

## **OSCAR Policy Template 2016**

### **Child-centred services**

Philosophy

Child-centred services

Cultural awareness

Parent / caregiver relationships

Programme planning

### **Child wellbeing**

Child protection

Behaviour guidance

### **Staffing**

Relevant legislation

Definition of staff

Recruitment and appointment of staff

Vetting and safety checking

Staff induction

Training and professional development

Staff Conduct & duty of care

Staff complaints / concerns

### **Health and Safety**

Relevant legislation / introduction

Programme safety procedures

Staff induction, participation and training

Programme attendance & supervision

Incl: ratios / pick up / lates / rolls

Excursions and transport

Accidents / incidents (and reported to MSD)

Emergency procedures

Business continuity & disaster recovery

Medication and illness

Sun safety

### **Service Operation / Management**

Programme hours

Enrolment

Organisational structure

Record-keeping

Financial management

Insurance

Programme policies accessible

Quality improvement

Complaints

## **Level 3 Social Sector Accreditation Standards (SSAS)**

These are now the benchmark for all OSCAR provider approvals. The “OSCAR Standards” as we know them are no longer in use by MSD Assessors. A provider with current MSD Approval under the MSD OSCAR Standards will retain this approval. When they are next re-approved, it will be under the new standards.

Feedback from our members who have gone through a re-approval recently is that the process of coming up to speed with the SSAS has gone smoothly, with MSD Assessors assisting by explaining requirements that were unfamiliar. On the whole, it seems that policies and procedures which complied with the OSCAR Standards are a good fit under the new standards.

The new standards can be viewed at [www.msd.govt.nz](http://www.msd.govt.nz) - search for “Oscar approval” *Note that for OSCAR providers there are 2 documents to refer to. Camps and outdoor adventure-type programmes have an additional standard.*

### ***Reviewing the new MSD Approval standards:***

## **“Client-centred Services” & “Community Wellbeing”**

### **Overview**

In broad terms, the first 2 sections of the SSAS are concerned with “child outcomes”, in particular the responsiveness of your service to the needs of children and families: demonstrating a “child-centred” approach.

Relevant OSCAR policies could include programming, cultural awareness, inclusion of children with special needs as well as the programme philosophy. Under the “community wellbeing” standard, policies and procedures for child protection and behaviour guidance will be relevant.

We aren’t suggesting that providers re-write their policies but we do recommend a pro-active approach to reviewing and refining existing policies against the new SSAS requirements, as well as taking note of evidence that might be relevant.

## **Significant changes, updates, points for review:**

### **Client-centred services / community wellbeing**

- Do programme policies clearly reflect that the welfare and interests of children are the first and paramount consideration? (It is recommended that the “paramountcy principle” be stated in policy and included in staff inductions.)
- How do children get opportunities for choice / participation / input? E.g. being asked for suggestions for programme activities.
- How does the programme recognise and cater for the needs / interests / strengths / backgrounds of individual children and their families, including consultation and feedback? For example – where there is a child with a disability, how is information about the child collected, how are parents involved and how has the programme responded?
- How are parents informed about programme activities?
- Are there unique programme characteristics that contribute to how your service is child-centred? E.g. programme values, specialist activities, unique facilities etc.
- What staff training or induction is provided around the particular needs of children in your programme?
- How do you ensure that the programme is delivered free from discrimination, bullying or harassment?
- How do you inform parents and the community about your commitment to child protection?
- How do you inform parents about the limits to confidentiality if there are concerns for the safety of a child?
- Do you keep a record of any notifications made to CYF and request a receipt of notification?
- Is your behaviour policy clear on the interventions that staff can / cannot use with children?
- How are staff trained/inducted in:
  - positive approaches to guiding children’s behaviour
  - responding to misbehaviour
  - reporting/responding to concerns about children’s safety/wellbeing

Note that later sections in the SSAS (“quality improvement” and “client services and programmes” overlap with these requirements.)

