attributed to some other cause and an indicator that alerts you to the possibility of child abuse.

Here are some questions you may need to consider in assessing the situation:

- Has the child's family or living circumstances changed recently, possibly causing a significant change in their behaviour?

- Does the child have a significant behavioural difficulty (such as a child with severe autism spectrum disorder or oppositional defiance disorder) that makes parenting them extremely challenging, and therefore more likely to lead to physical and verbal conflict situations occurring at home?

- Does the child take a medication that means they bruise easily and in situations where you would not normally expect to see bruising?

- Does the child have difficulties with coordination and motor planning that means they stumble, trip or fall more frequently than other children?

- Does the child have a disability such as osteogenesis imperfecta that causes frequent fractures?

- Do the family have different standards to your own about clothing, hygiene and personal grooming?

You can access information about some of these issues through the child's records, providing your job role allows you to have access to these. In most situations it is likely you will be told by parents or caregivers if a child takes a medication or has a disability or illness that could give rise to bruising or other physical indicators, but it is possible that parents or caregivers may not yet be aware of the condition.

## Caring for yourself

Any situation that involves a child being possibly harmed by another person triggers strong emotional responses from most people. It can be extremely distressing to consider the notion that someone would harm a child.

If you feel you are dealing with a situation of potential child abuse, it is important to make sure you also care for yourself. It is likely that you will experience strong emotions and find the situation upsetting. You may want to talk to other people about the situation so you can explore your own feelings and get some advice about what to do. Remember that it is also important that you protect the rights of the child and family to privacy and confidentiality. By all means talk to someone such as your supervisor, but ensure you do so at a time when there is no chance that the conversation will be overheard by others who should not have access to the information. Some workplaces also provide employee support programs that can provide confidential psychological support during difficult situations through the services of a trained psychologist.

The following case study shows how an educator identifies and reports a child at risk according to requirements and policies.

**Case study**

Beth works in an outside school hours care setting in NSW, providing before-school care for a group of children aged between 7 and 11 years old. She is concerned about a young boy, Max, who is 9. She has noticed that Max always wears long sleeves, even when it is warm. He tends to shy away from accidental physical contact and is socially quite isolated from the other children.

One day, Max is dressed as usual in a long-sleeved shirt, but the temperature is 30 degrees. Beth suggests Max push his sleeves up so he can cool down a little. When he does, she observes deep bruising to both of his forearms and marks that appear to be small, circular burns in a line along his inner arm. Max quickly pulls his sleeves down again, but Beth is extremely distressed about the situation and asks her supervisor for a meeting immediately after the session to discuss what to do. Together they agree that Beth must report the situation under mandatory reporting requirements, as well as from an ethical point of view.

Beth's supervisor helps her obtain details from Max's file and stays with her as she makes the call to child protective services. She makes sure Beth feels supported and, the following day, organises for her to speak with a psychologist through their workplace employee support program. She ensures Beth knows that she has done the right thing, both according to the organisation's policies and procedures and law, and ethically.

## Practice task 14

1. Collect information about the mandatory reporting requirements for your state or territory. Find out:

   a) which professions or groups of people must make reports (mandated reporters)

   b) what types of abuse must be reported

   c) who to report to

   d) how to make a report.

2. Document this information and then discuss with your trainer how you feel about the requirement to make reports of child abuse as a part of your professional role. Also discuss where you could go for support and advice to help you deal with your own feelings and emotions about making a report of child abuse if the situation ever arose in your working life.

PC 3.6

# 3F  Applying ethical decision-making in your role

Ethics are the moral principles, based on our values and beliefs, that we use to decide right or wrong or good or bad. We use our ethics to judge a person's ideas and behaviour and to decide on the worth of proposals. Ethical decision-making forms a part of your role as an educator.

Ethics and ethical principles underpin daily decision-making, where decisions require you to consider value judgments and beliefs. In earlier chapters you learnt about the importance of listening to children and adjusting your communication to suit their needs and individual differences. You also learnt about the importance of considering your actions and acting appropriately in the work that you do. To do all of these things well, you are relying on your system of ethical beliefs.

