



Health and Safety and Compliance Guidelines

In collaboration with NZPF Property & Equipment

Overview

These guidelines have been created to assist with identification of health and safety issues within centres and to assist Associations with documentation required to meet health and safety requirements.

The systems and procedures outlined are suggestions only and it is the ultimate responsibility of your Association/Centre whether you choose to implement them.

The Health & Safety in Employment Act 1992 (HSEA) places responsibility for implementation of systems and procedures of safety in the place of work/business squarely on the shoulders of the Employer and Owner of the business. This means that Centre members are responsible for the daily management of hazards and safety of those on the premises during sessions.

Associations have the responsibility to oversee the centre practices to ensure that they comply with Association policies and ultimately good employer and OSH requirements.

We hope the information in these guidelines is helpful

Stay Safe

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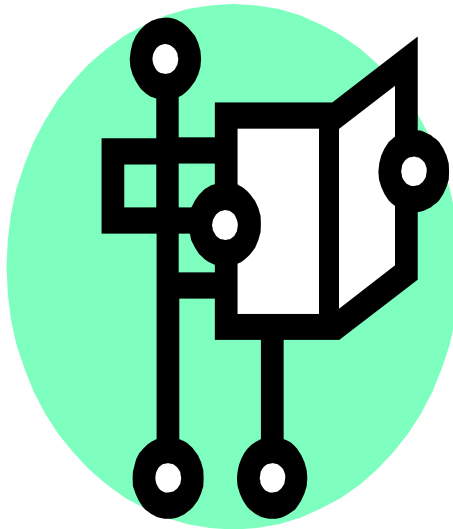


These guidelines have been divided in easy to read categories for each room or area of a Playcentre. The categories are as follows:

- ♣ Health & Safety for Property
- ♣ Health & Safety for Equipment
- ♣ Licensing/Compliance Requirements

Further reference can be made to the following documents:

- ♣ New Zealand Playcentre Federation Property Manual
Produced by the NZPF Property Team.
- ♣ Watch Out List
Produced by NZPF Equipment
- ♣ Equipment for Playcentres
Produced by NZPF Promotions
- ♣ Early Childhood Education Regulations
Produced by the Ministry of Education



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Health and Safety Policy Statement

The New Zealand Playcentre Federation is committed to maintaining a safe and healthy environment for all Playcentre members including Families, Association Members, Federation Personnel, and employed Staff.

Health and safety is everyone's business, and everyone is expected to share in Playcentre's commitment to avoid all accidents and incidents, which may cause personal injury, property damage or loss of any kind.

Every member will take all reasonable steps to promote the health and safety of all children, to prevent accidents and the spread of infection amongst children enrolled in the service.

Every member will take all reasonable steps to ensure that the premises, facilities & other equipment on the premises are kept in good repair, maintained regularly and used safely and kept free from hazards.

The health & safety of members will be ensured by:

- ♣ Providing and maintaining safe premises for the operation of Playcentre sessions and for carrying out Association and Federation business.
- ♣ Ensuring all equipment is safe for use by children and adults
- ♣ Ensuring all children & adults are not exposed to unmanaged or uncontrolled hazards
- ♣ Developing and implementing health & safety protocols, emergency and evacuation procedures
- ♣ Meeting legislative requirements

To achieve this Playcentre members will:

1. Provide reference materials with supporting information.
2. Comply with all legislation relating to the running of an Early Childhood Centre – such as the Ministry of Education Regulations, OSH Legislation, NZ Building Code, NZ Safety Standards.
3. Systematically identify and control all hazards. Where there are significant hazards members will take all practicable steps to eliminate, isolate and or minimise these hazards to prevent any injury or damage.
4. Keep all members/personnel informed of these hazards and the hazard controls.
5. Inform all members/personnel of emergency and evacuation procedures.
6. Record all incidents and accidents in the appropriate format and take all practicable steps to prevent these events from reoccurring.
7. Carry out regular reviews to monitor health and safety issues.
8. Continuously review policies and procedures to ensure that they are current and meet the purpose

A summary of the intention of Health & Safety Act:

- ♣ The Act covers ALL people on the premises – not just employees
- ♣ The object of the Act is to prevent harm to employees and others at your place of work
- ♣ The people responsible for Health & Safety in the Playcentre includes all members, and where applicable, all employees
- ♣ All these people are exposed to prosecution when an accident occurs at work, if they do not have an OSH System in place
- ♣ If the systems and procedures of OSH are in place, and maintained in the day-to-day running of the Playcentre, then the Playcentre has a defence in place in the event of an accident. The defence is in showing that “all practicable steps” to avoid an accident have been taken
- ♣ Employees also have to take all practicable steps to avoid an accident

Meaning of the words used

Some of the words used in the Act need to be described:

Practicable

The Act talks about taking “..all practicable steps to ensure..”

This means that the PLAYCENTRE HAS TO DO EVERYTHING THAT IT REASONABLY CAN to ensure safety.

Reasonable

You have to consider:

How likely is it that harm could occur?

What is known about the sort of harm that could occur?

What sort of things could be done?

What would it cost?

How available are the things you need?

Harm

An injury – a cut for example
An illness – asthma for example
BOTH an injury and an illness.

Serious Harm

BAD injuries or illness. The Act lists amputation, fainting or illness requiring a doctor's help and a long list detailing "where some body function doesn't work for a while or doesn't work ever again".

Hazard

ANY danger that could cause harm (injury or illness) to someone.

Significant Hazard

- Could cause serious harm (bad injury or illness)
- Could cause harm that does not show up for some time AFTER a person was in the area where the hazard was
- Could cause harm IF a person spent a long time in the area where the hazard was, or was in the area many times.

Identifying Hazards

Finding out WHAT the dangers are, and where they are.

Accident

An event that resulted in someone being harmed (suffering serious or non-serious injury or illness).

Near Miss Incident

An event that did not result in harm (injury or illness) to someone but in different circumstances could have. The incident may or may not result in property damage.

Principal

Any person who engages any other person, other than an employee, for gain or reward. The Playcentre is the principal when 'employing' a tradesperson.

Contractor

Any person engaged by the Playcentre (other than an employee) to do work for gain or reward (e.g. a tradesperson).

We/ us / our

All members and employees of the Playcentre.

What does the Playcentre need to do to comply?

Basically have a Health & Safety Policy that covers the following areas:

- (a) OSH Policy Statement
- (b) Policy and procedures that include:
 - a. Health & Safety Officer position and job description
 - b. Accident Reporting system and procedures
 - c. Hazards Register
 - d. A method of record keeping
 - e. Emergencies
 - f. Contractors/Others on the premises

In these guidelines you will find sample forms and to assist you.



Example

Health & Safety Officer Job Description

Expectations

- To be familiar with the Health & Safety Legislation, Operations Manual, Association constitution and Centre policies.

Qualities

- Good organisational, communication and delegation skills
- An awareness of the general running of the centre

Goals

- Be aware of fire drills, procedures and license requirements
- Be an active and effective member of your Playcentre
- Ensure that the centre is made aware of any health and safety issues as they arise

Duties and Responsibilities

- 1 Attend any training, meetings etc. held by the Association for Health & Safety Officers
- 2 Promote Safe and Healthy practises for Centre Adults and Children
- 3 Ensure requirements of the Occupational Health and Safety Act are met by:
 - Maintaining the Centre Hazard List
 - Ensuring that the information the enrolment officer has for induction is current and correct
 - Reporting on Accident Register to Centre meetings
 - Ensure Fire and Earthquake drills are performed
 - Ensure notified evacuations are completed
 - Ensure fire evacuation plan is approved and displayed.
 - Providing information to monthly centre meetings regarding Health & Safety
- 4 Work with the Equipment Officer to complete the annual play equipment safety check
- 5 Inform centre people about Civil Defence procedures and legal responsibilities
- 6 Keep the Civil Defence Kit stocked
- 7 Maintain the Centre Children's allergy register
- 8 Ensure the Watchout list is current and displayed
- 9 Maintain Centre First Aid Kit
- 10 Liaising with Police, Fire and Ambulance services
- 11 Checking that all local Emergency Services phone numbers and addresses are listed by the telephone, in the Civil Defence Kit and also the Centre's Operation Manual.

Centre Protocols

Reporting on the Accident Register to Centre meetings:

All accidents must be recorded in the Centre Accident Register; the register is to be reviewed at each Centre meeting to ensure that there is no pattern occurring in the accidents that are happening at the centre. If there is a pattern noticed there may be an area of the centre that requires attention to prevent reoccurrence. If identified ensure that the area of concern is added to the Hazard register.

Inform all employees of the outcome of the accident/incident investigation, i.e. new hazard identified and the hazard controls.

There are procedures that should be followed in relation to accidents and they are

Minor Accident

- ♣ Ensure area is safe around affected person and the immediate surrounding area.
- ♣ Call out to patient to get a response
- ♣ Allow person to move too you, don't pick them up. This helps to check the patient's mobility
- ♣ Look for and assess injuries
- ♣ Treat grazes/cuts with clean water, apply cold pack to bruises/sprains, and apply remedy as necessary from First Aid Kit.
- ♣ Record in Accident Register
- ♣ Ensure parent/caregiver is informed of the accident if a child.

Major Accident

- ♣ Check patient for Medic Alert bracelet
- ♣ Call for help from other caregivers. Request one adult to call for ambulance if necessary. Remove other children away from the accident area.
- ♣ A – Check airway – clean/clear
- ♣ B – Check breathing – look/listen/feel
- ♣ C – Check circulation
- ♣ Commence CPR if required

- ♣ Check and control any bleeding
- ♣ Leave patient where they are. Keep warm by covering them with a blanket or jacket while waiting for ambulance
- ♣ Apply ice or clean bandage to affected area if required
- ♣ Stay calm and reassure patient while waiting for emergency services

Once the initial accident is dealt with the following protocols should be followed:

- ♣ An adult should accompany a child in the ambulance
- ♣ Inform patient's parent/caregiver if they are not present
- ♣ Write details into Accident Register
- ♣ Notify Occupational Safety and Health (OSH) within 24 hours of the accident – phone number 09 262 5300 (24 hour number)
- ♣ Provide details of the accident in writing to your nearest office within 7 days. (Failure to do so could result in a hefty fine)
- ♣ For serious harm accidents **Do not** disturb the scene! Seek approval of an OSH Inspector before releasing or disturbing scene

Induction Information for New Members

To ensure that all new members are aware of all identified hazards and their responsibilities in ensuring that they are minimised or eliminated it is important that the Hazard register is an integral part of the induction process into becoming a Playcentre member.

Include into your yearly checklist a once a term check that all new members have read the Hazard register and that the Enrolment Officer is having every new member read the Hazard list and the Evacuation procedures upon enrolment.

New members also need to be made aware of their responsibility to record all accidents and near misses so that potential hazards can be identified and dealt with.

Ensuring Fire and Earthquake drills are performed

An earthquake and a fire drill is required to be performed for every session at least once per term. (See NZPF Property Manual for details on this)

Civil Defence



Be Ready

Disasters can strike at any time and often without warning. We can't prevent disasters but we can take some simple steps to ensure we will be able to cope. All of us must think ahead and be prepared by involving the whole centre.

Develop an emergency plan, which includes

- ♣ Ensure all members know where to meet. Regularly practice this.
- ♣ Ensure someone is responsible for collecting the emergency survival kit – This may be all in one place or in use around the centre (such as blankets)
- ♣ How to turn off gas, water and electricity at the mains
- ♣ How to maintain contact with each other during an emergency
- ♣ How to contact your local civil defence for advice during an emergency.

People with disabilities

If you have a member with a disability you should arrange some form of buddy system to ensure that their needs are being met.

