

ACCEPTANCE AND REFUSAL OF AUTHORISATIONS POLICY GUIDELINES

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place in relation to the acceptance and refusal of authorisations (Regulation 168).

The approved provider must ensure that authorisations are obtained from families or authorised nominees in relation to:

- administering medication to children (Regulation 92)
- children leaving the premises in the care of the parent or the authorised nominee or another person authorised by the parent or authorised nominee named in the child's enrolment record (Regulation 99)
- excursions, including transportation (Regulation 102)
- transport provided or arranged by the service (Regulation 102D)
- seeking medical treatment for children and transportation by an ambulance service (Regulation 161).

Other legal requirements or quality practices may also involve authorisations, such as in relation to photos of children and privacy.

Under the *Education and Care Services National Regulations*, education and care services must have policies and procedures in place in relation to the acceptance and refusal of authorisations. These guidelines are part of a series and are intended to assist in the development of your *Acceptance and refusal of authorisations policy*. They have been designed to guide you in the development of your policy and are not an exact format.

1. Title

Acceptance and refusal of authorisations policy

2. Policy statement

The policy statement will reflect your service's philosophy and approach to the acceptance and refusal of authorisations.

For example:

We have comprehensive processes in place for managing authorisations that are sensitive to the needs of children and their families.

3. Background

Your policy needs to include a statement of why this requirement is in place.

For example, the *Education and Care Services National Regulations* require policies and procedures to be in place in relation to the acceptance and refusal of authorisations. Written authorisations from families or authorised nominees help to ensure that the health, safety, wellbeing and best interests of all children are met. Through the authorisation process, families are informed of risks associated with the issue, and can make an informed choice whether or not to proceed.

4. Legislative requirements

Your policy must be consistent with and refer to legislative requirements for the acceptance or refusal of authorisations. Examples include, but are not limited to:

Reg 92	Medication record
Reg 93	Administration of medication
Reg 94	Exception to authorisation requirement - anaphylaxis or asthma emergency
Reg 96	Self-administration of medication
Reg 99	Children leaving the education and care service premises
Reg 102	Authorisation for excursions
Reg 102D	Authorisation for service to transport children
Reg 160	Child enrolment records to be kept by approved provider and family day care educator
Reg 161	Authorisations to be kept in enrolment record
Reg 168	Education and care service must have policies and procedures
Reg 170	Policies and procedures to be followed
Reg 171	Policies and procedures to be kept available
Reg 172	Notification of change to policies or procedures

When writing your policy, you should break down what is required under each Regulation and how your service will meet these requirements. How these work in practice will be contained in your procedures.

As you reflect on your *Acceptance and refusal of authorisations policy*, it might highlight the need to split its various areas into different policies and procedures that can be readily accessed by all educators and staff members to follow in relation to your service's philosophy and their roles and responsibilities.

The service's *Acceptance and refusal of authorisations policy*, should set out the circumstances the provider would accept (or refuse) an authorisation. For example, the policy may state authorisations must be in writing, signed and dated, and clearly state the name of the child to whom the authorisation relates.

5. Principles to inform your policy

All decision-making should be carried out in accordance with the principles of your service's *Acceptance and refusal of authorisations policy*. Examples of principles could include, but are not limited to:

- The health, safety and wellbeing of children is our number one priority. Our range of safeguards include policies and procedures for the acceptance and refusal of authorisations.
- Our parents are part of the service decision-making process. Through authorisations, they are made aware of risks and can make informed decisions.
- We value the important role our educators and staff play. They are provided with the necessary training and support to act in accordance with authorisations provided and to know when to refuse authorisations.
- We prioritise good governance and quality management. We ensure that our acceptance and refusal of authorisations processes are effective and transparent and meet all regulatory requirements.

6. Key terms

To make it easier for your audience, provide definitions of key terms that may not be used every day. For example:

Term	Meaning	Source
ACECQA – Australian Children’s Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.	
Authorised nominee	A person who has been given permission by a parent or family member to collect the child from the service or the family day care educator.	National Law (Section 170)
Enrolment record	<p>The approved provider must ensure that an enrolment record is kept for each child enrolled at the service, and the family day care educator must keep an enrolment record for each child they educate and care for. The record must include:</p> <ul style="list-style-type: none"> • Full name, date of birth and address of the child • The name, address and contact details of <ul style="list-style-type: none"> - each known parent of the child - any emergency contact - any authorised nominee - any person authorised to consent to medical treatment or administration of medication - any person authorised to give permission to the educator to take the child off the premises • Details of any court orders, parenting orders or parenting plan • Gender of the child • Language used in the child’s home • Cultural background of the child and their parents • Any special considerations for the child, such as cultural, dietary or religious requirements or additional needs • Authorisations for: <ul style="list-style-type: none"> - the approved provider, nominated supervisor or an educator to seek medical treatment and/or ambulance transportation for the child - the service to take the child on regular outings • Name, address and telephone number of the child’s registered medical practitioner or medical service • Medicare number (if available) 	<p>National Regulations (Regulations 102, 160-162)</p> <p>Guide to the NQF (Management of records – Children’s enrolment record)</p>

	<ul style="list-style-type: none"> • Details of any specific healthcare needs of the child, including any medical conditions, allergies, or diagnosis that the child is at risk of anaphylaxis • Any medical management plan, anaphylaxis medical management plan or risk minimisation plan • Dietary restrictions • Immunisation status • If the approved provider or a staff member has sighted a child health record, a notation to that effect. 	
Excursion	<p>An outing organised by an education and care service or family day care educator, but does not include an outing organised by an education and care service provided on a school site if:</p> <p>(a) the child or children leave the education and care service premises in the company of an educator; and</p> <p>(b) the child or children do not leave the school site.</p>	National Regulations (Definitions)
Medication	<p>Medicine within the meaning of the Therapeutic Goods Act 1989 of the Commonwealth. Medicine includes prescription, over-the-counter and complementary medicines. All therapeutic goods in Australia are listed on the Australian Register of Therapeutic Goods, available on the Therapeutic Goods Administration website (www.tga.gov.au).</p>	Guide to the NQF (Glossary)
Medical attention	<p>Includes a visit to a registered medical practitioner or attendance at a hospital.</p>	acecqa.gov.au
Medical emergency	<p>An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.</p>	
Medication record	<p>The approved provider and family day care educator must keep a medication record for each child to whom medication is administered by the service. This record must include:</p> <ul style="list-style-type: none"> - the child's name - signed authorisation to administer medication - a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required. <p>A template medication record is available on the ACECQA website (https://www.acecqa.gov.au/media/22731).</p>	National Regulations (Regulation 92)

Parent	In relation to a child, includes: (a) A guardian of the child; and (b) A person who has parental responsibility for the child under a decision or order of a court.	National Law (Definitions)
Regular outing	In relation to an education and care service, means a walk, drive or trip to and from a destination: (a) that the service visits regularly as part of its educational program; and (b) where the circumstances relevant to the risk assessment are the same on each outing.	National Regulations (Definitions)
Regular transportation	In relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are the same for each occasion on which the child is transported.	Guide to the NQF (Glossary)
Transportation	Transportation forms part of an education and care service if the service remains responsible for children during the period of transportation. The responsibility for, and duty of care owed to, children applies in scenarios where services are transporting children, or have arranged for the transportation of children, between an education and care service premises and another location, for example their home, school, or a place of excursion. Examples of transport <u>not</u> forming part of a service include: <ul style="list-style-type: none"> • private transport provided by families and carers (i.e. carers not engaged by/registered with a service) • transport provided and/or arranged by an entity other than the approved provider, e.g. a school bus, and the children are not under the care of the approved provider • transport where the approved provider is providing the transport service in a capacity other than as the approved provider, e.g. a government department that provides an education and care service, provides school education, and provides a school bus to school students, on which the children who attend the service also travel for practical reasons (such as in a remote or rural location) • when a disability service picks up children and transports them to school or an activity. 	Guide to the NQF (‘Transportation’)

7. Links to other policies

Refer to related policies and procedures, for example:

- Excursions
- Emergency and evacuation
- The administration of first aid
- Incident, injury, trauma and illness
- Dealing with medical conditions in children
- Enrolment and orientation
- Transportation of children
- Delivery of children to, and collection of children from, education and care service premises
- Governance and management of the service

8. Induction and ongoing training

State information about induction training and frequency of ongoing training and information sharing to assist managers, coordinators, educators and staff to fulfil their roles effectively.

9. Policy created/reviewed

Include the date the policy was created, reviewed or changes were made.

10. Monitoring, evaluation and review

State when the policy will be reviewed and who will be responsible for this.