You can learn a lot about the ethical beliefs and values of your organisation by reading its vision, mission and values statements. These documents set out the values and morals of the organisation as a whole and tell staff, clients and the general public what the organisation is really about.

You can find these documents in several ways. They may be included in the organisation's annual report, and are often available on the organisation's website. You may be given copies as part of your induction pack when you first join the organisation. You may also be invited to be a part of the decision-making that helps develop or revise the documents.

## Reflecting on your own values and beliefs

As an educator, it is likely that you will come across many different types of people in your daily activities. There will be people who have very similar values and beliefs to your own, and there will be people who hold vastly different values and beliefs. Sometimes these differences will have a cultural or religious base to them. Sometimes they will just be a reflection of the fact that we are all individuals with values and beliefs shaped by our own unique sets of experiences and circumstances.

It is wise to consider from time to time what your own values and ethics are and to consider the things that are important to you. By reflecting on your values and ethics, you can become more aware of your own thinking and the reasons behind your actions and choices.

## Conflicting ethical views

When a conflict occurs between your views and another person's, it is important to consider your own ethical view about the situation and spend some time considering the perspective of the other person or of your organisation. You may find that it is possible to reach an agreement that means both parties feel comfortable and your different views can coexist.

In the following case study, an educator considers her ethical views against her organisation's.

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**Case study**

Martina reads through the values statement of her organisation and realises that Christian values guide and inform their practice. Although she does not consider herself a Christian, she decides that her own ethical principles are closely aligned with the organisation's.

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In this case, it is possible for two seemingly conflicting views to exist side by side with a shared goal of acting in a way that benefits the children and families Martina provides care for. She might feel differently, however, if she were expected to include some prayer or bible study in the program. If this was the case, she would need to consider her suitability for this role and identify whether other program educators should take on this part of the role.

## The ethics of working with children at risk

You have learnt about the requirements and responsibilities associated with children at risk. While there are legal and organisational requirements that dictate how you should handle mandatory reporting and situations where you believe a child is at risk, there are also ethical considerations. One of the principles that underpins mandatory reporting is the view that, as a society, we should never tolerate or accept situations where a child is harmed. While a failure to act can be justified by previous experiences of making a report or a belief that there is insufficient evidence, it is important to consider whether these are excuses rather than reasons. The ethics of working with children at risk require us to think deeply about what we believe and about the best way forward for individual children, their families and society as a whole.

Ethics may also relate to duty of care. For example, even though you may not legally owe a duty of care to a child (perhaps because they are not enrolled in the program or because you are not at work), you may consider it your ethical duty of care to ensure the child is safe.

The following case study shows how an educator applies ethical decision-making.

## Case study

Naomi is a supervisor for a holiday program and has become concerned that running costs are rising. The main factor causing the cost increase is art and craft consumables, which are being purchased in large quantities. Although she is pleased that the children are getting valuable art and craft experiences, she is worried about the costs being unsustainable.

This presents Naomi with an ethical dilemma. On one hand she is responsible for running the program to budget, but on the other hand she can see the benefits for the children from the art and craft.

Naomi calls a team meeting with her colleagues to discuss the issue. They come up with a plan to do a simple cost–benefit analysis of the art and craft program by evaluating its impact on the children. This includes asking the parents for their views as part of the evaluation. Their evaluation provides them with a clear indication that the art and craft activities are having a positive effect on the development of the children.

Using the results from the evaluation, Naomi is able to prepare a recommendation to the board for extra funding to keep the art and craft program going at its current level.

## Practice task 15

Read the following scenario, then answer the questions that follow.

### Scenario

Nadira, an 8-year-old girl from a Muslim family, has started attending your service. At your first meeting with her parents, they are very concerned that Nadira should understand that girls have a different status to boys in their culture. They do not want her to participate in any ball games such as soccer or softball.

