



CHCECE032

Nurture babies and toddlers

**LEARNER
GUIDE**



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This Learner Guide

CHCECE032 - Nurture babies and toddlers (Release 1)

This unit describes the performance outcomes, skills and knowledge required to develop relationships with babies and toddlers and their families and attend to the specific physical and emotional needs of babies and toddlers from birth to 23 months. It requires the ability to follow individualised care routines for sleep, feeding and toileting.

This unit applies to educators who work according to established policies and procedures and under the guidance of others in regulated children's education and care services in Australia.

The skills in this unit must be applied in accordance with Commonwealth and State/Territory legislation, Australian standards and industry codes of practice.

A complete copy of the above unit of competency can be downloaded from the TGA website:

<https://training.gov.au/Training/Details/CHCECE032>

About this Unit of Study Introduction

As a worker, a trainee, or a future worker, you want to enjoy your work and become known as a valuable team member. This unit of competency will help you acquire the knowledge and skills to work effectively as an individual and in groups. It will give you the basis to contribute to the goals of the organisation which employs you.

It is essential that you begin your training by becoming familiar with the industry standards to which organisations must conform.

This Learner Guide Covers

Nurture babies and toddlers

- I. Develop relationships with babies and toddlers
- II. Develop effective relationships with family members
- III. Promote safe sleep
- IV. Provide positive nappy-changing and toileting experiences
- V. Promote quality mealtime environments
- VI. Create a healthy and safe environment

Learning Program

As you progress through this unit of study, you will develop skills in locating and understanding an organisation's policies and procedures. You will build up a sound knowledge of the industry standards within which organisations must operate. You will become more aware of the effect that your own skills in dealing with people have on your success or otherwise in the workplace. Knowledge of your skills and capabilities will help you make informed choices about your further study and career options.

Additional Learning Support

To obtain additional support, you may:

- Search for other resources. You may find books, journals, videos and other materials which provide additional information about topics in this unit.
- Search for other resources in your local library. Most libraries keep information about government departments and other organisations, services and programs. The librarian should be able to help you locate such resources.
- Contact information services such as Infolink, Equal Opportunity Commission, Commissioner of Workplace Agreements, Union organisations, and public relations and information services provided by various government departments. Many of these services are listed in the telephone directory.
- Contact your facilitator.

Facilitation

Your training organisation will provide you with a facilitator. Your facilitator will play an active role in supporting your learning. Your facilitator will help you at any time during working hours to assist with:

- How and when to make contact,
- what you need to do to complete this unit of study, and
- what support will be provided.

Here are some of the things your facilitator may do to make your study easier:

- Give you a clear visual timetable of events for the semester or term in which you are enrolled, including any deadlines for assessments.
- Provide you with online webinar times and availability.
- Use ‘action sheets’ to remind you about tasks you need to complete, and updates on websites.
- Make themselves available by telephone for support discussion and provide you with industry updates by email where applicable.
- Keep in touch with you during your studies.

Flexible Learning

Studying to become a competent worker is an interesting and exciting thing to do. You will learn about current issues in this area. You will establish relationships with other students, fellow workers, and clients. You will learn about your own ideas, attitudes, and values. You will also have fun. (Most of the time!)

At other times, studying can seem overwhelming and impossibly demanding, particularly when you have an assignment to do and you aren't sure how to tackle it, your family and friends want you to spend time with them, or a movie you want to see is on television.

Sometimes being a student can be hard.

Here are some ideas to help you through the hard times. To study effectively, you need space, resources, and time.

Space

Try to set up a place at home or at work where:

1. You can keep your study materials,
2. you can be reasonably quiet and free from interruptions, and
3. you can be reasonably comfortable, with good lighting, seating, and a flat surface for writing.

If it is impossible for you to set up a study space, perhaps you could use your local library. You will not be able to store your study materials there, but you will have quiet, a desk and chair, and easy access to the other facilities.

