TOBACCO, E-CIGARETTES, ALCOHOL AND OTHER DRUGS

QUALITY AREA 2. | ELAA version 1.0

PURPOSE

This policy provides guidelines to enable St Francis of Assisi OSHC to:

- provide a safe environment for all children which ensures their safety, health and wellbeing
- promote a cultural of health and wellbeing of all staff, children and families
- improve educational health and wellbeing outcomes for all children and families
- provide access to information on quitting smoking, vaping, alcohol and other drug use and promote the health benefits of avoiding these behaviours.



POLICY STATEMENT

VALUES

St Francis of Assisi OSHC is committed to:

- ensuring a smoke/vape free, illicit drug-free, and alcohol free environment for children, families, educators, staff, volunteers and visitors
- promoting low-risk alcohol consumption to our service community
- encouraging educators and staff to build on opportunistic learning moments with children
- providing information to educators, staff and families about the health benefits of not smoking, vaping or taking drugs, and responsible low risk alcohol consumption.

SCOPE

This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, educators, staff, students, volunteers, parents/guardians, children, and others attending the programs and activities of St Francis of Assisi OSHC, including during offsite excursions and activities.

R indicates legislation requirement, and should not be deleted							
Providing a safe and healthy environment for educators, staff, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs	R	R					

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and activities of St Francis of Assisi OSHC (Regulation 103, National Law: Section 167)				
Ensuring that children being educated and cared for by St Francis of Assisi OSHC are provided with an environment that is free from the use of vaping, tobacco/e-cigarettes, illicit drugs and alcohol (Regulation 82 (1))	R	V	V	V
Ensuring that a nominated supervisor, educators, staff, contractors, volunteers, students on placement at St Francis of Assisi OSHC are not affected by alcohol or drugs, including prescription medication (refer to Definition) to impair the person's capacity to supervise or provide education and care to children at St Francis of Assisi OSHC (Regulation 83 (1))	R	R	√	V
Not consuming alcohol or be affected by alcohol or drugs (including prescription medication) that impairs capacity to supervise or provide education and care to the children (Regulation 83 (2) (a) (b))	V	R	V	V
Developing procedures that include steps to remove an affected staff member from St Francis of Assisi OSHC so they do not further endanger other staff and children. Procedures should provide guidelines to ensure that the staff member is able to get home safely and outline steps for initiating police or ambulance intervention if the situation cannot be safely managed at the workplace level (refer to Code of Conduct Policy and Compliments and Complaints Policy) (National Law: Section 167)	R	R	V	V
Developing, updating and reviewing the <i>Tobacco, E-Cigarettes, Alcohol and other Drugs Policy</i> in collaboration with the nominated supervisor, educators/staff, parents/guardians, children and others involved at St Francis of Assisi OSHC	V	V	V	V
Providing the nominated supervisor, educators, staff, contractors, volunteers, students and families with information about policy requirements, with opportunities to provide feedback and input	V	V	√	V
Considering diversity and cultural practices when implementing this policy and tobacco, e-cigarettes, alcohol and other drugs initiatives	V	V	V	V
Ensuring the <i>Tobacco, E-cigarettes, Alcohol and other Drugs</i> Policy is included in educator and staff induction/orientation	R	V		
Preventing and managing risks associated with the use of alcohol and other drugs	R	V		
Monitoring the health and safety of educators, staff, contractors, volunteers, students on placement, parents/guardians and children	R	√		
Providing information and training to educators and staff, including information and training on vaping, tobacco, ecigarettes, alcohol and other drugs	V	V		
Providing staff who identify as having an alcohol and/or other drugs problem referrals to professional assistance, and/or the Employee Assistance Program (if applicable)	V	V		

Ensuring there is a smoke and vape free zone (refer to Definition) within four metres of the entrance to St Francis of Assisi OSHC premises, and within ten metres of children's outdoor play areas	R	V			
Ensuring that there is smoke and vape free signage that can be easily seen and understood by the whole community	R	√			
Ensuring that all service events, on and off site, are smoke, vape and drug-free	R	√	V		V
If there is alcohol at a staff or family events, ensuring all legal requirements related to the sale and supply of alcohol are met and that responsible consumption of alcohol is promoted	R	V	V		V
If external organisations use the premises, a formal agreement ensuring that the service premises are smoke and vape-free, drug-free and responsible alcohol consumption is promoted	R	V			
Ensuring that the nominated supervisor, educators, staff, families and visitors adhere to legislation and St Francis of Assisi OSHC policies related to smoke and vape-free areas and are asked not to smoke in sight of children	R	V	V		V
Encouraging the nominated supervisor, early childhood teachers, educators and staff who smoke or vape to take appropriate hygiene measures after smoking so that children are not exposed to second-hand (refer to Definition) and third-hand smoke (refer to Definition) (refer to Hygiene Policy)	R	V	V		V
Not consuming or being under the influence of alcohol or affected by drugs when attending St Francis of Assisi OSHC	√	√	V	1	V
Refraining from smoking in the car with children under the age of 18				V	
Ensuring the consumption of alcohol as a part of events, celebrations, awards, gifts and fundraising is done so responsibly	V	√	V		V
Supporting the nominated supervisor, staff and families who want to quit smoking, vaping, drinking or using other drugs to access appropriate agencies and maintaining confidentiality	V	V			
Providing resources about the health risks related to smoking, vaping, excessive drinking and taking drugs to educators and staff	V	V			
Providing information about health risks related to smoking, vaping, excessive drinking and using other drugs to families and community members, including information about accessing support services	V	V			
Guiding age-appropriate, sensitive discussions about health issues related to vaping, tobacco, e-cigarettes, alcohol and drug use as opportunities arise (e.g. if a child is pretending to smoke)		V	V		V
Engaging in professional development and resources that guide age-appropriate, sensitive discussions about health issues related to vaping, tobacco, e-cigarettes, alcohol and drug use as opportunities arise		V	V		V
Ensuring that partnerships are established with relevant organisations and health professionals to support smoke and	V	√	V		V

vape-free, drug-free and responsible consumption of alcohol initiatives where appropriate				
Ensuring that there are no partnerships with organisations that market or supply alcohol, tobacco, vapes or e-cigarettes	√	√	√	√
Taking reasonable care for their own health and safety in the workplace, and the health and safety of others who may be affected by their acts or omissions (OHS Act section 25(1)(a) and (b))	V	V	V	V