Nadira has indicated that she has an interest in ball games. Today, you observe her watching some other girls her age playing netball. Later, you notice that Nadira has joined in and is playing netball with the girls. Another educator has encouraged her to participate until just before her parents arrive.

1. What are the ethical issues involved in this case?

2. What are the ethical decisions you will need to make to ensure Nadira can participate fully in the program?

# Chapter summary

1. When you are working with children, it is important to understand the standards, policies and procedures that apply to your job role and govern your work.

2. It is important that you remain up to date with changes that occur to legislation, standards and quality practices.

3. As an educator, you need to have a good understanding of duty of care and how it applies to your job role. It is important to clarify your particular duty-of-care responsibilities.

4. Organisational policies and procedures sit alongside legislation and relevant frameworks such as the National Quality Framework and *My time, our place – Framework for School Aged Care.*

5. Identifying and reporting children at risk can be a confronting and challenging issue. It is important that you have a good understanding of your legal and ethical responsibilities.

6. Mandatory reporting means that there are various groups of people who are required by law to report situations where they believe a child is at risk of harm or is being abused. These laws vary between states/territories. Always speak to your supervisor if you are unsure of what to do.

7. Ethics is a system of moral principles that guide and inform decision-making and actions.

## Assessment activity 3
## Working within the framework of school age care

Your trainer or assessor may require you to complete this assessment activity and will provide you with instructions as to how to present your responses. They may provide alternative or additional assessment activities depending on the circumstances of your training program.

The following table maps the assessment activity for this chapter against the element and performance criteria of Element 3 in *CHCSAC003 Work collaboratively and respectfully with children in school age care.*

| Part | Element | Performance criteria |
|------|---------|----------------------|
| A | 3 | 3.2, 3.3, 3.5, 3.6 |
| B | 3 | 3.1, 3.4 |
| C | 3 | 3.1, 3.2, 3.3, 3.4, 3.5, 3.6 |

## Purpose

This assessment activity is designed to assess your skills and knowledge in working within the framework of school age care.

## Requirements

To complete this assessment activity, you need:

- access to *My time, our place – Framework for School Age Care in Australia*
- to answer the questions and submit responses as directed by your trainer/ assessor/training organisation.

## Part A

1. Give a definition for each of these terms:
   a) Duty of care
   b) Negligence
   c) At risk
   d) Mandatory reporting
   e) Ethics
   f) Policy
   g) Procedure

2. Phillipa is working with a group of children on an excursion to a playground when she notices a toddler, who is not part of her group, fall from a piece of equipment. Does Phillipa owe a duty of care to the toddler? Explain your answer.

# Part B

Access a copy of *My time, our place – Framework for School Age Care in Australia*, (MTOP), available from the ACECQA website at: www.acecqa.gov.au.

MTOP covers all aspects of school age care operations. The section headed Practice, on page 13, mentions 'Collaboration with children'. Read this section.

In the Outcomes section, there are two columns under each outcome. The right-hand column is headed 'Educators facilitate this, for example, when they …' Read through this column under each of the outcomes and find where the words 'collaborate' or 'collaboration' are used; for example, under Outcome 2, on page 28, 'collaborate to develop daily routines and practices that embrace sustainability'. List all the uses of the words collaborate or collaboration you can find.

Choose two of these statements and write a brief plan (one page or less) for how you would collaborate with children aged 5 to 12 years to do the stated task. For example, using the statement from page 28, how would you collaborate with children to 'develop daily routines and practices that embrace sustainability'? Your plan should include your method for collaborating. It should look at encouraging participation, valuing ideas, problem-solving, making decisions and any other areas you think are relevant. You should also refer to the information covered in Chapter 1 about communicating with children.