Study Resources

The most basic resources you will need are:

1. A chair
2. A desk or table
3. A computer with Internet access
4. A reading lamp or good light
5. A folder or file to keep your notes and study materials together
6. Materials to record information (pen and paper or notebooks, or a computer and printer)
7. Reference materials, including a dictionary

Do not forget that other people can be valuable study resources. Your fellow workers, work supervisor, other students, your facilitator, your local librarian, and workers in this area can also help you.

Time

It is important to plan your study time. Work out a time that suits you and plan around it. Most people find that studying, in short, concentrated blocks of time (an hour or two) at regular intervals (daily, every second day, once a week) is more effective than trying to cram a lot of learning into a whole day. You need time to ‘digest’ the information in one section before you move on to the next, and everyone needs regular breaks from study to avoid overload. Be realistic in allocating time for study. Look at what is required for the unit and look at your other commitments.

Make up a study timetable and stick to it. Build in ‘deadlines’ and set yourself goals for completing study tasks. Allow time for reading and completing activities. Remember that it is the quality of the time you spend studying rather than the quantity that is important.

Study Strategies

Different people have different learning ‘styles’. Some people learn best by listening or repeating things out loud. Some learn best by ‘doing’, some by reading and making notes. Assess your own learning style and try to identify any barriers to learning which might affect you. Are you easily distracted? Are you afraid you will fail? Are you taking study too seriously? Not seriously enough? Do you have supportive friends and family? Here are some ideas for effective study strategies:

1. **Make notes.** This often helps you to remember new or unfamiliar information. Do not worry about spelling or neatness, as long as you can read your own notes. Keep your notes with the rest of your study materials and add to them as you go. Use pictures and diagrams if this helps.
2. **Underline keywords** when you are reading the materials in this Learner Guide. (Do not underline things in other people’s books.) This also helps you to remember important points.
3. **Talk to other people** (fellow workers, fellow students, friends, family, or your facilitator) about what you are learning. As well as help you to clarify and understand new ideas, talking also gives you a chance to find out extra information and to get fresh ideas and different points of view.



Using this Learner Guide

A Learner Guide is just that, a guide to help you learn. A Learner Guide is not a textbook. Your Learner Guide will:

1. Describe the skills you need to demonstrate to achieve competency for this unit.
2. Provide information and knowledge to help you develop your skills.
3. Provide you with structured learning activities to help you absorb knowledge and information and practice your skills.
4. Direct you to other sources of additional knowledge and information about topics for this unit.

How to Get the Most Out of Your Learner Guide

Some sections are quite long and cover complex ideas and information. If you come across anything you do not understand:

1. Talk to your facilitator.
2. Research the area using the books and materials listed under Resources.
3. Discuss the issue with other people (your workplace supervisor, fellow workers, fellow students).
4. Try to relate the information presented in this Learner Guide to your own experience and to what you already know.
5. Ask yourself questions as you go. For example, ‘Have I seen this happening anywhere?’ ‘Could this apply to me?’ ‘What if...’ This will help you to ‘make sense’ of new material, and to build on your existing knowledge.
6. Talk to people about your study. Talking is a great way to reinforce what you are learning.
7. Make notes.
8. Work through the activities. Even if you are tempted to skip some activities, do them anyway. They are there for a reason, and even if you already have the knowledge or skills relating to a particular activity, doing them will help to reinforce what you already know. If you do not understand an activity, think carefully about the way the questions or instructions are phrased. Read the section again to see if you can make sense of it. If you are still confused, contact your facilitator or discuss the activity with other students, fellow workers or with your workplace supervisor.

Additional Research, Reading, and Note-Taking

If you are using the additional references and resources suggested in the Learner Guide to take your knowledge a step further, there are a few simple things to keep in mind to make this kind of research easier.

Always make a note of the author's name, the title of the book or article, the edition, when it was published, where it was published, and the name of the publisher. This includes online articles. If you are taking notes about specific ideas or information, you will need to put the page number as well. This is called the reference information. You will need this for some assessment tasks, and it will help you to find the book again if you need to.

