

## Licensing criteria for home-based ECE services

[Section 10 of the Education and Training Act 2020](#) defines home-based ECE services as the provision of education or care, for gain or reward, to fewer than 5 children under the age of 6 (in addition to any child enrolled at school who is the child of the person who provides education or care) in:

- a. their own homes
- b. the home of the person providing education or care
- c. any other home nominated by the parents of the children.

These services are licensed in accordance with the Education and Training Act 2020 under the [Education \(Early Childhood Services\) Regulations 2008](#), which prescribe minimum standards that each licensed service must meet. Licensing criteria are used to assess how the services meet the minimum standards required by the regulations.

For each criterion there is guidance to help services meet the required standards.

The publication of the [criteria on its own can be downloaded as a PDF](#) [PDF, 1.3 MB] and printed.

The licensing criteria were last updated in November 2016.

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## Downloads

- [Licensing Criteria for Home-based Education and Care Services 2008](#) [PDF, 1.3 MB]

## Useful links

[Ngā arohaehae whai hua / Self-review guidelines for early childhood education](#)

Print copies of Ngā arohaehae whai hua / Self-review guidelines for early childhood education can be requested from:

Ministry of Education Customer Services

Phone 0800 660 662

Fax 0800 660 663

## Curriculum

### 43 Curriculum standard: general

(1) The curriculum standard: general is the standard that requires every licensed service provider to whom this regulation applies to—

(a) plan, implement, and evaluate a curriculum that is designed to enhance children’s learning and development through the provision of learning experiences and that is consistent with any curriculum framework prescribed by the Minister that applies to the service; and that—

- (i) responds to the learning interests, strengths, and capabilities of enrolled children; and
- (ii) provides a positive learning environment for those children; and
- (iii) reflects an understanding of learning and development that is consistent with current research, theory, and practices in early childhood education; and
- (iv) encourages children to be confident in their own culture and develop an understanding, and respect for, other cultures; and
- (v) acknowledges and reflects the unique place of Māori as tangata whenua; and
- (vi) respects and acknowledges the aspirations of parents, family, and whānau; and

(b) make all reasonable efforts to ensure that the service provider collaborates with the parents and, where appropriate, the family or whānau of the enrolled children in relation to the learning and development of, and decision making about, those children; and

(c) obtain information and guidance from agencies with expertise in early childhood learning and development, to the extent necessary, to—

- (i) support the learning and development of enrolled children; and
- (ii) work effectively with parents and, where appropriate, family or whānau

(2) Each licensed service provider to whom this regulation applies must comply with the curriculum standard: general.

The criteria in this section have been grouped together by topic. Each criterion has also been given a short, descriptive title. The titles are provided only to help you navigate around more easily on the website – they do not form part of the criteria themselves.

## In this section

- [Professional practice](#) - Criteria and guidance for C1-C4
- [Culture and identity](#) - Criteria and guidance for C5-C6
- [Children as learners](#) - Criteria and guidance for C7-C10
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## Professional practice

Criteria for professional practice:

### In this section

- [C1 - Curriculum consistent](#)
- [C2 - Assessment](#)
- [C3 - Interactions](#)
- [C4 - Adults' knowledge](#)

## C1 Curriculum consistent

### Criteria

#### Curriculum criterion 1

The [service curriculum](#) is consistent with any prescribed curriculum framework that applies to the service.

#### [Documentation required](#)

#### Rationale/Intent:

Criterion ensures that there is a link between the prescribed curriculum framework and what happens at the service.

#### Guidance

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*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The curriculum framework is the Principles/Ngā Kaupapa Whakahaere and Strands/Ngā Taumata Whakahirahira of Te Whāriki. More information about the curriculum framework can be found on the [homepage](#) of this website.

Te Whāriki continues to provide the basis for consistent high-quality curriculum delivery in the diverse range of early childhood services in Aotearoa/New Zealand. As such, it is the best guidance to meet this criterion. In this document, curriculum is described as “the sum total of the experiences, activities, and events, whether direct or indirect, which occur within an environment designed to foster children’s learning and development.” (page 10).

The ways in which each early childhood education service works with the curriculum framework will vary. Each service will continue to develop its own curriculum and programmes that reflect the things that are important to the children, their families, the staff, the community and the philosophy of the specific setting. In a home-based setting the coordinator, educator, and parents will be the key players. It is important to be able to identify how everything we do with the children in the home, works towards meeting the curriculum framework for the children and families that attend.

Other guidance, like [Kei Tua o te Pae](#) and [Quality in Action](#), build from Te Whāriki to provide more detail about ways to do this.

## Things to consider

Things to consider:

How do we know that our service empowers children?

How do we reflect the wider world of family and community within our service curriculum?

How do we know that our service curriculum reflects the holistic way children learn and grow? What does holistic learning look like?

How do we know that our service curriculum is embedded in reciprocal and responsive relationships?

How do you learn from your service curriculum and what you notice from children’s learning to deepen your understanding of the principles and strands?

How is our understanding of what the strands mean in our service guided by the principles?

Where does self-review fit into the curriculum framework?

Are our understandings of the principles and strands leading us to ask questions like “why do we do things this way?”

How does curriculum leadership happen in a home-based environment?

How do we bring our understanding of Te Whāriki to bear when reviewing our service philosophy?

## C2 Assessment

### Criteria

#### Curriculum criterion 2

The [service curriculum](#) is informed by [assessment](#), planning and evaluation (documented and undocumented) that demonstrates an understanding of children’s learning, their interests, whānau, and life contexts.

#### [Documentation required](#)

## Rationale/Intent:

This criterion requires assessment for learning to ensure that the learning, development, and experiences provided for children are connected.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A service curriculum that is informed by assessment, planning, and evaluation will notice, recognise, and respond to the contributions made to the programme by the children, their families, staff, and community. Experiences planned to support and enhance children's learning will be purposeful and meaningful to them.

A service will develop a process to assist them to meet this criterion, taking into consideration the beliefs, values, knowledge, and aspirations of children, their families, coordinators, educators, and community.

Documentation and evidence gathered during this process may take a variety of forms to suit the service's operation, and can include: daily notebook records; observations and learning stories; examples of children's work; recorded discussions; policies and procedures. Children, their families, coordinators and educators should all contribute to this process. How information is gathered is not important – how it is used to inform the service curriculum and educator practice is important.

Further information about Planning, Evaluation, and Assessment can be found on pages 28-29 of [Te Whāriki](#).

## Practice

Examples of what this might look like in practice:

Parents' views are sought and recorded

Stories about children's learning in environments other than the home-based environment are included in the planning, assessment, and evaluation process, including the child's home and other early childhood education services the child may attend

Children are supported by educators to be actively involved in assessing their own learning, doing such things as telling their own learning stories

Photographs and other observations are analysed to identify the learning that has occurred and how to build on it

A wide range of methods is used to gather information about children's learning

Curriculum goals and assessment practices are consistent with service philosophy

Educators develop, in collaboration with parents/whānau, learning goals that acknowledge children's heritages and support their understanding of their cultural identity

Educators share their knowledge with parents/whānau.

## Things to consider

Things to consider:

How do we identify what works well and what the barriers are to meaningful assessment, planning, and evaluation?

When changes are made to the assessment, planning, and evaluation process how do we ensure they are effective?

How is our assessment practice embedded in reciprocal and responsive relationships?

How do we encourage contributions from children, their families, and community?

How useful is the information we gather about children?

How are our current assessment practices supporting and enhancing children's learning?

Whose knowledge is of value?

How are learning goals set for children, and who does this?

What external factors influence our views on assessment, e.g. school?

In what ways do these external factors have an impact?

How do we access knowledge that will assist us to support/enhance the learning for all children?

How do we ensure that we have an understanding of other world views and ways that these may influence learning outcomes for the child?

## C3 Interactions

### Criteria

#### Curriculum criterion 3

[Educators](#) engage in meaningful, positive interactions to enhance children's learning and nurture reciprocal relationships.

#### Documentation required

##### **Rationale/Intent:**

Criterion is a means of ensuring that the service curriculum is consistent with the prescribed curriculum framework, and recognises the key importance of adult-child interactions.

##### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Relationships are a source of learning, empowerment, and identity for all of us. As educators, if we believe everything we do has an impact on learning and teaching, we have a responsibility to engage in responsive and respectful relationships with children, families/whānau, and each other.

Interaction provides a rich social world for children to make sense of and understand. Educators provide encouragement, warmth, acceptance, and challenges to help children extend their ideas and understanding of the world.

How services support and organise staff, to ensure that children experience stable and predictable relationships with educators, is important to enhance learning and care experiences for children.

##### **Practice**

Examples of what this might look like in practice:

Co-operative ventures and achievements are valued and encouraged

Educators listen carefully to children, asking open and searching questions to encourage complex learning and thinking

Educators use daily care routines as opportunities to have meaningful interactions with children

The service curriculum develops children's skills in forming and maintaining positive relationships with others



Infants experience one-to-one interactions which are intimate and sociable

Adults are warm and friendly in their interactions with other adults

The service curriculum provides opportunities for children to play together for sustained periods in groups of their own choosing

Strong relationships are formed between children and educators due to low turnover of staff

Children's actions demonstrate that they trust educators to respond in a positive way

Educators respond quickly and directly to children, adapting their responses to individual children. They provide support, focused attention, physical proximity, and verbal encouragement as appropriate, are alert to signs of stress in children's behaviour, and guide children in expressing their emotions.

## Things to consider

Things to consider:

How would we explain to others how children's learning is supported through meaningful and positive interactions?

How are reciprocal relationships reflected in our setting?

What do we understand about the notion of whanaungatanga? How is it reflected in our service?

What strategies do we use in our teaching practice to be 'in-tune' with children?

How do we ensure that every child has the opportunity to develop a strong, reciprocal relationship with at least one educator?

How does the language that we use empower children?

How does our team define an engaged learner?

## C4 Adults' knowledge

### Criteria

#### Curriculum criterion 4

The practices of [educators](#) and [coordinators](#) demonstrate an understanding of children's learning and development, and knowledge of relevant theories and practice in early childhood education.

#### [Documentation required](#)

#### Rationale/Intent:

The criterion is based on the assumption that quality education is more likely to be assured when teachers working at the service have appropriate knowledge and understanding.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Our understanding of children's learning and development underpins what we do, and why we do it. A range of theories in learning and development support and influence early childhood education. It is important that we understand what influences our teaching practice and can articulate and put

into action the knowledge that we have.

The early childhood education knowledge-base is constantly being revised and developed. Professional learning helps us to keep up-to-date with these changes. Participating in professional development opportunities (formal and informal) and professional reading helps us to continuously build on our understanding. Educators and coordinators should take opportunities to discuss and debate ideas and theories, and identify meaningful ways to put their new knowledge into practice.

Self-review practices also play an integral role in assisting us to explore our understanding of children's learning and development, and identify what we do not know and need to learn more about.

## Practice

Examples of what this might look like in practice:

Educators can articulate how their practices impact on children's learning

Educators reflect on practice in the light of new information they have learnt

Educators share their understandings with coordinators

Practices reflect the service's philosophy in relation to aspirations for the child

Planning, evaluation, and assessment documentation clearly identify the learning that has occurred for the child.

## Things to consider

Things to consider:

How do we make decisions about our focus for professional development?

How do our relationships and interactions reflect relevant theories and good practice in early childhood education?

What do we say by our actions? What goes unnoticed, or unsaid? Do our actions match our words?

How does the language we use demonstrate our understanding of relevant theories and good practice?

How do different theories that guide our practice connect with each other? How are they different?

How do we articulate to others why we do things, and what we are doing?

How do our understandings of Te Whāriki inform our approach to new knowledge?

How does our professional learning change our perspectives of Te Whāriki?

## Culture and identity

Criteria for culture and identity:

### In this section

- [C5 - Acknowledgement of tangata whenua](#)
- [C6 - Culture](#)

## C5 Acknowledgement of tangata whenua

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## Criteria

### Curriculum criterion 5

The service curriculum acknowledges and reflects the unique place of Māori as tangata whenua. Children are given the opportunity to develop knowledge and an understanding of the cultural heritages of both parties to Te Tiriti o Waitangi.

#### [Documentation required](#)

##### **Rationale/Intent:**

This criterion is a means of ensuring that the service curriculum supports all children to develop an understanding and appreciation of New Zealand's cultural heritage.

##### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Te Tiriti o Waitangi plays a significant role in the revitalisation of Māori language and culture, an important part of Aotearoa/New Zealand culture. Early childhood services are a vital link to ensuring all New Zealand children, regardless of ethnicity, are given the opportunity to learn about and experience, in a very real way, both Pākehā and Māori culture.

Te Whāriki is a bi-lingual, bi-cultural document which reflects Māori views of children's learning and development and includes many strategies for implementing bi-cultural programmes. [Quality in Action](#) also provides useful guidance, as bi-cultural approaches are threaded throughout the document.

The service curriculum will be developed in partnership with Māori to provide genuine opportunities for participation in programme development, enhancing outcomes for Māori children.

##### **Practice**

Examples of what this might look like in practice:

Te Reo Māori is spoken, heard, and visible across the environment and used for a range of purposes

Children learn about the history of local hapu and iwi through meaningful experiences

Educators use teaching strategies which reflect tikanga Māori, including narrative, song, art, and movement

Educators integrate te reo me tikanga Māori into all aspects of the service curriculum, including routines, rituals, and regular events

Children are aware of their own ancestral heritage and the history of Aotearoa/New Zealand

Children display a strong sense of environmental awareness and care, including consideration of both the natural (living) world and the physical (non-living) environment

The service philosophy and practices reflect commitment to a bi-cultural partnership.

##### **Things to consider**

Things to consider:

What do we understand about the unique place of Māori as tangata whenua? How is this visible within our environment?  
How do we ensure that management and educators understand the principle of partnership inherent in Te Tiriti o Waitangi?  
How is this partnership reflected in the policies and practices of the service as identified in the governance and management criteria?  
How does our service encourage and/or support educators to extend their knowledge and use of te reo me tikanga Māori  
How are we communicating and working in partnership with Māori? How is this determined? Is it effective? How do we know?  
Do we know the history of and/or understand the protocols of our local hapū and iwi?

## C6 Culture

### Criteria

#### Curriculum criterion 6

The [service curriculum](#) respects and supports the right of each child to be confident in their own culture and encourages children to understand and respect other cultures.

#### [Documentation required](#)

##### **Rationale/Intent:**

This criterion is a means of ensuring that the service curriculum is responsive to the different cultures of the families of the children attending and helps children gain a positive awareness of their own and other cultures.

##### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Children's learning and development is enhanced if the well-being of their family and community is supported; if their family, culture, knowledge and community are respected; and if there is a strong connection and consistency between all aspects of the child's world.

When all families are welcomed it supports a child's sense of connection and connectedness. The service curriculum supports the cultural identity of all children, affirms and celebrates cultural differences, and aims to help children gain a positive awareness of their own and other cultures.

##### **Practice**

Examples of what this might look like in practice:

Partnerships are developed with families/whānau to assist understanding of the values, customs, rituals, and practices that are important to the child and to identify meaningful ways to include these in the curriculum

Children's home languages and cultural practices are heard and seen around the home

Resources reflect ethnic diversity and the cultures of the families using the service

Experiences and opportunities are taken for the modelling of non-discriminatory practices

Important events are acknowledged and celebrated to foster children's sense of worth and belonging within the environment

Children have opportunities to share aspects of their culture with others in the service  
Educators use a variety of teaching strategies that demonstrate the holistic way children learn and grow.

## Things to consider

Things to consider:

- In what ways are families/whānau kept informed about and encouraged to participate in the development of our service curriculum?
- In what ways do our self-review processes support children knowing about and understanding their own culture and others' cultures?
- How is our understanding of and respect for our own and others' cultures reflected in our service's philosophy statement, policies, and practices?  
Governance and Management criteria?
- How do we know whether our programme is effective, in relation to supporting each child to be confident in their own cultures and respectful of others' cultures? Evaluation criteria
- How do we ensure the provision of meaningful and respectful cultural experiences?
- Are our relationships with families/whānau reciprocal and responsive? How do we know?
- How do we challenge discriminatory practices and behaviour in our service?
- How do we challenge issues to do with fairness and social justice?
- What opportunities are there for the children to take part in events and customs of cultural significance?
- How do our behaviours demonstrate that we value and respect diversity?

## Children as learners

Criteria for children as learners:

### In this section

- [C7 - Curriculum responsive](#)
- [C8 - Language-rich environment](#)
- [C9 - Range of experiences](#)
- [C10 - Behaviour management](#)

## C7 Curriculum responsive

### Criteria

#### Curriculum criterion 7

The [service curriculum](#) is inclusive, and responsive to children as confident and competent learners. Children's preferences are respected, and they are involved in decisions about their learning experiences.

#### [Documentation required](#)

## **Rationale/Intent:**

Criterion is a means of ensuring that the service curriculum is consistent with the prescribed curriculum framework.

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A service curriculum that is inclusive ensures all children know that the early childhood service they attend is a place where they belong and where they feel valued for who they are.

The service curriculum treats all children, regardless of their age, gender, ethnicity, and abilities, as competent and confident learners who are active participants in their own learning. Supportive, responsive educators guide children to make choices in, and contribute to the planning of, the programme in an early childhood service.

The curriculum will enable children with special needs to be actively engaged in learning with and alongside the other children in the service.

## **Practice**

Examples of what this might look like in practice:

Children participate in decisions that affect them, choosing their own challenges and learning opportunities from a range of resources and equipment  
Educators respect children's choices and accept them wherever possible

The environment is set up so that children can independently access equipment and resources

The environment includes a wide range of learning experiences from which children can choose familiar activities or try new challenges

Educators demonstrate, in practice, that they regard each child as competent, and assist children in making informed decisions by providing them with the information they need

Children with special needs are fully engaged in the programme working with and alongside other children in the service

Children interact positively with other children of different ages, backgrounds, gender, abilities, and/or ethnic groups.

## **Things to consider**

Things to consider:

How do the tools/resources in your service curriculum reflect what parents/whānau value as learning for their children?

How do you explain to others what real choice for children is? Who answers this question?

How do we explain to others our expectations and understanding in relation to children's learning and development?

How does the way our day is set up influence the experiences for children? How are children empowered to influence how the day is organised?

Where do the notions of child-centred, child-initiated, and child-directed learning fit into all of this?

In what ways do we support and enable children who are non-verbal to make choices within our programme?

How does our service curriculum include strategies to fully include children with special needs?

## **C8 Language-rich environment**

### **Criteria**

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## Curriculum criterion 8

The [service curriculum](#) provides a language-rich environment that supports children's learning.

### Documentation required

#### **Rationale/Intent:**

This criterion is a means of ensuring that the service curriculum is consistent with the prescribed curriculum framework.

### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Language is a vital part of communication and cultural transmission. If children are competent communicators, they are well-placed to enjoy their relationships with others and to be successful learners. Language does not consist only of words, sentences, and stories though; it includes the language of images, art, dance, drama, mathematics, technology, movement, rhythm, print, and music.

The 'languages' used in the environment will depend on the make-up of the children and families that attend, and the community that the service serves - for example a language-rich environment in an infant and toddler setting may look, feel, and sound different from a setting for older children.

In early childhood services in Aotearoa/New Zealand it is important that educators understand the significance of te reo Māori and that it is heard, seen, and used throughout the day, and integrated throughout the service curriculum.

All children will enter an early childhood service with a first language. Sometimes this language is different to the language or languages used in the centre. It is important that educators work in collaboration with the parents/whānau of the child to ensure that the child's first language is integrated into the service curriculum in real and meaningful ways.

### **Practice**

Examples of what this might look like in practice:

The service curriculum is print-focused. Educators encourage print-awareness in children's activities, by having a lot of printed material visible around the centre at children's eye-level or just above, and offer children a range of readily accessible books

The first language of each child that attends the service is represented in the environment – seen and heard – particularly the key words and phrases that the child relies upon for communication

Children and educators use their first languages and extend their vocabularies in both te reo Māori and English

Children use a variety of ways to communicate including non-verbal communication through art, movement, and music

Educators actively listen to and respond to all forms of communication from children

Educators promote stories, songs, dance, and music from a variety of cultures.

### **Things to consider**

Things to consider:

What languages are 'spoken' here?

How do our wider relationships with colleagues, parents, and the community influence our provision of a language-rich environment?

What tools and strategies do we have to support the provision of a language-rich environment?

How do we evaluate how our level of engagement with children and families impacts on learning outcomes for children?

What kinds of review practices happen within the language used in engagement with children?

How do we reflect on or monitor the language we use with children, families, and each other?

How do the language experiences provided for children reflect the families' wishes, beliefs, and aspirations?

How do we access content knowledge and technical language to support and extend children's thinking?

What role does a language-rich environment play in the transmission of culture?

What happens at our place that reflects the importance of language/learning?

How would we explain to others how children's learning is supported through a language-rich environment?

Do we notice who talks, when they talk and what they say? Do we notice who does not talk, and why?

How are the languages and symbols of children's own and other cultures promoted and protected?

How can our environment support children's thinking and language?

## C9 Range of experiences

### Criteria

#### Curriculum Criterion 9

The [service curriculum](#) provides children with a range of experiences and opportunities to enhance and extend their learning and development – both indoors and outdoors, individually, and in groups.

#### [Documentation required](#)

##### **Rationale/Intent:**

This criterion is a means of ensuring that the service curriculum is consistent with the prescribed curriculum framework.

##### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The range of experiences and opportunities provided to enhance children's learning and development will be heavily influenced by the outcomes of assessment, planning, and evaluation practices. Along with providing a range of resources and equipment, extending children's learning and development involves using these resources in purposeful and meaningful ways, relevant to the children's lives.

Services offering out-of-school care need to ensure that the presence of older out-of-school-care children does not negatively impact on the range of learning experiences provided. They need to consider any planned activities to ensure there are appropriate activities for the ages of the children attending.

Resources take many forms and will include people, places, and things. The resources provided to support the service curriculum should reflect the



service's philosophy of learning, and will be responsive to the preferences of children, their families, the educator, and community. Low numbers of children in a home-based setting, and the ability for the educator to take them away from the immediate home-environment, means opportunities for learning can occur in a large number of environments, including settings like supermarkets, local playgrounds, and schools.

The experiences and opportunities available should enable children to make choices about their learning. This could be individual or group learning, happen indoors or outdoors, and offer challenge and familiarity. The home is a rich source of resources for learning – everyday items and routines can be used to enhance children's knowledge skills and dispositions, for example, hanging out the washing can involve prediction (how many pegs will I need?), sorting, and other mathematical skills.

Through their interactions with children, educators have a key role in extending children's learning and development. They create opportunities for children to expand their thinking and learning within friendly, nurturing relationships.