11. Checklist

- Have you referenced the relevant Regulations and are these reflected in the policy?
- Does the title provide a clear and concise statement identifying the intent of the policy?
- Have you checked the policy requirements and referenced related legislation that applies to your service type?
- Does your policy statement provide a framework for decision-making and ensure consistent practice?
- Does your policy statement reflect your service philosophy?
- Is it clear why this policy exists?



ACCEPTANCE AND REFUSAL OF AUTHORISATIONS PROCEDURES GUIDELINES

The approved provider must ensure the service has procedures in place for the acceptance and refusal of authorisations.

Your procedures should be written in clear and concise language, making them easy to read, understand and implement.

The steps and guidelines you document in your procedures will not only guide your practice, but also inform regulatory authorities of educator and staff expectations and responsibilities.

Every service is different so it is not sufficient to apply generic acceptance and refusal of authorisations policy and procedures to multiple services.

Under the *Education and Care Services National Regulations*, education and care services must have policies and procedures in place in relation to the acceptance and refusal of authorisations. These guidelines are part of a series and are intended to assist in the development of your *Acceptance and refusal of authorisations procedures*. They have been designed to guide you in the development of your procedures and are not an exact format.

1. Title

Acceptance and refusal of authorisations procedures

2. Reference to policy and philosophy

Here you refer to your *Acceptance and refusal of authorisations policy* as seen in your policy documents. You can reference where you will find the policy to help those looking for it.

Your procedures will also reflect your service's overall philosophy, *Acceptance and refusal of authorisations policy*, and evidence-based quality practice guidelines for the acceptance and refusal of authorisations.

3. Procedures

This is where you detail the way you will implement the *Acceptance and refusal of authorisations policy*.

It is the 'How to' in your service and includes specific step-by-step procedures for the acceptance and refusal of authorisations.

Some areas that will be outlined here will include:

- where the procedures will be kept
- when they were last reviewed
- templates and documents that might be required and/or used as a part of the procedures
- systems to monitor the implementation of the procedures
- communication with families – how they will be made aware of the requirements and the importance of keeping authorisations up-to-date.

You will need to consider how other procedures interact with the *Acceptance and refusal of authorisations procedures*. These include procedures relating to children's medical conditions, first aid, emergency, transportation and excursions.

As you reflect on your *Acceptance and refusal of authorisations policy*, it might highlight the need to split its various areas into different procedures, which will be displayed or accessed by all educators and staff to follow in relation to their actions.

4. Roles and responsibilities

This is where you will designate specific roles and responsibilities for the people who hold different positions within your service. This needs to align with the Regulations.

It is important to note that it is the legal responsibility of approved providers to ensure systems are in place to minimise risk and ensure health and safety procedures are implemented by the responsible people in services. Ultimate responsibility lies with the approved provider to ensure their service/s are meeting the requirements under the National Quality Framework.

When developing this section consider:

- What are the roles and responsibilities of the approved provider, nominated supervisor, educators or other staff in your service in relation to the acceptance and refusal of authorisations?
- How will you clearly define these roles and expectations and where will it be documented?
- Why are clear and robust procedures for the acceptance and refusal of authorisations important for children's safety and wellbeing?
- How will you learn from the administration of these procedures to improve your practices?
- How will you ensure that the necessary tools are available so the approved provider, nominated supervisor, educators and other staff members can follow the procedures? How will they be made aware of the procedures?

An example of roles and responsibilities could include, but is not limited to:

Roles	Responsibilities
Approved provider	<ul style="list-style-type: none"> • ensure that obligations under the <i>Education and Care Services National Law</i> and <i>National Regulations</i> are met • ensure that an enrolment record is kept for each child that includes authorisations signed by a parent or a person named in the enrolment record as authorised to consent to the medical treatment of the child, in relation to: <ul style="list-style-type: none"> - seeking medical treatment from a registered medical practitioner, hospital or ambulance service - transportation by an ambulance service - regular outings (Regulations 160, 161) • ensure that a medication record is kept that includes the authorisation to administer medication signed by a parent or a person named in the enrolment record (Regulation 92) • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> - a parent or authorised person named in the enrolment record - a registered medical practitioner or an emergency service if a parent or authorised person named in the enrolment record cannot be contacted (Regulations 93, 96) (In the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation (Regulation 94)) • ensure that children only leave the service premises, family day care (FDC) residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person authorised by a parent or authorised nominee to collect the child (Regulation 99) • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing (Regulation 102) • ensure no child is transported by the service without authorisation from a parent or other authorised person named in the enrolment record (Regulation 102D) • ensure systems requiring authorisations are in place for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date • put in place processes for circumstances where authorisations are refused. For example: <ul style="list-style-type: none"> - where the service is asked to administer medication that is not in its original container (see Regulation 95) - when an authorisation appears to be fraudulent, e.g. when it is provided by a person who is thought not to be the parent or authorised nominee • take reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the <i>Acceptance and refusal of authorisations policy and procedures</i> • ensure that copies of the policy and procedures are readily accessible to nominated supervisors, coordinators, educators and staff, and available for inspection • notify families at least 14 days before changing the policy or procedures if the changes will: <ul style="list-style-type: none"> - affect the fees charged or the way they are collected or - significantly impact the service's education and care of children or - significantly impact the family's ability to utilise the service