People with asthma and other respiratory disorders may be especially affected by stress, dust or volcanic ash. Have plenty of face-masks in your emergency survival kit.

If you have special food needs, be sure to include as much as you can in your emergency survival kit.

If you need mobility aids, insist on bringing your aid if you are evacuated. Moving to safety is fine, but you won't want to be helpless when you get there.

Turning off utilities

In an emergency, utilities such as gas, water and electricity may need to be turned off. This may be because they are damaged or to prevent further injury to people and property. A plan of your centre can be drawn up showing where to turn off water, electricity and gas. Always seek professional advice before reconnecting the gas supply.

Your escape plan

An escape plan outlines the safest ways out of each room of the centre, and gives an outside meeting place. Ensure that your Civil Defence evacuation plan is located on the centre wall and is practiced at least once per session per term.

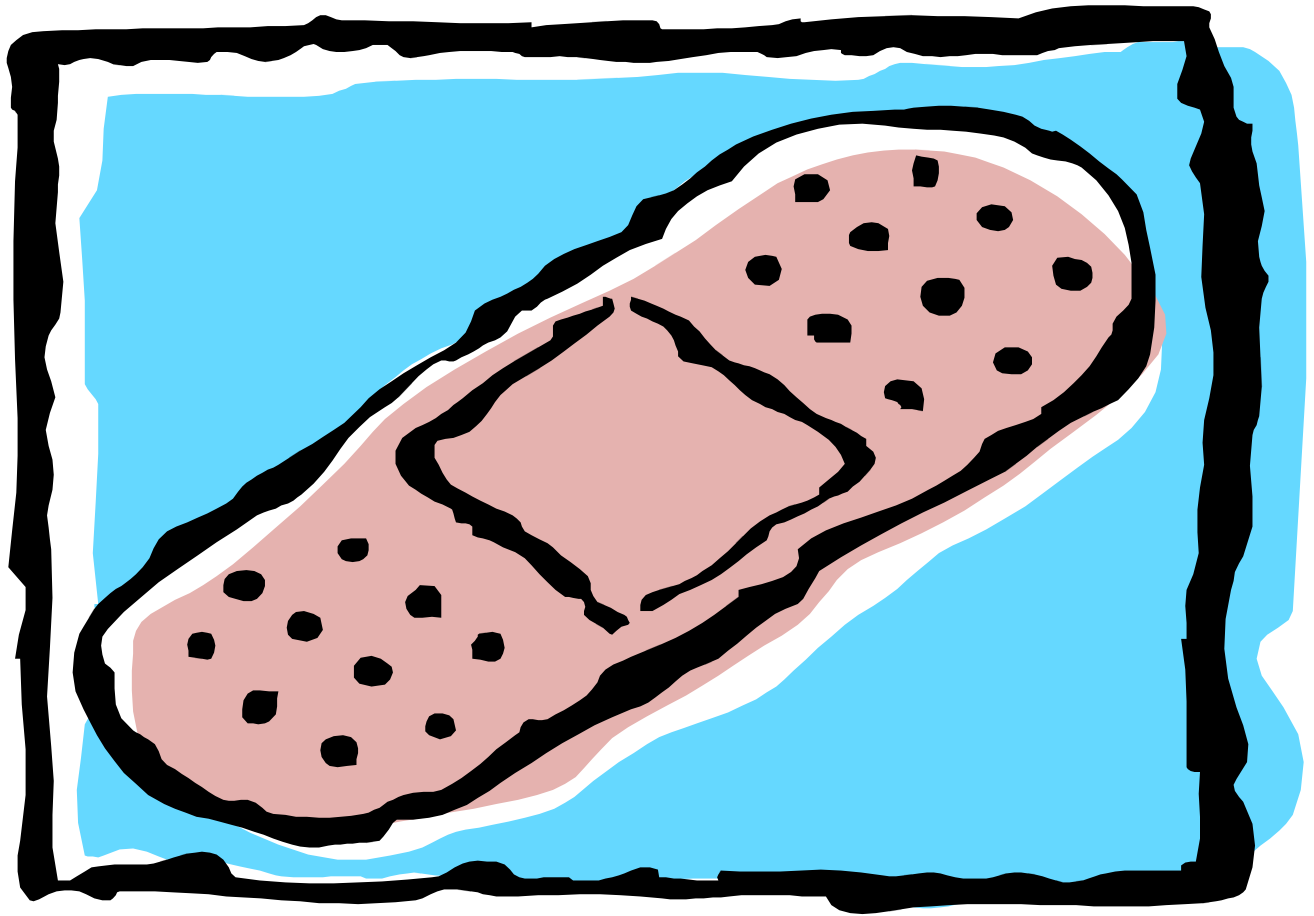
Emergency survival kit

If you prefer to keep your emergency survival kit items in the centre for everyday use, make sure you know where to find them when an emergency occurs.

Your Civil Defence Kit could include: Food and water (enough for three days) including:

- ♣ Canned or dried food
- ♣ A can opener
- ♣ Snack bars
- ♣ Baby food
- ♣ Formula milk for infants
- ♣ Teaspoons
- ♣ Sanitary products
- ♣ Pre-moistened towelettes
- ♣ A primus or BBQ to cook on
- ♣ Bottled water (3 litres per person per day).
- ♣ Disposable cups - plastic
- ♣ Check and renew the food and water every 12 months.
- ♣ A first aid kit and essential medicines
- ♣ Spare toilet paper and plastic rubbish bags for your emergency toilet – suggest at least 12
- ♣ Waterproof torches and spare batteries
- ♣ Candles
- ♣ Matches
- ♣ Bag of barley sugars (or similar)
- ♣ A radio and spare batteries. Check the batteries every three months.
- ♣ Supplies for babies and small children. Such as disposable nappies etc.
- ♣ Spare clothing
- ♣ Blankets.

First Aid



Training, Equipment and Facilities:

These guidelines set out a framework for taking "all practicable steps" in providing effective first aid arrangements and are recommended by OSH.

Key references include the following:

The Health and Safety in Employment Act (1992) and amendments;
The Health and Safety in Employment Regulations (1995); and

The nature of the work being performed is the most important factor in deciding the first aid requirements for each centre.

Responsibilities

Centre members are accountable for:

- ♣ Ensuring appropriate First Aid supplies are provided (see minimum list below)
- ♣ Ensuring that there is at least one first aider present for every session
- ♣ Providing information to new members about the location of first aid boxes, where to find the names of members who hold valid First Aid Certificates, and the procedures to be followed when first aid is required.

First Aid Cabinets and Replacement Items

The centre must always ensure that the minimum level of first aid equipment is suitably stocked and contained in a properly identified first aid kit. There is no mandatory list of items that should be included in a first aid kit. Centres should decide what to include in the first aid kit from information gathered during their assessment of first aid needs. As a guide, where no special risk arises in the workplace, a minimum stock of first aid items would normally be as listed below.

Mobile first aid kits that provide additional requirements should contain, in sufficient quantities, the contents as listed above. It is essential that first aid equipment be checked regularly and that items be replaced before the expiry date shown on the packets.

Members should ensure that first aid kits are replenished as soon as possible after use in order to ensure that there is always an adequate supply of materials available.

Suggested minimum contents for workplace first aid kits:

- A manual giving general guidance on first aid;
- 20 individually-wrapped sterile adhesive dressings (Various sizes), appropriate to the type of work;
- 2 individually-wrapped triangular bandages (preferably sterile);
- safety pins & scissors & tweezers;
- 6 medium-sized, individually-wrapped sterile unmedicated wound dressings, about 12 cm x 12 cm and 2 large sterile individually-wrapped unmedicated wound dressing, approximately 18 cm x 18 cm;
- Cold pack
- 1 pair of disposable gloves; and
- 1 resuscitation mask.

This is a suggested contents list only; equivalent but different items will be considered acceptable.

Once the assessment of the first aid items required has been completed, a need for additional items may be identified; this could include, for example, scissors, adhesive tape, disposable aprons, individually-wrapped moist wipes or saline solution. These may be stored in the first aid kit if there is room, but they may be stored separately as long as they are available for use as required.

Provision of First Aid Training

The suggested training course needs to meet the minimum as set out by the department of labour and to meet the requirements of unit standard 6400. The training course may be provided in on full day or over a longer period.

Certificates

The First Aid Certificate issued by a trainer is evidence that the holder has the qualification and is trained to the required standard. For the purposes of workplace first aid emergency management, Centre members must ensure that their first aid personnel maintain competency.

The First Aid Certificate is valid for a period of up to 2 years following qualification. An 8-hour refresher course every 2 years will be required to maintain the certificates as current for workplaces under the provisions of the Department of Labour requirements.

Where a certificate has lapsed for more than three calendar months from the anniversary date of issue, it will be necessary for the first aid personnel to complete a full first aid course.

First Aid Kits

First aid kits should be made of suitable material and designed to protect the contents from damp and dust. Kits should be clearly identified as first aid containers; the marking used should be a white cross on a green/red background.

First aid kits should be located so as to be clearly visible and accessible to all members and be unlocked wherever possible. Sealed emergency kits should be available where it is imperative that kits are locked. Each centre shall provide at least one full basic first aid kit in each place of work as well as an additional mobile first aid kits as appropriate to the situation. A first aid kit should be provided and located so as to ensure that:

- a. it is close to a wash basin with hot and cold running water, soap, and clean towels. If, because of location, running water is not available, then saline solution can be provided instead;
- b. it is easily seen and readily accessible to all members;
- c. where members travel on excursions a minimum one travel first aid kit must be taken on all excursions.

Pain relief should not be included in first aid kits. Special provision for treating allergic reactions should be the responsibility of the person with the allergy.

Cleaning of Wounds

Soap and water and disposable drying material should be provided for first aid purposes. Where soap and water are not available, consideration may be given to suitable alternatives, e.g. individually wrapped moist cleansing wipes which are not impregnated with alcohol. **NEITHER COTTON WOOL NOR ANTISEPTICS SHOULD BE USED IN THE FIRST AID TREATMENT OF WOUNDS.** (Cotton wool drops fibre and sticks to wounds. Antiseptics once opened grow bacteria and unless diluted correctly can cause burns, and this in turn leads to the patient's situation deteriorating.)

Disposal of Waste Material

Plastic disposable bags for soiled or used first aid dressings and disposable gloves should be provided. Centres should ensure that used dressings, etc. are safely disposed of in sealed bags, (this reduces the risk of cross-infection.)

Kitchen



Property

- ♣ **Inaccessibility** – All kitchens must be either physically inaccessible to all children or access must be prevented to hazardous items. This will include such things as safety catches on fridges, microwaves etc
- ♣ **Floor Surfaces**– Must be durable safe and suitable for activities to be carried out. A non-porous covering is required such a vinyl, wood etc
- ♣ **Hot Water** – Hot water must be able to be delivered at a minimum of 60 degrees for washing dishes etc. A tempering valve or other accurate means of limiting hot water is advised. Hot water may not be stored in such things as a Zip, where the water falls below 60 degrees C. This means that you may also not turn off the hot water in between sessions.
- ♣ **Kitchen Sink** – must be situated by a hot water supply which provides for the temperature to be delivered at a minimum of 60 degree Celsius.
- ♣ **Food Preparation Surfaces & Cupboards** – must be impervious to moisture and can be easily maintained hygienically.

