

# KU Kooinda Child Care Centre



## No kidding, it's heavy work

Workplace hazards come in many shapes and sizes: trips, spills, broken equipment, busy two-year-olds who absolutely don't want their nappy changed right now.

Managing 46 kids, from babies through to pre-schoolers, is demanding work for the 20 staff members at KU Kooinda Child Care Centre at Newcastle University.

The children are cared for in rooms in family groupings – mixed ages – with two teachers per 12 children. Extra teachers are also on hand to help out as necessary.

Family grouping, as opposed to the more common practice of dividing kids into age-based groups, make some aspects of the job less repetitive and therefore safer, says Centre Director Tracey Collins. "When you do a nappy run you don't have 12 to change in one go, you might have four or five."

But the physical management of the children is a constant challenge from an OHS perspective. Children, some of whom can't yet walk, need to be moved between areas, put to bed and woken up, and have their nappies changed – sometimes when they're very reluctant to leave what they're doing.

Kooinda already has a policy on lifting children, which encourages minimal lifting and states that wherever possible children should walk rather than have a staff member lift them.

Measures are in place, like stairs the children can climb up to the nappy change table, to reduce the lifting load on childcare workers.

Nevertheless, several staff members have suffered back injuries, prompting Collins to consider introducing a 'no-lift' policy across the centre.

"So far I've just been mentioning to staff that it's something I'd like to look at based on the number of injuries, to prepare them for a consultation process," she says.

Kooinda, which is part of the KU group of preschools and daycare centres, has a formal OHS consultation process which, brings organisation-wide resources and procedures to workplace-specific issues. It starts with Collins and KU's OHS Manager Ian Makins preparing a draft policy or procedure, which is then issued to staff for discussion and input. OHS is

always discussed at the staff meetings held every five weeks.

Recent issues open for consultation were the use of a blower vac for removing stray sand from around the sandpit, as well as procedures for safe use of the centre's laptop computer.

KU – which administers 131 services with nearly 2000 employees – also has a committee structure to bring together representatives from work areas, and a centralised OHS document suite on its intranet.

But informal consultation takes place continually as staff negotiate the dynamic environment of the childcare centre.

Childcare worker Renae Petty and her colleague Aaren Osborne have implemented their own no-lift policy for the room they look after. The impetus for Petty was a back injury which took several months to mend.

Petty and Osborne work together to make sure their room is set up and managed in the safest possible way. They use the nappy-change stairs for toddlers to climb into their cots, rather than needing to be lifted from the ground.

"We are always aware of clutter and toys as a hazard. We pack away at a certain time of the day. I also set up the room so the entrance and exits are clear – we don't put baby toys and blocks near those areas, as they can be trip hazards. Construction areas are pushed up against the wall.

"Aaren and I talk about these protocols together; we talk about a problem and come up with a solution."

It's that continual tic-tacking about health and safety during the course of the day that contributes most to effective consultation, says Ian Makins, OHS Manager for the KU group.

"The team dynamic is the key to effective consultation in the services. On the ground, they are talking about issues all the time as they deal with the children on a daily basis," says Makins.

"Because we are dealing with children, situations change rapidly so there's a high level of communication, that's why the consultation process for OHS works very well."



*Tracey Collins*

“I constantly remind people that we need to look after our own health and safety, not just that of the children.

Because of nature of the work and the nature of people who do early childhood work it is hard to be selfish and to do that. One problem is that when they have injured themselves but their baby has to get into the cot – well that baby has to wait two minutes until a staff member without a back injury can put them in.

There’s a really selfless attitude, but as long as you’re protecting the child it’s important to keep yourself safe as well.”

*Tracey Collins  
Director*

“KU advocates that each service as a team - when they identify a hazard - come together to consult. I get a very good sense that they consult effectively, they have regular staff meetings and they keep minutes. At those meetings they’ve been discussing health and safety issues that have been identified, and relevant controls have been put in place.

I believe the team dynamic is the key to effective consultation in the services. Most of the policies and procedures, not just for OHS, are all focused on a team dynamic and communication. The majority of our policies and procedures would foster that.”

*Ian Makins  
OHS Manager, KU*



*Ian Makins*

“Childcare is a physically risky industry. Everything is at the child’s level, so you’re bending over to pick up toys 50 times a day or more. Even putting their cutlery on the table can strain your back. That’s why if I see someone lifting a child I think, ‘why don’t you let them walk?’

There’s a very high awareness of OHS at this centre. Here, we support any measure that improves teachers’ health and safety.

If it’s a whole centre issue, we talk about it at our meeting. Tracey does a draft and brings it to the meeting and we review it and add anything that needs to be changed and modified. Everyone’s point of view is taken into account.”

*Renae Petty*



*Renae Petty*