Keep your notes short and to the point. Relate your notes to the material in your Learner Guide. Put things into your own words. This will give you a better understanding of the material.

Start off with a question you want answered when you are exploring additional resource materials. This will structure your reading and save you time.

Introduction



Nurturing babies and toddlers can be both challenging and rewarding. You are responsible for the small humans who rely on you completely to take care of them. Children build the foundation for their development during the early years. Treating babies and toddlers with care and respect allows them to adapt and understand positive behaviour.

This unit will describe the skills and knowledge required by educators working with babies and toddlers to ensure that the children's physical and emotional wellbeing is maintained. This unit applies to those working with babies and toddlers from birth to 24 months in early education and care contexts.

This learner guide will discuss how you can do the following from a practical perspective:

- Develop relationships with babies and toddlers
- Develop effective relationships with family members
- Promote safe sleep
- Provide positive nappy-changing and toileting experiences
- Promote quality mealtime environments
- Create a healthy and safe environment

I. Develop Relationships With Babies and Toddlers



Early childhood environments set the foundation for children's development. It is a time when children develop feelings of attachment and belonging. This is a crucial time for instilling trust and a sense of identity. Different developmental levels are built and enhanced during early childhood. Developing relationships is the process of building emotional connections. From the birth of a child, relationships are built on trust and intimacy. Children can explore and discover who they are through relationships. It is crucial for children to experience people understanding and helping them out. This encourages them to be open and approach experiences with enthusiasm.

The early years in a child's life offer great potential for tremendous growth and development. There is a significant window of opportunity for adults to help shape a child's views and guide their actions.

This chapter will discuss how you can do the following:

- Provide consistent and positive personal care routines suited to the child's individual and cultural context
- Identify and initiate opportunities during daily routines for one-to-one communication with babies and toddlers that supports learning, development and wellbeing
- Recognise and respond to interactions initiated by babies and toddlers, and provide physical comfort and calm reassurance to facilitate attachment
- Identify ways of enhancing relationship-building skills through observation, discussion and reflection

1.1 Provide Consistent and Positive Personal Care Routines Suited to the Child's Individual and Cultural Context



Nurturing practices, patience and responsible actions are required when caring for babies and toddlers. The education and care that a child receives have a huge impact on their development and growth. During the early years of a child, when they are learning to adapt to new experiences, they must feel supported through consistent and positive personal care routines, which serve as the activities of daily living. These prepare children for important day-to-day activities such as getting dressed, eating food or taking a bath.

Ways to prepare children for these activities may include the following:

- Training the children's ability to use their hands to interact with objects around them
- Communicating with children
- Demonstrating a step-by-step process, such as putting on a pair of pants
- Teaching them to follow easy instructions given by an adult

1.1.1 Provide Consistent Personal Care

An important facet of a child's day in a group care setting is predictability (i.e. setting a consistent pattern that gives the child an opportunity to learn good habits). Consistency means that you provide the same level of care every day. This way, you can build trust and connect with the child.

By designing appropriate routines and transitions, educators are helping to provide children with a strong sense of safety and security. This applies strongly to the nursery environment, where a large part of the day is usually taken up with:



To be predictable, routines need to be consistent (i.e. follow the same pattern every day) and should reflect the needs of different age groups.

Consistent personal care offers the following benefits:

- It makes children understand what is expected of them (e.g. to wash hands before eating).
- It establishes healthy habits (e.g. brushing teeth after a meal).
- It helps create a schedule (e.g. sleep time).
- It offers stability (i.e. lessens the anxiety of the unknown).

For babies and young children, these routines will need to accommodate the individual needs of each child, as well as be flexible enough to work around any special occurrences on the day (e.g. photo day or a special event).

To provide consistent personal care to children, you can do the following techniques:

- **Lessen daily transitions.**

Transition is the change from one activity to another. Too many transitions in a day can be stressful to a child.