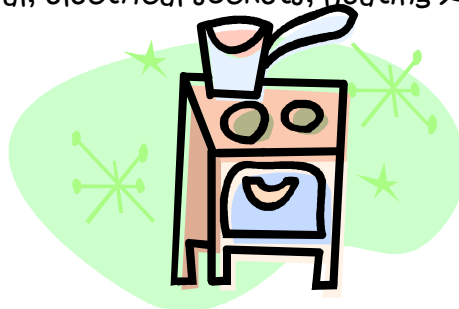
Equipment

- ♣ **Rubbish Container** – must have a securely fitting lid or suitable covering to prevent rodents, and should be hygienically cleaned.
- ♣ **Food Utensils** – You must have an appropriate amount of utensils & crockery that can be hygienically cleaned and stored. Any damaged items are a health hazard and must be disposed of immediately.



Compliance /OSH

- ♣ **Floor Surfaces** – Must be easily kept clean.
- ♣ **Poisons** - All cupboards containing poisons must be inaccessible to children by either being locked or fitted with a child proof safety latch
- ♣ **Food preparation** - designated area is provided for food preparation which is not to be used for any other purpose. This includes a sink solely for this purpose and appropriate food preparation areas.
- ♣ **Perishable Food** – Requires a means to keep perishable foods at a temperature below 4 degrees Celsius and protected from vermin and insects. This could be met by way of using a chilly bin if there is no fridge.
- ♣ **Cooking/Heating Food** – Must have a means of cooking and or heating food. This can be met by way of a microwave.
- ♣ **Stove** – must be installed according to NZ safety standards & must be permanently affixed to the wall.
- ♣ **Cleaning dishes** – need a means of hygienically washing dishes. There is no requirement for a dishwasher but a procedure is required that includes that dishes are hand washed and then submerged in boiling water for a period of no less than 2 minutes to ensure sanitisation.
- ♣ **Unsecured Fixtures** – must prevent damage to people and property resulting from unsecured furniture & fixtures falling. This includes affixing any storage shelves to the walls, microwaves in brackets etc.
- ♣ **Serving Food** – A record must be kept of all food served by the Centre must be kept which will include ingredients and is available for inspection 3 months after it has been served. This does not include food provided by caregivers.
- ♣ **Hazard Identification** – All practicable steps are taken to eliminate, isolate or minimise hazards. A hazard identification register should be displayed on the wall of the kitchen outlining all potential hazards. This must be regularly reviewed (at least once per term) and kept up to date.
Consideration should be given to cleaning agents, medicines, poisons, other hazardous material, electrical sockets, heating Appliances etc



Bathroom, Toilet & Washdown

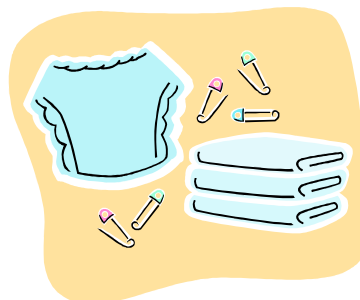


Property

- ♣ **Safety Glass – Safety Glass** – Any glazed area accessible to children is either safety glassed or covered by an adhesive film designed to hold the glass in place in the event of it being broken or have barriers that prevent children falling on the glass. This includes mirrors.
- ♣ **Handwashing** – There is at least one tap per 15 children delivering warm water no more than 40 degrees C. These need to be low enough for children to access by themselves. Need a means of drying to prevent infection.
- ♣ **Location of Toileting area** - must be adequately separated from areas of the service used for play or food preparation.
- ♣ **Hot Water** – A tempering valve or other accurate means of limiting hot water temperature to no more than 40 degrees is installed.
- ♣ **Toilets** – Must be independently accessible by children needing to use them and at least one adult toilet must be provided. At least one toilet must provide children with a sense of privacy.
- ♣ **Nappy Changing Area** – Must be located in a designated area near hand washing facilities and separated from areas of service used for play or food. Some visibility from other areas of service is required but maintaining children's dignity and right to privacy.
- ♣ **Washdown Facilities** – There is a plumbed in fixture for washing sick or soiled children. This must be able to be independently accessed by children if necessary.

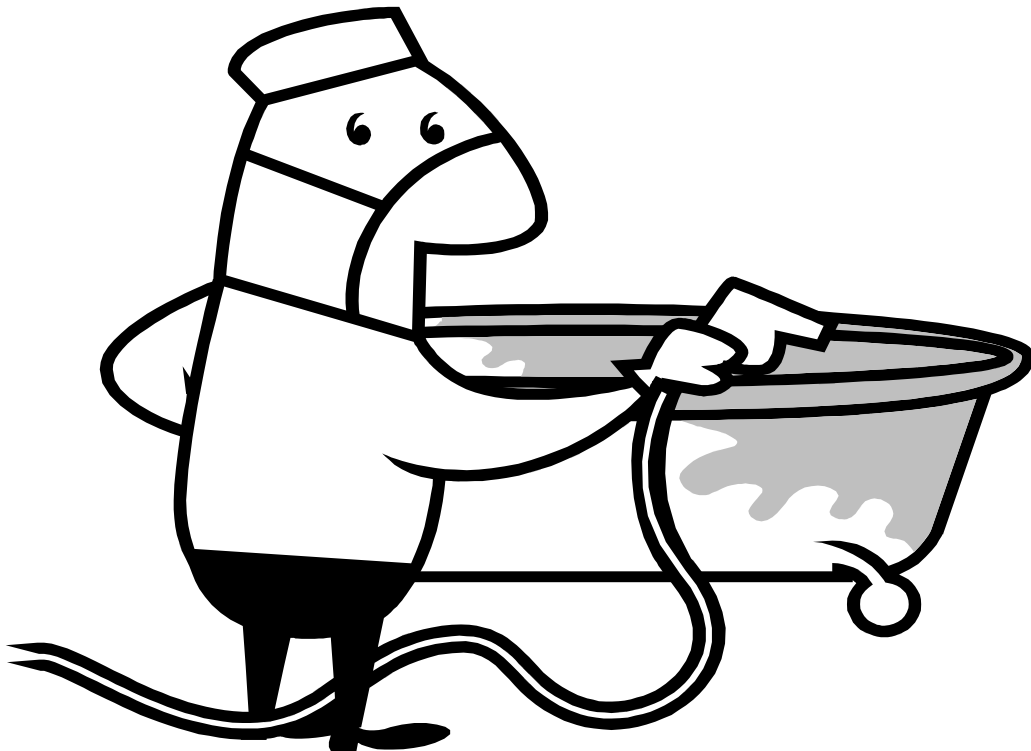
Equipment

- ♣ **Nappy Changing Structures** – Must be rigid and of stable construction which can be kept hygienically clean. They must be safe and appropriate for age/weight and number of children needing to use them & located near hand washing facilities.



Compliance/OSH

- ♣ **Nappy Changing Procedure** – Must be displayed near the nappy changing area detailing changing and nappy disposal.
- ♣ **Toilets** – At least one toilet per 15 people attending over 2
- ♣ **Poisons** – must be kept inaccessible to children.
- ♣ **Floor Surfaces** – Must be easily washed and kept clean and have some form of non-porous covering to prevent contamination
- ♣ **Hazard Identification** – All practicable steps are taken to eliminate, isolate or minimise hazards. A hazard identification register should be displayed on the wall of the toilet area outlining all potential hazards. This must be regularly reviewed (at least once per term) and kept up to date.
Consideration should be given to :
 - Cleaning agents
 - Wet areas
 - Other hazardous material
 - Any other hazards present in the bathroom area



Sleeping Facilities



Property

- ♣ **Safety Glass** – Any glazed area accessible to children is either safety glassed or covered by an adhesive film designed to hold the glass in place in the event of it being broken or have barriers that prevent children falling on the glass. This includes mirrors.
- ♣ **Sleeping Space** – Must be a space provided that provides for restful sleep as per regulations. If it is a separate room then a viewing window is required.

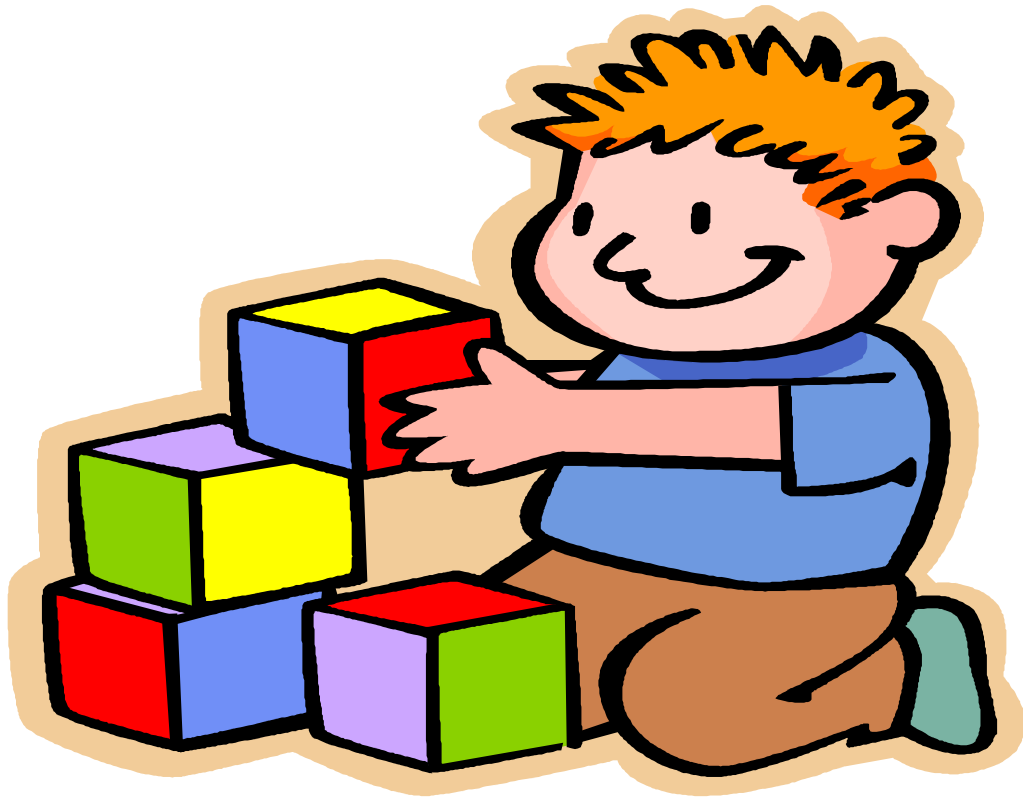
Equipment

- ♣ **Sleeping Apparatus**– Must be of the variety to allow children to lie flat and are designed to ensure their safety.
- ♣ **Mattress Covering** - All Mattresses must be securely covered with a non-porous covering that protects them from being soiled, allows for easy cleaning and is not a suffocation hazard.
- ♣ **Bedding** – Clean individual bedding is provided for sleeping or resting children that is sufficient to keep them warm.
- ♣ **Cots** – must be NZSS approved and fully washable. Porta-cots are not acceptable to be used.