## Child-centred services

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|  | Child-centred practice is a fundamental part of the programme.                                       |
|  | The programme can show it is responsive to the needs of children and their families                  |
|  | The programme is committed to a service that is free from discrimination and harassment              |
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|  | <b>Procedures</b>  |
|  | Collecting information about children and their families at enrolment                                |
|  | Assessing children's needs and planning an appropriate programme for them                            |
|  | In particular: cultural needs, learning needs, disabilities, etc                                     |
|  | Providing a varied and enriching programme that caters for a range of abilities, interests and needs |
|  | Informing parents about programme/activities   |
|  | Seeking feedback about the programme/activities from children and parents                            |
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|  | <b>Evidence</b>  |
|  | Programme philosophy/values  |
|  | Newsletters / noticeboards / feedback forms  |
|  | Programme fliers and information   |
|  | Programme plans – show variety and a range of activity types   |
|  | Provision of age-appropriate activities  |
|  | Planning for individual children or particular groups / needs / abilities                            |
|  | <i>How do you introduce children to new experiences / activities?</i>                                |
|  | Planning meeting notes   |
|  | Activity displays  |
|  | Enrolment forms allow collection of information about children                                       |
|  | Disability access at facility  |

## Child and community wellbeing

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|  | <b>Child protection / Behaviour Guidance</b>  |
|  | The organisation provides services in a manner consistent with section 6 of the Children, Young Persons, and Their Families Act 1989 (CYP&FA), where services reflect the principle that the welfare and interests of the child or young person are the first and paramount consideration.  |
|  | The organisation will demonstrate that child protection policies and procedures are in place  |
|  | <b>Policies</b>   |
|  | Describing positive and preventive approaches to behaviour management and how to minimise the need to use protective behaviour management: assessment process, support planning, interventions that can / cannot be used.   |
|  | Preventing, recognising, responding to and reporting child abuse.   |
|  | <b>May include</b>  |
|  | <ul style="list-style-type: none"> <li>- Staff induction training on policies for abuse prevention and reporting</li> <li>- Staff training on recognising and responding</li> <li>- Publications relating to behaviour management</li> <li>- POLICES THAT REINFORCE PARAMOUNTCY PRINCIPLE –PROGRAMME PLANNING, STAFF INDUCTION ETC</li> </ul> |
|  | <b>Behaviour Guidance: Specific Procedures</b>  |
|  | describing positive and preventive approaches to behaviour management   |
|  | interventions that can / <u>cannot</u> be used. (See msd wording)   |
|  | how to minimise the need to use protective behaviour management   |
|  | assessment process, support planning  |
|  | Robust, effective supervision and early intervention  |
|  | <b>Child Protection: Specific Procedures</b>  |
|  | Commitment to child protection  |
|  | <i>How do you promote the unacceptability of abuse in yr programme?</i>   |
|  | Section 15 must include section 15 in yr policies   |
|  | Act in best interest of child and not protect the org.  |
|  | Confidentiality – <i>but parents informed about limits to confidentiality.</i>  |
|  | <i>How are parents informed of policies including the limits to confidentiality?</i>  |
|  | Induction of staff into processes for responding to concerns.   |
|  | Training for staff in recognising abuse – evidence  |
|  | Robust, good supervision (prevent, minimise unsafe situations) / visitors are visible   |
|  | Process for responding to allegations or concerns – <i>including other community members</i>  |
|  | Actions staff must take – who to consult with / report to   |
|  | Process for reporting to an agency  |
|  | Allegations against staff   |
|  | Process for recording concerns, notifications etc.  |
|  | Documentation will include receipt of notification from CYF   |
|  | Support for staff   |
|  | <b>Forms</b>  |
|  | Child abuse report  |

## ***Reviewing the new MSD Approval standards:***

### **“Staffing”**

The requirements are consistent with legislative requirements introduced under the Vulnerable Children Act (VCA) such as the greater focus the staff appointment process and safety checking that are appropriate for appointment in a children’s service.

This is likely to prompt OSCAR providers review their record-keeping for the recruitment process, documentation supporting decisions to appoint staff and information kept on file about each staff member.

It is notable that all provisions of the VCA are also applicable for persons in management/governance roles, so background vetting and safety checking requirements apply (with evidence confirming this.)

### **Significant changes, updates & points for review:**

- Definition of “staff” includes casual staff and volunteers. All programme staff are “children’s workers” and “core staff” for the purposes of VCA requirements.
- Evidence is required of risk assessments for each staff appointment
- Background checking to include a complete work history – 5 years, chronological, account for any gaps
- Evidence is required of confirmation of identity (i.e. documents provided the Vetting consent form)
- Any decisions regarding appointments where there are disclosed convictions, needs to be well-documented.
- Clearly specify who makes decisions re- appointments
- What is expected where charges are laid or a conviction upheld against a current staff member
- The assessor may enquire into staff complaints and how were resolved
- Maintain records of advice received from government agencies or other bodies on employment matters
- Must be a sign-off on Code of Conduct (could be included with employment agreement) and key policies on health and safety.
- Staff have access to effective processes for resolving concerns/complaints