- **Plan effectively.**

Effective planning means that you choose essential activities and choose the most practical transition schedules. For example, it will be easier for babies and toddlers to fall asleep during a nap when they are neither hungry nor too full. So, it will be best to schedule a different activity, such as playtime, after a meal, or before nap time.

- **Set expectations.**

Support children to self-regulate and develop their body clocks by telling them what is expected of them during scheduled activities. Let children know what the activity for a set schedule means. For example, let children know they need to sleep during nap time or they need to eat during mealtime.

1.1.2 Provide Positive Personal Care

Positive personal care means providing personal care compliant with standards and guidelines to ensure quality and safety. To provide positive personal care to children, you must consider the following.

Laws and Regulations

The Australian Children's Education and Care Quality Authority (ACECQA) assists governments in overseeing the National Quality Framework (NQF) for Early Childhood Education and Care. The NQF is used to regulate education services by setting up standards and learning frameworks.

Below are the pieces of legislation that apply to different states and territories.

State /Territory	Legislation/Regulation
Australian Capital Territory	
New South Wales	
North Territory	<i>Education and Care Services National Law Act 2010</i>
Queensland	<i>Education and Care Services National Regulations (2011 SI 653)</i>
South Australia	
Tasmania	
Victoria	
Western Australia	<i>Education and Care Services National Law (WA) Act 2012</i> <i>Education and Care Services National Regulations</i>

The National Quality Standards, according to the NQF, are divided into seven quality areas as follows:

1. Educational program and practice
2. Children's health and safety
3. Physical environment
4. Staffing arrangements
5. Relationships with children
6. Collaborative partnerships with families and communities
7. Governance and leadership

Although all of these quality areas are essential, you need to focus on the quality standards for children's health and safety along with the quality standards for relationships with children for this unit.

Children's Health and Safety

Quality Area 2 of the NQS outlines the standards for children's health and safety. It outlines the following considerations:

- **Health**

The health of each child must be considered and supported at all times.

- Wellbeing and comfort
- Health practices and procedures
- Healthy lifestyle

- **Safety**

- Supervision
- Incident and emergency management
- Child protection

Relationships With Children

Quality Area 5 of the NQS outlines the standards for relationships with children. It outlines the following considerations:

- **Relationships between educators and children**

Respectful and equitable relationships are maintained with each child.

- *Positive educator to child interactions*
Interactions are responsive and meaningful and geared towards building trust.
- *Dignity and the rights of the child*
The rights and dignity of a child are protected.

- **Relationships between children**

Each child is supported to build and maintain sensitive and responsive relationships.

- *Collaborative learning*

Opportunities are provided to allow collaboration between children.

- *Self-regulation*

Children are encouraged and supported to regulate their behaviours.

Sourced from the New South Wales Legislation website on March 1, 2021. For the latest information on New South Wales Government legislation please go to <https://www.legislation.nsw.gov.au>.



Further Reading

ACECQA provides a fact sheet about Quality Areas 2 (Health and Safety) and 5 (Relationships with Children). Refer to the links below.

[Quality Area 2 – Children’s health and safety](#)

[Quality Area 5 – Relationships with children](#)

In the table below are the regulatory authorities for each state/territory.

State/Territory	Regulatory Authority
New South Wales	Early Childhood Education Directorate, NSW Department of Education
Victoria	Department of Education and Training
Queensland	Regulation, Assessment and Service Quality, Early Childhood and Community Engagement, Dept. of Education and Training
Western Australia	Department of Communities, Education and Care Regulatory Unit
South Australia	Education Standards Board

State/Territory	Regulatory Authority
Tasmania	Department of Education, Education and Care Unit
Australian Capital Territory	Children's Education and Care Assurance, Early Childhood Policy and Regulation, Education Directorate, ACT Government
Northern Territory	Quality Education and Care NT, Department of Education

Approved Learning Frameworks

The national law and regulations require services to base their programs on approved learning frameworks. Below is the nationally approved learning framework for early childhood education:

- Belonging, Being and Becoming: The Early Years Learning Framework for Australia (EYLF) (applicable for 0–5 years old)

Victoria has a specific learning framework:

- Victoria: Victorian Early Years Learning and Development Framework



Further Reading

ACECQA has a comprehensive guide on the approved learning frameworks. Refer to the link below:

[Approved Learning Frameworks](#)

Organisational Policies and Procedures

It is crucial for you to know what your organisation's policies and procedures are when it comes to interacting with children. There may be various policies and procedures in place for you to comply with, such as the following:

- **Physical environment**

Learning centres will usually have policies and procedures for how physical environments should be used and the purpose of using them. This may include how to maintain cleanliness and ensure safety.

- **Interaction with children**

Learning centres will also have policies and procedures for how you should interact with the children under your care. This may involve the use of appropriate language and disciplinary techniques.

You must understand what may be considered dangerous or inappropriate by your organisation. Not only can this affect your professional career, but this can also affect the safety of the children in your care. Remember that you are responsible for their wellbeing and that these children will rely on you to protect and secure them.



Sparkling Stars Early Years Learning Centre

Sparkling Stars is the simulated early years learning centre environment referenced in our learning resources. Their policies and procedures are published on their site. You can access them through the link below:

[Policies and Procedures](#)

It is important to remember that the children under your care may be from different cultural backgrounds and have different individual needs. It is then your responsibility to ensure that the care you provide and the routines you follow for the children under your care are sufficient and appropriate.

Inclusion in early childhood services reflects the acceptance in society of the principles of social justice. Children of all ability levels and diverse backgrounds have the same intrinsic value and are entitled to the same access to and opportunities for participation, acceptance and belonging.

Inclusivity in the early childhood education and care context can be demonstrated through the following principles:

- Respecting, including and promoting each child's religion, culture, ethnic background, sexual orientation, gender identity, physical and mental ability in the procedures, activities, and physical environments of the centre
- Recognising that children are active agents in their own lives and learning and engaging with all children regardless of their background and culture

Diversity in the early childhood education and care context can be demonstrated through the following principles:

- Recognising that every child has a different learning curve that requires individualised learning and development opportunities, enabling children to achieve their full potential
- Understanding that each child has a unique experience of context and culture as well as a sense of identity and belonging

Equity in the early childhood education and care context can be demonstrated through the following principles:

- Recognising the complex nature of disadvantage and purposefully addressing it, such as the implementation of differentiated instruction (bridging the gap) or individualised support for marginalised and indigenous children
- Engaging every child in challenging, age-appropriate learning experiences that involve different learning experiences appropriate to their skills and knowledge

Access in the early childhood education and care context can be demonstrated through the following principles:

- Ensuring that children with disabilities have access to the childcare centre by designing, constructing, and maintaining facilities and environments that are physically accessible, safe to use and appropriately located
- Supporting the communication needs of children with hearing and/or vision impairment and giving them proper assistance to communicate effectively and efficiently

Staff and families working together offer a child a better learning environment. When parents care about what the children are learning or what areas of their development they are focusing on for their child, they can introduce similar experiences and activities at home, which will aid in the child's development.

Individual Patterns of Children

No two children are the same, as every household is different. Depending on their family background, children may display individual patterns that differ from the others. These are usually the result of how the children are raised at home according to their family's culture and norms.

This means that what some children are allowed to do, others are not. You will need to communicate with the families of each of your children and gain an understanding of the rules of their home so that you can maintain consistency and continuity for the children. There would be no point in allowing children to do things in your care that they are not allowed to do in the home.

Cultural Norms

Since norms are different even within a cultural group, you must not generalise about the different individuals within a cultural group. At the same time, you must not discount cultural norms and be insensitive to them.

Your knowledge about a person's culture needs to be viewed as a starting point from which you then try and find out more about them and their family and whether there are relevant norms and routines for responding to behaviour. Remember to ask questions about the family when you are in doubt.