## Practice

Examples of what this might look like in practice:

Educators are familiar with individual children's interests and strengths and provide appropriate experiences to extend them

Children have ready-access to varied environments and resources that they can explore and investigate

Equipment can be used in a variety of different ways

Children engage in a variety of different physical experiences, planned to challenge them and enhance their physical skills

Children are actively engaged in investigation and sustained exploration

The service curriculum reflects the holistic way that children learn

Educators frequently join in children's activities, and offer materials, information, or encouragement to facilitate play and learning around a particular subject.

## Things to consider

Things to consider:

Are there enough resources to promote children's choices for challenge, revisiting, wider community experiences, exploration, and solitary and group play?

How is our environment set up? Who makes the decisions about how our environment is set up? Where does assessment for learning feature in this?

Does the physical access support children to make choices about their movements between the indoor and outdoor environments?

How are children and their families/whānau engaged, regarding the range of experiences and opportunities provided?

How do our teaching practices stimulate children's thinking, and reflect the holistic way children learn and grow?

Is our environment used in purposeful, and meaningful ways?

Is the environment arranged in a way that allows choice and opportunities for independence and interdependence?

Is out-of school care being provided in the home?

## C10 Behaviour management

### Criteria

#### Curriculum Criterion 10

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The [service curriculum](#) supports children's developing social competence and understanding of appropriate behaviour.

## [Documentation required](#)

### **Rationale/Intent:**

This criterion recognises the importance of children's social confidence in establishing and maintaining relationships with other children and adults.

### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

As children learn to make sense of their world and develop working theories, they develop an understanding of themselves in social contexts, including the early childhood service.

What is viewed as social competence and appropriate behaviour may vary from setting to setting and will depend on the values that families, educators, and coordinators hold. It is therefore vital that educators, coordinators, parents, and children share with each other their understandings of social competence.

The environment, our expectations, and our teaching practices will be strong indicators of what we consider to be socially appropriate and competent behaviours.

A service curriculum that supports social competence and understanding of appropriate behaviour will provide ongoing opportunities for children to practise, through actions, words, and behaviours, their growing competence.

### **Practice**

Examples of what this might look like in practice:

Educators emphasise what to do, rather than what not to do, in explanations and instructions

There are enough resources to promote children's choices for challenge, revisiting, wider community experiences, exploration, solitary and group play

Relationships and interactions promote respect between children, and between children and educators

Educators use a range of conversation skills to encourage children to talk and think about relationships and the consequences of different responses to a given situation or problem

Children know the limits and boundaries of acceptable behaviour

Children are only offered genuine choice

The service curriculum provides opportunities to discuss and negotiate rights, fairness, and justice with adults.

### **Things to consider**

Things to consider:

What are the limits and boundaries in our home? How are these negotiated and shared with children and their families?

What are our expectations of the range of behaviours children will demonstrate in the early years?

What is my image of children?

How do we evaluate the effectiveness of our teaching strategies in relation to the development of children's social competence?

How do my own personal values impact on, and influence my teaching practice?

How do our routines and rituals support children's developing social competence?

How do we manage challenging behaviours in respectful and dignified ways?

What are the advantages and disadvantages to children if educators intervene and provide guidance and support during play?

## Working with others

Criteria for working with others:

### In this section

- [C11 - Parents' aspirations](#)
- [C12 - Opportunities for parents](#)
- [C13 - Seeking information](#)

## C11 Parents' aspirations

### Criteria

#### Curriculum criterion 11

Positive steps are taken to respect and acknowledge the aspirations held by parents and whānau for their children.

#### Documentation required

#### **Rationale/Intent:**

The criterion is underpinned by the belief that a level of collaboration between parents and adults providing education and care will result in positive outcomes for children, and that parents are the 'experts' on their own children. The criterion aims to ensure that services consider the parents' perspectives in regards to their children.

#### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Children are a taonga of their families/whānau. All parents have particular goals and dreams for their children. These aspirations may be about the individual child and/or may be about the child within the context of their collective group.

Educators need to listen carefully and respectfully to the aspirations shared by parents. Sometimes the goals parents identify for their children may not fit comfortably with the service philosophy or what you understand about children's learning and development. In these situations it is important to discuss this with the parents, articulating your understanding and finding a way to meet the parents' aspirations that is appropriate to your service.

## Practice

Examples of what this might look like in practice:

Educators are receptive to information about children's lives at home and incorporate it into their planning and programme  
There are regular opportunities provided for parents to share their goals for their child with educators  
Families are confident to visit, talk with the educator and coordinator, ask questions, and offer information about their child.

## Things to consider

Things to consider:

What informal and formal opportunities for engaging with parents are regularly taken (and recorded) to develop an understanding of their aspirations for their child?  
In what way does our service use consultation to support change?  
How do we create an atmosphere that enables free-sharing of ideas and opinions?  
In what ways do our notions of power impact on parents sharing their aspirations?  
Whose knowledge is viewed as the most valuable?  
What happens when parents/whānau challenge our interpretations of anything? Is this process one of empowerment?  
Who decides how families/whānau are consulted? What is the agenda for this consultation?

## C12 Opportunities for parents

### Criteria

#### Curriculum criterion 12

Regular opportunities (formal and informal) are provided for parents to:

communicate with and , about their child, and share specific evidence of the child's learning; and  
be involved in decision-making concerning their child's learning.

#### [Documentation required](#)

#### Rationale/Intent:

The criterion is underpinned by the belief that a level of collaboration between parents and adults providing education and care will result in positive outcomes for children. The criterion also aims to ensure that the learning and development of children is optimally supported through a holistic, collaborative approach, and that parents are well-informed.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Partnerships involving regular consultation with parents, guardians, and whānau are a crucial part of quality early childhood education. Parental presence and engagement have been found to support improved outcomes for children, and develop a greater sense of belonging for families and whānau.

Where parents are welcomed, and educators use a range of strategies to develop genuine partnerships built on mutual trust and respect, parents feel more able to participate in decision-making about their child's learning.

Educators and Coordinators need to consider the time, place, and space to develop these relationships through informal and formal opportunities. Formal opportunities will include times where communication is planned and may involve preparation, for example a whānau hui or interview evening. Informal opportunities are likely to occur each day, often at the drop-off and pick-up times.

## Practice

Examples of what this might look like in practice:

Parents feel that they are well-informed and that their views are respected and taken note of

Interactions with parents are culturally appropriate and give them a sense of belonging

Parents' 'voices' are apparent in documentation concerning children

Families are confident to visit, talk with the educator and coordinator, ask questions, and offer information about their child

Resource material about children's learning is readily available for families/whānau

Educators consult with parents about the process to be used when sharing information and making decisions, to ensure it is culturally appropriate, comfortable, and effective for all.

## Things to consider

Things to consider:

How do we share a child's day with parents?

How do we acknowledge the role of parents/whānau as partners in observing and evaluating their children's learning and development?

How do we empower parents/whānau to actively participate in decisions that affect the education of their children? How do we ensure they are effective?

How are parents'/whānau rights recognised?

In what ways can parents/whānau communicate in our setting?

How effective are the ways we engage with parents? How do we measure this?

How do we encourage parents to enquire about their child's learning and development?

How do we ensure that parents understand the practices and procedures of our service?

## C13 Seeking information

### Criteria

#### Curriculum criterion 13

Information and guidance is sought when necessary from agencies/services to enable [educators](#) and [coordinators](#) to work effectively with children

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and their parents.

## [Documentation required](#)

### **Rationale/Intent:**

The criterion is underpinned by the belief that a level of collaboration between parents, adults providing education and care, and other agencies as necessary, will result in positive outcomes for children. The criterion aims to ensure that services seek information as needed.

### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

There are a range of situations where information and guidance from outside agencies and specialist services can enhance the ability of a child to fully access the curriculum and therefore improve their educational outcomes. Support and assistance may be focused on an individual child and family/whānau or on the wider group of children, management, and educators.

Building stronger links between ECE services, parents and whānau, parenting programmes, schools, health, social services, and other specialists, allow children's learning and development needs to be met more holistically. It is useful for a coordinator to establish these links within their network's community before they are needed, to ensure timely assistance.

Before coordinators approach a specialist service, it is important to consult with the parents to ensure that the process is appropriate. Confidentiality issues must always be taken into consideration.

### **Practice**

Examples of what this might look like in practice:

Educators, with support from coordinators, know and quickly recognise the factors that suggest that specialist information and guidance is required. Decisions to seek specialist guidance are made in collaboration with others, including educators, coordinators, and parents, and are based on observational evidence.

Coordinators have a directory of specialist services and a ready network who will provide guidance and support to parents.

### **Things to consider**

Things to consider:

How do our policies provide a clear process for identifying when support is needed, and for seeking that support?

How do we know that we have considered the family's wishes?

How do we go about making contact with specialist services? Do we know where all our local community facilities are?

How do our own values and assumptions impact on our decision whether or not to seek support?

What are our own assumptions of how specialist support operates?

How do we integrate advice from specialist services into the curriculum?

What are our strategies to fully-include children with special needs?

## Curriculum criteria documentation required

Documentation that provides evidence of the service's compliance with criteria C1-C13. Documentation may take a variety of forms to suit the service's operation (such as portfolios, wall displays, policies and procedures) but must include:

1. A process for providing positive guidance to encourage social competence in children (C10);
2. A process for providing formal and informal opportunities for parents to:
  - communicate with adults providing education and care about their child, and share specific evidence of the child's learning; and
  - be involved in decision-making concerning their child's learning (C12); and
3. A record of information and guidance sought from agencies and/or services (C13).

## Premises and facilities

### 45 Premises and facilities standard: general

- (1) The premises and facilities standard: general is the standard that requires every licensed service provider to whom this regulation applies—
- (a) to use premises and facilities that, having regard to the number and age range of the children attending the premises, provide sufficient and suitable space for a range of activities, facilities for food preparation, eating, sleeping, storage, toileting, and washing, and sufficient and suitable heating, lighting, noise control, ventilation, and equipment to support—
- (i) appropriate curriculum implementation by the service provider; and
  - (ii) safe and healthy practices by the service provider; and
- (b) to comply with the requirements of Schedule 4 (which relates to activity spaces).
- (2) Each licensed service provider to whom this regulation applies must comply with the premises and facilities standard: general.

**The criteria in this section are grouped together by topic. Each criterion has also been given a short, descriptive title. These titles are provided only to help you navigate around more easily on the website – they do not form part of the criteria themselves.**

### In this section

- [General](#) - Criteria and guidance for PF1-PF11
- [Food preparation and eating](#) - Criteria and guidance for PF12-PF13
- [Sanitary facilities](#) - Criteria and guidance for PF14-PF18
- [Sleep](#) - Criteria and guidance for PF19-PF22

## General

General criteria:

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## In this section

- [PF1 -Design and layout of premises](#)
- [PF2 -Premises support effective supervision](#)
- [PF3 -Building Act compliance](#)
- [PF4 -Variety of equipment](#)
- [PF5 -Infant toddler safe space](#)
- [PF6 -Flooring](#)
- [PF7 -Storage](#)
- [PF8 -Art sink](#)
- [PF9 -Telephone](#)
- [PF10 -Heating, lighting, and ventilation](#)
- [PF11 -Outdoor activity space](#)

## PF1 Design and layout of premises

### Criteria

#### Premises and Facilities criterion 1

The design and layout of the premises:

support the provision of different types of indoor and outdoor experiences; and include quiet spaces, areas for physically active play, and space for a range of individual and group learning experiences appropriate to the number, ages, and abilities of children attending.

#### Rationale/Intent:

To ensure children have access to an environment that can support a range of activities for children of all ages and strikes a balance between physically active play and quiet spaces.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

All homes will be designed differently but most will have lounge or living space that can be used for a variety of activities, including where children are able to find a place for quiet activities as necessary. An area without carpet can be used for more messy activities, such as painting or clay modelling, or a coversheet can be laid down to protect flooring as necessary so that children have the ability to experience different creative activities.

Homes must have sufficient indoor space for group learning and homes also need to have some outdoor space to allow for physical activity. For the indoor and outdoor space requirements, see the Education (Early Childhood Services) Regulations 2008.



If providing out-of-school care, the educator should ensure they can see and hear the children at all times. Small spaces should be kept clear of clutter and larger spaces are set up so children have clear play spaces that educators can observe.

For the indoor and outdoor space requirements, see the Education (Early Childhood Services) Regulations 2008.

## PF2 Premises support effective supervision

### Criteria

#### Premises and Facilities criterion 2

The design and layout of the premises support effective adult supervision so that children's access to indoor and outdoor spaces is not unnecessarily limited.

#### Rationale/Intent:

To ensure the children's use of the environment is not unduly restricted by design limitations that make adequate supervision difficult.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Homes are not always designed with small groups of children in mind, and educators need to manage any difficulties presented by the configuration of the premises.

Supervision is paramount in ensuring children are safe while attending the service.

As much as possible, the design and layout of homes should not make it too difficult for the educator (as the only adult present) to actively supervise all children attending.

Any issues with the layout of the premises that limit supervision should be included on the hazard register.

## PF3 Building Act compliance

### Criteria

#### Premises and Facilities criterion 3

The [premises](#) conform to any relevant bylaws of the local authority. Any premises undergoing alterations conform to the Building Act 2004.

#### **Documentation required:**

Code Compliance Certificate issued under Section 95 of the Building Act 2004 for any building work undertaken, or alternatively any other documentation that shows evidence of compliance.

Current Annual Building Warrant of Fitness (if the premises require a compliance schedule under Section 100 of the Building Act 2004).

#### **Rationale/Intent:**

To ensure the premises are compliant with the Building Act 2004 and maintained in good condition.

#### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The provisions of the Building Act 2004 do not apply to homes built prior to 1992 that have not since been renovated. The Ministry of Education will not require code of compliance certificates for every home. If recent building work has been undertaken, then the service provider should ask for a copy of the code of compliance certificate.

Building warrants of fitness and compliance schedules are not commonly needed in residential homes. These documents are required under the Building Act only when buildings contain an escalator, lift, cable car, automatic doors, or particular kind of fire alarm – they provide evidence that these mechanical systems are maintained in good working order.

If the home is located in an apartment block, the building will require a code of compliance certificate and building warrant of fitness. Again, the service provider should ask for copies.

## **PF4 Variety of equipment**

### **Criteria**

#### **Premises and Facilities criterion 4**

A variety of equipment and materials is provided that is appropriate for the learning and abilities of the children attending.

#### **Rationale/Intent:**

The criterion aims to uphold a minimum level of quality education by ensuring that children have access to a range of suitable and safe equipment and materials.

#### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Children learn by interacting with people and with their environment. The furniture, equipment, and resources provided for children will have an impact upon their learning.

Home settings provide children with opportunities to engage in experiences that are relevant to their own lives. Children should be able to access equipment and materials that support their interests, skills and abilities.

All equipment and resources available to children must be safe and able to be kept hygienic. See [HS1 - Premises and contents are safe and hygienic](#) for how to keep equipment hygienic.

Think about the size, sturdiness and durability of items available to children, especially infants and toddlers.

Some home-based service providers have a range of equipment and resources available for educators to loan and educators may belong to toy libraries.

## Things to consider

Consider making use of existing resources and equipment within the home to enhance children's learning opportunities. In addition to a range of things like books, blocks, art equipment, etc, consider using existing materials and activities that take place in the home environment as learning experiences for children. For example, baking, cooking, gardening and washing dishes are activities that are easy to provide in the home setting.

Consider how the furniture, equipment, and resources you provide in the home will:

- promote and protect written and spoken language of children attending
- be non-sexist and inclusive
- support parents' aspirations for their children's learning
- reflect different attitudes and feelings
- provide for group and individual play
- provide for children's current and emerging interests
- provide opportunities for choice, planning, and problem solving
- be relevant and challenging for the range of ages and abilities of children attending.

Consider a balance between natural products and man-made equipment and materials. Plastic products are usually cheaper and easy to clean, but they do not usually last as long or have the same aesthetic appeal as products made from natural materials.

## PF5 Infant toddler safe space

### Criteria

#### Premises and Facilities criterion 5

If infants, toddlers or children not walking attend, there are safe and comfortable (indoor and outdoor) spaces for them to lie, roll, creep, crawl, pull themselves up, learn to walk, and to be protected from more mobile children.

**Rationale/Intent:**

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To ensure that the safety of infants and toddlers is upheld as well as ensuring a minimum level of quality education by ensuring that mixed-age environments are designed to consider their unique needs.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

In the home setting where it is likely that children of varying levels of ability and mobility will be together in the same activity space, it is important that infants and toddlers can safely play and explore, both indoors and outdoors.

If providing out-of-school care, the educator needs to be aware of the space that older school children will be using, as well as any spaces that may be shared with ECE children.

In thinking about how to use the home's existing design and space, consider how the following features can be incorporated:

Allowing young children the freedom to explore and play.

Providing older children with the opportunity to concentrate and work on a project for a sustained period of time without fear of it being demolished by a young 'helper'.

Lessening the likelihood of a prone or crawling infant, or a toddler just beginning to find their feet, being accidentally injured by an older child who is fully engaged in their own play and is not aware of their presence.

## PF6 Flooring

### Criteria

#### Premises and Facilities criterion 6

Floor surfaces are durable, safe and suitable for the range of activities to be carried out (including wet and messy play), and can easily be kept clean.

#### Rationale/Intent:

To ensure safe, hygienic and appropriate flooring.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Floor surfaces should be easy to clean and suitable for the activities being undertaken.

Homes will have different floor types. If easy to clean floors are not available, consider laying down a coversheet over existing flooring to enable children to engage in creative or messy activities.

## PF7 Storage

### Criteria

#### Premises and Facilities criterion 7

There are spaces for the safe storage of children's play equipment, personal belongings, cleaning materials, and confidential administrative records.

##### Rationale/Intent:

To ensure that equipment is safely stored, and that confidentiality can be assured in a home setting.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Homes are not always designed with large storage areas. Consider how to best use existing storage areas, ie, cabinets or cupboards, to provide the storage needed.

When children are attending an educator's home, it is important for them to have independent access to their belongings so they have the ability to take some responsibility for their things, including choosing what to wear throughout the day.

Storage space both indoors and outside will be needed for resources, such as paper, paint, spare puzzles, books, so that these are easily accessible to support children's learning. Consider how existing storage space might be adapted, such as the lower shelves of existing linen and spare cupboards, to accommodate resources. If additional storage space is needed, there is a range of inexpensive options, such as baskets or stackable boxes, available.

If high shelving is being used, it will be necessary to ensure that any stored equipment can't fall in an earthquake.

Any confidential administrative records kept in the home setting **must** be stored using a lockable cupboard, file box, file cabinet, drawer or room to ensure visitors to the home cannot access these.

Cleaning materials need to be safely stored out of children's reach. A lockable cupboard (for example, with security latches) or high shelving in the kitchen or laundry area may be most suitable for this purpose.

## PF8 Art sink

### Criteria

#### Premises and Facilities criterion 8

There are facilities (other than those required by PF18) or alternative arrangements available for the preparation and cleaning up of paint and other

art materials.

**Rationale/Intent:**

To ensure that facilities for preparing and cleaning art materials uphold hygienic practices.

**Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

There needs to be adequate space and facilities to prepare and clean up paint and other art materials. A laundry tub would be appropriate for art preparation and clean up. Bathroom facilities are not appropriate.

Alternative systems may include:

Using one or more buckets to wash materials, and disposing of the waste water in the laundry sink or down an outside gully trap

Placing an insert into a sink facility used for another purpose to prevent art materials from coming into contact with any cleaning waste or chemical residues, and/or to prevent paint or waste water from coming into contact with the sink.

Robust cleaning procedures are needed to ensure all facilities are thoroughly cleaned before and after being used for art preparation and clean up.

## PF9 Telephone

**Criteria**

**Premises and Facilities criterion 9**

A telephone is available for calls to and from the premises.

**Rationale/Intent:**

To ensure that services have the means to contact parents as necessary, and vice versa, as well as easily deal with any emergency situations that may arise.

**Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A phone at the home allows:

quick contact with emergency services when necessary

two-way contact with parents or caregivers (i.e. you can call them, and they can call you).

A mobile phone is sufficient to meet the criterion so long as parents are happy to call a mobile number and, if pre-paid, it is kept charged with credit

so the educator can make calls.

If the home only has a cordless phone, be aware the educator will be unable to use it when the power goes off for any reason.

## PF10 Heating, lighting, and ventilation

### Criteria

#### Premises and Facilities criterion 10

Parts of the home used by children have:

lighting (natural or artificial) that is appropriate to the activities offered or purpose of each room;  
ventilation (natural or mechanical) that allows fresh air to circulate (particularly in sanitary and sleep areas); and  
a safe and effective means of maintaining a room temperature of no lower than 16°C.

#### Rationale/Intent:

To ensure the safety and well-being of children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

### Heating

Efficient heating will ensure rooms can be kept at a comfortable temperature while children are attending. See [HS21 – Room Temperature](#). There is a range of options but safety of children is paramount. See [HS11 – Hazard Management](#).

### Noise

The materials and furnishings in the home will help to reduce noise levels for everyone's benefit.

The more soft furnishings, the more sound is absorbed. Some examples are:

curtains  
rugs and carpet  
big cushions  
couches/lounge chairs.

### Ventilation

There must be adequate ventilation in every room in the home that is used by children. Good ventilation is particularly important for rooms children sleep in, where nappies are changed, and bathrooms.

Good ventilation will:

- supply fresh air for breathing
- clear away pollutants and odours to improve air quality
- help remove excessive moisture in the air
- improve thermal comfort in warm weather by increasing air movement and removing heat.

## PF11 Outdoor activity space

### Criteria

#### Premises and Facilities criterion 11

There is an outdoor activity space that is:

- easily accessible and available to children;
- enclosed by structures and/or fences and gates that are maintained so that children cannot leave without an adult's help; and
- safe, well-drained, and suitably surfaced for a variety of activities.

#### Rationale/Intent:

The criterion aims to:

- uphold a minimum level of quality education by ensuring that children have easy access to the outdoor environment
- uphold children's safety by ensuring that the outdoor environment is securely fenced so that 'escape' is less likely, and
- uphold children's safety and a minimum level of quality education by ensuring the area is well drained and has suitable surfacing.

The criterion is underpinned by the belief that the opportunity for outdoor play is an important feature of the education and care of young children in New Zealand.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

It is important all mobile children are able to get outside without being dependent on adults.

Outdoor space should:

- enable children to experience natural settings (for example, wind, sky, sun, rain)



enable children to undertake activities that would generally not be allowed inside a home (for example, running, kicking a ball).  
include items typical and distinctive to outdoor settings (such as dirt, grass, sandpits, paddling pools and outdoor play equipment).

The suitability of the outdoor space to provide the outcomes for children will be assessed on a case-by-case basis, taking into account the practicalities and risks of each case under the provisions of [Regulation 54\(3\)](#) of the Education (Early Childhood Services) Regulations 2008.

Children cannot be in a position to leave the licensed premises without the knowledge of the educator.