# Part C

Complete a table similar to the following with a description of how you would act in each of these situations and why.

| Situation | Action and reason |
|---|---|
| 1. A family asks if you can drop their child home after a session as they know you live close by. | |
| 2. A child wants you to carry them on your hip as they are feeling sad about an argument they have had with another child. | |
| 3. Your supervisor tells you that you should not report a suspected child abuse situation as they do not think you have enough evidence to support your suspicions. | |

*... continued*

| Situation | Action and reason |
|---|---|
| 4. A co-worker tells you not to bother recycling office paper as it all just goes to landfill anyway. | |
| 5. A child has an asthma attack during your program. | |

## Record your foundation skills

When you have completed the assessment activity, make sure you record evidence of how you have developed and applied foundation skills. You may use the table at the end of this learner guide for this purpose. Keep copies of material you have prepared as further evidence of your skills. Refer to the information on foundation skills in Appendix 2 of this learner guide for further guidance.

# Appendices

## Appendix 1: How the learner guide addresses the unit of competency

The following table details the elements and performance criteria for this unit of competency. The second column shows where they are covered in this learner guide.

| CHCSAC003 Work collaboratively and respectfully with children in school age care | Where covered in this learner guide |
|---|---|
| **Element 1: Communicate effectively with a range of children in the school age care context** | **Chapter 1: Communicating effectively with a range of children in the school age care context** |
| 1.1 Listen to children to gain an understanding of them as individuals in the environment | 1A Listening to children to understand them as individuals |
| 1.2 Use communication strategies that encourage relationship-building and are appropriate to the individual | 1B Using appropriate communication strategies that encourage relationship-building |
| 1.3 Act upon information that the child provides about their needs | 1C Acting upon information that children provide about their needs |
| 1.4 Use cross-cultural communication strategies to engage with children from diverse backgrounds | 1D Using cross-cultural communication strategies to engage with children from diverse backgrounds |
| 1.5 Use varied communication techniques to ensure the inclusion of all children | 1E Varying communication techniques to include all children |
| **Element 2: Reflect an understanding of middle childhood** | **Chapter 2: Reflecting an understanding of middle childhood** |
| 2.1 Consider the interests and needs of the child in all actions and decisions | 2A Considering children's interests and needs in all your actions and decisions |
| 2.2 Evaluate issues in relation to child's abilities and culture and adjust approaches accordingly | 2B Evaluating issues and adjusting approaches according to children's abilities and culture |
| 2.3 Select activities and resources to promote access, equity, diversity and inclusion of all children in the service | 2C Selecting activities and resources to promote access, equity and diversity and include all children |
| 2.4 Establish guidelines relevant to middle childhood when required | 2D Establishing guidelines relevant to middle childhood development |

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| CHCSAC003 Work collaboratively and respectfully with children in school age care | Where covered in this learner guide |
|---|---|
| **Element 3: Work within the framework of school age care** | **Chapter 3: Working within the framework of school age care** |
| 3.1 Apply industry standards and best-practice approaches to working with children in school age care | 3A Applying industry standards and best practice approaches |
| 3.2 Ensure duty of care is applied to all job functions | 3B Ensuring duty of care is applied to all job functions |
| 3.3 Follow organisational policies and procedures as required | 3C Following your organisation's policies and procedures |
| 3.4 Establish professional relationships and boundaries with children in care and their families | 3D Establishing a professional relationship and boundaries with children and their families |
| 3.5 Identify and report children at-risk as required by policy | 3E Identifying and reporting children at risk according to policy |
| 3.6 Apply ethical decision-making in the educator role | 3F Applying ethical decision-making in your role |

## Performance evidence

The following table details the performance evidence required for this unit of competency and outlines where it is addressed in the content of this learner guide.

| Performance evidence | Where covered in this learner guide |
|---|---|
| Communicated and interacted effectively with at least three groups of children of different ages in an out of school hours care setting, including: | |
| • communicating appropriately with children and showing active listening skills | 1A, 1B, 1D |
| • using communication strategies to encourage children to participate in activities and build relationships | 1A, 1B, 1C, 1D |
| • considering individual needs and interests of children and inclusion tactics when planning activities | 1B, 1C, 1D, 2A, 2B, 2C, 2D |
| • utilising engagement strategies for encouraging children to participate fully in school age care | 1B, 1C, 1D, 2A, 2B, 2C |
| Consistently followed and applied industry standards, frameworks and organisational policies and procedures, including ethical practice | 1B, 1C, 1D, 1E, 3A, 3B, 3C, 3D, 3E, 3F |
| Performed the activities outlined in the performance criteria of this unit during a period of at least 120 hours of work in at least one regulated education and care service | |