Compliance/OSH

- ♣ **Monitoring Sleeping Children** – A procedure must be displayed and implemented and must include:
 - Children do not have access to food or fluid in bed
 - Are checked for warmth, breathing and general well being at least every 5-10 minutes
- ♣ **Position of Sleeping Furniture** – must be placed to allow for adequate ventilation, clear access to one side, so children can sit or stand safely when they wake and must be stored hygienically.
- ♣ **Sleeping Apparatus** – Furniture or items intended for children to sleep on are provided at a ratio of at least one to every 5 children under the age of two.
- ♣ **Procedure** – Must be displayed on the wall in the sleeping area
- ♣ **Temperature** - Must be at least 16 degree C.
- ♣ **Linen** – Must be hygienically laundered after use
- ♣ **Ventilation** – Must be ventilation that allows fresh air to circulate

Main Indoor Play Space



Property

- ♣ **Supervision** – Where possible the design and layout of the premises support effective adult supervision.
- ♣ **Flooring** – Floor surfaces must be durable safe and suitable for activities to be carried out and easily cleaned.
- ♣ **Safety Glass – Safety Glass** – Any glazed area accessible to children is either safety glassed or covered by an adhesive film designed to hold the glass in place in the event of it being broken or have barriers that prevent children falling on the glass. This includes mirrors.
- ♣ **Heaters** – Must be inaccessible to children (i.e have guards or are located up high) or if accessible must be supervised at all times.
- ♣ **Fire Evacuation** – The premises must have a current Fire Evacuation Scheme approved by the NZ Fire Service. (See NZPF Property Manual)

Equipment

- ♣ **Mirrors** – must be made of safety glass or laminated with safety tinting.
- ♣ **Furniture** – Positive steps are taken to prevent damage to people and property resulting from unsecured heavy furniture, fixtures and equipment falling. Shelves, book cases etc must be affixed to the wall.
- ♣ **Broken Equipment** – Must be removed from child access immediately.
- ♣ **Lighting Bulbs** – If centres use energy saving light bulbs they must be aware that upon smashing there is a specific procedure for disposal as they contain mercury.

Compliance/OSH

- ♣ **Eating Area** – There is a safe and hygienic place for children to sit when eating.
- ♣ **Art Material Cleaning** – There is a facility to prepare and clean paint and other art materials. Brushes may be washed in the cleaners sink in a container (such as a bucket) which prevent cross-contamination
- ♣ **Hazards** - A hazard identification register should be displayed on the wall of the main centre outlining all potential hazards. This must be regularly reviewed (at least once per term) and kept up to date.

- ♣ **Heating** – Centre must be heated to a minimum of 16 degrees C prior to the beginning of session and this temperature must be maintained throughout.
- ♣ **Storage** – There are spaces provided for the safe storage of indoor equipment. The design and location of the storage space enables adults and or children to exercise choice about the type of equipment used.
- ♣ **Lighting** – Lighting is provided (either natural or artificial) that is appropriate to the activities offered and for the purpose of the room.
- ♣ **Ventilation** – Must be provided to allow for fresh air to circulate freely
- ♣ **Acoustic Absorption** – There are materials used if necessary to reduce noise levels that may negatively affect children's learning or wellbeing. This could be the use of well placed furniture, curtain, carpeting etc.
- ♣ **Hazard Management** – Premises and equipment is regularly checked for hazards to children, Incident records are analysed to identify hazards and appropriate action is taken. Consideration should be given to equipment, electrical sockets, foreign materials, bodies of water etc.

Outdoor Play Space



Property

- ♣ **Fencing** – Outdoor space must be enclosed by structures or fences and gates that are designed to ensure the children cannot leave the premises without an adult's help. Fences must be a minimum of 1.2 metres high and comply with current ECE fencing standards
- ♣ **Hand Rails** – must be affixed with all steps and ramps at a height that allows them to be used easily by children and adults.
- ♣ **Decking/Verandahs** –
 - Must be kept clean and be made of or covered with a non-slip material.
 - Must comply with building code and all local council requirements.
 - Need to be kept free from protruding nails, splinters
 - Checked regularly
- ♣ **Safety Checks** – These must be done daily prior to the beginning of session.
- ♣ **Outdoor Sheds** – Doors must be securely latched or closed during session.
- ♣ **Storage** - There are spaces provided for the safe storage of outdoor equipment. The design and location of the storage space enables adults and or children to exercise choice about the type of equipment used

Equipment

- ♣ **Moveable Climbing Equipment** - must comply with NZ Safety Standards
- ♣ **Play structure and Impact Safety Surfacing** - must comply with all current NZ Safety Standards
- ♣ **Safety Checks** – Must be done daily prior to the beginning of session.
- ♣ **Sandpits** – Sand needs to be changed regularly and must be raked and checked for foreign matter at the beginning of every session if not covered.
- ♣ **Sun Shades** – adequate sun protection must be provided.

Compliance /OSH

- ♣ **Access** – Must provide disabled access to the centre premises.
- ♣ **Supervision** – There must be active supervision at all times.
- ♣ **Poisonous Plants** – Must not have poisonous plants in the centre or if present the appropriate hazard must be identified.
- ♣ **Hazards** – A hazard identification register should be displayed on the wall of the main centre outlining all potential hazards. This must be regularly reviewed (at least once per term) and kept up to date.

Disease Control



Reducing the spread of communicable diseases requires attention to both personal hygiene and environmental cleaning. Good personal hygiene is essential when any illness occurs. Key elements include frequent and thorough hand washing and drying, covering broken skin with dressings, covering coughs and sneezes, the correct disposal of tissues and isolating those who become sick at a Centre.

When someone is sick it is important they stay away from other people to prevent the spread of disease. Playcentre should also have a sickness policy for children and adults.

The main concerns are respiratory viruses and gastro enteritis associated with diarrhoea and vomiting e.g. Campylobacter, Norovirus. Respiratory viruses are passed on by droplets when people cough and sneeze. These viruses can survive for 48 hours on surfaces and may be picked up on hands and transferred to the face and mouth. Gastro enteric diseases can be spread via the faecal-oral route i.e. in contaminated food or water, and via aerosol spread, following projectile vomiting.

It is recommended that your Public Health Nurse or a Health Protection Officer is contacted if 20% of children are absent due to similar illnesses. Public Health Nurses and Health Protection Officers will be able to provide further advice and can assist if an outbreak is identified.

Summary of Protection Measures against Communicable Disease

Protection Measure	Where Applicable
Hand Hygiene, cough etiquette, ventilation	Everyone, all the time
Policies for sick people	Everyone, all the time
Social distancing – stay 1 metre away from sick people	Everyone, wherever practical
Environmental cleaning	Risk based cleaning schedule
Personal Protection Equipment	Adults cleaning up vomit/diarrhoea

Cleaning Regimes

All Playcentres should have in place a routine schedule for general cleaning describing the areas to be cleaned and the frequency and method of cleaning. This should be recorded in a cleaning schedule that covers all area of the Playcentre. Use the following as a base from which to create your cleaning schedule.

Walk through your Playcentre and make a list of everything that needs cleaning. Some examples of this are as follows – please add all of your own areas as well.

High risk areas

- ✿ Toilets/Nappy Changing areas
- ✿ Hand basins
- ✿ Food surfaces, preparation areas and equipment used for food preparation
- ✿ Isolation area for sick children
- ✿ Anywhere that is visibly contaminated by vomit or faecal matter

Frequently touched items

- ✿ Rubbish bins, broom & mop handles
- ✿ Door handles, taps, switches & controls
- ✿ Telephones
- ✿ Toys, play equipment, books

General Items

- ✿ Floors, walls, decking, concrete play areas,
- ✿ Waste areas, drains

For each item, or group of items, write down what should be done to clean the items. Contact a chemical company for advice on the type of products to be used in the Playcentre. Collect the MSDS (Material Safety Data Sheets) from the company supplying the chemicals. These will tell you how to use them and the things to avoid, for example, mixing acid and chlorine based chemicals. You may be able to have the company carry out a training session for your staff in the correct, safe use of the chemicals.

Routine Cleaning

Routine cleaning should occur on a daily basis and involves cleaning both high risk areas such as toilets and general areas such as the play space.

Step 1: Identify areas to clean including high risk areas as above.

Step 2:: How to clean.

High risk areas must be cleaned last after routinely cleaned areas to prevent cross contamination from occurring. Surfaces must be cleaned with hot water and detergent first regardless of whether there is any visible matter present. A detergent removes dirt but will not remove any micro-organisms. Then clean with a disinfectant such as bleach. Disinfectants are designed to kill those micro-organisms responsible for causing respiratory and gastro enteric illnesses. They work when applied to surfaces that have previously been cleaned. Some commercial cleaning agents have activity against micro-organisms, but bleach is cheap and effective. Suitable bleaches are Janola, White Magic or Domestos. Personal protective equipment (PPE) should be used when cleaning.

Step 3: Check cleaning has occurred

Ensure that adults are trained appropriately in regards to the cleaning schedule so they know what they have to do and when in addition to knowing how to use PPE correctly. Display a copy of the cleaning schedule on the wall of the cleaning cupboard or where cleaning materials are stored so it can be easily referred to. Ensure the cleaning schedule is reviewed regularly and checks are made to ensure that all cleaning is being done properly.

Make sure that any cleaning regime is included when you are introducing new parents to your centre to ensure that everyone remains safe.

Following is a template of a cleaning schedule for use. Keep a copy of any completed schedule with your usual Playcentre paperwork so that it can be accessed in the event that it needs to be checked by MoE or ERO.

Cleaning Schedule

[illegible]

Personal Protective Equipment (PPE)

PPE can provide additional protection against exposure to, and reduce the spread of communicable disease when used correctly. PPE includes masks, gloves, gowns and aprons.

Varying levels and types of PPE are required depending on the situation, the level of exposure and the risk of transmission. Education and training is required to ensure the PPE is used and disposed of correctly, to maintain the equipment's effectiveness and ensure protection for the person using it.

PPE will be most useful for cleaning up vomit or diarrhoea. Playcentres should consider how often they have managed vomiting and diarrhoea events in the last 2 years as a guide to volumes of PPE required. Consider opportunities to bulk purchase with other centres and local schools.

Adults cleaning up any blood spills must wear gloves and clean the affected surface with a bleach solution.

PPE for cleaning up vomit and diarrhoea in Playcentres

PPE (Disposable)	Packaging	Notes
Particulate Respirator Masks - N 95 or P 2	1 box of 10	Must be fitted properly
Plastic aprons	Packet of 25	
Non-sterile impermeable gloves	Boxes of 100	Beware of latex allergy

In the event of a pandemic influenza more detailed information about the appropriate types of PPE in schools and ECCs will be made available.

General Cleaning Tips

- ✿ When carrying out general cleaning reusable rubber gloves may be used, but they should be washed after use. Reusable gloves should be cleaned by washing them with soap and water while they are worn. Once removed soak in 0.1% bleach solution for 20 minutes and allow to air dry inside and out.
- ✿ If using disposable gloves for cleaning then discard after use.
- ✿ Wear appropriate protective equipment when carrying out general cleaning i.e. gloves and an apron when cleaning toilets.
- ✿ When cleaning avoid touching the face with gloved or unwashed hands.
- ✿ Wash hands with liquid soap and hot water for at least 20 seconds and dry them thoroughly for a further 20 seconds on disposable paper towels immediately after the gloves are removed.
- ✿ Alcohol gels (70% or more alcohol) can be used on hands to sanitise following washing. Hands must be visibly clean (no build up) for the gels to be effective.
- ✿ Ensure surfaces are cleaned with hot water and detergent followed by a disinfectant such as bleach.

How to disinfect: The easiest and most effective way of disinfecting is with bleach. Supermarket bleaches are sold in different strengths, usually 2–5% sodium hypochlorite solution. The strength is written on the label. The recommended concentration of bleach disinfectant is 1000 ppm (0.1%) hypochlorite. To achieve this, the following table provides a guide to diluting supermarket bleach of differing concentrations.