## Fences

It is important that children playing outside are safe and not able to leave the home setting unassisted or unnoticed by an adult. The most practical way of keeping children safe is to have unclimbable fences or barriers enclosing the play space. It is recognised that fences in home-based settings will vary in design and height. The materials fences or barriers are constructed with, height and space design, and size should also be considered.

Beware of plantings (trees) and placement of moveable equipment that negate the height of the fence.

Fences under one metre that are made of climbable materials can be made unclimbable with the addition of shade cloth or use of additional barrier or fencing type materials, such as brushwood fencing or chicken wire.

Very low fences may need to be replaced to ensure children cannot leave unnoticed.

Temporary fencing forms may be appropriate if erection is stable and secure so that a child is unable to climb over or through the barrier or push the barrier over.

If there are significant hazards such as roads, rivers, or animals in close proximity to the home, consideration needs to be given to how the risk can be mitigated or managed by the educator. More guidance for rural properties is given in Things to Consider.

## Gates

Gates need to have a working locking mechanism so children cannot open them unassisted.

## Surfacing

Having a variety of surfaces (such as grass, decking, concrete, paving, etc) to play on supports children's exploration and helps them to make links with the wider world. Regardless of the types of surfaces at the home, each must be safe, well drained and fit for purpose. Any surface that allows water to pool is a potential safety hazard that will need to be managed.

Grass is an ideal surface for most outdoor activities. It can also be used as a safety surface for equipment under one metre in height. It has the advantage of staying cool in hot weather and is suitable for both walking and crawling children.

Areas of decking, concrete or paving are also suitable for outdoor activity, provided they do not pose any other hazards. Both types generally drain well and have the advantage of needing little maintenance. However, they are hard and abrasive and cannot be used as a safety surface.

## Things to consider

## Rural properties

A very large outside area may make supervision more difficult and the fencing of an enclosed smaller area adjacent to the home may be a sensible option.

Wire stranded farm fencing restricts movements of animals but not children, and additional covering will be required particularly when water troughs, roads, animals or farm machinery are nearby.

Electric fencing is unsuitable as a barrier.

## Food preparation and eating spaces

Criteria for food preparation and eating spaces:

### In this section

- [PF12 -Dining facilities](#)
- [PF13 - Kitchen facilities](#)

## PF12 Dining facilities

### Criteria

#### Premises and Facilities criterion 12

There is a safe and hygienic place for children attending to sit when eating.

#### Rationale/Intent:

To ensure that the areas where children eat are safe and hygienic.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Places for children to sit and eat could include:

at a dining room or kitchen table

at a breakfast bar

at a child-sized table inside or outside  
sitting on the edge of low decks  
sitting on grass or other outdoor surfaces.

High chairs or seats that attach to the edge of a table can be used as places for infants and young toddlers to sit while eating. Their use should be supervised (see the guidance for [HS19 – Supervision while Eating](#)).

Table surfaces can generally be made hygienic by spraying with a diluted bleach solution (see the guidance for [HS1 – Premises and Contents Are Safe and Hygienic](#)) and then being wiped dry before use. If there is concern table surfaces are not able to be made completely hygienic through wiping, washable covers can be used as a barrier between the table and food. Covers are also a good way of showing children that the table is now an eating place rather than an activity place.

Large easy-to-clean mats spread on the floor or on the grass, benches, and the edges of low decks are also practical ways of providing places for children to sit and eat.

## Things to consider

When meals or snacks are eaten outside, there are some safety and hygiene issues to consider:

Children sitting directly on grass or safety surfaces such as bark or matting should be encouraged to keep uncovered food on a plate or in their lunch box. This will reduce the chance of food becoming contaminated from contact with the ground.

Children eating outside need protection from the sun during this time. If possible, locate outdoor eating places under trees, shade sails, covered decks, sun umbrellas, and covered pergolas.

## PF13 Kitchen facilities

### Criteria

#### Premises and Facilities criterion 13

There are facilities for the hygienic preparation, storage and/or serving of food and drink that contain:

- a means of keeping perishable food at a temperature at or below 4°C and protected from vermin and insects;
- a means of cooking and/or heating food;
- a means of hygienically washing dishes;
- a sink connected to a hot water supply;
- storage; and
- food preparation surfaces that are impervious to moisture and can be easily maintained in a hygienic condition.

#### Rationale/Intent:

To ensure that there are facilities to support the hygienic preparation and storage of food.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

**Storing perishables** – a fridge is the most practical way of storing perishable food and drink at a safe temperature and for keeping it protected from vermin and insects. The fridge should be large enough to store perishable food (including food brought by children) and any medication that requires refrigeration.

**Cooking and/or heating food** – the appliances needed for cooking and/or heating food will depend upon the number of children you are cooking for and the type of meals being prepared. Options include microwaves, stove tops, and ovens.

**Washing dishes** – some homes may have a dishwasher that can be used. If the home does not have a dishwasher and the educator washes dishes by hand the Ministry of Health recommends a hygienic method of hand washing dishes is followed:

Thoroughly wash the dishes in hot water that is at least 43°C.

Use adequate soap or detergent.

Rinse and disinfect the dishes in hot water by placing them in clean boiling water for 30 seconds, or in clean hot water that is at least 77°C for 2 minutes (make sure children are kept out of the area until the water has drained away).

Keep the dishes separate from each other while they are rinsed, for example on a dish rack.

Remove them immediately and let the air dry them. Never use a tea towel or cloth to dry or polish the dishes after they have been cleaned.

**Sink with hot water connection** – having a sink with a hot water supply enables hand washing of items hygienically and to obtain hot water for other purposes, such as cleaning food preparation surfaces.

**Storage** – open shelves should only be used to store sealed packets or food in containers. Cupboards or storage units used for storing food need to be fit for purpose and designed to reduce the chances of food becoming contaminated by vermin and insects.

**Food preparation surfaces** – surfaces need to be constructed from or sealed with moisture-impervious materials, and designed in a way that minimises a build-up of dirt, food particles and bacteria, for example, in corners and joins. Check surfaces regularly for signs of wear and tear, chips, scratches, loose tiles, cracked grout, or worn sealant. Any of these can allow moisture to penetrate the surface and make the surface difficult to keep hygienic.

## Things to consider

### Supervision of children in kitchens

Some homes may have open plan kitchens and there are likely to be times when children will need to access kitchen and cooking facilities to take part in supervised activities, such as cooking and food preparation.

Kitchens and cooking facilities are potentially dangerous places for children so access for children must be supervised.

## Sanitary facilities

Criteria for sanitary facilities:

### In this section

- [PF14 - Isolation area](#)
- [PF15 - First aid kit](#)
- [PF16 - Toilet/hand washing facilities](#)

- [PF17 - Nappy change facilities](#)
- [PF18 - Body wash facilities](#)

## PF14 Isolation area

### Criteria

#### Premises and Facilities criterion 14

There is space (away from where food is stored, prepared, or eaten) where a sick child can:

be temporarily kept at a safe distance from other children (to prevent cross-infection);  
lie down comfortably; and  
be supervised.

#### Rationale/Intent:

The criterion aims to uphold the safety and well-being of all children attending by ensuring that there is a comfortable and safe place available for the isolation of a sick child.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

When a child becomes unexpectedly ill attending the home-based service, there needs to be somewhere for their care to make the sick child feel comfortable, as well as to keep other children from becoming ill until the sick child or other children at the home can be collected and taken home. The child must be able to be supervised. If the child is isolated in a separate room the educator should carry out regular checks every 10 to 15 minutes, as they would do with a sleeping child.

In a home-based setting, it is likely that there would be more than one different place that could meet this requirement (bedroom, study, family room, etc). Deciding on the best place to use in each situation will depend on:

the number and ages of other children attending  
the physical layout of the home (and related supervision issues)  
the symptoms of the illness  
how the child is feeling and responding to becoming ill.

## PF15 First aid kit

### Criteria

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## Premises and Facilities criterion 15

There is a first aid kit that:

complies with the requirements of ; and  
is easily recognisable and readily accessible to adults; and  
is inaccessible to children.

### Rationale/Intent:

To ensure:

there are adequate provisions available for the treatment of minor injuries  
adults can easily find the necessary provisions for administering first aid, and  
children cannot access any hazardous materials themselves.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

## First aid kit contents and placement

A list of first aid kit contents can be found in [Appendix one](#) (note that this is the minimum requirement). The first aid kit should be stored in a place where it is readily available to adults, but is secure and out of reach of children.

## First aid kit maintenance

Items in first aid kits will need to be replaced as they are used, and regular checks should be made to ensure that any perishable items are not past their use-by date (once a month or term is recommended). Regular checks are particularly important in the home setting where family members may also be accessing first aid kit items.

## First aid kit identification

First aid kits need to be easily recognisable – so that when an accident happens, any adult at the home can identify it.

## PF16 Toilet/hand washing facilities

### Criteria

## Premises and Facilities criterion 16

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There is a toilet and hygienic hand washing and drying facilities suitable for the use of the children attending.

#### **Rationale/Intent:**

The criterion aims to uphold children's safety and well-being.

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The door to the toilet or bathroom must be able to be independently opened by children and be kept unlocked at all times.

Adequate supervision is important. The educator will need to manage this depending on where the bathroom facilities are in relation to where children are located in the home.

## **Toilets**

A moveable step and/or a toilet seat insert can be helpful for young children just learning to use a toilet. They can also be easily removed when an adult needs to use the toilet.

Some families may use potties – if a potty is used, contents must be disposed of in the toilet and the potty cleaned and sanitised after each use. See for information on using bleach as a sanitiser.

## **Hand washing**

Liquid soap (rather than a communal bar of soap) can be less messy and is more hygienic when there are several children attending.

The hot water temperature from household taps can present a scalding hazard to children. Careful supervision is necessary for young children, and older children can be taught about hot water safety.

## **Hand drying**

There are a number of ways children can dry their hands, but some are more hygienic and easy to use than others. Viruses and bacteria spread easily from one child to another when they share the same towel. Getting hands dry is important. Damp hands create damp surfaces, which encourages survival of bacteria, viruses, and organisms like Giardia.

Recommended options include the following.

**Disposable paper towels** – there is a cost involved, but they have several advantages:

They are easy to use.

They do not spread infections.

They are easy to replace.

They can be used for other cleaning purposes.

**Individual towels** for the children attending are preferable to a single communal towel for drying hands. Different colours can be used so that young

children can identify 'their' towel.

## PF17 Nappy change facilities

### Criteria

#### Premises and Facilities criterion 17

Where children wearing nappies attend, there are safe and hygienic nappy changing facilities.

##### Rationale/Intent:

To ensure that appropriate facilities are available for children wearing nappies.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

### Hygiene

All surfaces on and around the change area must be smooth, impervious and able to be easily wiped cleaned and disinfected (a towel does not meet this criterion). Any change mat or pad must have a non-porous covering or be disposed of after each child is changed.

### Location

Nappy change facilities should be located in an area of the home that is separate from food preparation or eating areas.

### Design, strength and durability

If using a change table:

check its strength to ensure it is sturdy enough to cope with the weight of the children using it  
use the strap to ensure the child doesn't roll off, or always keep one hand on the child at all times.

For older, heavier children, a change mat on the floor may be more appropriate than a changing table.

### Children's independence and dignity

Educators need to ensure the facilities foster children's independence as appropriate and protect children's dignity and right to privacy.



## Health and safety of educators

Some change facilities require educators to engage in excessive heavy lifting, hunching over, or kneeling. This may result in sprains or strains so educators need to be mindful of how to manage this.

## PF18 Body wash facilities

### Criteria

#### Premises and Facilities criterion 18

There is a plumbing fixture (such as a shower, shub, or bath) for washing sick or soiled children.

#### Rationale/Intent:

To ensure that there are suitable facilities and practices for washing children who vomit or soil themselves while attending the service, so that the risk of cross infection is reduced.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Sometimes children at the home will need to have all or part of their bodies washed. This might be necessary, for example:

- at nappy change time – if wipes are not enough to ensure the soiled child is cleaned thoroughly
- if a child has vomited over themselves
- if a child has had a toileting accident
- if children become very dirty during play.

Every home will have at least one type of body wash facility available. Showers and shubs are preferred and are more hygienic as a child is not sitting in dirty water. However, if these are not available, fixed baths or baby baths are also suitable for washing sick or soiled children in the home.

Because home bathrooms are not designed for the exclusive use of attending children, educators need to think about how children using these facilities can be kept safe. Cleaning procedures also need to be implemented to ensure body wash facilities are hygienic before and after use.

#### Things to consider

Specific considerations should include the following:

- How readily can educators provide for the safe and comfortable washing of a sick or soiled child?
- How will body waste and waste water be disposed of safely and hygienically?
- How will the educator supervise other children while washing a sick or soiled child?

## Sleep

Sleep criteria:

### In this section

- [PF19 - Sleep facilities](#)
- [PF20 - Design of sleep provisions](#)
- [PF21 - Mattress coverings](#)
- [PF22 - Bedding](#)

## PF19 Sleep facilities

### Criteria

#### Premises and Facilities criterion 19

There is space available for the restful sleep of children who need it at any time they are attending.

#### Rationale/Intent:

The criterion aims to uphold the wellbeing of children by ensuring there are adequate provisions for sleep. Home-based services are more able to respond to children's individual sleep needs regardless of their age, due to the smaller group size and family atmosphere. A single criterion ensuring that children's sleep needs are met in an appropriate way regardless of their age is therefore appropriate for this service type.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Homes need adequate facilities to cater for occasions when a child needs to rest or sleep. How a service provides these facilities depends on what suits the home layout and parent expectations. It is preferable that a separate room is available so that, when a child chooses to sleep, there is a quiet area provided.

Consideration needs to be given to the number of children attending each home and the probability of multiple children needing to sleep/rest at the same time, particularly if there is more than one child under the age of 2 in care at the same time.

Consideration also needs to be given to the location of the sleep space in the home so the educator can maintain effective supervision of other children while monitoring sleeping children. See [HS8 – Sleep Monitoring](#).

## PF20 Design of sleep provisions

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## Criteria

### Premises and Facilities criterion 20

Furniture and items intended for children to sleep on (such as cots, beds, stretchers, or mattresses) are of a size that allows children using them to lie flat, and are of a design to ensure their safety.

#### Rationale/Intent:

To ensure that sleeping provisions are safe and appropriate for children using them.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

This guidance should be read in conjunction with the guidance for the other criteria relating to sleep ([Premises and Facilities 19-22](#) and [Health and Safety 8-10](#)).

Furniture and items intended for children to sleep on (such as cots, beds, stretchers, or mattresses) must:

Be large enough to allow all children to lie flat on their backs

Be of a design that ensures children's safety.

In addition, they must:

Allow children, who are able to, sit or stand safely when they wake ( )

Allow adults to easily get children out in the case of an emergency evacuation ( )

If furniture and items do not meet these requirements then they cannot be used.

When assessing the safety of sleep furniture and items, the following need to be considered:

The development of the child (mobile or non-mobile)

The height of the furniture in terms of falling risk – beds must be less than 700mm above the floor

The ability for clothing, bedding or the child's head becoming caught presenting a strangulation hazard

The presence of any small parts that could be a choking hazard

The ability for fingers or limbs to become trapped

### Cots

A cot is designed for infants and is enclosed on all four sides so the infant cannot fall out. A cot is only suitable for infants who are able to be lifted out.

Cots must have no gaps or protrusions that could trap an infant or catch their clothing and have no sharp edges. The sides must be high enough to stop an infant climbing out and there should be no footholds.

Where cots are used, these should be sturdy, easily washable ([PF21](#)) and allow good airflow ([HS9](#)).

Mattresses need to fit firmly inside the cot to avoid gaps that an infant could get wedged in. Mattresses should not be too soft, as this is a risk factor for infant suffocation.

## Portable cots

Portable cots can only be used in a home-based setting if they are used by a single child. As portable cots are made with a textile or mesh that allows for breathable air zones, they cannot be easily cleaned when used for multiple children ([PF21](#)).

Home-based services may use a portable cot if it:

meets the Australian/New Zealand Standard AS/NZS 2195:2010 (Folding cots)  
has a mattress covered in non-porous material, and  
is used for only one child.

Children who are able to stand up are not to be placed in portable cots as the portable cot could tip over when a child stands and the child could be injured.

## Stretchers and mattresses

Stretchers or mattresses must not pose a suffocation hazard. Inflatable mattresses cannot be used as they allow a child's face to be smothered, so cannot ensure a child's safety.

Stretcher fabric must be taut and its wear monitored to ensure the stretcher does not sag with use over time.

## Beds

Beds are single level sleep furniture where the upper surface of the mattress is less than 700mm above the floor. Children are able to get in and out of a bed without adult assistance.

Infants must not be placed in a bed as they may roll off the bed.

## Bunk beds and elevated beds

Bunk beds are those where multiple beds are stacked on top of each other and the upper surface of the mattress is 700mm or more above the floor. Elevated beds are those where the upper surface of the mattress is 700mm or more above the floor.

Bunk beds and elevated beds cannot be used as beds as this height poses a falling risk and they are not of a design that ensures a child's safety.

Risk mitigations such as increasing supervision or the use of safety matting do not meet the requirements of this criterion.

If there are bunk beds present in the home, they **must not** be used. The room with the bunk bed must be made inaccessible to children. It must be

included on the hazard management checklist ([HS11](#)) for that home and the bedroom door must be closed each day.

If an infant is sleeping in a cot or portable cot, the infant must not be in the same room as a bunk bed.

## Slings, backpacks, prams, buggies and car capsules

Items whose primary purpose is transportation e.g. slings, backpacks, prams, buggies and car capsules cannot be provided by the home-based provider or educator as an item intended for children to sleep on as they are not intended for that purpose or allow children to lie flat.

## Things to consider

Some home-based services like to have prams or buggies available for excursions, or to settle children when necessary. Pram and buggies are primarily designed to transport children when adults need to walk some distance. Although children often do sleep 'in transit' in a pram or buggy, this is not the primary purpose of the equipment. A buggy is therefore not the best place for a child to sleep if there is no need to transport them anywhere.

## PF21 Mattress coverings

### Criteria

#### Premises and Facilities criterion 21

Furniture and items intended for children to sleep on (such as cots, beds, stretchers or mattresses) that will be used by more than one child over time are securely covered with or made of a non-porous material (that is, a material that does not allow liquid to pass through it) that:

- protects them from becoming soiled;
- allows for easy cleaning (or is disposable); and
- does not present a suffocation hazard to children.

#### Rationale/Intent:

To ensure that mattresses that may be used by many children over time are kept hygienically clean and cross infection is prevented.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Children sometimes sweat when they sleep, and bed-wetting accidents do occur from time to time. Damp or soiled mattresses can be a breeding ground for bacteria.

Mattresses must have a surface that is smooth, easily cleaned and impervious to moisture and does not present a suffocation hazard to children. The waterproof layer must cover at least the whole of the upper surface and all sides of the mattress.

It is essential plastic mattress covers are securely attached to mattresses. It is recommended that these waterproof covers are held in place with elastic or other such device. Any ripped mattress covers must be replaced immediately.

## PF22 Bedding

### Criteria

#### Premises and Facilities criterion 22

Clean individual bedding (such as blankets, sheets, sleeping bags and pillowslips) is provided for sleeping or resting children that is sufficient to keep them warm.

#### Rationale/Intent:

To ensure children have clean and warm bedding when sleeping.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Linen must never be shared between children. It must either be washed after every use or stored separately with the child's name on it. Refer to the guidance for [HS10 – Storage of Sleep Provisions](#).

When putting a child to bed, it is recommended by the Child and Youth Mortality Review Committee (CYMRC) that:

bedding should be sufficient to keep the child warm but not to overheat them

bedding must be arranged so that it does not cover the child's face – this is especially important for babies

children under 2 should not use pillows.

## Health and safety practices

### 46 Health and safety practices standard: general

(1) The health and safety practices standard: general is the standard that requires every licensed service provider to whom this regulation applies to

- (a) take all reasonable steps to promote the good health and safety of children enrolled in the service; and
- (b) take all reasonable precautions to prevent accidents and the spread of infection among children enrolled in the service; and
- (c) take all reasonable steps to ensure that the premises, facilities, and other equipment on those premises are—

- (i) kept in good repair; and
- (ii) maintained regularly; and
- (iii) used safely and kept free from hazards; and

(d) take all reasonable steps to ensure that appropriate procedures are in place to deal with fires, earthquakes, and other emergencies.

(2) Each licensed service provider to whom this regulation applies must comply with the health and safety practices standard: general.

**The criteria in this section are grouped together by topic. Each criterion has also been given a short, descriptive title. These titles are provided only to help you navigate around more easily on the website - they do not form part of the criteria themselves.**

## In this section

- [Hygiene](#) - Criteria and guidance for HS1-HS3
- [Emergencies](#) - Criteria and guidance for HS4-HS7
- [Sleep](#) - Criteria and guidance for HS8-HS10
- [Hazards and outings](#) - Criteria and guidance for HS11-HS15
- [Food and drink](#) - Criteria and guidance for HS16-HS20
- [Child health and wellbeing](#) - Criteria and guidance for HS21-HS27
- [Child protection](#) - Criteria and guidance for HS28-HS32
- [Notification](#) - Criteria and guidance for HS33
- [Supervision](#) - Criteria and guidance for HS34

## Hygiene

Criteria for hygiene:

### In this section

- [HS1 - Premises and contents are safe and hygienic](#)
- [HS2 - Laundering](#)
- [HS3 - Nappy changing procedure](#)

## HS1 Premises and contents are safe and hygienic

### Criteria

#### Health and Safety practices criterion 1

[Premises](#), furniture, furnishings, fittings, equipment, and materials for the use of children attending are kept safe, hygienic, and maintained in good condition.

## Rationale/Intent:

The criterion aims to uphold the health and safety of children.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Equipment should be safe and suitable for its purpose and the age of children using it.

Hard surfaces should be kept clean and equipment or toys should be kept hygienic. Toys and materials that children put in their mouths should be cleaned at the end of each day with hot soapy water or put in the washing machine/dishwasher depending on the toy.

Nappy changing surfaces should be cleaned and disinfected after every nappy change.

## Things to consider

### Bleach as a Disinfectant

Bleach contains sodium hypochlorite, the chemical which kills bacteria and viruses. The Ministry of Health recommends that ECE services will need to use a disinfectant that has at least 2% hypochlorite. Supermarket bleach is labelled between 2-5% sodium hypochlorite.

To work properly bleach solution needs to:

Be used on a surface free of dirt/organic material

Be a strong enough concentration i.e. 0.1% (see table below). If there is visible contamination, then use a stronger 1:10 solution

Have enough time to kill the bugs (ideally 30 minutes contact time).

The solution should be disposed of at the end of the day. Made up chlorine solutions are often kept in spray bottles – the bottle needs to be cleaned daily as dirty hands touch it.