## Knowledge evidence

The following table details the knowledge evidence for this unit of competency and outlines where it is in the content of this learner guide.

| Knowledge evidence | Where covered in this learner guide |
|---|---|
| How to access:<br>• the National Quality Framework<br>• the National Quality Standards<br>• the relevant approved learning framework | 1B, 3A, 3C, 3D, 3E |
| How to navigate through framework and standards documents to find areas relevant to this unit of competency | 1B, 3A, 3D |
| Development factors relevant to the middle childhood age group and appropriateness of communication and interactions with children in school age education and care | 1B, 2D |
| Principles of inclusiveness, diversity, equity and access in the school age education and care environment | 1B, 1D, 1E, 2A, 2B, 2C, 2D, 3A |
| Strengths-based approaches to support children's participation in the school age education and care | 1A, 1B, 1C, 1D, 1E, 2A, 2B, 2C, 2D |
| Support strategies for ensuring participation of children | 1A, 1B, 1C, 1D, 1E, 2C, 2D |
| Organisation standards, policies and procedures | 1C, 1D, 1E, 3A, 3B, 3C, 3D, 3E, 3F |

# Appendix 2: Foundation skills

As an employee, you need to have a wide range of skills and knowledge to perform the various tasks you undertake as part of your day-to-day duties.

The specific skills and knowledge required for your job are listed in your position description; for example, you may be responsible for operating equipment, planning a program, maintaining financial records or caring for children. However, underpinning all your duties and tasks are a set of skills that are essential if you are to participate successfully in work and be a valuable and productive employee.

Employers and industry have identified these skills as:

- learning
- reading
- writing
- oral communication
- numeracy.

In addition, employers require people who can contribute effectively to the organisation by being able to:

- work in a team
- plan and organise
- make decisions
- identify and solve problems
- create and innovate
- use technology
- work in a digital world.

Together, these skills are referred to as foundation skills.

Most tasks use a range of foundation skills. For example, if you are required to operate equipment or machinery, you need to be able to read organisational procedures and manufacturers' instructions to use the technology safely and correctly; plan and confirm your task with others; carry out numerical calculations specific to the task; work as part of a team; solve any problems that may arise; meet a deadline; and perhaps complete a written record or form for the work carried out.

Foundation skills are discussed in each chapter of this learner guide as part of your learning program. They are included in the content, the practice tasks and the assessment activities. Sometimes they are easy to spot, but sometimes you will need to read carefully to see where a foundation skill is included.

Following the assessment activity at the end of each chapter, you have the opportunity to record the things you did to develop foundation skills while working through the chapter by completing the form at the end of this learner guide.

## Providing evidence of foundation skills

The foundation skills you develop while working through this learner guide are assessed at the same time as the specific skills and knowledge outlined in Appendix 1.

It is important to keep notes and evidence of the actions you have taken that show you have developed these foundation skills. For example, if you work in a team, comment on the things you did to develop teamwork skills. If you wrote a letter, prepared a meeting agenda or developed a plan, use this material to show your written skills. If you carried out measuring, weighing or calculating, provide the results to show your numeracy skills.

You may also keep a written, audio or visual record and examples of your work as evidence of your skills.