Roles	Responsibilities
<p>Nominated supervisor / Responsible person</p>	<ul style="list-style-type: none"> • implement the <i>Acceptance and refusal of authorisations policy and procedures</i> • ensure that the child’s parent completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service • ensure no child is transported by the service without an authorisation from their parent or other authorised person named in the enrolment record • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> - a parent or authorised person named in the enrolment record - a registered medical practitioner or an emergency service if the parent or authorised person named in the enrolment record cannot be contacted (In the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation) • ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person authorised by a parent or authorised nominee to collect the child • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing • ensure no child is transported by the service without authorisation from a parent or other authorised person named in the enrolment record • implement and oversee authorisation systems for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date • implement processes for circumstances where authorisations may be refused
<p>Educators</p>	<ul style="list-style-type: none"> • ensure all action plans are carried out in line with the <i>Acceptance and refusal of authorisations policy and procedures</i> • ensure that the child’s parent completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service • ensure no child is transported by the service without an authorisation from a parent or other authorised person named in the enrolment record • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> - a parent or authorised person named in the enrolment record - a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted (In the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation) • ensure that children only leave the service premises or FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person authorised by a parent or authorised nominee to collect the child • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing • ensure no child is transported by the service without authorisation from a parent or other authorised person named in the enrolment record

Roles	Responsibilities
	<ul style="list-style-type: none"> • implement authorisation systems for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date • implement processes for circumstances where authorisations may be refused
Parents	<ul style="list-style-type: none"> • complete and sign authorisations in the enrolment record and medication record (if relevant) before their child commences at the service • complete and sign an authorisation for their child to attend excursions and/or to be transported by the service • ensure any changes to authorisations or contact details are kept up-to-date • be familiar with circumstances where authorisations may be refused

The following table will assist you in developing procedures specific to your needs and context. Referring to the Regulations when you are writing your procedures will assist you to ensure that you are meeting your obligations.

Areas to include in your procedures	Things to consider and outline in each area <i>(this will be specific to the context of your service)</i>	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Obtaining and keeping authorisations</p> <p>Reg: 92, 93, 96, 99, 102, 102D, 160, 161, 168, 170-172</p> <p>QA2: 2.2</p> <p>QA6: 6.1</p> <p>QA7: 7.1.2</p>	<ul style="list-style-type: none"> • What processes are needed to ensure that the child’s parent completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service • How to ensure that enrolment records and medication records are kept for each child and that these include authorisations from parents or other authorised nominees • The processes needed to ensure that parents complete and sign authorisations relating to excursions by the service and that they include: <ul style="list-style-type: none"> - the child’s name - the reason the child is to be taken outside the premises - when the regular outings or excursions are to occur - the destination - if transportation is involved: <ul style="list-style-type: none"> > the means of transport > any jurisdictional requirements for seatbelts or safety restraints - proposed activities during the excursion - the period the child will be away from the premises - the number of children on the excursion, the educator-to-child ratio, the number of staff and any other adults who will supervise the children - that a risk assessment has been prepared and is available at the service 	<ul style="list-style-type: none"> • Make sure your policy and procedures are available for all to access • Consider creating a checklist of all tasks/items needed at enrolment, including authorisations • Consider creating a list of situations for each authorisation type that would result in the authorisation being refused • Develop a plan to communicate with families in the event of the refusal of an authorisation. This could include speaking points for educators to use depending on the situation • Develop physical and electronic systems for record keeping 	<p>Excursions</p> <p>Emergency and evacuation</p> <p>The administration of first aid</p> <p>Incident, injury, trauma and illness</p> <p>Dealing with medical conditions in children</p> <p>Enrolment and orientation</p> <p>Safe transportation of children</p> <p>Delivery of children to, and collection of children from, education and care service premises</p> <p>Governance and management of the service</p>