Family Norms

The norms of different families are influenced by the norms of the cultural group they belong to. Sometimes these families are referred to as 'traditional'.

The norms of other families may be much less bound by their culture. These families may be less influenced by cultural norms and rather by other factors, such as their educational background, socioeconomic status and beliefs. Some individuals do not identify with any particular culture and prefer to think of themselves as 'cosmopolitan'.

Child-rearing practices will differ from one family to another family in the following areas:

- Routines, including personal sleeping and eating routines
- Expectations about the development of children's self-help skills
- Approaches to behaviour guidance or discipline

- Willingness to empower children
- Different expectations for manners and cleanliness
- Diverse gender roles (e.g. different expectations of girls and boys)
- Diverse languages
- Diverse beliefs, including religious beliefs
- Diverse lifestyles (e.g. some families place a high value on material possessions while others may encourage interactions and relationships)
- Family structure

Note that some of these practices may involve a person's culture. However, other factors influence how a family raises their children.

As educators, you need to carefully consider the child-rearing practices of a child's family before you go ahead and select processes, strategies or techniques to respond to the child's behaviour.

When you honour children, their families and the community you work in, you respect their diverse experiences, attitudes, beliefs and values. You approach interactions with an open mind and work together to create the best possible outcomes for each child.



Checkpoint! Let's Review

1. Babies and toddlers need to have predictable routines.
To be predictable, routines need to be consistent and follow the same pattern every day and reflect the needs of the age group.
2. Positive personal care means providing personal care compliant with standards and guidelines to ensure quality and safety.
3. Individual children may have different patterns, usually based on their family's culture. You must respect and honour these norms for the children under your care.
4. To provide personal care to a child, you need to consider applicable laws and regulations, approved learning frameworks, and organisational policies and procedures.

1.2 Identify and Initiate Opportunities During Daily Routines for One-To-One Communication With Babies and Toddlers That Supports Learning, Development and Wellbeing



Listening and watching you talk helps a baby understand the basics of communicating. In fact, a baby absorbs a huge amount of information about words and talking from birth. At about seven to eight weeks of age, a baby will discover that they have a voice and will start cooing and gurgling to communicate.

As they grow, they start to make more sounds and smile and wave their arms and feet around. They are getting the idea of conversation and want to tell all sorts of interesting things. If you listen and respond to a baby's murmurs, the baby will likely babble and gurgle enthusiastically before long.

Thus, it is vital to respond to these attempts at communication and encourage conversation with even the youngest of babies. You do not even have to wait for a response – just a running commentary of what you are doing is fine, as it is all language.

One method of communication that is shared across the world is something called ‘parentese’. It is the sing-song talk that some people automatically begin speaking in whenever they set eyes on a baby (Think ‘Oooooohhhh, aren’t you a cuuuutieeeee? Looook at your widdle haaaandsies.’). Studies have shown that babies prefer to be talked to in ‘parentese’. They enjoy hearing the higher-pitched sounds and exaggerated speech patterns of ‘parentese’ when the words have no meaning. Making sounds and the joy from watching your face as you talk to babies is a discovery they enjoy. Move in close when you talk to them and make lots of eye contact, mimic the sounds they make, and use big smiles to show your enjoyment. You will discover that babies find this type of interaction irresistible and, as time goes on, learn to grasp your face and turn it towards them to ‘talk’ to you.

Active listening is one method of effective communication, as it shows the child that you are engaged in their conversation while responding in a reassuring and sensitive manner.

Communication with toddlers and babies can be broken down into the types shown in the table below:

Communication Type	Samples
Verbal	<ul style="list-style-type: none"> ▪ Spoken words ▪ Speaking to a group in front of the baby or toddler
Non-verbal	<ul style="list-style-type: none"> ▪ Facial expressions ▪ Gestures ▪ Physical appearance ▪ Distance ▪ Tone and pitch
Visual	<ul style="list-style-type: none"> ▪ Written symbols ▪ Pictures ▪ Signs ▪ Objects

Children make efforts to communicate for many reasons, including gaining attention, seeking affirmation, sharing emotion, seeking help or assistance, or seeking comfort.