#### How to make up a 0.1% bleach solution

STRENGTH ON BOTTLE	BLEACH (ML)	WATER (ML)	TOTAL (ML)
1%	100	900	1000
2%	50	950	1000
3%	33	967	1000
4%	25	975	1000
5%	20	980	1000

## 'Eco' or 'natural' cleaners



There has been an increased interest in the use of 'green', 'eco', 'organic' or 'natural' cleaning products in ECE settings. Be aware that many of these products are suitable only for 'cleaning' surfaces by removing dirt, grease and grime, and not for 'disinfecting' surfaces to kill disease causing germs.

## HS2 Laundering

### Criteria

#### Health and Safety practices criterion 2

Linen used by children or adults is hygienically laundered.

##### Documentation required:

A [procedure](#) for the hygienic laundering (off-site or on-site) of linen used by the children or adults.

##### Rationale/Intent:

The criterion aims to ensure that inadequate laundering practices do not pose a health risk to children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Many items in a home based setting need prompt, regular washing. This should include bedding as well as towels, cloths, bibs and dress ups.

Educators will need to ensure there is a good supply of linen on hand to cover any potential shortage.

##### Documentation Guidance:

The procedure should state:

What items should be laundered and how often

Who does the laundering

Are different types of laundry washed separately to prevent cross infection e.g. kitchen and bathroom linen separated from bedding linen for example?

If the washing is done at the home of the Educator, that it is done as a separate load to the household wash

That Regional Public Health Service recommends that all washing is done in hot water with an adequate amount of laundry detergent.

For more information see [Chapter 9 of the Ministry of Health Environmental Health Protection Manual](#) [PDF, 588 KB].

### Things to consider

Items to be laundered include but are not limited to:

bedding

bibs

dress-up clothes

fabric play items

towels use for children if they become messy or wet whilst at the service

cloths used for art and messy play.

## HS3 Nappy changing procedure

### Criteria

#### Health and Safety practices criterion 3

A procedure for the changing (and disposal, if appropriate) of nappies is consistently implemented.

##### Documentation required:

A procedure for the changing (and disposal, if appropriate) of nappies.

The procedure aims to ensure:

safe and hygienic practices; and

that children are treated with dignity and respect.

##### Rationale/Intent:

The criterion aims to maintain general hygiene and children's safety and wellbeing.

### Downloads

[Home-Based Nappy Changing Procedure](#) [DOC, 32 KB]

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A nappy changing procedure helps communicate a service's expectations about this important care routine to parents/whānau and educators.

Educators may wish to keep a record of nappy changes for parent's information.

Procedures can be developed in a way to facilitate discussion between co-ordinators, educators, and family/ whānau about expectations and responsibilities in each home setting.

## Documentation Guidance:

A nappy changing procedure could include :

Who provides the nappies – the parents or the educator?

How often are children’s nappies checked/changed?

What hand washing practices are used? If relevant, what practices are used when wearing disposable gloves?

How is the nappy changing area cleaned and disinfected? When/how often?

How does the Educator interact with children when changing nappies?

How are children kept safe from falls or other hazards?

How are other children at the home supervised when the educator is changing a nappy?

How is ‘solid waste’ disposed of?

Are soiled nappies stored and disposed of or given to parents to take home for disposal?

If relevant, how are potties stored, used and cleaned?

A sample procedure template is given [Home Based Nappy Changing Procedure](#) [DOC, 32 KB].

For more information, see [PF17 – Nappy change facilities](#).

## Things to consider

Services should consider children with additional needs.

Older children in nappies need to be encouraged to be as independent as possible:

In accessing any changing area/table

Dressing themselves

Drying themselves

In decisions around when nappies are changed.

Consider what options to provide where there is a risk of injury to staff (such as lifting heavy or tall children).

Use the lens of Te Whāriki to review the nappy change procedure, for example:

How are children empowered in this routine / care moment?

How is independence fostered?

How are reciprocal and responsive relationships fostered? i.e. talking to the child about what is happening

Is nappy changing an unhurried care moment versus a ‘routine’?

## Emergencies

Criteria for Emergencies:

## In this section

- [HS4 -Emergency plan and supplies](#)
- [HS5 -Assembly areas safe](#)
- [HS6 -Securing furniture](#)
- [HS7 -Emergency drills](#)

## HS4 Emergency plan and supplies

### Criteria

#### Health and Safety practices criterion 4

There are a written emergency plan and supplies to ensure the care and safety of the children and educator at the home and when away from the home. The plan must include evacuation procedures that apply in a variety of emergency situations and that are relevant to the home.

□ The written emergency plan must also include out-of-school care children if out-of-school care is being provided in the home.

If the home is in a building that has an approved Fire Evacuation scheme, the evacuation procedures must be consistent with that scheme.

#### Documentation required:

A written emergency plan that includes at least:

An evacuation procedure for the premises.

A list of safety and emergency supplies and resources sufficient for the age and number of children and adults present in the home and details of how these will be maintained and accessed in an emergency.

A communication plan for families and support services.

Evidence of review of the plan on an, at least, annual basis and implementation of improved practices as required.

#### Rationale/Intent:

The criterion aims to uphold the safety of children by ensuring that the premises have an adequate plan for evacuating children in the event of fire or another emergency. The criterion also aims to ensure that adults at the service have the necessary knowledge and supplies to deal with other emergency situations.

*Amended November 2016*

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

### Emergency Plan

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Home-based service providers and educators will need to work together to ensure there is a plan developed for dealing with emergencies.

If the home does not have a landline, the educator will need to ensure they have a means of accessing appropriate help and support.

The evacuation procedure must cover all emergency situations. The service provider is responsible for ensuring there is a procedure for each home.

Educators must think about the possible emergency situations they might encounter in the home. Preparing for an emergency situation is an important part of the induction process that the co-ordinator carries out with each educator.

In an emergency situation, the educator (as the only adult nearby) often needs to deal directly with emergency service personnel when they arrive at the scene. This makes it very important to have an evacuation procedure and to have a safe place for children to wait while the emergency is dealt with. For more information see [HS5 - safe assembly areas](#).

It may be more difficult to evacuate children from homes that are not at ground level in the event of an emergency. Your evacuation procedure will need to identify ways to mitigate this. Additional guidance is available specifically for services above ground level, we recommend you read [Guidance for ECE Services - Evacuation from High Rise Buildings](#) [PDF, 394 KB]

If the home is in a building with other tenants there will be a fire evacuation scheme approved by the Fire and Emergency New Zealand that applies to the whole building and all tenants, and this is the responsibility of the building owner.

The National Emergency Management Agency have a [What's the Plan Stan website](#) which focuses on helping children prepare for an emergency and a special section which aims to support educators to develop children's knowledge, skills and attitudes to respond to and prepare for an emergency.

The National Emergency Management Agency and the Ministry of Education have produced a template that can be used for planning for a variety of emergencies. Ministry of Education's [Emergency Management Plan template](#) [DOC, 759 KB].

## Emergency Supplies

Educators should have emergency supplies on hand in the home. If providing out-of-school care:

the emergency plan needs to include how all children in the home will be safely evacuated at the same time  
school aged children must not be expected to help carry non-walking children or be responsible for evacuating ECE children  
the emergency supplies in the home should be sufficient to also provide for the older children who are also present in the home.

## HS5 Assembly areas safe

### Criteria

### Health and Safety practices criterion 5

Designated assembly areas for evacuation purposes outside the building keep children safe from further risk.

**Rationale/Intent:**

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The criterion aims to uphold the safety of children by ensuring that assembly areas do not place children in further danger - on a main highway for example. The criterion is also based on the assumption that a safe assembly area is more likely to result in regular drills being carried out.

*Amended May 2015*

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

In an emergency situation, the educator (as the only adult nearby) often needs to deal directly with emergency service personnel when they arrive at the scene. This makes it even more important that there is a safe place for children to wait while the emergency is dealt with. Young children often behave erratically when scared or distressed, and educators need to reduce stress (for themselves, as well as for the children) in these situations as much as possible.

Parents need to be informed where the evacuation point will be so they will know where their children will be.

The National Emergency Management Agency and the Ministry of Education have produced a template that can be used for planning for a variety of emergencies.

[National Emergency Management Agency](#)

Download the [Emergency Management Plan template](#) [DOC, 759 KB].

## HS6 Securing furniture

### Criteria

#### Health and Safety practices criterion 6

Heavy furniture, fixtures and equipment that could fall or topple and cause serious injury or damage are secured.

#### Rationale/Intent:

The criterion aims to uphold the safety of children.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

In all areas of the home, large and heavy items of furniture, equipment and appliances such as pianos, free standing fridges and stoves should be secured to the structure of the building. Check the strength of the wallboards and follow manufacturers' instructions.

Other home appliances such as televisions, stereos or microwave ovens should be secured with industrial Velcro or non-slip mats. See the [EQC](#)

[website for more information.](#)

Lighter things such as books and blocks can also cause injury if they fall on children.

When deciding which objects to secure, consider the height of the shelf or table it is on. A television falling off a low stand could still injure an infant lying on the floor nearby.

Where possible place toy boxes and popular play equipment and resources away from the free fall zones of larger appliances and shelves as well as large glass areas.

## Things to consider

When securing these items, the following guidelines will be useful:

Always fasten to the structure of the building. Studs are fine, but wallboards may be too weak.

Make sure that the fastenings you use are strong enough to hold the weight of the heavy object. What will happen if it gets bounced up/down?

When you can, try to fasten objects near the top rather than at the bottom. If you cannot, then the fastenings at the bottom will need to be very strong. This is because of the leverage effect when something topples (a fridge for example).

## HS7 Emergency drills

### Criteria

#### Health and Safety practices criterion 7

[Educators](#) are familiar with relevant emergency drills and carry these out with all children present in the home on an at least three-monthly basis.

##### Documentation required:

A record of the emergency drills carried out and evidence of how evaluation of the drills has informed the annual review of the service's emergency plan.

☐ For services providing out-of-school care the record must include evidence of drills performed with enrolled children and out-of-school care children at the same time.

##### Rationale/Intent:

The criterion aims to uphold the safety of children by ensuring that:

adults at the service have the necessary skills, knowledge and experience to deal with emergency situations;  
review of the service's emergency plan and evacuation procedures are part of the service's regular self review processes; and  
children are familiar with, and confident in, responding to emergency procedures.

*Amended November 2016*

### Guidance

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*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Research has shown that the factor that most contributes to reducing injuries and fatalities during any emergency evacuation is regular practice. This ensures that educators are familiar with procedures and that children also become familiar and comfortable with what is expected of them. Regular practice also ensures that any equipment relied on in an evacuation will be subject to regular checks, for example, any special equipment that might be used to assist in the evacuation of the non-walking children. It is also recommended that educators have a range of strategies available to manage any children whose behaviour has become disturbed during the evacuation.

The following activities will support you in ensuring that all adults are familiar with the evacuation procedures:

Training as part of new staff and educator's induction.

Regular refresher training for all staff.

Including emergency plans and procedures as a regular agenda item for meetings between educators and coordinators.

Communication with parents and families in newsletters or placing information on a website.

Educators should be able to talk confidently and knowledgeably about the procedures without needing to refer to any documentation:

They should be able to confidently identify the roles that they and others will play during an emergency evacuation.

They should be able to confidently and knowledgeably describe how children (walking and non-walking) will be managed during an evacuation.

They should be able to confidently and knowledgeably describe how they will deal with any unexpected circumstance that arises during an evacuation – i.e. respond to questions such as “How will you manage if any of your 3-4 year olds refuse to walk independently from the home?”

It is also important that the children are familiar and comfortable with the evacuation procedures. In addition to participation in regular trial evacuations, familiarity with emergency responses can be included as appropriate in the service's programme.

Educators are expected to have trial evacuations at least every three months. Evacuation drills should be organised to test a variety of emergency situations and scenarios. For example, practising earthquake drills one day and fire evacuation drills another.

If the home is providing out-of-school care, drills need to include both the enrolled children and older out-of-school care children to ensure everyone in the home knows what to do in an emergency situation and all children can be safely evacuated.

Older out-of-school care children must not be expected to help carry non-walking children during a drill, nor should they be responsible for the evacuation of ECE children.

If the home where the service is operating is located in an apartment building, the building will have regular fire drills. Apartment owners and/or tenants will be notified of these drills and they should inform the educator of any planned drill. During these drills, building alarms will sound and the educator will need to evacuate to the building's assembly area with all children present.

Additional guidance is available specifically for ECE services above ground level. We recommend reading this. [Guidance for ECE Services - Evacuation from High Rise Buildings](#). [PDF, 260 KB]

## **Documentation Guidance:**

Educators are required to keep a record of each trial evacuation. At a minimum, this should record:

The date and time

Number and ages of children and whether any are receiving out-of-school care

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Any other people present

Any issues identified and what actions were taken. e.g. a child tripped over toy on the floor and hurt their knee.

Keep the drill reports for two years.

Reviewing emergency plans and evacuation procedures should be a regular part of a service's self review. Co-ordinators should discuss the drill reports with the educators. If any changes are required to your evacuation procedures, these should be noted promptly in your evacuation plans and any other documentation and notices updated. Remember also to communicate to all staff, family and others if you have made any changes.

## Sleep

Criteria for Sleep:

**In this section**

- [HS8 -Sleep monitoring](#)
- [HS9 -Sleep furniture spacing](#)
- [HS10 -Storage of sleep furniture and bedding](#)

## HS8 Sleep monitoring

### Criteria

#### Health and Safety practices criterion 8

A [procedure](#) for monitoring children's sleep is implemented, and information is communicated to parents about their child's daily sleep patterns.

**Documentation required:**

A procedure for monitoring children's sleep.

The procedure ensures that children:

do not have access to food or liquids while in bed; and  
are checked for warmth, breathing, and general well-being at least every 10-15 minutes (during day-time sleep), or more frequently according to individual needs.

**Rationale/Intent:**

The criterion aims to uphold the safety and wellbeing of children while they are sleeping, and minimise risk of harm.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Educators need to implement a procedure for monitoring children's sleep and keep a record of children's sleep times.

## Documentation Guidance:

A documented sleep procedure ensures that there is a consistent approach by educators to monitor the safety and wellbeing of children while sleeping. It will clearly outline the roles and responsibilities of the educator when children are sleeping.

If the child is sleeping in a room positioned reasonably close to where other children are playing, it is easier for the educator to regularly check children.

Keeping a record of sleeping times and checks by educators will ensure that parents have access to information about their child's sleeping patterns each day while they are in the care of the educator.

Keep the sleep records for the current year plus one additional year.

It demonstrates the fulfilment of the service's duty of care; that children have been suitably monitored while sleeping to ensure their safety and wellbeing while in the care of the service. Co-ordinators should check the monitoring of sleeping times.

If ever a dispute were to arise between a parent and service regarding the care of their child around sleep, it would be useful for the service to be able to refer the parent to the documented procedure to demonstrate that good practice occurred.

## Things to consider

The use of technology does not reduce the requirement to physically enter the room and check on the sleeping child at least every 10-15 minutes and record these checks.

Issues that should be considered when using sleep monitoring technology in addition to the physical checks include:

- privacy and the collection of images and recordings
- maintenance of technology and associated batteries
- training in operation of technology
- testing accuracy and responsiveness of the technology
- circumstances where the technology will not be appropriate e.g. power cuts, child is unwell; and
- the agreement of the parents and/or guardians involved.

## HS9 Sleep furniture spacing

### Criteria

## Health and Safety practices criterion 9

Furniture or items intended for children to sleep on (such as cots, beds, stretchers, or mattresses) are arranged and spaced when in use so that:

- adults have clear access to at least one side (meaning the length, not the width);
- the area surrounding each child allows sufficient air movement (to minimise the risk of spreading illness); and
- children able to sit or stand can do so safely as they wake.

### Rationale/Intent:

The criterion aims to ensure that sleeping provisions are arranged so that they do not present a hazard to children's safety and wellbeing.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria*

Allowing plenty of space between sleeping children will enable good air flow, limiting cross infection and children disturbing others. Sleep areas must be well ventilated to allow air to circulate.

The space between sleep furniture/items needs to allow the educator to easily check on children, ensure they are not too hot or cold, and check their breathing and enables the educator or other adults to move between them quickly in an emergency.

If children are capable of standing up in their cot or bed, ensure that there are no choking hazards within reach e.g. curtain cords.

## Things to consider

Consider using more than one room in the home to have children sleeping if this is possible. It can be difficult to provide undisturbed sleep for a child if other children in the same room are unsettled.

# HS10 Storage of sleep furniture and bedding

## Criteria

### Health and Safety practices criterion 10

If not permanently set up, furniture or items intended for children to sleep on (such as cots, beds, stretchers, or mattresses) and bedding is hygienically stored when not in use.

### Rationale/Intent:

The criterion aims to prevent cross-infection by ensuring that sleep provisions used periodically (i.e. not permanently set up) are hygienically stored when not in use.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria*

Furniture such as cots, beds, stretchers or mattresses and bedding that is used periodically needs to be hygienically stored when not in use to prevent cross-infection. Spraying and wiping cots, beds and mattresses with a suitable cleaning agent is needed before storage. Linen must be removed from the mattresses and not stacked in between mattresses.

If bedding is to be used for the same child over the course of a week it could be either labelled with the child's name or in a labelled bag.

There will need to be adequate hygienic storage for this purpose. You will also need to ensure that the storage does not create hazards to children **but is easily accessible to the educator**. For bedding, this could be in the linen cupboard.

Areas used for storage of sleep furniture should be dry and well aired.

## Hazards and outings

Criteria for Hazards and Outings:

### In this section

- [HS11 - Hazard management](#)
- [HS12 - Noise levels](#)
- [HS13 - Animals](#)
- [HS14 - Excursions](#)
- [HS15 - Travel by motor vehicle](#)

## HS11 Hazard management

### Criteria

#### Health and Safety practices criterion 11

Equipment, premises and facilities are checked on every day of operation for hazards to children. Accident/incident records are analysed to identify hazards and appropriate action is taken. Hazards to the safety of children are eliminated, isolated or minimised.

Consideration of hazards must include but is not limited to:

cleaning agents, medicines, poisons, and other hazardous materials;  
electrical sockets and appliances (particularly heaters);

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hazards present in kitchen or laundry facilities;  
vandalism, dangerous objects, and foreign materials (e.g. broken glass, animal droppings);  
the condition and placement of learning, play and other equipment;  
windows and other areas of glass;  
poisonous plants; and  
bodies of water.

## **Documentation required:**

A documented risk management system.

## **Rationale/Intent:**

The criterion aims to uphold the safety of children by ensuring that services have a mechanism to assess and address environmental hazards in an ongoing way.

*Amended May 2016*

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A key aspect of promoting the health and safety of everyone in the home-based setting is hazard and risk management.

A hazard is a situation or thing that has the potential to cause death, injury or illness to a person.

Risk is the likelihood that death, injury or illness might occur when a person is exposed to a hazard. Risks must be managed by taking action to eliminate them, and if that is not reasonably practicable, minimising or isolating them. Eliminating a hazard will also eliminate any risks associated with that hazard.

It is important that the service provider and educator assesses and understands the hazards and risks and hazards that are relevant to the environment of each home. To start this assessment there is a [sample list of Potential Hazards](#) [DOC, 156 KB].

Water temperature is one of the most common hazards educators will need to manage in the home setting. An educator should never let a child come in contact with water until it has been checked by hand.

Any potentially harmful substances or materials must be made inaccessible. This will include cleaning products and medicines, but may also include face, body and/or hair products used by other members of the family.

Hazards and risks must also be managed on any excursion outside the home. [See HS14 for more guidance.](#)

In order to meet this criterion services can use a daily check sheet. Any hazards found should be documented and eliminated, isolated or minimised.

## **Supervision**

Supervision is an essential component of hazard and risk management in a service. Supervision must be active and focussed.

The type of supervision required depends on the layout of the premises, activities being undertaken, equipment being used, the ratio of adults to children, and the number, ages and needs of children.

Direct, close and constant supervision by teachers, educators and kaiako will be required if an activity includes an element of risk. For example, climbing, cooking, using ropes, cords or tools of any kind or activities near water.

Ensuring children do not have unsupervised access to hazardous equipment such as ropes, cords and tools is a key aspect of supervision. Access to any hazardous equipment must be closely monitored.

Teachers, educators and kaiako should guide children on how to use equipment appropriately and safely.

Knowing children's interests and abilities will assist teachers, educators and kaiako to anticipate children's play. Anticipating what children might do next will help teachers, educators and kaiako support children if challenges or difficulties arise, and intervene if there is potential danger. To ensure risk is minimised or eliminated, teachers, educators and kaiako should guide children's behaviour and approach to play when necessary.

If an activity poses a risk, teachers, educators and kaiako will use their professional judgement to ensure that the right kind of supervision can be provided. If close supervision cannot be provided for an activity which requires it, then teachers, educators and kaiako should encourage children to modify their activity, or defer it until the appropriate level of supervision can be provided.

Teachers, educators and kaiako should have regular conversations about how play is supervised in their own setting.

There is a supervision criterion which all home-based services must meet. Refer to [HS34 for requirements and guidance](#).

## Health & Safety at Work Act 2015 (HSWA)

Services must comply with the standards set in the licensing criteria as well as the requirements of the HSWA and its regulations. [Additional guidance about the HSWA](#) is available for early learning services.

## Documentation guidance

Your hazard and risk management system is likely to be made up of two main processes:

- Documented daily hazard checks – inside and out

- Regular risk review – your risk register should be updated whenever new information comes available, and reviewed on an annual basis.

Keep the hazard and risk checklists for the current year and the preceding year.

[DOCX, 17 KB]

[PDF, 51 KB]

[DOC, 156 KB]

Below are some additional sources of information for support around risk management:

## Things to consider

Consider a sequential approach to hazard and risk management. For example:

- Identify hazards and risks.

Assess the likelihood and impact of identified risks.

Respond to hazard or risk – what will be done, when, by whom?

Monitor and review hazard and risk management system and practices.

Issues to consider in developing a hazard and risk identification and management system to ensure hazards are assessed and addressed in an ongoing way are:

How hazards and risks will be identified?

How processes for updating the identification of hazards and risks on a regular basis will be updated?

If a hazard is identified, how it will be eliminated, isolated or minimised? When will it be done? Who is responsible for this?

What opportunity is there for educators, teachers and kaiako to contribute to hazard and risk management systems, processes and practice?

How will visitors to the service be informed about identified hazards?

How is the maintenance of premises and equipment documented, managed and budgeted for?

How are maintenance issues communicated to the person responsible or governance committee for any repairs or replacement?

How are the service's hazard and risk management checklists reviewed and used to inform the service's management and practice, eg supervision, maintenance, repairs?

## HS12 Noise levels

### Criteria

#### Health and Safety practices criterion 12

All practicable steps are taken to ensure that noise levels do not unduly interfere with normal speech and/or communication, or cause any child attending distress or harm.