Recipes to achieve a 0.1% Bleach Solution

Original strength of Bleach (% sodium hypochlorite)	Bleach (milliliters)	Water (millilitres)	Total (millilitres)	Parts per million (ppm)
1%	1000	9000	10,000	1000
2%	500	9500	10,000	1000
3%	333	9677	10,000	1000
4%	250	9750	10,000	1000
5%	200	9800	10,000	1000

- ✿ Make the bleach solution up fresh each day in a ventilated room and discard any leftovers after 24 hours.
- ✿ Keep diluted bleach covered, protected from sunlight and heat, in a dark container (if possible) and keep out of reach of children. A spray bottle is an effective way to dispense the bleach solution.
- ✿ Spray or wipe the bleach solution onto hard surfaces that have previously been cleaned with hot soapy water and leave on for at least 10 minutes.
- ✿ If items are being placed into a bleach solution then it is recommended that the item is soaked for 30 minutes.
- ✿ Once an item or surface is disinfected allow it to air dry.
- ✿ Some surfaces cannot be cleaned with bleach solutions (e.g., keyboards, telephones). For these surfaces alcohol wipes are recommended.
- ✿ Disposable cloths should be used for cleaning high risk areas and disposed of after use. If reusable cloths are used soak in bleach solution before drying. Separate coloured cloths should be used for cleaning higher risk areas i.e. toilets/nappy changing areas, and their use should be restricted to these areas only.
- ✿ Reusable mops must be soaked overnight in 0.1% bleach solution.
- ✿ When there is an increase in respiratory illnesses at a school or ECC, carpets or soft furnishings can be cleaned with domestic household carpet cleaning and fabric cleaning products.

Vomiting or diarrhoeal incidents

These incidents should always be treated as potentially infectious. It is recommended that the following procedures are followed:

- ✿ Disposable gloves are worn and a plastic disposable apron (as a minimum) is worn. It is recommended that Playcentres have a small supply of particulate respirator masks (N95) for use when cleaning vomit which is suspected as being caused by a gastro enteric illness. A particulate respirator mask (N95) should be worn if the vomit is cleaned up within an hour of the incident occurring.
- ✿ When cleaning up after an incident, wear non-sterile impermeable disposable gloves.
- ✿ The immediate area should be cleared of children and adults and blocked off. Involve as few people as possible in the clean up operation.
- ✿ If vomiting has occurred spray the area immediately with an air neutralising aerosol spray. This neutralises the odour and may assist by causing aerosols containing viruses to drop to the floor where they can be disinfected.
- ✿ If possible, open windows and doors to direct the airflow to the outside of the building.

- ✿ If possible, remove soiled furniture to a safe and isolated place for thorough cleaning.
- ✿ Vomit and/or diarrhoea should be removed by:
 - Covering the debris with an absorbent material (i.e. absorbent granules, sand) which are then disposed of and/or:
 - Using paper towels to soak up excess liquid then using disposable cloths
 - Using a wet vacuum (if available) containing a detergent and disinfectant solution. A mask should be worn when vacuuming a contaminated area.
- ✿ Following the removal of matter, wash the immediate area with hot water and detergent using disposable cloths.
- ✿ Apply disinfectant as per table 3 to the contaminated area and its surrounds to at least 3 metres in all directions.
- ✿ Clean and disinfect non-disposable equipment after use.
- ✿ Restrict access to the contaminated area for at least 30 minutes to allow it to air dry. If necessary cordon off.
- ✿ If carpet has been contaminated by vomit or faecal matter do not dry vacuum once the material has been removed, as some organisms/viruses can remain in the carpet and become airborne when vacuuming occurs. Carpets should be steam cleaned using a steam cleaner which reaches a minimum of 60 degrees centigrade, unless the floor covering is heat sensitive and fabric is bonded to the backing material with glue. If this is the case, clean with detergent, and thoroughly air the area until dry before allowing people back into the area. Steam cleaning can be carried out by a specialist carpet cleaning company. A mask should be worn when cleaning contaminated carpet.

Disposal of Contaminated Materials, PPE & Body Fluids

Care must be taken to dispose of contaminated materials and the protocols as noted below to prevent continued contamination.

- ✿ Paper towels or absorbent granules used to soak up excess liquid and any solid matter must be placed directly into a plastic bag that is then sealed or tied. This bag must then be placed into a second bag and sealed to reduce the risk of it leaking and then placed in the general rubbish bin.
- ✿ Place all contaminated cleaning cloths, gloves, aprons and any masks into a plastic bag, seal or tie and then place in the general rubbish bin.
- ✿ Depending on where the incident occurred it may be practical to dispose of any matter by directly flushing it down the toilet.

- ✿ Dispose of any used tissues immediately after use. If a toilet is convenient then used tissues can be flushed down the toilet. If there is no convenient toilet and it is likely that tissues will be double handled then they should be placed into a lined rubbish bin that either has no lid or has a pedal-operated lid.
- ✿ Bin liners should be plastic to avoid any leakage. To avoid double handling of any rubbish, the complete rubbish bag should be changed on a daily basis rather than emptying out the contents. This is particularly important when there is an increased incidence of illness within your centre.

Enhanced Cleaning

Enhanced cleaning means more frequent cleaning and should occur when there is an increased incidence of illness at a school or ECC e.g. an outbreak of gastroenteritis.

If enhanced cleaning is required ensure that adults understand why there is a need for enhanced cleaning, what products and equipment to use, how often to clean and what areas to clean.

Nappy Changing

It is important for Centres to develop and follow a safe practice for changing nappies and to have facilities that make safe practice easy.

- ✿ Hands must be washed both before and after changing the nappy with liquid soap and hot water for at least 20 seconds and dried thoroughly for 20 seconds on disposable paper towels.
- ✿ Gloves are not necessary for nappy changing, but may be preferred for dirty nappies and during increased periods of illness. Hands must be washed even after wearing gloves.
- ✿ Gloves are recommended if the carer has a cut or wound on their hands. Cuts should be covered with a waterproof dressing.
- ✿ When gloves are worn they must be disposed of immediately and not washed or reused.
- ✿ Nappy changing areas/pads must be cleaned and disinfected after every nappy change by wiping down with hot soapy water or alcohol wipes. Surfaces should be easy to clean and in a condition where moisture is not able to be absorbed.
- ✿ Alcohol wipes should be disposed of after use and cloths should be placed into the laundry.
- ✿ When the pad has been soiled, it must be washed down with soapy water and then disinfected with a 0.1% bleach solution and left to stand for at least two minutes to dry.

- ✿ The child's hands should be washed with soap and hot water for at least 20 seconds and dried thoroughly for 20 seconds on disposable paper towels after nappy changing.
- ✿ Nappy liners are recommended for easy disposal of solids in the toilet (Note: that some wipes and nappy liners cannot be flushed down the toilet).
- ✿ Dirty nappies should be placed in containers with tight fitting lids. If clothing is soiled it should be removed. It is preferable that rinsing and laundering of nappies or soiled clothing is not done at the centre. Soiled articles should be double bagged and kept in a location that is inaccessible to children until taken home by the parent.
- ✿ At the end of a session of nappy changing the change pad, changing area, taps, toilets and potties must be wiped with a bleach solution. Once applied the solution should be left on to dry for at least 10 minutes.

Toys & Play Equipment

Toys and play equipment need to be included in the cleaning schedule and cleaned on a regular basis. Following is a list of suggestions to assist centres with cleaning of toys and equipment.

- ✿ Playdough equipment and toys that are placed in the mouth, chewed or sucked should be washed daily.
- ✿ Dress-up clothes should be washed in hot water once a week and when they are soiled.
- ✿ Hard toys, some waterproof soft toys and plastic books should be washed in hot water and detergent, and then rinsed in hot water. A dishwasher may be used, but this may damage plastics as the dishwasher powder contains bleach which may affect the colour of some toys. Other toys that are handled frequently, such as books, need to be wiped clean regularly and when soiled they may need to be discarded.
- ✿ Soft absorbent toys (teddy bears, fabric books) are not recommended for Playcentre as they can hold bacteria and it is very difficult to manage the cross contamination during a session.
- ✿ Large waterproof toys (ride-on toys) should be washed with a clean cloth using warm water and detergent.
- ✿ Comfort toys that children sleep with must not be shared with other children during the session.
- ✿ Toys must not be used in the bathroom, toilet or kitchen for safety and hygiene reasons.
- ✿ Playdough should not be used for more than one day. Salt used in the dough mixture will not stop bacteria growing if it becomes dirty. If it is made several days in advance it must be kept in the fridge, taking out only what is needed each day.

Pandemic Planning for Playcentre

This is the Pandemic Plan for Playcentre

The Pandemic Manager is

Emergency Pandemic Supplies are located and include:

- Disinfectant
- Toilet paper
- Janola
- Gloves
- Breathing mask
- Soap

Stage 1 - Risk Management

Notification: Ministry of Health announces human-to-human transmission.

Pandemic Manager Will Ensure:

1. Inform all parents that pandemic plan is activated
2. All contact details are up to date (Use child contact details form if necessary).
3. Association Secretary has current contact list – This will be provided to the local MOE office as well as a copy kept on file.
4. All parents are kept updated on their tasks & responsibilities which will include how to manage sick children and adults & what happens in the event of centre closure.
All parents are aware of ways to limit spread of influenza including staying at home when sick, cough & sneeze control, hand washing etc.
5. Review centre's resources to ensure that there are sufficient supplies of cleaning materials. Introduce extra cleaning as required. This will be determined by the nature of the pandemic and will be advised by the Ministry of Health community public health.

Centre Members Will:

1. Check their enrolments records for currency
2. Become familiar with disease control and management of illness
3. Take children home immediately that they become ill or if asked by the Pandemic Manager.
4. If a child becomes ill during session and cannot be taken home immediately they will be placed under the care of an adult and will be taken to the isolation area to await removal from the Centre. The isolation area is

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Stage 2 Cluster Control

Trigger: Ministry of Health announces human pandemic influenza strain case(s) found in separate locations in New Zealand.

Goals:

- ECEs/Centres/Schools inside cluster area are closed
- ECEs/Centres/Schools outside cluster areas are on heightened alert
- Parents are informed, understand their roles and responsibilities, and have confidence in our preparedness.

Pandemic Manager Will:

1. Restrict entry of people with influenza symptoms. Children who are unwell will remain at home and parents and whānau should be advised not to come in to the centre when they are feeling unwell, particularly if they are exhibiting any influenza symptoms. Unwell children (through their parents/whānau) should be advised to contact a doctor by phone, and to stay at home until symptoms resolve.
2. The Pandemic Manager will communicate the decision to the Centre members through established protocols.
3. Notify any cases to health authorities as required
4. Establish a system to monitor families who are ill or suspected of being ill, including contacting families who are unexpectedly absent.

Centre Members Will

1. Take care of children showing influenza symptoms. Report to the Pandemic Manager whether the person or child has any of the following:
 - High fever (or feel feverish and hot)
 - Headache, fatigue and weakness
 - Sore throat, cough, chest discomfort, difficulty in breathing
 - Muscle aches and pains.
 - Been overseas recently to an affected country
 - Been in contact with someone diagnosed with influenza.
2. Fill in the Notification Form (in master forms section). Take names of contacts (those who have been within one metre of them or in an enclosed place for more than 60 minutes). These will be provided to the Pandemic Manager
3. In consultation with the Pandemic Manager, arrange to send children home immediately. Suggest they or their family call their doctor by telephone to advise that they have been in contact with a suspected influenza case. Set up an isolation room in the sleeping area.
4. Advise parents of children at centre to take them home.
5. Ensure the centre has adequate supplies of tissues, medical and hand hygiene products, cleaning supplies and masks.
6. Cancel all extra curricular activities and planned centre trips.

7. Remove books, magazines and papers from common areas. Consider ways of cleaning and/or restricting communal use of some play, physical education equipment and office equipment.
8. Implement Pandemic Cleaning Procedure. The procedures in such an event will be to use detergent and/or bleach to clean all surfaces as advised by the Ministry of Health.

Stage 3 Pandemic Management

Trigger: Ministry of Health announces significant number of pandemic influenza outbreaks at separate locations, or outbreaks spreading out of control.