Use the table at the end of this learner guide to record your achievements and describe the activities you have undertaken that demonstrate how you developed foundation skills as you worked through this learner guide. Here are some examples for oral communication.

| Foundation skills | The activities undertaken to develop and apply the foundation skill |
|---|---|
| Oral communication | • Asked my supervisor to clarify an instruction. Repeated the instruction to confirm I understood it.<br>• Presented an item at a staff meeting.<br>• Provided information to a colleague.<br>• Gave feedback to a team member.<br>• Accurately conveyed information to a customer.<br>• Reported a hazard. |

The following table provides a definition for each foundation skill and examples of how you can develop it as you work through this learner guide.

| Foundation skill | What this skill means | How you can develop this skill |
|---|---|---|
| Learning | Understanding your job role, organisational procedures and legal responsibilities.<br><br>Managing your work and seeing how well you are going. Making goals for yourself at work.<br><br>Seeking professional development opportunities for continuous improvement. | • Attend a training session on mandatory reporting.<br>• Participate in a mentoring program to train and support new staff.<br>• Complete an online training session on manual-handling to better cater for the needs of nonambulant children. |
| Reading | Understanding how documents are presented and being able to navigate through documents.<br><br>Understanding industry- and job-specific terminology.<br><br>Interpreting key information in relevant documents.<br><br>Understanding routine workplace checklists and documentation. | • Read standards and legislation.<br>• Read journals for updates on current best practice. |
| Writing | Planning, drafting and writing reports and documents.<br><br>Communicating through written letters, email and online.<br><br>Recording progress; reporting incidents. | • Develop activity plans.<br>• Write reports relating to children at risk. |
| Oral communication | Clarifying instructions.<br><br>Providing information.<br><br>Supporting others through encouragement, negotiation and conflict resolution. | • Ask children about their interests.<br>• Develop relationships with children through discussion. |
| Numeracy | Calculating costs, weights, measurements of height and distance.<br><br>Interpreting measurements. | • Understand national standard and regulation numbering.<br>• Implement plans following a timetable. |
| Teamwork | Working well with other people by cooperating, collaborating, encouraging and building rapport. | • Give directions to an assistant about how to implement a task.<br>• Refer a problem or issue to a team leader/manager in an appropriate manner.<br>• Work alongside a colleague to run a whole group activity. |

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| Foundation skill | What this skill means | How you can develop this skill |
|---|---|---|
| Planning and organising | Planning your workload and commitments.<br>Implementing tasks.<br>Completing work on time.<br>Knowing how to deal with hazards and risks. | • Prepare equipment and resources prior to an activity.<br>• Write a plan showing the time line, resources and activity description for a holiday program.<br>• Organise to be at work and ready to work before children arrive for a program. |
| Making decisions | Understanding and applying decision-making processes.<br>Reviewing the impact of your decisions. | • Decide whether a problem is an ethical dilemma.<br>• Review strategies to identify whether they are best practice. |
| Problem-solving | Identifying problems.<br>Working out how to fix a problem using problem-solving processes. Reviewing the outcome. | • Use an alternative activity when wet weather means children cannot do planned outdoor activities.<br>• Deal with a power failure during a holiday program.<br>• Phone a manager to request extra staff support when a staff member calls in sick for work. |
| Innovation and creation | Recognising opportunities to develop and apply new ideas. Generating ideas by thinking of new ways to do something.<br>Making suggestions to improve work. | • Develop activity plans based on information you gather about children.<br>• Identify ways all children can participate despite their needs. |
| Technology and digital literacy | Efficiently using digitally based technologies and systems correctly and safely.<br>Accessing, organising and presenting information.<br>Using equipment correctly and safely. | • Use digital media to capture information provided by children.<br>• Research current best practice, standards and legislation. |

# Foundation skills

Using the following table (or similar), describe the activities you have undertaken that demonstrate how you developed and applied foundation skills as you worked through this unit. Keep copies of material you have prepared as further evidence of your skills.

| Foundation skills | The activities undertaken to develop and apply the foundation skill |
|---|---|
| Learning | |
| Reading | |
| Writing | |
| Oral communication | |
| Numeracy | |
| Teamwork | |
| Planning and organising | |
| Making decisions | |
| Problem-solving | |
| Innovation and creation | |
| Technology and digital literacy | |