#### Rationale/Intent:

The criterion aims to uphold the health and wellbeing of children by ensuring that steps are taken, when necessary, to manage high noise levels in day-to-day operation (as in the case of ongoing construction next to the service).

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Managing noise levels will benefit everyone in the home. Establish expectations with children about what is an acceptable level of noise inside.

You can create quieter spaces for children simply by using low partitions that children can snuggle up against, especially with a few cushions around, and carpet or rugs to sit on.

Beware of environmental noise from outside the home such as road works or construction nearby and try to ensure that negative effects are

reduced where possible. If possible, the educator should attempt to ascertain the length of time the noise might occur and if appropriate make contingency plans:

When might it be appropriate to temporarily relocate the children to another educator's home?

How would parents/whānau be consulted or advised?

## HS13 Animals

### Criteria

#### Health and Safety practices criterion 13

Safe and hygienic handling practices are implemented with regard to any animals. All animals on the premises are able to be restrained.

##### Rationale/Intent:

The criterion aims to ensure that animals kept by the service do not pose a health risk to children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Children and adults who handle animals need to practice sound hand washing procedures afterwards.

Pets kept in home-based settings need their habitats to be cleaned and maintained as required depending on the needs of the animal, and children supervised when interacting with them.

If there are pets in the home, the outdoor area of the home-based setting will need to be regularly checked for animal droppings and these removed.

Educators will need to ensure that animals including those brought to the home can be properly restrained at all times. This could include some guidance on:

where dogs brought at pick-up and drop-off should be tied e.g. not immediately at the gate where children are passing

what happens if a sight impaired family member of a child attending the service has a guide dog

having a separate fenced off exercise area where dogs can be removed to if necessary.

### Things to consider

Where the home is located at a rural property with farm animals, the educator will need to be aware of any animals in the vicinity of the home and ensure children are supervised when interacting with them.



## HS14 Excursions

### Criteria

#### Health and Safety practices criterion 14

Whenever children leave the [premises](#) on an [excursion](#):

assessment and management of risk is undertaken;  
a supervision plan specific to the excursion is developed and implemented  
parents have given prior written approval of their child's participation;  
for regular excursions at the time of enrolment; and  
for special excursions prior to the excursion taking place; and  
there are communication systems in place so that people know where the children are and the educator can communicate with others as necessary.

#### Documentation required:

A record of excursions that includes:  
the names of adults and children involved;  
the time and date of the excursion;  
the location and method of travel;  
the excursion supervision plan  
assessment and management of risk;  
evidence of parental permission for regular excursions at the time of enrolment; and  
evidence of parental permission for special outings or excursions.

#### Rationale/Intent:

The criterion is underpinned by an understanding that excursions outside of the home are a vital aspect of the home-based service curriculum. There are inherent risks involved for any outing or excursion which need to be managed to uphold the safety and wellbeing of children.

*Amended November 2016*

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The responsibility for the assessment of risk for any excursion lies with the service, and parents should give written approval to the excursion and the proposed ratios.

#### Risk Assessment:

For **regular excursions**, the risk assessment can be a new plan or an update of a previous assessment so any new risks are identified. The potential risks are more likely to be known to, and easily managed by, the service provider as part of their routine involvement and presence in the

community.

A **special excursion** requires a specific risk assessment and development of a management plan prior to the excursion because the environment and circumstances in which these occur will be different each time.

## Supervision on excursions

Extra diligence is required by educators to ensure children are closely supervised during excursions. Advance planning of the destination, transport, meals and toilet breaks will help to identify potential hazards and to determine the level of supervision required.

Children can be closely monitored by regular head counts throughout the excursion and by ensuring the educator remains in close proximity to the children.

If the excursion involves activities in or near water, additional supervisory precautions will be required. This means educators should have constant visual contact and be in close proximity to children at all times. If educators need to move away from the area they should take all children away from the water.

## Documentation Guidance:

Written approval for regular excursions may be obtained via a signature on the Enrolment Form, provided the information also informs parents of the planned adult: child ratio.

Permission for special excursions needs to be sought for each excursion.

## Supervision Plan

Supervision plan should include:

Whether the educator will need to get parent help or the help of another adult

What the appropriate ratios are (for example is the excursion going to be near water?)

A contact person who can respond and assist easily if any unforeseen incident occurs? (eg available to ring ambulance, talk with police etc)

How transitions will be managed to/from the destination including from vehicles/transport and any parking area.

How frequently head counts/roll checks will be made during the excursion.

The plan should also include any additional supervision that may be required to address risks identified in the risk assessment process.

To assist you in planning and documenting your excursions, some sample documents are provided below. These can be altered to suit your service's needs:

[DOCX, 19 KB]

[DOCX, 20 KB]

[DOCX, 20 KB]

## Things to consider

## Things to take

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The following are useful things to take on an excursion:

A list of all children plus their emergency contact details in case of any accident of emergency. Use this to take periodic roll checks when on a combined outing with other educators and children

First aid kit. Consider carrying some bags in case of travel sickness, and some portable instant ice-packs

Personal medication for any of the children – inhalers, epi pens etc. Also take any personal medication that is needed for any accompanying adults and the educator

Cell phone – with number for the destination or venue and a contact number for the co-ordinator

Sun protection. Rain wear if needed

Books or other items to entertain children if there are any delays

Drinking water for all children and adults

Spare clothing.

## Transport considerations

When using private vehicles consider how the following will be checked:

All drivers must have a current full New Zealand driver's licence.

Each vehicle must be registered and have a current warrant of fitness.

All private vehicles must have the appropriate safety restraints for adults and children in accordance with the NZ Transport Agency regulations.

See this fact sheet for more details: [Go to the .](#)

How will the educator manage getting equipment (such as buggies) and children safely in and out of the car?

## HS15 Travel by motor vehicle

### Criteria

### Health and Safety practices criterion 15

If children travel in a motor vehicle while in the care of the service:

each child is restrained as required by Land Transport legislation; and  
the written permission of the of the child is obtained before the travel begins.

#### Documentation required:

Evidence of parental permission for any travel by motor vehicle.

In most cases, this requirement will be met by the [excursion records](#) required for [criterion HS14](#).

## **Rationale/Intent:**

The criterion aims to uphold the safety of children while travelling in motor vehicles. Linking the restraint of children to licensing requirements allows Ministry of Education to put a regulatory intervention in place for non-compliance, as opposed to fines given by Police. Parental permission would most likely be gained from parents upon enrolment, as children in Home-based services are in vehicles much more regularly than children in Centre-based services.

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

If there are not sufficient child restraints or cars/vans available for any excursion, then other transport options will need to be considered.

Ensuring children are properly restrained according to traffic law while travelling in a car is a bare minimum requirement.

Taxis and shuttles have different legislated requirements for child restraints. Children travelling in taxis should be restrained as if they were in a private car or van.

If the service provides regular transport (outside of enrolled and licensed hours), accountability is agreed in writing between parents and the service.

ECE services should employ “best practices” and have procedures in place that focus on health and safety, such as:

Who the adults will be – including any qualifications (teaching, first aid), if they have been police vetted/safety checked

Appropriate adult:child ratios

Supervision arrangements

Alternative arrangements if parents are not at home when children are to be dropped off

Sign-in procedures

Parental permission upon enrolment.

[Find out more information on Transporting children to and from ECE services and kōhanga reo.](#)

## **Things to consider**

Other things you might like to consider when arranging travel in motor vehicles include:

Do all the vehicles have current registration and warrants of fitness?

Are you certain that all drivers have a current full New Zealand driver’s licence?

All private vehicles must have the appropriate safety restraints for adults and children in accordance with the NZ Transport Agency regulations.

See this fact sheet for more details: [Go to the NZTA website.](#)

What would the educator do if the parent’s car seat is not compliant?

More information is available from the [NZ Transport Agency website.](#)

## **Food and drink**

Criteria for food and drink:

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## In this section

- [HS16 - Food and nutrition](#)
- [HS17 - Food hygiene](#)
- [HS18 - Drinking water](#)
- [HS19 - Supervision while eating](#)
- [HS20 - Bottle Feeding](#)

## HS16 Food and nutrition

### Criteria

#### Health and Safety practices criterion 16

Food is served at appropriate times to meet the nutritional needs of each child while they are attending. Where food is provided by the service, it is of sufficient variety, quantity and quality to meet the nutritional and developmental needs of each child. Where food is provided by parents, the service encourages and promotes healthy eating guidelines.

#### Documentation required:

A record of all food served during the service's hours of operation (other than that provided by parents for their own children). Records show the type of food provided and are available for inspection for 3 months after the food is served.

#### Rationale/Intent:

The criterion aims to uphold the health, safety and wellbeing of children by ensuring the service meets their nutritional needs or alternatively encourages parents to do so. Requirement to keep records for 12 months has been reduced to 3, as this is considered to be a more useful minimum period of time. Record-keeping requirements serve two purposes;

- a) to demonstrate compliance with the criterion; and
- b) to provide useful information in the event of any allergic reactions that may develop in children attending.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

#### Food is served at appropriate times to meet the nutritional needs of children while they are attending

Services may have set mealtimes or have "rolling kai", i.e. that children are able to eat when they are hungry. It is important to ensure whichever practice is followed:

food is available for tamariki when they are hungry; and children are supervised and seated while eating (); and there is a place set aside for the children to sit and eat ().

## **Where food is provided by the service, it is of sufficient variety, quantity and quality to meet the nutritional and developmental needs of each child**

It is important to engage with whānau when determining the food to serve to tamariki that is of sufficient variety, quantity and quality to meet the nutritional and developmental needs of each child.

The Ministry of Health provide guidance which classifies foods based on their nutritional value with colour codes in the [Healthy Food and Drink Guidance](#). The Ministry of Health have determined that healthy options (Green) should make up at least 75 percent of foods and drinks served at early learning services. For children under two years of age, all food and drink provided should be green.

The Ministry of Education would consider services to be in breach of this criteria if for example:

services prepared foods for 4-6-year old's in accordance with the Ministry of Health guidance for 1-3-year old's for the sake of efficiency; or services disregard the individual needs of tamariki who were not developing in accordance with expected range of development in small children; or healthy options make up less than 75 percent of foods and drinks served.

## **Where food is provided by parents the service promotes and encourages healthy eating guidelines**

Services may choose to develop a Healthy Food and Drink Policy with whānau.

Services may provide the [Healthy food and Drink Guidance](#) to whānau at the time of enrolment. The Guidance may be provided in hard copy, electronically, or via an electronic link for whānau with internet access.

Services may display posters which encourage healthy foods and demonstrate how to prepare foods to meet the developmental needs of tamariki.

### **Documentation:**

Where a service provides food, a record of the daily menu outlining the ingredients will meet this requirement. Menus are required to be specific in case of an unexpected allergic reaction. For example, what type of fruit or the contents of a sandwich must be recorded to satisfy this requirement.

If food is provided by parents for a shared lunch a list of all food provided is required to meet this requirement

Keep the records of food served for 3 months.

### **Things to consider**

[The NZ Heart Foundation](#) has information on their free Healthy Heart Award programme which provides structure and guidance around all aspects of food and nutrition. This includes multilingual lunchbox resources, policies, sample menus and resources to engage whānau and professional development for staff.

## HS17 Food hygiene

### Criteria

#### Health and Safety practices criterion 17

Food is prepared, served, and stored hygienically.

#### Rationale/Intent:

The criterion aims to uphold the health and safety of children by ensuring hygienic practices occur in regard to food.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Basic food hygiene is important to avoid outbreaks of food-borne illness in home-based services.

There should be enough fridge space to store chilled foods – including milk and yoghurt provided by parents for infants and children.

Where children are involved in food preparation on a regular basis for consumption by others, food hygiene practices must be maintained and children supervised and provided with guidance around not eating the food and discarding dropped items. There should be utensils provided for children to use and appropriate surfaces should be used.

If children are eating outside, the educator should encourage children to:

- sit on a mat or at an outside table;
- eat from a lunchbox or plate;
- discard any dropped food; and
- have a means of washing or wiping their hands.

For more information on the preparation and storage of infant formula, refer to the guidance for [HS20 - Bottle Feeding](#).

Under the Food Act (2014), home-based educators who prepare and serve food for the children in their care must ensure the food they provide is safe and suitable.

The Ministry of Primary Industries has developed some [Food Safety guidance and fact sheets](#) for services, as well as providing [tips for food safety](#).

## HS18 Water supply

### Criteria

#### Health and Safety practices criterion 18

An ample supply of water that is fit to drink is available to children at all times, and older children are able to access this water independently.

#### **Rationale/Intent:**

The criterion aims to uphold the health and safety of children by ensuring they have access to a safe drinking water supply. Requirement for independent access is based on evidence that self-access to water enables children to maintain an adequate level of hydration.

#### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Good access to an ample supply of water that is fit to drink needs to be provided for children attending. Older children need to be able to access this water independently.

There are different ways this could be achieved, depending on the age of the children attending the home. These include:

using individually marked water bottles or sipper cups. Water bottles or sipper cups will need to be emptied and washed daily making a water jug and individual cups available for children to pour their own water.

Guidelines concerning the provision of potable (drinkable) water should be available from your District Health Board.

#### **Things to consider**

Homes in rural or isolated areas that are not on a town water supply and use springs, bores or water tanks need to ensure that the water is fit to drink.

There are a number of resources available on the safety of household water from water tanks and bores.

## **HS19 Supervision while eating**

### **Criteria**

#### **Health and Safety practices criterion 19**

Children are supervised and seated while eating.

Where food is provided by the service, foods that pose a high choking risk are not to be served unless prepared in accordance with best practice as set out in Ministry of Health: Reducing food-related choking for babies and young children at early learning services.

Where food is provided by parents, the service promotes best practices as set out in Ministry of Health: Reducing food-related choking for babies and young children at early learning services and must provide to all parents at the time of enrolment a copy of Ministry of Health: Reducing food-related choking for babies and young children at early learning services.



## **Rationale/Intent:**

The criterion aims to uphold the safety of children by minimising the risk of children choking while eating unsupervised.

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

### **Children are supervised while eating**

In this criterion, supervised means an adult is assigned to oversee children while they are eating to ensure attention is on the children and not on completing other tasks. The adult assigned must be in close proximity to the children who are eating and know how to respond if a child is choking or has an adverse reaction.

The [Response - if a child is choking](#) outlines the appropriate response if a child is choking.

### **Children are seated while eating**

Seated means that children's weight is supported by their buttocks rather than their feet and their back is upright.

Where practical it is preferable that children are seated in a chair with their food directly in front of them to prevent the child needing to twist to the left or right, which can cause them to lose control of the food in their mouth.

### **Where food is provided by the service**

Foods that pose a high choking risk to children must not be served unless prepared in accordance with the [Ministry of Health Guidance](#). This guidance outlines foods that should be excluded from services and how to alter other high-risk foods for different age groups, i.e. for one to three years old, and four years up to six years.

[Eating for Healthy Babies and Toddlers](#) outlines how to prepare foods for newborns to one-year olds.

### **When food is provided by parents**

Services must provide a copy of the [Ministry of Health Guidance](#) at the time of enrolment and should record on the enrolment form that this information has been provided and understood by parents.

Services must promote the Ministry of Health Guidance and may demonstrate compliance by developing formal policies and procedure in partnership with whānau ([GMA3- Parent Involvement](#)).

Any policy could include actions the service will take and how they will communicate with whānau if food is provided that is not prepared in accordance with the Ministry of Health Guidance and the service does not consider it to be developmentally appropriate for that child.

### **Things to consider**

How can educators support children's safety while they are eating? e.g. making sure there are not too many distractions?

How do children learn what is expected of them while eating? e.g. to remain seated until they have finished eating?

How can educators support children's learning while I am supervising their eating?

If the educator provides the food:

Selecting appropriate food for individual children is very important in minimising choking risk. It is important to discuss with a parent or caregiver the foods children can manage safely rather than relying on age alone as the indicator.

Be aware of foods which are more likely to cause choking:

small hard foods that are difficult for children to bite or chew (eg, nuts, large seeds, popcorn husks, raw carrot, apple, celery)

small round foods that can get stuck in children's throats (eg, grapes, berries, raisins, sultanas, peas, watermelon seeds, lollies)

foods with skins or leaves that are difficult to chew (eg, sausages, chicken, lettuce, nectarines)

compressible food which can squash into the shape of a child's throat and get stuck there (eg, hot dogs, sausages, pieces of cooked meat, popcorn)

thick pastes that can get stuck in children's throats (eg, chocolate spreads, peanut butter)

fibrous or stringy foods that are difficult for children to chew (celery, rhubarb, raw pineapple).

To reduce the risk of choking on these foods the educator can:

alter the food texture – grate, cook, finely chop or mash the food

remove the high risk parts of the food – peel off the skin, or remove the strong fibres.

## HS20 Bottle Feeding

### Criteria

#### Health and Safety practices criterion 20

Infants under the age of 6 months and other children unable to drink independently are held semi-upright when being fed. Any infant milk food given to a child under the age of 12 months is of a type approved by the child's parent.

#### Rationale/Intent:

The criterion aims to uphold the safety and wellbeing of children by ensuring they are not 'propped' and left unattended with a bottle. The criterion also ensures a basic level of nurturing behaviour towards infants. The second part of the criterion aims to uphold the health and wellbeing of children by ensuring that breastfed infants are not given infant formula without the knowledge and consent of parents and avoids children being given a type of infant formula that is known by the parent to cause an allergic reaction.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Infants or other children with special needs who may not be able to drink independently should not be "propped up" and left unattended as they can

move around or slide over which may lead to choking.

Parents and educators need to decide who provides any infant formula and bottles. If the educator provides the formula, parental approval of the brand/type is required before it is used. If the usual brand/type is unavailable, parental approval of any substitute is also required prior to its use.

It is good practice for the educator is consultation with the family needs to have a procedure for hygienic preparation of bottles including:

Sterilisation of bottles

Hand washing

Timing of preparation - as close as possible to feeding time

Following instructions for the formula (as different brands use different size scoops and volumes of water)

If storage of made up formula brought by parents is necessary, that it should only be kept in the refrigerator for a **maximum of four hours** past the time it is made up.

The Ministry of Health's health education resource - [Feeding your baby infant formula](#) contains useful information on using formula.

## Child health and wellbeing

Criteria for child health and wellbeing:

### In this section

- [HS21 -Room temperature](#)
- [HS22 -First aid qualifications](#)
- [HS23 -Response to Infectious Illnesses](#)
- [HS24 -Medical assistance and incident management](#)
- [HS25 -Medicine administration](#)
- [HS26 -Medicine training](#)
- [HS27 -Children washed when soiled](#)

## HS21 Room temperature

### Criteria

#### Health and Safety practices criterion 21

Rooms used by children are kept at a comfortable temperature no lower than 16°C (at 500mm above the floor) while children are attending.

#### Rationale/Intent:

The criterion aims to uphold the wellbeing of children.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Rooms used by children must be kept at minimum of 16°C at 500mm above the floor from the beginning of operating hours. This includes rooms used for sleeping and the toilet/bathroom.

It is important to note that this is a minimum requirement. Services may choose to keep rooms in their homes at a higher temperature.

WHO guidelines state a minimum of 18°C for residential living spaces. The criteria requirement is lower than this to allow for temperature fluctuations due to doors opening to allow children to move between indoor and outdoor spaces.

Educators should think about how they will minimise draughts especially at ground level where infants lie and crawl and children play.

Having a home too warm could lead to lethargy in children and adults.

The Guidance for [PF10 - heating, lighting and ventilation](#) provides options for efficient heating to ensure that rooms can be kept at a comfortable temperature, while ensuring the safety of children.

## HS22 First aid qualifications

### Criteria

#### Health and safety practices criterion 22

There is an adult present at all times while the children are attending who:

holds a current First Aid qualification gained from a New Zealand Qualification Authority accredited first aid training provider; or  
is a registered medical practitioner or nurse with a current practising certificate; or  
is a qualified ambulance officer or paramedic.

If access to first aid training is limited due to circumstances beyond the service provider's control, the service provider must ensure that educators have knowledge of first aid, and gain a first aid qualification within 4 months of starting work at the service.

If a child is injured, any required first aid is administered or supervised by an adult meeting these requirements.

#### Documentation required:

Copies of current first aid (or medical practising) certificates for adults counting towards this requirement.

Where access to first aid training for an educator is limited, a record of the actions taken by the service provider to ensure the educator has knowledge of first aid and achieves a first aid qualification within 4 months of starting work at the service

#### Rationale/Intent:

The criterion aims to uphold the safety of children by ensuring adults with the necessary skills and knowledge to deal with injuries and illness are

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present at all times and readily available.

*Amended May 2016*

## **Guidance**

### **First Aid Qualifications**

Information on the required first aid qualifications is available of the [First Aid page of this website](#).

This includes information on who to contact to have an international first aid qualification assessed to see if it meets requirements.

If access to first aid training is limited due to circumstances beyond the service provider's control, the service provider must ensure that educators have knowledge of first aid, and gain a first aid qualification within 4 months of starting work at the service.

To help services correctly apply this condition clause, [operational guidelines are available](#).

### **Documentation guidance:**

Where access to first aid training is limited, the service provider must record their decision to apply the condition, including:

their assessment of the educator's interim first aid knowledge; and  
the date of booked first aid training.

There is a [template](#) [DOCX, 24 KB] that services can use to record the required information.

The service provider must keep a copy of the educator's first aid certificate and ensure the certificate is kept up to date.

## **HS23 Response to Infectious Illnesses**

### **Criteria**

#### **Health and Safety practices criterion 23**

All practicable steps are taken to ensure that children do not come into contact with any person (adult or child) on the [premises](#) who is suffering from a disease or condition likely to be passed on to children and likely to have a detrimental effect on them.

Specifically, any child who becomes unwell while attending the service or receiving out-of-school-care is kept at a safe distance from other children (to minimise the spread of infection) and returned to the care of a parent or other person authorised to collect the child without delay.

☐ Out-of-school care must not be provided to children who are absent from school due to illness.

#### **Rationale/Intent:**

The criterion aims to uphold the health and safety of children by preventing undue exposure to disease or illness.

*Amended November 2016*

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

It is very common for early childhood services to have to deal with children experiencing different forms of illness. Some will be infectious; that is, spread from person to person. Other forms of illness do not spread and will only affect the child or adult who has the illness.

It is not always easy to tell when a child is becoming ill. They can react in a variety of ways – they can become confused, distressed, miserable, very quiet, or ‘clingy’.

It is also quite difficult to tell what has caused the illness and whether or not it is infectious. Familiarity with the information in [Appendix 2](#) of the criteria on infectious illnesses, incubation periods, symptoms, recommended exclusion times from attending the service etc will be helpful.

Home-based services must take steps to minimise the contact of children with any person who has an infectious illness.

When a child becomes ill at a home that is not their own, the sooner they can be taken home, the better. In order for them to be kept at a safe distance from other children at the home the educator will need a separate area for them that can be easily supervised whilst looking after other children attending. For more information see the guidance for [PF14 – Isolation Area](#).