Goal:

- Centre successfully activates closure procedures in response to multiple-cluster or nationwide outbreak.

Pandemic Manager Will:

1. Through consultation with the local District Health Board Emergency Planner, local Ministry of Education Office and the Association Management make the decision to close the centre as required.
2. Advise all parents
3. Post notices of closure on entry points.
4. Through local media (radio, television) and voice message – telephone inform all interested groups:
 - Local station of pandemic
 - What the centre is doing
 - What parents could be doing with children
5. Collaborate with local agencies in making centre facilities available in pandemic response efforts.

Stage 4 Recovery

Trigger: Population protected by vaccination and/or pandemic abated in New Zealand.

Goal:

- Centre ensures continuing wellbeing of parent and children, and education services are fully restored.

Pandemic Manager Will::

1. Through media, centre website, telephone and email, advise that the centre is reopen. A 0800 number may be supplied by the Ministry of Health.
2. As necessary arrange for trauma/grief counselling.
3. Undertake debrief of procedures used with Centre Members.
4. Review the importance of keeping safe guidelines with children

Consultation Procedures.

Initial notification:

Following consultation with the Association management, and initial letter of notification (such as the suggested template below) may be sent to Centre members advising them of the situation.

1. Initial Advice Letter:

Dear Parents/Caregivers

The government has announced that New Zealand is stepping up its pandemic response plans.

The Playcentre Association has been in contact with health officials and confirms there is no reason for alarm.

A copy of our centre Pandemic Plan is enclosed so that we are all aware of the systems we need to follow in our Playcentre until the pandemic alert is over.

We ask that all children showing flu like symptoms be kept home until checked and cleared by a doctor or nurse before they return to centre.

The symptoms of influenza and how they differ from common cold symptoms are:

- High fever (or feel feverish and hot)
- Headache, fatigue and weakness
- Sore throat, cough, chest discomfort, difficulty in breathing
- Muscle aches and pains.

Additional factors for consideration are if the person has:

- Been overseas recently to an affected country
- Been in contact with someone diagnosed with influenza.

We are working closely with appropriate authorities to ensure that all children at our centre are kept as safe as possible. If you have any questions or concerns please feel free to contact me.

Yours sincerely

Closure Notification:

Should the situation become worse and the centre requires closing a simple letter can be provided to parents giving them notice of the situation.

Make sure that you keep in contact with your centre members letting them know updates on a regular basis.

2. Centre Closure Letter:

Dear Parents/Caregivers

We have been informed by the Ministry of Health of a serious pandemic outbreak and have been advised, for health and safety reasons, to close the Playcentre until further notice.

Please ensure that your children are kept at home until you have received notice that you are able to return. We will keep you updated on the situation.

Yours sincerely

Centre Re-Open:

Once the threat is over, then things can return to normal. It is important to provide a positive message to member and the community that the Playcentre is resuming its usual session times etc.

3. Centre Re Open Letter

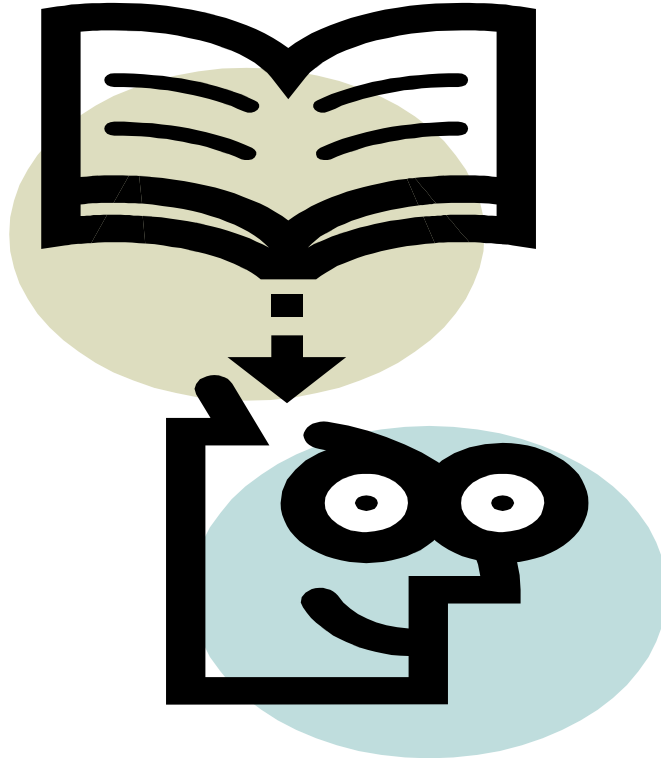
Dear Parents/Caregivers

We have been informed by the Ministry of Health that our Playcentre is out of danger and that we can now resume our usual sessions.

Because we were well prepared, our centre has reacted well to the pandemic threat. Your support during this trying time is appreciated and we look forward to seeing you again at the normal sessions.

Yours sincerely

HAZARD IDENTIFICATION AND CONTROL PROCEDURES



It is our intention to systematically identify and control all hazards in centres. Where there are significant hazards all practicable steps will be taken to:

Eliminate the hazard,

Isolate the hazard, OR

Minimise the hazard

Where the hazards may only be minimised, we will ensure:

- ✿ All members are fully informed of the hazard and advised how to appropriately handle the hazard.
- ✿ Safety practices are used and maintained
- ✿ Any new hazards identified, are incorporated into Hazard Register and all members informed
- ✿ All hazards and the hazard controls will be regularly assessed
- ✿ All members are aware of emergency and evacuation procedures

ACTION: Identify all hazards in your centre. Write these on the form, “Hazard Register”.

TIP: Identify all items individually.

ACTION: Identify the “potential harm” for each hazard.

TIP: Some hazards may cause a variety of harm, e.g. using an electric jug may cause electrocution and burns.

ACTION: Determine whether the hazard is a “significant hazard”, i.e. can it cause serious harm?

TIP: Refer to the Definition of Serious Harm : Accident Recording, Reporting and Investigation Procedures.

ACTION: Evaluate each hazard to determine whether it is practicable to:

1. **E**liminate the hazard [Get rid of, remove the hazard], if not then
2. **I**solate the hazard [Confine, totally enclose, separate, insulate the hazard], if not, then
3. **M**inimise the hazard [Reduce, decrease, downgrade the hazard].

With all hazards you have identified, this process needs to be carried out in this order - 1, 2, or 3

TIP: Indicate on the Hazard Register form, under E, I, or M the hazard control measure. Note, that some hazards may use more than one hazard control.

ACTION: Identify Hazard Controls.

TIP: Identify all practices required to operate safely as Hazard Controls.

ACTION: Identify the information required for each Hazard.

ACTION: Check that Hazard Controls and other safety requirements are in place, at every session. Record date checked, on the Hazard Register.

TIP: Ensure existing Hazard Controls are appropriate. Identify any new hazards.

ACTION: Identify all chemicals and hazardous substances, including safe handling and emergency procedures. Enter this information on the “Hazardous Substances Register”.

TIP: Obtain all Material Safety Data Sheets (MSDS's) from the supplier of chemicals or hazard substances, this could be a list of ingredients found in the substances.

Example

Hazard Register

Location: Kitchen Area

Hazards Identified	Potential Harm	Significant Hazard		E	I	M	Hazard Controls
		Yes	No				
Usage of Stove	Electrocution, Burning,	X				X	<ul style="list-style-type: none"> ■ When using stove members must be aware it is hot. ■ Keep kitchen door locked to prevent child access while oven is hot
Facilities							<ul style="list-style-type: none"> ■ Kept clean and tidy. ■ Rubbish bin with lid. ■ Hot and cold water
							<ul style="list-style-type: none"> ■
							<ul style="list-style-type: none"> ■
							<ul style="list-style-type: none"> ■

E = Eliminate

I = Isolate

M = Minimise

Example

Hazard Register

Location: Main Building

Hazards Identified	Potential Harm	Significant Hazard		E	I	M	Hazard Controls
		Yes	No				
Emergency evacuation							
Housekeeping							<ul style="list-style-type: none"> ■ All areas properly cleaned? ■ Are all goods stored safely? ■ Hot water, soap and drying means available? ■ Clean up spills.
Facilities							<ul style="list-style-type: none"> ■ Kept clean and tidy. ■ Rubbish bin with lid. ■ Hot and cold water.
Ventilation							<ul style="list-style-type: none"> ■ Sufficient fresh air.
Contractors and/or Sub-contractors							<ul style="list-style-type: none"> ■ Ensure preferred contractors maintain health and safety standards.
First Aid Kit							<ul style="list-style-type: none"> ■ Ensure first aid kit is kept accessible. ■ Ensure kit is stocked and maintained in accordance with First Aid Regulations.
Accident Register							<ul style="list-style-type: none"> ■ Are all accidents/incidents recorded in the register?
Fire Extinguishers							<ul style="list-style-type: none"> ■ Are they fully charged? ■ Are they within their service period?
							<ul style="list-style-type: none"> ■
							<ul style="list-style-type: none"> ■

E = Eliminate

I = Isolate

M = Minimise

Hazard Register

Location: _____

[illegible]

E = Eliminate

I = Isolate

M = Minimise

Hazardous Substances Register

Chemical Name	Trade Name	Quantity Stored on Site	Used For	Containers Labelled [<input checked="" type="checkbox"/>]	Safety Protocols [please state]

Employee's/Members Responsibilities

Every member shall take all practicable steps to ensure:

- ♣ Their own safety while at Centre; and
- ♣ That no action or inaction of the members while at Centre causes harm to any other person(s)

No untrained employees will be permitted to perform any task or deal with any substance or material without prior experience (unless closely supervised by some with such experience).

All members/employees are to be aware of:

- ♣ The hazards they will be exposed to in the workplace, and the hazard controls or procedures to be taken to prevent any harm or damage to themselves, other person(s) and property.
- ♣ What to do in an emergency.

To ensure that we are complying and maintaining this system, we will:

1. Ensure new, and existing staff/members read and understand safety procedures.
2. Ensure these health & safety guidelines are available and accessible to all new, and existing members and employees.
3. Review these guidelines at least annually, or as need be.
4. Maintain records to ensure all staff have read and understood requirements.

ACTION: Ensure all employees read and understand the Safety Guidelines.

ACTION: Advise employees of all hazards that they may be exposed to. Ensure they understand all the hazard controls, including appropriate action to reduce risk.

Participation

Reasonable opportunity will be provided for employees and members to participate in ongoing processes for improving health and safety.

ACTION: Ensure all employees and members are aware of the emergency and evacuation procedures.

ACCIDENT AND INCIDENT RECORDING, REPORTING AND INVESTIGATION PROCEDURES



Notification Procedures

- ❀ All accidents and incidents must be notified to the person in charge of the session immediately.
- ❀ All incidents and non-serious harm accidents must be recorded on the Accident / Incident Register located in the centre.
- ❀ All serious harm accidents to any person e.g. employee(s), contractors, contractor's employees and other person(s) are to be notified to OSH as soon as possible. (Refer to list of OSH Addresses and Phone Numbers). Note: Principals and self-employed persons must also report serious harm accidents to OSH.
- ❀ A "Notification of Circumstances of Accident or Serious Harm" form, is to be forwarded to the nearest OSH Office within seven (7) days of the event.
- ❀ Inform all members and employees of the outcome of the accident/incident investigation, i.e. new hazard identified and the hazard controls.

ACTION: Ensure all members and staff are aware of the correct procedures for notification of serious harm accidents. Particularly notification to OSH as soon as possible.

TIP: Transfer any new identified hazards and hazard controls into the Hazard Register.

ACTION: Investigate all accidents and incidents (or near misses). Incidents (or near misses) are often an indicator of potential harm.