Areas to include in your procedures	Things to consider and outline in each area <i>(this will be specific to the context of your service)</i>	Strategies for monitoring and implementing procedures	Related policy and/or procedures
	<ul style="list-style-type: none"> • The processes needed to ensure that parents complete and sign authorisations relating to transportation by the service and that they include: <ul style="list-style-type: none"> - the child's name - the reason the child is to be transported - when the transportation is to occur - the pick-up location and destination - the means of transport - the period of time for the transport - the number of children to be transported, the number of staff members and any other adults who will supervise the children - any jurisdictional requirements for seatbelts or safety restraints - that a risk assessment has been prepared and is available at the service - that written policies and procedures for transporting children are available at the service • What authorisations may be required for other legal requirements or quality practices, e.g. photos of children and privacy • Whether to set a minimum age requirement for an authorised nominee • Ascertain the circumstances in which authorisations will be refused. For example: <ul style="list-style-type: none"> - where the service is asked to administer medication that is not in its original container (see Regulation 95) 		

Areas to include in your procedures	Things to consider and outline in each area <i>(this will be specific to the context of your service)</i>	Strategies for monitoring and implementing procedures	Related policy and/or procedures
	<ul style="list-style-type: none"> - when an authorisation appears to be fraudulent, e.g. when it is provided by a person who is thought not to be the parent or authorised nominee • How to communicate with parents about refusals • How to ensure that any refusals of authorisations are documented, including: <ul style="list-style-type: none"> - the details of the authorisation - why it was refused in those circumstances - actions taken by the service to address the situation 		

Areas to include in your procedures	Things to consider and outline in each area <i>(this will be specific to the context of your service)</i>	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Implementing authorisations</p> <p>Reg: 92, 93, 94, 96, 99, 102, 102D, 168, 170-172</p> <p>QA2: 2.2</p> <p>QA6: 6.1</p> <p>QA7: 7.1.2</p>	<ul style="list-style-type: none"> Processes for ensuring that medication is only administered or self-administered if authorised Processes for ensuring that medication is only administered in an emergency if authorisation is provided verbally (except in the case of anaphylaxis or asthma) by: <ul style="list-style-type: none"> - a parent or authorised person named in the enrolment record - a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be How to ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee, or a person authorised by a parent or authorised nominee to collect the child How to ensure that all children have appropriate authorisation to leave the service on an excursion or regular outing How to ensure that no child is transported by the service without authorisation from a parent or other authorised person named in the enrolment record What processes are required in cases where authorisations have been refused, e.g. alternate arrangements for children who will not be attending an excursion 	<ul style="list-style-type: none"> Provide educator and staff induction training on authorisations, standalone training, and regular updates and reviews at meetings Ensure educators and staff are familiar with relevant policies and procedures, particularly for children’s medical conditions, first aid, transportation, and excursions Display authorisation reminders where relevant, e.g. near exit to premises Ensure authorisations are part of checklists for excursions, transportation, etc. 	<p>Excursions</p> <p>Emergency and evacuation</p> <p>The administration of first aid Incident, injury, trauma and illness</p> <p>Dealing with medical conditions in children</p> <p>Enrolment and orientation</p> <p>Safe transportation of children</p> <p>Delivery of children to, and collection of children from, education and care service premises</p> <p>Governance and management of the service</p>

5. Procedures created/reviewed

Include the date the procedures were created or reviewed.

6. Monitoring, evaluation and review

Your service, in consultation with educators, staff, families and other stakeholders, should review the effectiveness of these procedures within a set timeframe or earlier if there is a change in relevant legislation.

State when the procedures will be reviewed and who will be responsible for this.

7. Checklist

- Do the procedures align with your *Acceptance and refusal of authorisations policy*?
 - Have your procedures been written in plain English and can they be easily implemented by an educator or staff new to your service?
 - Is it clear who is responsible for the implementation of the procedures?
 - Are all educators and staff aware of the procedures and can implement them if required?
 - Do you need to develop any resources to monitor and record the procedures?
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Useful Resources

Include links to useful resources that have helped inform the development of your policy. Be mindful of any state- or territory-specific content.

Some examples include but are not limited to:

- Acceptance and refusal of authorisations policy – <https://www.education.vic.gov.au/childhood/providers/regulation/Pages/authorisationspolicy.aspx>
- Guide to the National Quality Framework – <https://www.acecqa.gov.au/nqf/about/guide>