When a child becomes ill in their own home, they will need to be isolated from other children in the home. The educator will need to consider either the other children being picked up or relocated to another educator’s home.

If there are out-of-school care children in the home, a similar process is required so they can be isolated from other children and collected as soon as possible.

It is a good idea for the educator and family(s) to agree when the child is enrolled what will happen when a child is ill or appears to be becoming ill. To enable timely contact, it is vital to have up-to-date contact information for the parents on children’s enrolment records.

Equally it is important to have a shared understanding of what will happen if the educator is sick or becomes ill whilst looking after children in the home.

A policy and procedure that covers exclusion for general or infectious illness for the home-based service will assist educators to make a decision about whether or not to exclude a child on the grounds of ill health – either on the spot or when parents have a doctor’s diagnosis.

[Regional Public Health produce a number of fact sheets on a variety of diseases.](#)

## Things to consider

### When should children stay away from the service?

In general children should stay away from an early childhood service when they are ill and causing concern or:

have no interest in activities or play

have little energy - want or need to sleep or rest for long periods  
cry easily, are irritable or in pain  
constantly want to be held and comforted, are 'clingy'  
have a fever  
have diarrhoea or vomiting.

## **What to do if children become ill while at the service**

Call their parents or emergency contact to either come home or collect them as soon as possible.

If the educator is at the child's home, the child may just want to be tucked into their usual bed.

If a child cannot go home immediately, keep them away from others, perhaps by making a bed up on a couch for them and get the other children involved in an activity as far away as practical while still being able to monitor the child

Give them plenty of clear fluids to drink (water). Keep them cool if there is a fever and warm if they are cold.

Assess the child's illness. If a parent or caregiver is not available and the child seems to be becoming more ill, arrange for the child to be seen by a doctor.

## **Preventing spread of illness to others**

If other children develop the illness, take a careful look at the hygiene and cleaning routines used at the home:

make sure everyone is washing their hands thoroughly before eating and after using the toilet and the educator after changing nappies

Wash children and wipe noses with disposable wipes or cloths that are used only once.

Check that cups and eating utensils are washed thoroughly in hot water.

## **What happens if the educator becomes ill?**

If an educator is looking after children in their own home and is ill or becomes ill while children are in their care, they should notify their co-ordinator. In consultation with parents, the children should be moved to another educator's home or sent home.

If an educator is working in the family's home and becomes ill while children are in their care, they should notify their co-ordinator and the child's parents.

## **HS24 Medical assistance and incident management**

### **Criteria**

#### **Health and Safety practices criterion 24**

All practicable steps are taken to get immediate medical assistance for a child who is seriously injured or becomes seriously ill, and to notify a parent of what has happened.

**Documentation required:**

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A record of all injuries, illnesses and incidents that occur at the service. Records include:

- the child's name;
- the date, time, and description of the injury, illness or incident;
- actions taken and by whom; and
- evidence that parents have been informed.

A procedure outlining the service's response to injury, illness and incidents, including the review and implementation of practices as required.

## **Rationale/Intent:**

The criterion aims to uphold the health and safety of children by ensuring that children who fall ill or are injured are given appropriate care.

*Amended May 2016*

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Injuries, illnesses and incidents can be a part of early childhood experiences. When a child becomes seriously ill or suffers a serious injury while in the care of the service, services must get medical assistance. This would usually be ringing for an ambulance or taking the child to see a doctor. It is always better to seek medical assistance if you are unsure of the extent of the injury or the seriousness of the illness than to risk the consequences of doing nothing.

## **Notifying Parents**

Educators must notify parents as soon as possible of the event, and be able to provide as much detail as possible about what happened, when, and what actions they took. Educators must also notify their co-ordinator or the service provider.

It is vital to have up-to-date contact information for the parents on children's enrolment records.

When informing parents by phone, ascertain where possible whether they have other adult support to deal with the event, e.g. support to look after other children, transport etc.

## **Notifying other agencies**

Some injuries, illnesses and accidents must be notified to specified agencies under separate legislation. Services should familiarise themselves with their wider obligations to notify these agencies.

The Ministry of Education must also be notified of such incidents. See [HS34 – Incident notification to the Ministry of Education](#).

[An injury and incident procedure flowchart is available for services to use.](#)

Under the Health and Safety at Work Act 2015, service providers must notify WorkSafe New Zealand if there is a notifiable event. Services should ensure that their health and safety practices are aligned to their obligations under other legislation.



## Documentation guidance

It is important that ALL injuries, illnesses and incidents are recorded, even if only minor injuries are sustained. This is for two reasons:

A very minor injury can sometimes become more serious after a period of time, e.g. a minor graze becomes infected and a child requires hospitalisation.

A pattern or trend in the occurrence of minor injuries may lead to awareness of the need to make changes at the service.

It does not matter who witnesses the incident – if the service is told of an incident by a visiting adult or parent this must be documented in the same way as if an educator witnessed the incident.

The record of injury, incident or illness that services must keep will also be of assistance to paramedics or the child's doctor if further assessment of the child's health is required.

You should keep the injury/illness/incident record for two years from the date of the incident.

For any injury/incident that is notifiable under the Health and Safety at Work Act 2015 (HSWA), it is a requirement to keep the records for five years from the date of the incident.

## Things to consider

Some issues to consider are:

If a child needs to go to hospital or the doctor, who will go with them and how will care be ensured for the other children at the home?

At what point are the child's parents/caregiver first notified about an accident or illness?

Children's allergies, particularly allergic reactions to medication and medical conditions that are caused by allergies.

Maintaining a list of allergies for children at the home, and ready access to the list and relevant medications in the event of an allergic reaction.

What do you do if the illness is contagious?

There may be costs associated with calling an ambulance. Services should plan in advance for this contingency.

## HS25 Medicine administration

### Criteria

#### Health and Safety practices criterion 25

[Medicine](#) (prescription and non-prescription) is not given to a child unless it is given:

by a doctor or ambulance personnel in an emergency; or

by the ; or

with the written authority (appropriate to the category of medicine) of a parent.

Medicines are stored safely and appropriately, and are disposed of, or sent home with a parent (if supplied in relation to a specific child) after the

specified time.

## Documentation required:

A record of the written authority from parents for the administration of medicine in accordance with the requirement for the category of medicine outlined in .

A record of all medicine (prescription and non-prescription) given to children attending the service.

Records include:

name of the child;

name and amount of medicine given;

date and time medicine was administered and by whom; and

evidence of parental acknowledgement.

## Rationale/Intent:

The criterion aims to uphold the health and safety of children by ensuring that children are given proper care, and that medication is not administered inappropriately by services.

*Amended May 2015.*

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Medicines must be stored out of the reach of children, but still be easily accessed by the educator if needed in an emergency. Some medicines may require refrigerated storage; services must ensure that children do not have unsupervised access to the kitchen or the fridge.

It is recommended that family medications and creams are kept separately from first aid supplies used by the educator in their role.

Educators must take note of the expiration dates of medicines, and ensure that they are not administering medicines that have passed their use-by date. Educator supplied medicines that have expired must be disposed of appropriately – check with a pharmacist about the best way to do this.

Parent-supplied medicines should be given to the parents for disposal.

The different categories of medicines have different parent authorisation requirements, as set out in [Appendix 2](#). For categories (i) and (iii), parent authorisation must be given at enrolment of the child at the service. Category (ii) medicines require daily parental authorisation. For category (i) medicines, services must be specific about what products they will use (including brand names).

The different categories of medicines also have different parent acknowledgement requirements. When category (i) and (ii) medicines are administered, the child's parent should acknowledge this on the medicines record sheet at the end of each day that the medicine is given. When the same dose of Category (iii) medicine is administered on a regular basis, parental acknowledgement may be obtained weekly or every three months.

When administering medicine check that the **right dose** (use a standard measuring syringe or spoon) of the **right medicine** is given to the **right child** (double-check the details on the label each time) at the **right time** (follow any instructions provided by parents or medical staff about this).

## **Documentation Guidance:**

### **Administration:**

Every educator must keep a record of all medicine (prescription and non-prescription) given to children when attending, regardless of whether it is administered by an educator or by the child's parent.

The record of medicine administered to children should be kept for 2 years.

Keeping a record of medicine administration demonstrates that the service has fulfilled its duty of care; that the child needing medicine has been given the right dose of the right medicine at the right time.

It is a useful record for both parents and medics in the event of a child experiencing an adverse reaction or sudden-onset illness.

The recording of category (i) medicines administered in relation to injuries as required by criterion HS22 will meet this requirement for those medicines.

### **Authorisation and Acknowledgement:**

The written authority for categories (i) and (iii) medicines is on the enrolment form so must be kept for 7 years. For category (ii) medicines, the written authority should be kept for as long as the child is receiving that medicine.

Parental acknowledgement of the medicine having been given to their child must also be recorded. Category (i) and (ii) medicines require daily parental acknowledgement, whereas parental acknowledgement may be obtained and recorded weekly or every three months for category (iii) medicines whose dosage does not change.

## **HS26 Medicine training**

### **Criteria**

#### **Health and Safety practices criterion 26**

Adults who administer medicine to children (other than their own) are provided with information and/or training relevant to the task.

#### **Documentation required:**

A record of training and/or information provided to adults who administer medicine to children (other than their own) while at the service.

#### **Rationale/Intent:**

The criterion aims to uphold the health and safety of children by ensuring that medication is given to children only by people with the necessary knowledge and skills.

### **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Educators need to feel confident and capable of providing the necessary support to children when they administer medication.

Because educators do not generally have medical training, some form of training or information is required so they can do this. First aid courses do not commonly cover the correct administration of medicine, so this will not usually be sufficient.

An example might be insulin injections for diabetics, EpiPens for anaphylactic shock, or the use of asthma inhalers with a spacer. Work together with the child's family to find the best way of providing the training needed for staff in these situations.

Training could be provided by any of:

- the parents
- the child's GP or practice nurse
- a public health nurse
- a pharmacist
- a foundation or society, e.g. asthma foundation

For common medicines that are administered by mouth (such as antibiotics), the level of information needed will be minimal:

- Check that the **right dose** (use a standard measuring syringe or spoon)
- of the **right medicine** is given to the **right** child (double-check the details on the label each time)
- at the **right time** (follow any instructions provided by parents or medical staff about this).

## Documentation Guidance

Keep the record of training for the duration of the child's enrolment or the educator's employment, whichever is longer. This record should be kept with the child's enrolment records.

## HS27 Children washed when soiled

### Criteria

#### Health and Safety practices criterion 27

Children are washed when they are soiled or pose a health risk to themselves or others.

#### Rationale/Intent:

The criterion aims to uphold the health and wellbeing of children by ensuring children who vomit or soil themselves are washed appropriately so that the risk of cross infection for both adults and children in at the service is reduced.

### Guidance

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*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

It might be necessary to wash a child:

- at nappy change time – sometimes wipes are not enough
- if a child has vomited over themselves or over another
- if a child has had a toileting accident
- if children become dirty during play.

Washing practices should be consistent with the requirements of [PF18 - body wash facilities](#).

Consider the child's need for privacy. Respectful interactions between the educator and child are important.

Staff protection and child protection policies need to be kept in mind.

[Regional Public Health](#) provides guidelines for washing soiled children including suggested spill kit contents.

## Child protection

Criteria for child protection:

### In this section

- [HS28 -Child protection](#)
- [HS29 -Inappropriate material](#)
- [HS30 -Use of alcohol and other drugs by coordinators and educators](#)
- [HS31 -Use of alcohol and other drugs by other people at the home](#)
- [HS32 -Smoking](#)

## HS28 Child protection

### Criteria

#### Health and Safety practices criterion 28

There is a written child protection policy that meets the requirements of the Vulnerable Children Act 2014. The policy contains provisions for the identification and reporting of child abuse and neglect, and information about how the service will keep children safe from abuse and neglect, and how it will respond to suspected child abuse and neglect.

The policy must be reviewed every three years.

**Documentation required:**

A written child protection policy that contains:

- provisions for the service's identification and reporting of child abuse and neglect;
- information about the practices the service employs to keep children safe from abuse and neglect; and
- information about how the service will respond to suspected child abuse and neglect.

A procedure that sets out how the service will identify and respond to suspected child abuse and/or neglect.

**Intent:**

Child protection policies support children's workers to identify and respond to vulnerability, including possible abuse and neglect.

*Amended 26 February 2016*

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Services must have a child protection policy that meets the Children's Act 2014 requirements.

The policy must:

- contain provisions on the identification and reporting of neglect and abuse, and
- be written, and
- be reviewed every three years.

To be helpful, the policy should contain definitions of neglect and abuse so that staff can apply these consistently when needed.

Policies should also contain provision for ensuring children are protected from harm by any person present at the home.

Services must make the policy and information about its practices available to parents ([GMA1 - Parent access to information](#)).

We've published a guide to help you navigate the child protection policy requirements set out in the Children's Act 2014. [Download the guide.](#)

## Documentation guidance:

The [Safer Organisations, Safer Children](#) [PDF, 1.1 MB] publication provides advice on good practice to help organisations draft high quality child protection policies and review their procedures.

The guidelines include a review tool to help services identify gaps in current policies, information about what to include in a new policy, as well as example policies including a policy used in an early childhood education setting.

The policy needs to be consistent with advice provided by CYFS that can be found in the publication called "[Working together to keep children and young people safe](#)" [PDF, 3 MB].

Educators and co-ordinators require guidelines and opportunities for training to further develop their knowledge and understanding of:

- the signs and symptoms of child abuse and neglect
- roles and responsibilities around record keeping and reporting

responsibilities to children  
limitations of their role.

## HS29 Inappropriate material

### Criteria

#### Health and Safety practices criterion 29

All practicable steps are taken to protect children from exposure to inappropriate material (for example, of an explicitly sexual or violent nature).

##### **Rationale/Intent:**

The criterion aims to uphold the safety and wellbeing of children by ensuring that pornographic or violent material (electronic games, DVDs, websites, magazines, etc) is not available to children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Censor classifications can be used as a guide, however any material should be checked for suitability before sharing it with children.

What **may** be regarded as not objectionable under the Films, Videos, and Publications Classification Act may, nevertheless, be inappropriate and harmful to young children given the impact of the medium in which the publication is presented and the age of the children to whom the publication is available.

Educators need to ensure that there is no access to any inappropriate material when completing their [daily hazard check \(HS11\)](#)

Supervising children using computers or other electronic devices (tablets, iPads etc) in the home is essential. If the home has access to the internet (either for use with the children or in another room) password protection and the use of parental locks should be considered.

Exposure to objectionable material may occur inadvertently through normal and legitimate searching activities or by unsolicited email delivery.

Educators should be aware of safe searching techniques and provide information to children on how to react and deal with unsolicited, inappropriate material.

### Things to consider

What are children able to see or hear when they are in the home setting?

What kinds of images are children able to see in magazines and other print materials? What about posters, DVDs, electronic games, and television?

Do children have access to the internet or other people's files on the computer? How can educators support their learning while keeping them safe?

If older children are present (either after school or during holidays) the educator needs to consider internet management and monitoring

## HS30 Use of alcohol and other drugs by coordinators and educators

### Criteria

#### Health and Safety practices criterion 30

Coordinators and educators must not use, or be under the influence of, alcohol or any other substance that has a detrimental effect on their functioning or behaviour while responsible for children attending the service.

#### Rationale/Intent:

The criterion aims to uphold the safety and wellbeing of children.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

It would be beneficial for a service provider to develop clear procedures to make expectations of coordinators and educators clear. The procedure could outline the consequences of inappropriate behaviour. It is good practice to go through this procedure with both coordinators and educators during their induction process and to share this information with parents.

The procedure should cover what action will be taken if an educator / coordinator is under the influence of alcohol or any other substance. This is a staff management issue and appropriate procedures need to be followed such as processes for managing serious misconduct. See the guidance for [GMA6 - Human Resource Management](#).

## HS31 Use of alcohol and other drugs by other people at the home

### Criteria

#### Health and Safety practices criterion 31

All practicable steps are taken to ensure that children do not come into contact with any person on the premises who is under the influence of alcohol or any other substance that has a detrimental effect on their functioning or behaviour.

#### Rationale/Intent:

The criterion aims to uphold the safety and wellbeing of children by ensuring children attending the service are not exposed to the risks of persons under the influence of alcohol or other harmful substances.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to*

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*use other approaches better suited to their needs as long as they comply with the criteria.*

It is important for service providers and educators to have considered in advance the types of situations that might occur in a home-based service and how these would be best handled. This would be an appropriate discussion during an induction process and could include:

What would the educator do if a parent or caregiver arrived to drop off or collect a child and they were under the influence of alcohol or any other substance?

What to do if the educator is working in the home of the child and an adult present at the premises consumes alcohol in the presence of the educator and/or child.

## HS32 Smoking

### Criteria

#### Health and Safety practices criterion 32

No person on the premises smokes in any area which is available for use by children or for food preparation while children are attending the service.

#### Rationale/Intent:

The criterion aims to uphold the safety and wellbeing of children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Educators must never smoke in the home while children are attending the service at any time including while children are asleep. In addition, they must never smoke whilst on an excursion with the children.

If there is a smoker in the household, they must not smoke while children are attending the service. This includes the outside area.

## Notification

Criterion for notification:

#### In this section

- [HS33 – Incident notification to the Ministry of Education](#)

## HS33 Incident notification to the Ministry of Education

### Criterion

Where there is a serious injury or illness or incident involving a child while at the service that is required to be notified to a [specified agency](#), the service provider must also notify the Ministry of Education at the same time.

### Documentation required:

A copy of the notification sent to the specified agency.

### Guidance

A [specified agency](#) is any government agency or statutory body that a service provider is required to notify if there is a serious (or as defined) injury, illness, incident or allegation.

This may include but is not limited to:

the New Zealand Police;

the Ministry of Health;

Oranga Tamariki;

; and

.

The Ministry and WorkSafe have produced a [flowchart](#) [PDF, 74 KB] to show what you need to do when there is a notifiable event at your service.

The Health and Safety at Work Act 2015 (HSWA) requires you to notify Worksafe of fatalities, serious injuries and illnesses that happen to workers and others as a result of work. Worksafe has detailed information about making a notification [here](#). For early learning services, "others" includes children, parents and visitors.

Make a notification of a child's serious injury or illness if it:

is a serious injury or illness which occurred as a result of work activity *and*

needs immediate admission to hospital *or*

needs treatment by a doctor within 48 hours of exposure to a substance.

Examples of an injury or illness occurring as a result of a work activity include, but aren't limited to, a child:

falling from a height during a nappy change

ingesting a cleaning product that wasn't stored securely

sustaining a serious injury from play equipment

### Documentation guidance:

A copy of the notification sent to the specified agency is required to be sent to the Ministry of Education.

## Supervision

Criterion for supervision:

### In this section

- [HS34 – Supervision](#)

## HS34 Supervision

### Criterion

Every educator must ensure that they actively supervise children, at all times, while they attend the service.

### Documentation Required:

A written supervision plan that ensures the good health and safety of children enrolled in the service is maintained at all times.

The plan must be specific to the premise and the number, age, abilities and enrolled hours of the children attending and must show how the educator will actively supervise children attending the service. It must include, but is not limited to:

how the premise will be arranged, across all indoor and outdoor spaces likely to be used at any time while children are attending the home, to enhance supervision of children;

how children will be supervised while they are;

involved in activities or daily routines (such as sleeping, eating and toileting) in separate parts of the home;

using play equipment and resources, both indoors and outdoors;

interacting with other people in the home, including visitors; and

using technology or while they are in the presence of technology while it is being used by others in the home.

Related to clause 46(1)(a) of standard.

### Rationale/Intent:

**The criterion aims to uphold the health and safety of children by ensuring they are adequately supervised at all times.**

*Added November 2016*

### Guidance

Children need a safe, secure environment which is effectively supervised. The type of supervision required will change depending on the layout of the home environment, the activities being undertaken, the number of children, and the ages and the individual needs of the children. Supervision can

ensure that children's play is enjoyable and their learning opportunities are promoted. Through careful observation, educators will see opportunities for supporting and building on children's play experiences and identify when children wish to play independent of adult involvement.

Educators effectively supervise children by actively watching and attending to their environment. They should avoid carrying out activities that will draw their attention away from supervision.

Supervision is not just watching the children. It requires focused and intentional observation of children.

Active supervision takes advantage of all available learning opportunities and means never leaving children unattended. It means being able to monitor (see or hear) all children at all times, including indoors, outdoors and when sleeping. Educators should use their professional judgment and common sense when deciding when it is appropriate to have any children out of their direct line of sight. For example, for older children who want to use the toilet with some privacy, it is appropriate to supervise by remaining in hearing distance.

Active supervision of children can be achieved in a number of ways including:

Direct and constant monitoring by the educator in close proximity to the children when supervising an activity with some element of risk, for example cooking experiences and any activity that is near water.

Careful positioning of the educator to ensure they are observing the children and are close enough to intervene promptly to prevent injury.

Scanning or regularly looking around to observe all children and to be aware when one moves out of view.

Listening closely to children near and far to supervise areas not in the educator's direct line of sight. This is particularly useful when listening out for sleeping children or older children using the bathroom.

Observing children's play and anticipating what may happen next will allow educators to assist children as difficulties arise and to intervene where there is potential danger.

Balancing activities to ensure risk is minimised.

The following areas can be included in a Supervision Plan:

## Set up of the environment

Educators should set up the environment so that they can supervise the children at all times. When activities for different children are grouped together and furniture is at waist height or shorter, educators are always able to see and hear children. Small spaces should be kept clear of clutter and larger spaces are set up so children have clear play spaces that educators can observe.

Where there is outdoor play equipment available at the home, educators need to be aware of children's abilities to safely use the equipment and to be able to teach the children the appropriate and safe use of the equipment (e.g. using a slide feet-first only and explaining why climbing up a slide can cause injury).

Where there are electronic devices, they should be used under the direct supervision of the educator.

Any activity where children play with, near or in water poses a high safety risk. In such a situation, the educator should have constant visual contact and be in close proximity to the children at all times. If the educator needs to move away from the area they should take all children with them away from the water.

## Working in the home

Educators should ensure there are always clear paths to where children are playing, sleeping and eating so they can react quickly if needed. This is

particularly important when children are attempting an activity for the first time or engaged in a high risk activity. For example, if a child is using play equipment such as climbing apparatus, the educator should be close enough to ensure equipment is being used correctly and to reach the child if they slip or fall.

## Scanning the environment

Educators need to continually scan the environment so they know where the children are. Counting the children frequently is especially important if there is a larger number or age range of children attending.

## Listening

Specific sounds or the absence of them may signify reason for concern and alert an educator to signs of potential danger.

## Anticipating children's behaviour

Educators should use what they know about each child's individual interests and abilities to predict what they will do. This can support the educator to see the potential for harm or recognise when a child might wander, get upset or take a dangerous risk. This should be balanced with allowing children the freedom to attempt new experiences and to play independently.