## Staffing

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|  | Effective processes to manage, train and support staff                         |
|  | Comply with all relevant legislation including Vulnerable Children Act         |
|  | Appropriate staff are employed who suitably skilled / competent for their role |
|  | <b>Procedures</b>  |
|  | Definition of “staff” includes casuals, paid and unpaid position               |
|  | Clear recruitment process for all positions – paid and unpaid                  |
|  | Risk assessment for all appointments   |
|  | Police vetting – including verification of identity – 3 yearly                 |
|  | Background checking: work history – any gaps accounted for                     |
|  | Referee checks – at least 2  |
|  | Clearly specified who makes/approves employment decisions                      |
|  | Response if there is disclosed convictions                                     |
|  | Training for staff in the policies and procedures – induction and ongoing      |
|  | Staff review or appraisal  |
|  | Resolving problems   |
|  | Staff complaints   |
|  | Staff rosters and breaks   |
|  | <b>Forms</b>   |
|  | Employment agreements / Volunteer agreements                                   |
|  | Job description  |
|  | Staff Code of Conduct (sign off)   |
|  | Staff induction record   |
|  | <b>Staff files – contents to be checked</b>                                    |
|  | Job application, CV, qualifications, work history                              |
|  | Work history: 5 years, chronological: checked for gaps and accounted for       |
|  | Confirmation of identity   |
|  | Referee checks   |
|  | Vetting (including recurrent – 3 years)  |
|  | Risk assessment: any identified risks and are they appropriately managed?      |
|  | Interview notes  |
|  | Drivers licence (if relevant)  |
|  | First aid qualification  |
|  | Employment agreement   |
|  | Code of conduct (signed off in employment agreement)                           |
|  | Job description  |
|  | Evidence of induction (signed)   |
|  | Training records   |
|  | Staff complaints, issues, disciplinary   |
|  | Performance appraisal  |
|  | Wage records, leave taken/owed   |
|  | IRD number and tax code  |

## ***Reviewing the new MSD Approval standards:***

### **“Health and Safety”**

This section is mostly consistent with the previous OSCAR Standards. Wording has been updated to reflect the introduction of new Health and Safety legislation and reflects a greater emphasis on consultation with workers and other organisations with “overlapping” health and safety responsibilities.

#### **Significant changes, updates & points for review:**

- Policies must comply with Health and Safety at Work Act 2015
- Consult / co-ordinate with MSD (as a key stakeholder) in relation to health and safety matters. Also notify MSD and Worksafe of “notifiable events” (records kept should include actions taken to prevent a recurrence and outcomes of any investigation.)
- Provide evidence of worker engagement
- Regular minuted health and safety meetings with staff
- Process for informing governance body/owner of health and safety matters
- Staff induction in health and safety includes staff sign off
- Business continuity and disaster recovery plan
- How are attendance and sign in/out records checked for accuracy?
- “The organisation can demonstrate that they are aware of how children get to or from the programme.... “ and that they have “considered the safety of children who leave the programme unaccompanied.”
- Response to incidents that have an emotional impact on children or staff.
- Parents are advised of policy re unwell children upon enrolment



## Health & Safety

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|  | Programme complies with all relevant legislation.   |
|  | The programme and its facilities are safe and healthy for staff, children, families and others  |
|  | Staff, children, parents and others are well-informed about health & safety in the programme  |
|  | Staff are suitably trained for carry out their roles safely   |
|  | The programme is well-prepared for emergencies  |
|  | The programme respond effectively to adverse events   |
|  | <b>Policy/procedures</b>  |
|  | Programme safety procedures: hazard identification / facility checking  |
|  | Risk assessment for high risk activities (e.g. water)   |
|  | Staff induction, participation and training in health and safety  |
|  | Programme attendance & supervision Incl: ratios / pick up / lates / rolls   |
|  | Excursions and transport  |
|  | Accidents / incidents (incl. reporting to MSD)  |
|  | Emergency procedures: evacuation / civil defence  |
|  | Business continuity & disaster recovery   |
|  | Medication and illness  |
|  | Sun safety / Smokefree environment  |
|  | Pool safety procedures (if relevant)  |
|  | <b>Forms</b>  |
|  | Accident / incident (including any investigation and outcomes)  |
|  | Includes: child's name, time and date of event; details: where/how; nature of injury and treatment; name and signature of staff; signed by parent |
|  | Medication form   |
|  | Venue safety checks & hazard register   |
|  | Risk assessments – including off-site, water or high risk activities  |
|  | Records of staff induction and training – health and safety, programme supervision, duty of care  |
|  | Records of staff induction and training – higher risk duties: driving, pool supervision   |
|  | Records of staff meetings where health and safety discussed   |
|  | Emergency plan – copy of what is held at the venue  |
|  | Record of evacuation drills   |
|  | <b>Evidence</b>   |
|  | Safe premises that comply with legislation  |
|  | Hazard register has been regularly updated  |
|  | Equipment and furnishing are kept safe, clean and in good repair  |
|  | First aid kit and first aider on site   |
|  | Emergency procedures are clearly displayed / exits visible  |
|  | Effective supervision practices (incl ratios) are observed and reflected in staff rosters etc   |
|  | Incident reports and response/follow up   |
|  | Job descriptions include health and safety duties   |
|  | Staff induction records include sign off for health and safety  |
|  | Training records/qualifications   |
|  | Staff meeting minutes / reports to governance / management  |