BACKGROUND AND LEGISLATION

BACKGROUND

The effects of drugs and alcohol can impair the capacity of a person to make judgments relating to the care, safety and education of young children. The effects of vaping and tobacco smoking on an individual's health are well documented. Second-hand smoke (refer to Definitions) and third-hand smoke (refer to Definitions) is dangerous, especially for babies and children, as they have smaller airways that are still developing.

Children exposed to second-hand smoke are at an increased risk of early death and disease from various causes. Second-hand smoke can impair a baby's breathing and heart rate, which can put the baby at a higher risk of sudden unexpected death in infancy (SUDI). Exposure to second-hand smoke (refer to Definitions) and third-hand smoke (refer to Definitions) can affect a child's developing brain due to the sensitivities of the brain to very small amounts of toxins.

Drinking alcohol or taking other drugs can affect a person's ability to connect with and care for children. Alcohol and other drug use can become an occupational health and safety issue, as it may impairs one's ability to exercise judgment, coordination, motor control, concentration, and alertness in the workplace. Employees unfit for work as a result of alcohol or other drug use put themselves, children and other staff members in the workplace at risk of harm.

The key to tobacco, e-cigarettes, alcohol and other drugs in the early years is prevention. The most effective means of prevention is providing an early childhood environment that is supportive and protective of all children. Building resilience and developing social and emotional competencies should start early to enhance the potential for children to resist risky behaviours later in life.

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Child Wellbeing and Safety Act 2005 (Vic) (Part 2: Principles for children)
- Early Childhood Australia's Code of Ethics (2016)
- Education and Care Services National Law Act 2010: Section 174
- Education and Care Services National Regulations 2011: Regulations 82, 82, 175, 176
- Liquor Control Reform Act 1998
- National Quality Standard, Quality Area 2: Children's Health and Safety
- Occupational Health and Safety Act 2004
- Occupational Health and Safety Regulations 2007
- Tobacco Act 1987 (Vic)



DEFINITIONS

The terms defined in this section relate specifically to this policy. For regularly used terms e.g. Approved provider, Nominated supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the Definitions file of the PolicyWorks catalogue.

Tobacco, E-Cigarettes, Alcohol and other Drugs

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Alcohol: A depressant drug that slows down activity in the central nervous system.

Drug: Refers to any substance taken to change the way the body and/or mind functions.

E-cigarette product: Any electronic device that is intended to be used to create an aerosol for inhalation and any liquid, or product containing liquid, intended to be used in or with an electronic device to create an aerosol for inhalation

Prescription medication: medicine that can only be made available to a patient on the written instruction of an authorised health professional. Examples of prescription medicines include blood pressure tables, cancer medicine and strong painkillers.

Second-hand smoke: refers to the ambient smoke that is a by-product of active smoking. It consists mainly of exhaled mainstream smoke and side stream smoke mixed with air. Breathing in second-hand smoke is also called passive smoking or involuntary smoking.

Smoke Free Zone: smoking that is prohibited in all enclosed workplaces and certain public spaces where members of the public gather and may be exposed to second-hand tobacco smoke.

Third-hand smoke: refers to residual tobacco smoke constituents that remain on clothes, surfaces and in dust after tobacco has been smoked. These substances are then re-emitted as gases or react with other compounds in the environment to create other substances.

Tobacco product: Any device or product that contains organic matter that is heated or burned to create aerosol or smoke that is inhaled by the user.

Tobacco, alcohol and other drugs: For the purposes of this policy and for the Healthy Early Childhood Services Achievement Program, the 'Tobacco, Alcohol and Other Drugs' health priority area focuses on creating smoke-free and drug-free environments and responsible alcohol consumption.

Vaping: E-cigarettes, also known as 'vapes', are battery operated devices that work by heating a liquid (or 'juice') until it becomes an aerosol that users inhale. Using an e-cigarette is commonly called 'vaping'.



SOURCES AND RELATED POLICIES

SOURCES

- Alcohol and Drug Foundation: https://adf.org.au
- Alcohol and Drugs Foundation: www.adf.org.au
- Better Health Channel Drugs: <u>www.betterhealth.vic.gov.au</u>
- Cancer Council Victoria: https://www.cancervic.org.au
- Department of Education and Training Drugs Education: <u>www.education.vic.gov</u>
- Health.Vic: www2.health.vic.gov.au
- National Drug Strategy: <u>www.health.gov.au</u>
- Quit Victoria: https://www.quit.org.au
- Raising Children Network: https://raisingchildren.net.au
- Tobacco in Australia: https://www.tobaccoinaustralia.org.au
- Work Safe Victoria: Guide for developing a workplace alcohol and other drugs policy (2017)

RELATED POLICIES

- Child Safe Environment and Wellbeing
- Code of Conduct
- Compliments and Complaints
- Delivery and Collection of Children
- Interactions with Children
- Occupational Health and Safety
- Staffing

Tobacco, E-Cigarettes, Alcohol and other Drugs

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EVALUATION



In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- assess whether a satisfactory resolution has been achieved in relation to issues arising from this
 policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (Regulation 172 (2)).

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