## Governance, management and administration

### 47 Governance, management, and administration standard: general

(1) The governance, management, and administration standard: general is the standard that requires every licensed service provider to whom this regulation applies to ensure that—

- (a) the service is effectively governed and is managed in accordance with good management practices; and
- (b) the service provider regularly collaborates with—
  - (i) parents and family or whānau of children enrolled in the service; and
  - (ii) the adults responsible for providing education and care as part of the service; and
- (c) appropriate documentation and records are—
  - (i) developed, maintained, and regularly reviewed; and
  - (ii) made available where appropriate; (A) at any reasonable time on request by a parent of a child enrolled in the service; and (B) at any time on request by any person exercising powers or carrying out functions under Part 26 of the Act; and
- (d) adequate information is made available to parents of enrolled children and, where appropriate, to the families or whānau of those children about the operation of the service; and
- (e) all reasonable steps are taken to provide staff employed or engaged in the service with adequate professional support, professional

development opportunities, and resources.

(2) Each licensed service provider to whom this regulation applies must comply with the governance, management, and administration standard: general.

**The criteria in this section are grouped together by topic. Each criterion has also been given a short, descriptive title. These titles are provided only to help you navigate around more easily on the website – they do not form part of the criteria themselves.**

## In this section

- [Parent involvement and information](#) - Criteria and guidance GMA1-GMA3
- [Professional practices](#) - Criteria and guidance GMA4-GMA6A
- [Planning and documentation](#) - Criteria and guidance GMA7-GMA11

## Parent involvement and information

Criteria for parent involvement and information:

### In this section

- [GMA1 - Parent access to information](#)
- [GMA2 - Information provided to parents](#)
- [GMA3 - Parent involvement](#)

## GMA1 Parent access to information

### Criteria

#### Governance Management and Administration criterion 1

Parents are advised how to access:

information concerning their child;

the service's operational documents (such as its philosophy, policies, and procedures and any other documents that set out how day to day operations will be conducted);

the most recent Education Review Office report regarding the service;

the Education (Early Childhood Services) Regulations 2008, and the Licensing Criteria for Home-based Education and Care Services 2008;

the full names and qualifications of each person counting towards regulated qualification requirements;

the service's current licence certificate; and

a procedure people should follow if they wish to complain about non-compliance with the Regulations or criteria.

## Documentation required:

Evidence (such as a newsletter or enrolment pack information) of compliance with the criterion.

A procedure people should follow if they wish to complain about non-compliance with the Regulations or criteria. The procedure includes the option to contact the local Ministry of Education office and provides contact details.

## Rationale/Intent:

The criterion is underpinned by the belief that a level of collaboration between parents and adults providing education and care will result in positive outcomes for children. The criterion aims to ensure that parents are well informed about the service's operation and their child's education, and are made aware of the input they are able to have.

## Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Providing written information to parents can take a variety of forms including:

- as part of a parent induction pack
- newsletters
- website.

The criterion could be met ensuring that after enrolment, copies of the statement of philosophy and important service policies are made available to parents. Each Educator could have a folder with all relevant documents in it so that these can be easily accessed by parents.

Services must have a procedure so people know how to make a complaint about any instance of non-compliance and this must include the option for people to contact their local Ministry of Education office, with the appropriate contact details.

Complaints could come from a variety of sources:

- a parent
- an educator
- a member of the family or the community
- a staff member.

and may be about a range of topics including:

- specific teaching practice
- routine or policy
- an event
- a particular staff member
- an educator
- a member of the management team or board
- or about the service in general.

Complaints will vary from minor to major, and may escalate rapidly from one to the other unless they are well managed.

Further guidance on developing a complaints policy and process is available, which includes a suggested template for developing a complaints policy and procedure.

[Guidance for developing a complaints policy / process for an ECE service](#) [PDF, 73 KB] [PDF; 73kb]

To ensure parents are well informed about children's development and learning services should consider:

Creation of a portfolio on each child that is readily accessible to the child and his or her parents/caregivers.

Portfolios can be paper based or electronic that can be stored online and accessed securely by parents.

Educators and coordinators could arrange individual meetings with parents to discuss their children's learning.

Service providers could hold meetings to convey information about the service.

Parents/caregivers need to be made aware that reports from ERO are free and available from the local ERO office on request. They can also be downloaded from the [Education Review Office](#).

## Things to consider

If a child attending your service is from a family with separated parents the Education and Training Act 2020 sets out the right of entry to early childhood education (ECE) services for parents and guardians.

Unless a court order rules otherwise, all parents and guardians are entitled to:

Reports about their child's participation in ECE and learning experiences

Participate in the opportunities provided by the ECE service to engage with parents

Have access to any official records held at the service related to their child's participation in that service.

Services will need to develop a process which supports staff to ascertain how a relationship between separated parents and the service may be established so that communication channels can be opened. This could include ensuring educators have a copy of the enrolment form so they are clear what any court orders are.

## Related downloads:

[Professional Practice regarding Separated Parents/Guardians](#) [PDF, 181 KB]

## GMA2 Information provided to parents

### Criteria

#### Governance Management and Administration criterion 2

Information is provided to parents about:

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how they can be involved in the service;  
any fees charged by the service;  
the amount and details of the expenditure of any Ministry of Education funding received by the service;  
any planned reviews and consultation and  
whether or not out-of-school care will be provided in the educator's home while their child is attending.

#### **Documentation required:**

Written information letting parents know:

how they can be involved in the service;  
any fees charged by the service;  
the amount and details of the expenditure of any Ministry of Education funding received by the service; and  
about any planned reviews and consultation

☐ For services offering out-of-school care, evidence of:

written notice advising parents if the home their child is attending will have children receiving out-of-school care; and  
written parental acknowledgement of the written notice.

#### **Rationale/Intent:**

The criterion is underpinned by the belief that a level of collaboration between parents and adults providing education and care will result in positive outcomes for children. The criterion aims to ensure that parents are well informed about the service's operation and their child's education, and are made aware of the input they are able to have.

*Amended November 2016*

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Providing written information to parents could take a variety of forms including:

as part of a parent induction pack  
newsletters  
website  
fees schedule  
annual reports  
meetings  
information about any planned reviews and consultation.

Many services develop regular reporting processes including providing an annual report. Often monthly financial reports are made available. This is a good way to provide information to parents on a regular basis.

For services offering out-of-school care, the notice could be:

in the enrolment form, or  
as a separate written notice given to parents, or  
as an email to the parents

Parental acknowledgement could be:

via a tick box or statement accompanied by the parent's signature on the enrolment form, or  
a copy of the notification that has been signed by the parent, or  
an email from the parent confirming that they have been notified

## Amount and details of Ministry funding

Information provided to parents about Ministry funding must be for the licensed service, not consolidated for a home-based service provider that has multiple services.

## Things to consider

If a child attending a service is from a family with separated parents the Education and Training Act 2020 sets out the right of entry to early childhood education (ECE) services for parents and guardians.

Unless a court order rules otherwise, all parents and guardians are entitled to:

Reports about their child's participation in ECE and learning experiences  
Participate in the opportunities provided by the ECE service to engage with parents  
Have access to any official records held at the service related to their child's participation in that service.

Services will need to develop a process which supports staff to ascertain how a relationship between separated parents and the service may be established so that communication channels can be opened. This could include ensuring educators have a copy of the enrolment form so they are clear what any court orders are.

## Related downloads:

[Professional Practice regarding Separated Parents/Guardians](#) [PDF, 181 KB]

## GMA3 Parent involvement

### Criteria

#### Governance Management and Administration criterion 3

Parents of children attending the service and adults providing education and care are provided with opportunities to contribute to the development and review of the service's operational documents (such as philosophy, policies, and procedures and any other documents that set out how day to day operations will be conducted).

#### Documentation required:

Evidence of opportunities provided for parents and adults providing education and care to contribute to the development and review of the service's

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operational documents.

## **Rationale/Intent:**

The criterion is underpinned by the belief that parent and whānau involvement can positively contribute to the service's operation and quality of education and care provided to their children.

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Home-based services are required to show evidence they have provided opportunities for parents, co-ordinators and educators to contribute to the development and review of the service's operational documents.

## **Documentation Guidance:**

Evidence of parents having opportunities to contribute to the development and review of the service's operational documents could include:

For meetings attendance records and minutes of the meeting could be considered as evidence

Educators could provide documents for parents to read

Copies could be kept on each child's file

If parents' views are sought, then the feedback or outcomes gathered.

## **Things to consider**

If a child attending a service is from a family with separated parents the Education and Training Act 2020 sets out the right of entry to early childhood education (ECE) services for parents and guardians.

Unless a court order rules otherwise, all parents and guardians are entitled to:

Reports about their child's participation in ECE and learning experiences

Participate in the opportunities provided by the ECE service to engage with parents

Have access to any official records held at the service related to their child's participation in that service.

Services will need to develop a process which supports staff to ascertain how a relationship between separated parents and the service may be established so that communication channels can be opened. This could include ensuring educators have a copy of the enrolment form so they are clear what any court orders are.

## **Related downloads:**

[Professional Practice regarding Separated Parents/Guardians](#) [PDF, 181 KB]

## Professional practices

Criteria for professional practices:

### In this section

- [GMA4 -Philosophy statement](#)
- [GMA5 -Self-review](#)
- [GMA6 -Human resource management](#)
- [GMA6A - Safety checking](#)

## GMA4 Philosophy statement

### Criteria

#### Governance Management and Administration criterion 4

A philosophy statement guides the service's operation.

#### Documentation required:

A written statement expressing the service's beliefs, values, and attitudes about the provision of early childhood education and care.

#### Rationale/Intent:

The criterion aims to ensure that the service has information available for parents and staff about the philosophy that underpins their provision of early childhood education and care. This information supports the collaboration between parents and the service to achieve positive outcomes for children.

*Amended 21 July 2011*

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

A Philosophy Statement expresses the fundamental beliefs, vision, values and ideals a service chooses to operate under. It is a core document providing the basis for decisions on both how the service is managed and how the service operates on a day-to-day basis.

It needs to be easy to understand by everyone and should be available to parents.

The Philosophy Statement is a living document that should be reviewed regularly as part of a service's self-review process.

Every Philosophy Statement will be different but could include:

the learning outcomes expected for children  
why the service was established  
what values underpin the service.

The Philosophy Statement is a living document that should be reviewed regularly as part of a service's self-review process.

More information on philosophy statements can be found in the Ministry of Education's publication [Community based early childhood education/Governing and managing](#).

The [Education Review Office](#) produced a report on service philosophy statements that may be of use when developing a philosophy statement.

## GMA5 Self-review

### Criteria

#### Governance Management and Administration criterion 5

An ongoing process of self-review helps the service maintain and improve the quality of its education and care.

##### Documentation required:

A process for reviewing and evaluating the service's operation (for example, its curriculum, learning and teaching practices, philosophy, policies, and procedures) by the people involved in the service. The process is consistent with criterion and includes a schedule showing timelines for planned review of different areas of operation.

Recorded outcomes from the review process.

##### Rationale/Intent:

The criterion is to ensure that services have processes for continual improvement to maintain the quality of the education and care provided to children. It is underpinned by the belief that ongoing self-review is part of good management and administration.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Self-review is an ongoing and continuous process of quality improvement. It involves gathering and analysing information about the service from a range of sources; and using that information to inform decisions aimed at improving service performance and the learning outcomes of children. These improvement opportunities are then detailed in a plan implemented by the service. The plan is regularly reviewed and the self-review cycle

repeats itself.

Self review enables early childhood services to evaluate what they do to improve the quality of education provided for children.

Self review can be planned or spontaneous and can be formal (for decisions requiring consultation) or informal.

Self review should be guided by procedures that involve gathering, analysis and use of information.

The perspectives of managers, educators, coordinators, children, parents and whanau should be included in review and the findings should lead to decisions about changes to what the service does and to the service's priorities.

Any changes made to the service's operation from self review should be revisited in future self reviews to ensure they are having the intended effect.

## Documentation Guidance:

Each service needs to have a process for self review including a schedule or timetable for planned reviews which is cyclical in nature.

All self review must be documented – this can be in a number of formats including:

educator diaries

meeting minutes (eg between coordinators and educators)

survey results

formal write-ups in a dedicated folder.

The outcomes of the review as well as what actions were taken or changes made also need to be recorded.

## Things to consider

Samples of home visit notes and narrative assessment may help to provide evidence and support coordinators to monitor any changes to practice which lead to successful outcomes for children from self-review.

[Ngā Arohaehae Whai Hua/Self-review Guidelines for Early Childhood Education](#) has been developed to encourage ECE services to adopt a process of self-review. The Guidelines cover all areas of the self-review process – including when to undertake self-review and what to review. A series of templates of review plans and frameworks that can be used as guides for review, and examples of self-review in practice are included as appendices. Review stories have also been provided by a range of ECE services, which show different approaches to review.

ERO has also prepared a set of evaluation indicators for use in its reviews of early childhood services. Services may also choose to use the indicators when reviewing their own performance. These indicators can be found at the Education Review Office.

The use of electronic reminder systems and electronic recording and communication media may assist smaller services to manage time constraints.

## GMA6 Human resource management

### Criteria

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## Governance Management and Administration criterion 6

Suitable human resource management practices are implemented for educators and staff.

### Documentation required:

Processes for human resource management. Processes at least include:

procedures for the selection and appointment of suitable educators and staff;  
job/role descriptions;  
training plans for educators with little or no previous experience in early childhood education;  
induction procedures into the service;  
a system of regular appraisal;  
provision for professional development;  
a definition of serious misconduct; and  
discipline/dismissal procedures.

### Rationale/Intent:

The criterion informs the Ministry of Education about the management's commitment and capability to implement human resource management practices that will recruit, manage and develop competent staff, as the ongoing quality of the staff engaging with and educating children is important in a quality service.

Selection processes and the provision of training will help ensure educators with little or no experience working in home-based early childhood education environments are: suitable or fit to be an educator, able to develop the appropriate skills and receive ongoing professional development support from service providers.

*Amended May 2015*

## Guidance

The requirement to ensure that human resource management practices are implemented is underpinned by Regulation 47(1)(a) and 47(1)(e). These require service providers to ensure that the service is effectively governed, is managed in accordance with good management practices and all reasonable steps are taken to provide staff employed or engaged in the service with adequate professional support, professional development opportunities, and resources.

*The following examples are provided as a starting point to show how services can meet the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

## Selection and Appointment Processes

[NZ Government Business website](#) carries a range of resources and tools for employers covering recruiting, appointing and managing staff.

Services should ensure that:

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Job descriptions are regularly reviewed and reflect the philosophy and needs of the service. For certificated teachers, link to the . The Ministry of Education provides .

Appointment policies and procedures are clear, reflect the requirements of current legislation, provide managers with useful guidance and are regularly reviewed.

Before confirming an appointment a safety check is undertaken in accordance with the Children's Act 2014 (see also ). A police vet is also obtained for every person over 17 years of age who lives in the home where the service is being provided.

All staff employed or engaged in the service are provided with ongoing support and receive a documented orientation and induction into the service which outlines all policies and procedures.

## Professional Development and Appraisals (or Professional Growth Cycle)

Services should ensure that:

Professional development for staff employed or engaged in the service is a priority, proactively supported and appropriately resourced.

Tōmua (Provisionally Certificated Teachers) are proactively supported to become fully certificated.

Philosophy, goals and professional development are clearly linked.

Professional development is closely aligned to individual appraisal goals or the professional growth cycle for certificated teachers.

A regular appraisal system or professional growth cycle is documented and is part of an annual cycle linked to professional development and includes provision for ongoing coaching or mentoring and self-reflection.

Staff employed or engaged in the service, in conjunction with the appraiser, identify specific and measurable goals, and progress towards achieving these is monitored through documented observations, conversations and ongoing feedback.

Professional development for certificated teachers (in all practising certificate categories Tōmua, Tūturu and Pūmau) is aligned with the Professional Growth Cycle for Teachers as required by the Teaching Council of Aotearoa New Zealand, and .

## Discipline/Dismissal Procedures

The Employment New Zealand Website carries a range of resources and tools for employers covering [Disciplinary Processes](#) and [Dismissal](#).

Discipline and dismissal policies and procedures must be clear, reflect the requirements of current legislation and provide managers with useful guidance.

The Education and Training Act 2020 states that an employer must provide a mandatory report to the Teaching Council of Aotearoa New Zealand in certain circumstances. A provides a comprehensive coverage of the process and requirements.

### Serious Misconduct

The [Education and Training Act 2020](#) and the [Teaching Council Rules 2016](#) outline the criteria for reporting serious misconduct and may assist in defining serious misconduct in your service.

## Things to consider

The service may need to consider having a procedure to follow whereby the potential employee/contractor can be asked to declare in writing their fitness to perform the role as advertised. The service will need to identify in what circumstances the service may deem it necessary to request a medical reference.

Support for Educator professional development can take many forms:

Readings



Role modelled practice  
Observation  
Professional discussions  
Manuals  
Kaiako/kaumatua  
Community members  
Reflective workbooks  
Diaries  
Workshops  
Buddy systems  
Community events/speakers  
Tertiary study.

## GMA6A Safety Checking

### Criteria

All children's workers who have access to children are safety checked in accordance with the Vulnerable Children Act 2014.

Safety checks must be undertaken and the results obtained before the worker has access to children.

The results of the safety checks must be recorded and the record kept as long as the person is employed at the service.

Every children's worker must be safety checked every three years. Safety checks may be carried out by the employer or another person or organisation acting on their behalf.

### Documentation required:

- A written procedure for safety checking all children's workers before they have access to children that meets the safety checking requirements of the Vulnerable Children Act 2014; and
- A record of all safety checks and the results.

### Intent:

Consistent robust safety checking helps assess whether people might pose a risk to children.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

We've published a guide to help you navigate the safety checking requirements set out in the Children's Act 2014. [Download the guide.](#)

### Who needs to be safety checked?

The Children's Act 2014 specifies who needs to be safety checked. You can read this in [section 23 of the Children's Act 2014](#).

The Ministry has prepared flow charts which explain the checks that must be completed on adults in specific roles.

## Core children's worker

In a home-based service both educators and coordinators are core children's workers. This is because there will be times during the day when their duties require them to have 'primary responsibility for, or authority over' children and/or be the 'only children's worker present'.

## Non-core children's worker

A 'non-core children's worker' would include staff whose main duties do not require them to have 'primary responsibility for, or authority over', children and/or be the 'only children's worker present', but whose work may include having access to children.

## Components of the safety check

Full requirements for safety checking are set out in the [Children's \(Requirements for Safety Checks of Children's Workers\) Regulations 2015](#).

Safety checking includes the collection and consideration of a range of information about the person.

A safety check is made up of 7 components:

- verification of identity (including previous identities)
- an interview
- information about work history
- referee information
- information from any relevant professional organisation or registration body
- a New Zealand police vet
- a risk assessment.

The risk assessment involves an evaluation of all information collected to assess if there is any risk to children's safety. For example, is a driving offence relevant to the requirements of the role or going to pose a risk to children? Would this information mean you should or shouldn't employ or engage the person? You must take into account the guidance we have provided in your risk assessment.

The publication [Safer Recruitment, Safer Children](#) [PDF, 2.4 MB] provides best practice guidance and [Children's worker safety checking under the Vulnerable Children Act 2014](#) [PDF, 1.2 MB] provides advice for organisations interpreting and applying the safety checking regulations.

A safety check of a **new children's worker** requires all 7 components to be completed.

A safety check of an **existing children's worker** requires the following 4 of the 7 components to be completed:

1. verification of identity (including previous identities),
5. information from any relevant professional organisation or registration body,
6. a New Zealand police vet, and
7. a risk assessment.

An existing children's worker is someone you have continuously employed since before 1 July 2015.

**Periodic rechecking** of all children's workers requires the following 4 of the 7 components to be completed:

1. that the person hasn't changed their name and if so reconfirmation of their identity,
5. information from any relevant professional organisation or registration body,
6. a New Zealand police vet, and
7. a risk assessment.

## Certificated teachers

Coordinators and educators who hold a current practising certificate will be police vetted by the Teaching Council as part of issuing and renewing the person's practising certificate.

If the Teaching Council has issued or renewed a practising certificate, they will have considered them to have a satisfactory vet. Services can choose to rely on this or carry out their own police vet.

More information is available on the [Police Vetting page](#).

The service provider will need to carry out all of the other components of the safety checking process for certificated teachers.

It must also:

meet the teacher in person

check a primary identification document

check a specified form of photographic identification

check that the name on the practising certificate matches the name on the person's identity documentation

check the Teaching Council's online register ( ) for the latest updates to the teacher's registration and practising certificate status

undertake a risk assessment.

## When do people need to be safety checked?

You **cannot** employ or engage a person as a new children's worker until the safety check has been completed.

Services cannot rely on a safety check done by a different employer (either current or previous) as the check was not done on their behalf. They must carry out all of the components themselves.

After 1 July 2018 you **cannot** continue to employ an existing core children's worker until the safety check has been completed.

After 1 July 2019 you **cannot** continue to employ an existing non-core children's worker until the safety check has been completed.

Periodic rechecking must be done every 3 years.

## Umbrella organisations carrying out safety checks

If an umbrella organisation carrying out the safety checks is the employer for staff at multiple services, then member services (Playcentres/Kindergartens) can use the children's workers who have been safety checked by that employer.

## **Relying on safety checking completed by another organisation on your behalf**

Where some or all components of the safety check have been completed by another organisation on a service's behalf, the service is responsible for confirming that these components have been completed, and that a full safety check has been done.

If the service chooses to rely on a safety check completed on their behalf, we recommend that they:

Seek permission from the person who is being safety checked for the information to be shared. Permission could be sought by the person or organisation completing the safety check **before** it is undertaken, or by the ECE service prior to requesting the information.

Prior to the safety check, obtain confirmation from the person or organisation that they are undertaking the safety check on your behalf.

Obtain in writing from the person or organisation completing the safety check that they have done this to the standard set out in the Children's Act 2014.

Complete the identity check and risk assessment for all children's workers, even if these have already been completed by another person or organisation.

Keep records about the safety checking of children's workers they engage or employ.

Responsibility for safety checking always rests with the employing or contracting organisation. This means services should exercise due diligence when relying on checks undertaken by others. Things to consider include:

How long ago the safety check was done

The purpose of the safety check that was done (for example what role).

## **Safety checking relief teachers**

Sometimes home-based services use relief teachers to cover short-term coordinator absences. These people must be safety checked.

Where some components of the safety check have been completed by another organisation on their behalf, the service is responsible for confirming that these components have been completed, and that a full safety check has been done.

We recommend that the service itself always completes the identity check and risk assessment for all children's workers, even if these have already been completed by another organisation.