## Health and safety

### MSD assessor site inspection may include

- Fencing - safety/suitability of the environment for children – variety, quiet spaces, warm welcoming
- Proximity to water, roads etc
- Building WOF etc.
- Exit signage and clear accessible
- Fire extinguishers etc record of inspections
- Emergency plans etc – displayed procedures
- Toxic chemicals
- First aid equipment and required records
- Kitchens – hygienic suitable, safe, storage etc
- Toilets – clean, accessible, sufficient
- Disabled access
- Vehicles used for transport – safe, suitable restraints, compliance

## **Reviewing the new MSD Approval standards:**

### **Service operation & management**

#### **Significant changes, updates & points for review:**

- Minutes from management / governance meetings – evidence that management / governance is informed about the programme
- The organisation is solvent and financially viable
- Adequate insurance coverage is in place
- Review of service delivery is undertaken regularly and evidence of service improvement

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|  | Clear governance / management structure – ties in with job descriptions for senior staff                             |
|  | Clear open and transparent process for recruitment to any governance body  |
|  | Stores and uses information with regard to legislation e.g. privacy  |
|  | The organisation is financially well-managed and viable  |
|  | Regular monitoring and improvement processes   |
|  | <b>Procedures</b>  |
|  | Programme hours  |
|  | Enrolment policy (check that it supports maintaining staff-child ratios)   |
|  | Record-keeping, storage, privacy and confidentiality – parents informed  |
|  | Financial management – income & expenditure records, budgeting, banking, petty cash and spending.                    |
|  | Government funding shown separately in accounts  |
|  | Financial audits (where more than \$100,000 in government <u>grant</u> funding (not subsidies) is received)          |
|  | Complaints process – parents informed  |
|  | Review of service delivery (e.g. annually) – refer to “Child Centred Service” policy                                 |
|  | <b>Forms</b>   |
|  | Enrolment form (meets requirements in OSCAR standard - see below) and parent information                             |
|  | Venue lease agreement  |
|  | <b>Evidence</b>  |
|  | Documentation of legal status e.g. company or incorporation certificate (not required for sole trader)               |
|  | Minutes from management/governance meetings – evidence that the governance body is well-informed about the programme |
|  | Minutes from staff meetings – evidence of staff engagement   |
|  | Annual plans / business plans (larger organisations)   |
|  | Board member would be required to be present at an approval visit  |
|  | Records and files are securely stored, and disposed of appropriately   |
|  | The organisation is solvent and financially viable   |
|  | Recent financial statements – monthly, annual  |
|  | Tax, GST, PAYE summaries – payments up to date   |
|  | Financial contingencies – sudden loss of revenue, programme closure etc.   |
|  | Controls on spending – budget limits and authorities   |
|  | How are any conflicts of interest managed?   |
|  | Adequate insurance coverage is in place  |
|  | Programme policies are on-site and accessible to parents   |
|  | Complaints are documented and shows practice consistent with policy  |
|  | Evidence of service improvement – policy updates, changes made as a result of feedback etc.                          |

### **Requirements for enrolment forms**

All enrolment forms are correctly and adequately filled out with up-to-date information. They must document:

- Parent contact details, signature and date
- a minimum of two emergency contacts
- names of individuals authorised to collect the child from the programme
- *Note: If a parent/guardian is not authorised to collect a child, the reason must be significant and evidence must also be provided, eg custody, access to a protection order.*
- the day/s of the week and the particular sessions the child will be attending
- parental/guardian consent when any child has been allowed to leave the programme un-accompanied
- any health and/or medical conditions, including what treatment is required and whether the child is self-medicating.
- Privacy statement
- Information of health issues, special needs, cultural background