Definition of “SERIOUS HARM”

1. Any of the following conditions that amounts to or results in permanent loss of bodily function, or temporary severe loss of bodily function:
 - respiratory disease
 - noise-induced hearing loss
 - neurological disease
 - cancer
 - dermatological disease
 - communicable disease
 - musculoskeletal disease
 - illness caused by exposure to infected material
 - decompression sickness
 - poisoning
 - vision impairment
 - chemical or hot metal burn of eye
 - penetrating wound of eye
 - bone fracture
 - laceration
 - crushing
2. Amputation of body part.
3. Burns requiring referral to a specialist registered medical practitioner or specialist outpatient clinic.
4. Loss of consciousness from lack of oxygen.
5. Loss of consciousness, or acute illness requiring treatment by a registered medical practitioner, from absorption, inhalation, or ingestion, of any substance.
6. Any harm that causes the person harmed to be hospitalised for a period of 48 hours or more commencing within 7 days of the harms occurrence.
7. Harm also includes physical or mental harm caused by work-related stress.

Accident / Incident Register

Name	Time and Date	Description of Injury	When and How Accident or Incident Happened	Recorded into Hazard Register	
				Yes ✓	No

NB: All Serious Harm accidents must also be recorded on "Notification of Circumstances of Accident or Serious Harm" form, and forwarded to nearest OSH Office within 7 days of event.

Form of register or notification of circumstances of accident or serious harm

Required for section 25(1), (1A), (1B), and (3)(b) of the Health and Safety in Employment Act 1992

For non-injury accident, complete questions 1, 2, 3, 9, 10, 11, 14 and 15 as applicable

1 Particulars of employer, self-employed person or principal:*(business name, postal address and telephone number)*

2 The person reporting is:
☐ an employer ☐ a principal ☐ a self-employed person
3 Location of place of work:

*(shop, shed, unit nos., floor, building, street nos. and names, locality/suburb, or details of vehicle, ship or aircraft)***4 Personal data of injured person:**

Name	
Residential address	

Date of birth

Sex (M/F)

5 Occupation or job title of injured person:*(employees and self-employed persons only)*

--

6 The injured person is:
☐ an employee ☐ a contractor (self-employed person)
☐ self ☐ other
7 Period of employment of injured person:*(employees only)*
☐ 1st week ☐ 1st month ☐ 1-6 months
☐ 6 months-1 year ☐ 1-5 years ☐ Over 5 years
☐ non-employee
8 Treatment of injury:
☐ None ☐ First aid only
☐ Doctor but no hospitalisation ☐ Hospitalisation
9 Time and date of accident/ serious harm:Time am/pmDate Shift ☐ Day ☐ Afternoon ☐ Night

Hours worked since arrival at work

(employees and self-employed persons only)

10 Mechanism of accident/ serious harm:
☐ fall, trip or slip ☐ hitting objects with part of the body
☐ sound or pressure ☐ being hit by moving objects
☐ body stressing ☐ heat, radiation or energy
☐ biological factors ☐ chemicals or other substances
☐ mental stress
11 Agency of accident/ serious harm:
☐ machinery or (mainly) fixed plant
☐ mobile plant or transport
☐ powered equipment, tool, or appliance
☐ non-powered handtool, appliance, or equipment
☐ chemical or chemical product
☐ material or substance
☐ environmental exposure (e.g. dust, gas)
☐ animal, human or biological agency (other than bacteria or virus)
☐ bacteria or virus
12 Body part:
☐ head ☐ neck ☐ trunk
☐ upper limb ☐ lower limb ☐ multiple locations
☐ systemic internal organs
13 Nature of injury or disease:☐ fatal*(specify all)*
☐ fracture of spine ☐ puncture wound
☐ other fracture ☐ poisoning or toxic effects
☐ dislocation ☐ multiple injuries
☐ sprain or strain ☐ damage to artificial aid
☐ head injury ☐ disease, nervous system
☐ internal injury of trunk ☐ disease, musculoskeletal system
☐ amputation, including eye ☐ disease, skin
☐ open wound ☐ disease, digestive system
☐ superficial injury ☐ disease, infectious or parasitic
☐ bruising or crushing ☐ disease, respiratory system
☐ foreign body ☐ disease, circulatory system
☐ burns ☐ tumour (malignant or benign)
☐ Nerves or spinal chord ☐ mental disorder
14 Where and how did the accident/serious harm happen?*(If not enough room attach separate sheet or sheets.)*

15 If notification is from an employer:

(a) Has an investigation been carried out? ☐ yes ☐ no

(b) Was a significant hazard involved? ☐ yes ☐ no

Signature and date _____ / ____ / ____

Name and position
(capitals)

Accident Investigation

Name of organisation:

Branch/department:

PARTICULARS OF ACCIDENT

Date of accident	Time	Location	Date reported
M T W T F S S (circle)			

THE INJURED PERSON

Name			Address		
Age	Phone number				
Date of accident			Length of employment — at plant on job		
TYPE OF INJURY:	<input type="checkbox"/> Bruising	<input type="checkbox"/> Dislocation	<input type="checkbox"/> Other (specify)	Injured part of body	
<input type="checkbox"/> Strain/sprain	<input type="checkbox"/> Scratch/abrasion	<input type="checkbox"/> Internal			
<input type="checkbox"/> Fracture	<input type="checkbox"/> Amputation	<input type="checkbox"/> Foreign body	Remarks		
<input type="checkbox"/> Laceration/cut	<input type="checkbox"/> Burn scald	<input type="checkbox"/> Chemical reaction			

DAMAGED PROPERTY

Property/ material damaged	Nature of damage
	Object/substance inflicting damage

THE ACCIDENT

Description

Describe what happened (space overleaf for diagram — essential for all vehicle accidents)

Analysis

What were the causes of the accident?

HOW BAD COULD IT HAVE BEEN?

☐ Very serious ☐ Serious ☐ Minor

WHAT IS THE CHANCE OF IT HAPPENING AGAIN?

☐ Minor ☐ Occasional ☐ Rare

Prevention

What action has or will be taken to prevent a recurrence? Tick items already actioned

By whom	When
---------	------

Use space overleaf if required

[illegible]

TREATMENT AND INVESTIGATION OF ACCIDENT

Type of treatment given	Name of person giving first aid	Doctor/Hospital		
Accident investigated by	Date	OSH advised YES / NO		Date

OSH Branch Addresses

NORTHLAND REGION

Manaia House
Corner Rathbone and Dent Streets
PO Box 141
WHANGAREI
Phone: (09) 438-0552
Fax: (09) 438-4874

NORTH HARBOUR

5 Argus Place
Glenfield
PO Box 33790
Takapuna
AUCKLAND
Phone: (09) 443-3460
Fax: (09) 443-4246

WEST AUCKLAND

Westgate Business Estate
5 Pinot Lane
Massey
PO Box 84245
Westgate
WAITAKERE CITY
Phone: (09) 833-5651
Fax: (09) 833-5157

PENROSE

First Floor
638 Great South Road
Penrose
PO Box 11177
Ellerslie
AUCKLAND
Phone: (09) 525-0268
Fax: (09) 525-0372

MANUKAU CITY

12 Lambie Drive
Manukau
PO Box 63010
Papatōetoe South
MANUKAU CITY
Phone: (09) 262-5300
Fax: (09) 262-5301

WAIKATO/THAMES

93 Collingwood Street
PO Box 958
HAMILTON
Phone: (07) 838-1381
Fax: (07) 838-0054

TAUPO/EASTERN BAY OF PLENTY

First Floor
Legal Chambers Building
1231 Haupapa Street
PO Box 2428
ROTORUA
Phone: (07) 347-9656
Fax: (07) 346-0229

WESTERN BAY OF PLENTY

Unit 2
ProMed House
Cnr Tenth Ave & Edgecumbe Road
PO Box 66
TAURANGA
Phone: (07) 578-2090
Fax: (07) 577-6396

HAWKES BAY-EAST COAST NAPIER

6 Taradale Road
PO Box 546
NAPIER
Phone: (06) 835-7017
Fax: (06) 835-7102

HAWKES BAY-EAST COAST GISBORNE

295 Gladstone Road
PO Box 139
GISBORNE
Phone: (06) 868 8809
Fax: (06) 868-8832

TARANAKI

97 Gill Street
PO Box 342
NEW PLYMOUTH
Phone: (06) 758-0516
Fax: (06) 757-8166

MANAWATU-WHANGANUI

267 Broadway Avenue
PO Box 241
PALMERSTON NORTH
Phone: (06) 359-1919
Fax: (06) 359-1431

HUTT-WAIRARAPA

Professional Building
Cnr Cornwall St & Kings Cres
PO Box 30556
LOWER HUTT
Phone: (04) 566-8962
Fax: (04) 566-7363

WELLINGTON/KAPITI

Level 3
Southmark House
203-209 Willis Street
PO Box 27463
WELLINGTON
Phone: (04) 385-7771
Fax: (04) 382-9159

NELSON/MARLBOROUGH

60 Vickerman Street
PO Box 5079
PORT NELSON
Phone: (03) 546-8180
Fax: (03) 546-8136

CANTERBURY/WEST COAST

Lincoln House
81 Lichfield Street
PO Box 22165
CHRISTCHURCH
Phone: (03) 365-2600 or 366 5500
Fax: (03) 365-2616

CANTERBURY/WEST COAST - GREYMOUTH

54 Tainui Street
PO Box 37
GREYMOUTH
Phone: (03) 768-0480
Fax: (03) 768-6930

CANTERBURY/WEST COAST - TIMARU

Ballantyne Building
324 Stafford Street
TIMARU
Phone: (3) 684-9120
Fax: (03) 684-9127

OTAGO

392 Hillside Road
PO Box 537
SOUTH DUNEDIN
Phone: (03) 455-0855
Fax: (03) 455-6680

SOUTHLAND

70 Victoria Avenue
PO Box 548
INVERCARGILL
Phone: (03) 218-2126
Fax: (03) 218-2152

HEAD OFFICE WELLINGTON

Fourth Floor
Aurora House
62 - 66 The Terrace
PO Box 3705
WELLINGTON
Phone: (04) 915-4317
Fax: (04) 915-4640

OSH WEB SITE ADDRESS

<http://www.osh.dol.govt.nz>

WORK INFO

<http://www.workinfo.govt.nz>

EMERGENCY AND EVACUATION PROCEDURES

In the event of any emergency, or natural disaster, the following will happen:

1. Prevention of harm to all persons on site.
2. Raise the alarm.
3. Contact Emergency Services on 111 (as required).
4. Do not put yourself or anyone else at any unnecessary risk!
5. Evacuate from building or area.
6. Assemble all personnel at _____.
7. Check all persons are accounted for by taking the roll.

We will ensure fire drills and evacuation procedures are practised once per session per term and will be notified to the New Zealand Fire Service every 6 months.

(For further information please see the NZPF Property Manual)

ACTION: Establish a safe designated assembly area.

- TIP: Check with your local Fire Service if further assistance required.

ACTION: Conduct an evacuation drill once per term per session.

- TIP: Show dates of evacuation drill completed.

DUTIES TO OTHERS

We have a duty to ensure the following persons are NOT HARMED:

- ❖ People in the vicinity of the centre
- ❖ People who are in the premises with express or implied consent, and have paid to be here, or are buying or inspecting goods

We have a duty to ensure the following persons are advised of any significant hazards that we would reasonably expect to find on our premises:

- ❖ Persons who are authorised to be here
- ❖ Persons who are on site under the authority of an Act, e.g. TrustPower, OSH, ACC

We do not have a duty to:

- ❖ Trespassers
- ❖ Persons on site solely for recreation or leisure (providing they were not authorised to be here)

ACTION: Define areas where entry restrictions apply.