### **Agency relief teachers**

Agencies providing relief teachers are likely to be completing some components of the safety check. Services can agree with the agency that it will complete those components on their behalf.

### **Independent relief teachers**

Services that engage a relief teacher independently (ie, not through an agency) will need to complete the safety check. Once this has been done, the completed check can be relied on for up to 3 years by the service.

## **Safety checking of trainees / students on practicum**

Under the Children's Act 2014, the requirements apply to unpaid work that is undertaken as part of an educational or vocational training course (e.g.

a student teacher undertaking and practicum placement).

Providers of educational or vocational training courses may have completed some of the components of the safety check as part of their enrolment process. For example an interview, reference check and police vet.

Services need to agree **in advance** with the training provider what components of the safety check it will complete on their behalf. The service must then get a letter from the training provider stating the student's name, what components of the safety check have been completed, and that they have been done to the standard set out in the Children's Act 2014.

The service should still complete the identity check and risk assessment for all children's workers, even if these have already been completed by another organisation.

## Police vetting

In addition to safety checking children's workers under the Children's Act 2014, services still need to meet their police vetting obligations under [Schedule 4 clauses 1-8 of the Education and Training Act 2020](#)

Further information is available on the [Police vetting](#) page of the Education website.

## Workforce restriction and core worker exemption

The Children's Act 2014 introduces a new children's workforce restriction, which prohibits services from employing or engaging people with a specified offence as core workers, unless they hold a Core Worker Exemption.

A specified offence means an offence identified in [Schedule 2 of the Children's Act 2014](#).

Individuals prohibited from being employed or engaged in a core worker role under the workforce restriction can apply for a [Core Worker Exemption](#).

Employers will be able to confirm whether a person holds a Core Worker Exemption.

## Short-term emergencies

Home-based services may employ a children's worker they have previously police vetted and whose vet is current, without completing the remaining components of the safety check, to manage short-term emergencies.

If a home-based service considers that an emergency or unexpected situation has arisen that increases risks to children, they may engage or employ a children's worker to reduce those risks without completing all components of the safety check, for up to 5 consecutive working days, as long as the person has a current police vet.

However, in the interests of children's safety, we recommend that home-based services begin the full safety checking process as soon as possible in an emergency or unexpected situation.

## Screening service for early learning service owner operators who are children's workers

A screening service is available to undertake safety checks for specified groups of children's workers.

This service has been established to provide third party safety checks for children's workers in the health, education and social development sectors who are self-employed or sole-practitioners.

In the education sector, this screening service has been approved for early learning service owner-operators.

Anyone who works with children must be safety checked.

You may choose to use this approved screening service, but you are not obliged to do so. You can conduct your checks through another service.

There is a cost to applicants for this service. To find out more, go to [CV Check](#).

## Documentation guidance:

Under [Section 39\(3\) of the Children's Act 2014](#), service providers are required to be able to provide details on any safety check done on a person and their work history including:

- how their identity was confirmed, and
- all information provided during the safety check, and
- the risk assessment, and
- the date or dates on which the person was engaged or employed by the organisation, and
- the nature of the work the person is/was engaged in.

Evidence of all children's worker safety checks must be kept for at least as long as the children's worker is employed or engaged, then securely destroyed. All information must be provided to the Ministry of Education, or any other relevant agency, on request.

The result of the safety check is confidential and the service provider and only those staff delegated with responsibilities that would require them to access the information should be able to do so.

Information needs to be stored appropriately. Typically, screening information will be kept on a person's personnel file. Files should be stored in a secure location with access only available for appropriate staff.

Once information is no longer required to be retained, it must be securely destroyed.

## Planning and documentation

Criteria for planning and documentation:

### In this section

- [GMA7 - Annual plan](#)
- [GMA8 - Annual budget](#)
- [GMA9 - Enrolment records](#)
- [GMA10 - Attendance records](#)
- [GMA11 - Availability of documentation](#)

## GMA7 Annual plan

### Criteria

#### Governance Management and Administration criterion 7

An annual plan guides the service's operation.

##### Documentation required:

An annual plan identifying 'who', 'what', and 'when' in relation to key tasks undertaken each year.

##### Rationale/Intent:

An annual plan is part of good business practice and will show the Ministry of Education how the service intends to ensure ongoing compliance with all regulatory requirements and criteria.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

The annual plan describes what the service will do in the next 12 months. It is detailed enough to cover day-to-day events, for example, excursions, staff appraisals or professional development.

The annual plan should be created in consultation with the Person Responsible so that the teaching and learning needs of the children can be met. In developing the annual plan the following questions can be asked:

What purchases need to be made this year?

Is any major maintenance work required?

Will our staffing needs change?

Is any fundraising required?

How will the service better engage with their (parent) community?

A sample annual plan is provided. [Childcare Centre Annual Management Plan Example](#) [DOC, 47 KB].

The annual plan should be developed at the same time as the annual budget.

### Things to consider

In addition to the required annual plan, services may also have a strategic plan.

Strategic plans are not a licensing requirement. However, having a plan that looks beyond 'this year' to the medium or long term can be very helpful for services. Strategic planning enables a service to determine its direction and what it hopes to achieve in the future.

Strategic plans are best developed in consultation with all stakeholders, e.g. parents/whānau, management committees/staff.

Strategic plans should be regularly reviewed. Progress could be recorded perhaps on the bottom or back of the annual plan.

## GMA8 Annual budget

### Criteria

#### Governance Management and Administration criterion 8

An annual budget guides financial expenditure.

**Documentation required:**

An annual budget setting out the service's estimated revenue and expenses for the year. The budget includes at least:

staffing costs, including leave entitlements;

professional development costs;

equipment and material costs for the ongoing purchase of new equipment and consumable materials; and

provision for operational costs and maintenance of the premises as appropriate.

**Rationale/Intent:**

The criterion will provide the Ministry of Education with evidence of the service's ability to continue to meet regulatory standards and criteria and afford the financial costs of providing a quality licensed ECE service.

*Amended 21 July 2011*

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

An annual budget must be prepared.

When setting and reviewing the budget, the service provider can:

develop criteria for allocating resources

identify priorities for expenditure

establish clear procedures for monitoring income and expenditure.

A budget of income and expenditure should be broken down on a monthly basis.

The annual budget should be developed at the same time as the annual plan.

## GMA9 Enrolment records

### Criteria

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## **Governance Management and Administration criterion 9**

Enrolment records are maintained for each child attending. Records are kept for at least 7 years.

### **Documentation required:**

Enrolment records for each child currently attending and for those who have attended in the previous 7 years. Records meet the requirements of the Early Childhood Education Funding Handbook and include at least:

the child's full name, date of birth, and address;

the name and address of at least 1 parent;

details of how at least 1 parent (or someone nominated by them) can be contacted while the child attends the service;

the name of the medical practitioner (or medical centre) who should, if practicable, be consulted if the child is ill or injured;

details of any chronic illness/condition that the child has, and of any implications or actions to be followed in relation to that illness/condition;

the names of the people authorised by the parent to collect the child; and

any court orders affecting day to day care of, or contact with, the child.

### **Rationale/Intent:**

The maintenance of enrolment records provides evidence of the accountability of service providers to the community and government for Crown funding. Enrolment records are also an indicator of good management and administration practices necessary to ensure the safety of the children attending.

*Amended May 2015*

## **Guidance**

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Enrolment records need to be kept for at least seven years - either paper based or electronically. Records should be stored in a way that they can't get corrupted or altered after a parent has signed them.

Enrolment forms need to be checked by parents at least annually to ensure all enrolment details are up to date. Often service providers photocopy enrolment forms for educators to store at the home.

You must wherever possible sight the child's birth certificate. Each child must have an NSN (National Student Number) that requires sighting of the child's birth certificate or passport. If you can't sight this documentation contact MOE Resourcing contact centre on 0800 ECE ECE to discuss.

It is recommended that copies of the birth certificates of each new child permanently enrolled in your service be kept in a secure place (locked filing cabinet) at the service provider's office.

An example enrolment form can be downloaded from [Chapter 6-1 in the Early Childhood Funding Handbook](#). This form can be adapted to suit the services particular circumstances but must have at least the mandatory requirements.

Services should be familiar with the obligations of the Privacy Act and understand the twelve information privacy principles dealing with collecting, holding, use and disclosure of personal information. Information on this can be found at the [Privacy Commissioner website](#).

**Note:** if a parent states that another parent or guardian has restricted or no access to their child, services must request that a copy of the applicable court order be provided. This should be attached to the child's enrolment information and staff should be made clearly aware of the situation. Service providers also need to ensure the educators are aware of any court orders that may impact on access to children.

Service providers may want to consider having a process in place for when educators leave the service to ensure that information relating to enrolment records is no longer held by the educator but is kept by the service provider.

After 7 years, records can be disposed of. This needs to be done so that unauthorised access to the information is not possible.

## Things to consider

Services should consider having a process whereby the enrolment records are collected or delivered to the service provider every three months (or after each funding period). This minimises the likelihood of loss or damage.

## GMA10 Attendance records

### Criteria

#### Governance Management and Administration criterion 10

An attendance record is maintained that shows the times and dates of every child's attendance at the service. Records are kept for at least 7 years.

#### Documentation required:

An attendance record that meets the requirements outlined in the Early Childhood Education Funding Handbook for children currently attending, and children who have attended in the previous 7 years.

#### Rationale/Intent:

The maintenance of attendance records is an indicator of good management and administration practices and supports the accountability of service providers to the community and government.

### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Attendance records for all children who attend the service are required and must be kept for seven years. This could be either paper based or electronically. Records should be stored in a way that they can't get corrupted or altered after a parent has signed them.

The [Section 6-3 in the Early Childhood Education Funding Handbook](#) details what is required in keeping attendance records. Attendance records may be kept in a form to suit the service.

Service must keep evidence that a parent or guardian of each child has regularly examined and confirmed the attendance record. This needs to be completed once a week.

A template for sign-in/sign-out records is included in Appendix 2 in the Funding Handbook.

After 7 years, records can be disposed of. This needs to be done so that unauthorised access to the information is not possible.

## Things to consider

Having a process whereby the attendance records are collected or delivered to the service provider every three months (or after each funding period) could minimise the likelihood of loss or damage.

## GMA11 Availability of documentation

### Criteria

#### Governance Management and Administration criterion 11

Required documentation is made available as appropriate to parents and Government officials having right of entry to the service under [Section 626 of the Education and Training Act 2020](#).

#### Rationale/Intent:

The criterion makes the development and maintenance of all the 'required documentation' related to the criteria a licensing requirement.

#### Guidance

*Any examples in the guidance are provided as a starting point to show how services can meet (or exceed) the requirement. Services may choose to use other approaches better suited to their needs as long as they comply with the criteria.*

Services need to ensure the required documentation as outlined in the Governance, Management and Administration criteria is made available when required.

Any historic documentation stored at a head office needs to be easily retrievable when required.

#### Things to consider

Having a process whereby the attendance records are collected or delivered to the service provider every three months (or after each funding period) could minimise the likelihood of loss or damage.

## Glossary

#### For the purposes of these criteria:

'Assessment' means the process of noticing children's learning, recognising its significance, and responding in ways that foster further learning. It includes documenting some, but not necessarily all, of what and how children are learning in order to inform teaching, and make learning visible.

**'Coordinator'** means the person who has primary responsibility for overseeing the education and care, comfort, and health and safety of the children, and providing professional leadership and support to educators within the service.

**'Culture'** means the understandings, patterns of behaviour, practices, and values shared by a group of people.

**'Educator'** means the person with the designated role of providing education and care directly to children in his or her care, and attends to the health and safety of those children.

**'Excursion'** means:

- being outside the licensed premises whilst receiving education and care from the services; but
- does not include an outing for the purposes of emergency evacuations, drills or the receipt of urgent medical attention
- regular excursion means – excursions that parents have agreed to at the time of their child's enrolment, that are part of an ongoing planned and consistent routine of education and care
- special excursion means – excursions that parents have agreed to prior to the excursion taking place, that are not a regular excursion.

**'Medicine'** means any substance used for a therapeutic purpose and includes prescription and non prescription preparations having the meaning assigned to these under Appendix 2.

**'Non-porous material'** means a material which does not allow water to pass through it.

**'out-of-school care'** means the presence of any child during licensed hours who is aged 13 years or younger, who is enrolled at school, and who is counted towards the total number of children that can be present in the home, in line with the requirements set out in [section 19 of the Education and Training Act 2020](#).

**'Parent'** means:

- the person (or people) responsible for having the role of providing day to day care for the child; and
- may include a biological or adoptive parent, step parent, partner of a parent of a child, legal guardian or member of the child's family, whānau or other culturally recognised family group.

**'Philosophy'** means a statement that:

- outlines the fundamental beliefs, values, and ideals that are important to the people involved in the service – management, adults providing education and care, parents, families/whānau, and perhaps the wider community;
- identifies what is special about the service; and
- is intended to be the basis for decisions about the way the service is managed and about its direction in the future.

**'Policy'** means a statement intended to influence and determine decisions, actions, and other matters.

**'Premises'** means home in which education and care is to be provided, and its associated outdoor space.

**'Procedure'** means a particular and established way of doing something.

**'Process'** means a goal-directed, interrelated series of actions, events, procedures, or steps.

**'Records'** means information or data on a particular subject collected and preserved.

**'Regulation'** means a regulation under the Education (Early Childhood Services) Regulations 2008.

'Service' means a home-based education and care service.

'service curriculum' means all of the experiences, interactions, activities and events - both direct and indirect, planned, and spontaneous - that happen at the service. Teaching practices including planning, assessment, and evaluation form part of the service curriculum.

'service provider' means the body, agency, or person who or that operates the home-based education and care service.

'Specified agency' means any government agency or statutory body that a home-based education and care service is required to notify if there is a serious (or as defined) injury, illness, incident or allegation. This may include but is not limited to: the New Zealand Police; the Ministry of Health; Child, Youth and Family; WorkSafe New Zealand; and the Teaching Council.

## Appendix 1: First aid requirements for criterion PF15

First aid kits should include the following (or these items are available on the premises):

- disposable gloves
- sterile saline solution (or some other means of cleansing wounds)
- safety pins, bandage clips or tape (or some other means of holding dressings in place)
- sterile wound dressings, including sticking plasters
- rolls of stretchable bandage
- triangular bandage (or some other means of immobilising an upper limb injury)
- scissors
- tweezers
- cold pack
- first aid manual
- National Poisons Centre phone number - **0800 POISON / 0800 764766**
- Healthline phone number - **0800 611 116**

The first aid kit may also contain any Category (i) medicines the service chooses to use, providing the appropriate written authority has been gained from parents (see [Criterion HS25](#)).

## Appendix 2: Categories of medicine HS25

### Category (i) medicines

**Definition** - a non-prescription preparation (such as arnica cream, antiseptic liquid, insect bite treatment spray etc) that is:

- not ingested;
- used for the 'first aid' treatment of minor injuries; and
- provided by the service and kept in the first aid cabinet.

**Authority required** - a written authority from a parent given at enrolment to the use of specific preparations on their child for the period that they are enrolled. The service must provide (at enrolment, or whenever there is a change) specific information to parents about the Category (i)

preparations that will be used.

### **Category (ii) medicines**

**Definition** - a prescription (such as antibiotics, eye/ear drops etc) or non-prescription (such as paracetamol liquid, cough syrup etc) medicine that is:

- used for a specific period of time to treat a specific condition or symptom; and
- provided by a parent for the use of that child only or, in relation to Rongoa Māori (Māori plant medicines), that is prepared by other adults at the service.

**Authority required** - a written authority from a parent given at the beginning of each day the medicine is administered, detailing what (name of medicine), how (method and dose), and when (time or specific symptoms/circumstances) medicine is to be given.

### **Category (iii) medicines**

**Definition** - a prescription (such as asthma inhalers, epilepsy medication etc) or non-prescription (such as antihistamine syrup, lanolin cream etc) medicine that is:

- used for the ongoing treatment of a pre-diagnosed condition (such as asthma, epilepsy, allergic reaction, diabetes, eczema etc); and
- provided by a parent for the use of that child only.

**Authority required** - a written authority from a parent given at enrolment as part of an individual health plan, or whenever there is a change, detailing what (name of medicine), how (method and dose), and when (time or specific symptoms/circumstances) the medicine should be given.

## **Further Home Based Regulatory Guidance**

### **Application of the 1:50 person responsible ratio**

Operational guidelines: Regulation 44 (1)(d)(ii)

These guidelines will help home-based ECE services understand how to meet the requirements of regulation 44 (1)(d)(ii).

Regulation 44 (1)(d)(ii) requires that, at all times while children attend the service, there is 1 person responsible for every 50 children.

This means that every licensed home-based service must have one person responsible, often called the coordinator, for every 50 children attending at any one time. For services with 51-80 children attending there must be two persons responsible.

*Note: Regulation 44(4) sets out the service types which are excluded from being defined as teacher led services, for the purposes of the qualification requirements in regulation 44 and schedule 1 only.*

### **Establishing a new home-based service**

Any service applying for a licence to operate a home-based ECE service must provide evidence of anticipated or expected enrolments with their application.

Where there is evidence of less than 50 anticipated enrolments, the licence maximum will be set at 50 child places (or less, as required in the

circumstances). The service provider will be required to name one person responsible for this licence.

Where there is evidence of greater than 50 anticipated enrolments, and/or that there will be at least 51 children attending at any one time, the service provider must show evidence of meeting the requirement for two persons responsible.

## Existing home-based services

All service providers take responsibility for ensuring all licensing requirements are met, including the 1:50 person responsible requirement.

## Operational guidelines: Regulation 28(2)(c)

These guidelines will help home-based ECE services understand how to meet the requirements of regulation 28(2)(c). They were developed in consultation with representatives of the home-based ECE sector and replace previously published information on this topic.

Regulation 28(2)(c) requires a home-based service coordinator to *take all reasonable steps each month to observe each child participating in the service while that child is receiving education and care.*

This means coordinators are expected to have monthly face-to-face contact with all educators and children enrolled in the service. Observations of the child should primarily occur during a child's enrolled hours in the home in which the child is enrolled for education and care. This ensures that, in addition to assessing the provision of education and care, the coordinator can check the home is a safe environment that is being maintained to meet licensing standards. The best way to achieve this is by visiting the home regularly.

*Note: Regulation 28(2)(c) must be read in light of other regulations and licensing criteria that further describe a service's or coordinator's responsibilities (notably regulations 28(2)(b) coordinator to visit each educator at least one per month; 28(3); 28(2) doesn't apply during any period when the service is closed for a fortnight or longer; 3(c): definition of person responsible as coordinator and their responsibilities; 43: Curriculum standard; 44(1)(d)(i): the person responsible must supervise children and educators at all times children attend the service; and 47: Governance and Management standard).*

## What happens during a coordinator visit to observe a child

The coordinator observes each child at the service focusing on each child as an individual. The coordinator considers how the child interacts with the educator and the other children, the delivery of education and care by the educator, and the specific learning and developmental needs of the child. They note the educator's practice and offer them support as needed in relation to that child.

For this reason, it is important that the coordinator visits are scheduled for each child during their normal days and hours of enrolment, while under the care of their regular educator, and when the child is awake and engaged in the daily life of the service.

The educator will continue to actively supervise all children present during the coordinator visit.

## Coordinator visits outside children's normal enrolment hours

Coordinators cannot observe children outside their normal enrolment hours. Therefore the coordinator's hours of work must align with the enrolment hours of the children under their supervision.

## Regularity of coordinator observations

The coordinator must take all reasonable steps to observe each child once every month.

How services meet the intent of "all reasonable steps" will be determined by their specific contexts. As a general guide, "reasonable" steps for the coordinator to take to observe a child each month might include:

- The coordinator prearranges a date and time to visit a child during the child's normal hours of enrolment when they are likely to be awake.
- On the morning of the scheduled visit, the coordinator phones the educator to check the child is attending.
- If the child is present, the scheduled visit goes ahead.
- If the child is absent or access to the home is prevented (for example, by severe weather conditions), the coordinator reschedules the visit for another day in that week or the following week. It is good practice to keep records of visits and any reason for rescheduling.

## Dealing with persistent child absence

If the rescheduled visit does not occur due to another absence by the child or access issues, a visit should be arranged for the following week. Occasionally a visit cannot take place.

However, if a child is persistently absent, and the coordinator has taken all reasonable steps to observe the child without success, then the service provider should discuss with the child's parents whether enrolment at the service is still needed.

## Observations during holiday periods

Coordinators can find it difficult to meet this monthly observation requirement during the Christmas and summer holiday period when children's attendance at a service can be irregular. However, if the service is operating over the summer break (generally late December to mid-January), the coordinator must continue to take all reasonable steps to observe each child once during the weeks when they are in attendance on either side of the holiday period. If the service is closed for three weeks over the Christmas holidays, the coordinator would be expected to observe each child in either December or January.

## Sleeping children

If the child is unexpectedly asleep when the coordinator arrives, the coordinator can use the time while at the house to ensure other regulatory requirements, such as health and safety practices, are being met. Another visit to the child must be rescheduled for the following month.

## Where coordinator visits take place

Coordinator visits must take place primarily in the home in which the child is enrolled for education and care. This applies to all homes, including those in rural and remote locations.

There are some occasions in which it is acceptable for the coordinator to observe a child in an alternative location.

## Coordinator visits outside the home setting

Sometimes there can be value in observing a child and educator away from the home setting, for example at playgroups. However, services must note the following conditions:

- a. Coordinators must not conduct more than two observations outside the home per twelve-month period, and these should not occur two months in a row; the coordinator must visit the child in the enrolled home setting in between. Observations outside the home can occur **in addition to** the home visit for any given month.
- b. The coordinator and educator must agree in advance there is a sound pedagogical reason for observing a child outside the home.
- c. The off-site setting must be appropriate for children; the educator must be able to deliver education and care to both the child being observed



and the other children in their care, while **at the same time** engaging with the coordinator for professional development support purposes. A cafe, for example, would not be suitable. If the observation is to take place at a playgroup, neither the educator nor the coordinator can run the playgroup. It must be run by someone else.

## **Documenting coordinator observations**

The coordinator must be able to provide evidence of both having visited children at the home-based services under their supervision, and that the visits were planned.

The coordinator should keep detailed notes of their observations of the child. Any regulatory issues they note during the visit must also be recorded.

If a visit has not been achieved, the coordinator should document an explanation for this and a description of their other attempts to see the child.

The rationale for observing a child outside the home must be recorded.

Documentation can take a variety of forms, including some or all of the following: the coordinator's schedule of planned visits (spreadsheet, diary etc); the coordinator's notes taken during the visit; and a written account of the visit in the child's profile book or in a note to the parents.

## **Service provider documentation for Regulation 28(2)(c)**

The home-based ECE service provider is responsible for ensuring their coordinators meet the requirements of Regulation 28(2)(c). They should have a documented policy or procedure that sets out their expectations of the coordinator in meeting the regulations and how they will be monitored.