- **TIP:** Display conspicuous sign, e.g. "No unauthorised entry".

CONTRACTORS AND SUB-CONTRACTORS

From time to time we may be a “principal”. A principal “means a person who or that engages any person (otherwise than as an employee) to do any work for gain or reward.”

As a principal, we are required to take all practicable steps for a contractor’s safety (and the safety of any employees of that contractor).

To achieve this, all contractors will be advised of:

1. All specific hazards they may be exposed to, and the hazard controls, whilst the contractor is undertaking work on our premises.
2. Emergency and evacuation procedures.

Our policy is that:

- ✿ Contractors shall be informed they are responsible for any hazards that they may create while on our premises;
- ✿ Contractors must advise us (the Principal) of all serious harm accidents to self or others in the place of work;
- ✿ The contractors must provide documentation to confirm they have complied with their own responsibilities under the Health and Safety in Employment Act 1992;
- ✿ Ensure the following is given to all contractors / sub-contractors:
 1. Letter to Contractor / Sub-contractor;
 2. Safety Requirements for Contractors;
 3. Conditions of Contract;

ACTION: Write to all ‘regular’ contractors to advise them of standards to be met. Refer to “Contractor’s Agreement”.

- **TIP:** Send two copies of ‘Contractor’s Agreement’. Ensure one copy is signed and returned by contractor/sub-contractor, with a copy of their Health and Safety Management Plan/Manual.
- **TIP:** Make a list of your preferred contractors. (A preferred contractor is one who meets all the health and safety requirements). Review these annually.

Contractor's Agreement

Date

Dear _____

re: **CONTRACT FOR** _____

To comply with the Health and Safety in Employment Act 1992, we require all contractors who wish to tender for contracts or maintain a service agreement/remain a preferred contractor/supplier to provide the following information:

1. Health and Safety Management Plan that includes:
 - Safety policy;
 - Hazards and the hazard controls; and
 - Accident reporting procedures
2. Contractors are reminded that all work is subject to the provisions of the Health and Safety in Employment Act 1992. In particular:
 - Contractors are to comply with all regulations, enactments, codes of practice (approved or voluntary) applying to the trade or profession within which they operate;
 - We, as the Principal, are to be advised of any and all hazardous plant, equipment, machinery or substances which are brought into the workplace;
 - All people utilised are fully trained in the work to be undertaken or are closely supervised by someone who is.
 - Any accident or incident which harms or may have harmed any person in the workplace, in addition to being recorded and notified as required under Section 25 of the Health and Safety in Employment Act 1992, are to be reported to Us, as the Principal.
 - All safety clothing/equipment required to minimise the risk of injury is to be provided, accessible to and used by any person engaged in the workplace.
3. Before commencing work on our premises, all contractors must ensure that any employees of the contractor, subcontractors on our premises, or if an individual, they are conversant with:
 - Emergency procedures (to be followed in the event of an emergency);
 - Safety rules and procedures;
 - Hazards which have been identified, and the hazard controls.
4. We as the Principal to the contract, retain the right to inspect the contract operation at any time, to ensure all safety procedures and rules are being followed. Failure to follow such rules and procedures may result in the contract being terminated immediately.

I agree to abide by all the above conditions, on behalf of:

Contractor's Name:

Contractor's Signature:

Date:

Contact Phone / Fax Number(s):

Sign the attached copy and return with your Health and Safety Management Plan / Manual.

MASTER FORMS



The following forms should be used for photocopying only:

- Cleaning Register
- Hazard Register
- Hazardous Substances Register
- Accident / Incident Register
- Notification of Circumstances of Accident or Serious Harm
- Accident Investigation
- Contractor's Agreement
- Pandemic Notification Form

Cleaning Schedule

[illegible]

Hazard Register

Workplace / Location: _____

[illegible]

E = Eliminate

I = Isolate

M = Minimise

Hazardous Substances Register

[illegible]

NZPF Health and Safety Guidelines

Accident / Incident Register

[illegible]

NB: All Serious Harm accidents must also be recorded on "Notice or Record of Accident / Serious Harm" form, and forwarded to nearest OSH Office within 7 days of event.

Form of register or notification of circumstances of accident or serious harm

Required for section 25(1), (1A), (1B), and (3)(b) of the Health and Safety in Employment Act 1992

For non-injury accident, complete questions 1, 2, 3, 9, 10, 11, 14 and 15 as applicable

1 Particulars of employer, self-employed person or principal:

(business name, postal address and telephone number)

2 The person reporting is:

☐ an employer ☐ a principal ☐ a self-employed person

3 Location of place of work:

(shop, shed, unit nos., floor, building, street nos. and names, locality/suburb, or details of vehicle, ship or aircraft)

4 Personal data of injured person:

Name	
Residential address	

Date of birth

Sex (M/F)

5 Occupation or job title of injured person:

(employees and self-employed persons only)

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6 The injured person is:

☐ an employee ☐ a contractor (self-employed person)
☐ self ☐ other

7 Period of employment of injured person:

(employees only)

☐ 1st week ☐ 1st month ☐ 1-6 months
☐ 6 months-1 year ☐ 1-5 years ☐ Over 5 years
☐ non-employee

8 Treatment of injury:

☐ None ☐ First aid only
☐ Doctor but no hospitalisation ☐ Hospitalisation

9 Time and date of accident/ serious harm:

Time am/pm

Date Shift ☐ Day ☐ Afternoon ☐ Night

Hours worked since arrival at work

(employees and self-employed persons only)

10 Mechanism of accident/ serious harm:

☐ fall, trip or slip ☐ hitting objects with part of the body
☐ sound or pressure ☐ being hit by moving objects
☐ body stressing ☐ heat, radiation or energy
☐ biological factors ☐ chemicals or other substances

☐ mental stress

11 Agency of accident/ serious harm:

☐ machinery or (mainly) fixed plant
☐ mobile plant or transport
☐ powered equipment, tool, or appliance
☐ non-powered handtool, appliance, or equipment
☐ chemical or chemical product
☐ material or substance
☐ environmental exposure (e.g. dust, gas)
☐ animal, human or biological agency (other than bacteria or virus)
☐ bacteria or virus

12 Body part:

☐ head ☐ neck ☐ trunk
☐ upper limb ☐ lower limb ☐ multiple locations
☐ systemic internal organs

13 Nature of injury or disease:

☐ fatal

(specify all)

☐ fracture of spine ☐ puncture wound
☐ other fracture ☐ poisoning or toxic effects
☐ dislocation ☐ multiple injuries
☐ sprain or strain ☐ damage to artificial aid
☐ head injury ☐ disease, nervous system
☐ internal injury of trunk ☐ disease, musculoskeletal system
☐ amputation, including eye ☐ disease, skin
☐ open wound ☐ disease, digestive system
☐ superficial injury ☐ disease, infectious or parasitic
☐ bruising or crushing ☐ disease, respiratory system
☐ foreign body ☐ disease, circulatory system
☐ burns ☐ tumour (malignant or benign)
☐ nerves or spinal chord ☐ mental disorder

14 Where and how did the accident/serious harm happen?

(If not enough room attach separate sheet or sheets.)

15 If notification is from an employer:

(a) Has an investigation been carried out? ☐ yes ☐ no
(b) Was a significant hazard involved? ☐ yes ☐ no

Signature and date _____ / /

Name and position
(capitals)

Accident Investigation

Name of organisation: Branch/department:

PARTICULARS OF ACCIDENT

Date of accident M T W T F S S (circle)	Time	Location	Date reported
--	------	----------	---------------

THE INJURED PERSON

Name		Address	
Age	Phone number		
Date of accident	Length of employment — at plant on job		
TYPE OF INJURY:	<input type="checkbox"/> Bruising	<input type="checkbox"/> Dislocation	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Strain/sprain	<input type="checkbox"/> Scratch/abrasion	<input type="checkbox"/> Internal	Injured part of body
<input type="checkbox"/> Fracture	<input type="checkbox"/> Amputation	<input type="checkbox"/> Foreign body	Remarks
<input type="checkbox"/> Laceration/cut	<input type="checkbox"/> Burn scald	<input type="checkbox"/> Chemical reaction	

DAMAGED PROPERTY

Property/ material damaged	Nature of damage
	Object/substance inflicting damage

THE ACCIDENT

Description

Describe what happened (space overleaf for diagram — essential for all vehicle accidents)

Analysis

What were the causes of the accident?

HOW BAD COULD IT HAVE BEEN?

☐ Very serious ☐ Serious ☐ Minor

WHAT IS THE CHANCE OF IT HAPPENING AGAIN?

☐ Minor ☐ Occasional ☐ Rare

Prevention

What action has or will be taken to prevent a recurrence? Tick items already actioned

Use space overleaf if required

		By whom	When

TREATMENT AND INVESTIGATION OF ACCIDENT

Type of treatment given	Name of person giving first aid	Doctor/Hospital	
Accident investigated by	Date	OSH advised YES / NO	Date

Contractor's Agreement

Date

Dear _____

re: **CONTRACT FOR** _____

To comply with the Health and Safety in Employment Act 1992, we require all contractors who wish to tender for contracts or maintain a service agreement/remain a preferred contractor/supplier to provide the following information:

1. Health and Safety Management Plan that includes:
 - Safety policy;
 - Hazards and the hazard controls; and
 - Accident reporting procedures
2. Contractors are reminded that all work is subject to the provisions of the Health and Safety in Employment Act 1992. In particular:
 - Contractors are to comply with all regulations, enactments, codes of practice (approved or voluntary) applying to the trade or profession within which they operate;
 - We, as the Principal, are to be advised of any and all hazardous plant, equipment, machinery or substances which are brought into the workplace;
 - All people utilised are fully trained in the work to be undertaken or are closely supervised by someone who is.
 - Any accident or incident which harms or may have harmed any person in the workplace, in addition to being recorded and notified as required under Section 25 of the Health and Safety in Employment Act 1992, are to be reported to Us, as the Principal.
 - All safety clothing/equipment required to minimise the risk of injury is to be provided, accessible to and used by any person engaged in the workplace.
3. Before commencing work on our premises, all contractors must ensure that any employees of the contractor, subcontractors on our premises, or if an individual, they are conversant with:
 - Emergency procedures (to be followed in the event of an emergency);
 - Safety rules and procedures;
 - Hazards which have been identified, and the hazard controls.
4. We as the Principal to the contract, retain the right to inspect the contract operation at any time, to ensure all safety procedures and rules are being followed. Failure to follow such rules and procedures may result in the contract being terminated immediately.

I agree to abide by all the above conditions, on behalf of:

Contractor's Name:

Contractor's Signature:

Date:

Contact Phone / Fax Number(s):

Sign the attached copy and return with your Health and Safety Management Plan / Manual.

Suspected Influenza Notification Form

Details of Affected Person:

Name:	Site:	Location of isolation:
Job title:	Nationality if visitor to site:	Date of birth: (optional)
Address:		
Telephone no: _____ (W) _____ (H) _____ (M)		
Symptoms noticed: Fever <input type="checkbox"/> Body aches <input type="checkbox"/> Headache <input type="checkbox"/> Fatigue <input type="checkbox"/> Dry cough <input type="checkbox"/> Others <input type="checkbox"/> Details: _____ Cold <input type="checkbox"/> _____ Time of fever on-set: _____ Time of isolation: _____		
Travel history over the past eight days: Countries visited _____ Flights taken: _____		
Where referred:		
Contact List (See separate page)		
Where referred:		
Contact List (See separate page)		

Details of Reporter:

Name:
Job title:
Telephone no: _____ (W) _____ (H) _____ (M)