Communicating with children is an imperative element in developing healthy relationships. Understanding and being aware of children's cues is the first step to being able to respond to them. These will be discussed further in the following subchapter.

Dependent on their stage of development and age, children will communicate by a number of different methods. For example, an infant will use several non-verbal cues to communicate without language skills. These cues could include smiling, laughing, crying and leg or eye movements.

In addition to children's cues, children are very good at demonstrating their emotions through body language. Children tend to animate their emotions to obtain a greater response, allowing adults to quickly establish why they display that particular body language.

Educators need to develop strong, supportive relationships with children. Therefore, educators need to be responsive to children's cues and body language by actively listening to children, asking questions and being available to support children.

Additionally, how educators respond to a child's efforts to communicate can dramatically affect the child's continued efforts of communication. As an educator, it is important to respond in a sensitive and appropriate way to the situation. For example, if an infant's cooing and attempts to make eye contact go unnoticed or are ignored, the child may not continue to attempt to communicate. Alternatively, if preschool-aged children have their attempts to share their achievements continually rejected, the children may begin to feel as though what they do does not matter to others. This self-belief will directly affect their sense of identity, confidence and feelings of belonging. It will also discourage them from attempting to communicate with adults in the future.

Your values and cultural background affect how you communicate with different children. However, you should put bias aside and respond to all children equally in your role as an educator.

There are different techniques and opportunities for communication that supports the learning, development and wellbeing of children, as shown in the table below.

Techniques and Opportunities	Description
Repeating words, sounds and gestures that children use	Children will learn to communicate by imitating what they see and hear during your interactions.
Describing objects or events	Children often have many things they wish to communicate but do not know the words to use. Describing new objects or events can help them learn.
Talking about routine activities	Describe the process of day-to-day activities to help children learn to do these for themselves. This can also help prepare children for transitions.
Initiating and building on one-to-one interactions	Make time to speak with children at some point in the day, giving them your full attention by momentarily disabling phones or gadgets that can distract you. This not only encourages them to share freely with you but also teaches them the value of listening.
Offering relaxed physical contact	Help children feel calm by offering relaxed physical contact. This may be done through simple interactions, such as sitting with the children while they play, offering gentle support by handing them their toys and cuddling. This will help children feel relaxed and comfortable engaging with their environment.
Responding positively to exploratory behaviour	Children will feel encouraged to explore their environment when they know that you support them. Offer encouragement and acknowledgement whenever a child tries to engage in a new activity.

As you get to know the children in your care, you will begin to identify their particular interests and strengths. Take the time to investigate these interests and use them as learning tools in your interactions with children. Children have the right to their interests, and as an educator, you can foster their learning by engaging children in conversations about them.

Sustained conversations (referring to previous conversations and topics) promote children's memory and cognitive development. Just as importantly, this one-on-one attention to an area of interest for the child teaches them that they are valued and their contributions and ideas are important.

The [Australian 24-Hour Movement Guidelines for the Early Years \(birth to 5 years\)](#) also has recommendations for supporting children's health, as shown in the table below.

Age Group	Recommendation
Babies (0 to 1 year old)	Babies in this age group should be physically active several times a day in various ways, particularly through supervised interactive floor-based play, including crawling. More is better. For babies not yet mobile, this should include at least 30 minutes of tummy time, including reaching and grasping, and pushing and pulling, spread throughout the day while awake.
Toddlers (1 to 2 years old)	At least 180 minutes should be spent in a range of physical activities, including energetic play, spread throughout the day. More is better.

Consider how you can regularly incorporate these conversations into your daily routine.

It is essential to remember to adjust your approaches to cater for children at different developmental stages and ages. The Early Years Learning Framework is designed to inspire educators, improve communication among key stakeholders and provide a common language for young children's learning for children themselves, key stakeholders, early childhood educators and other professionals.



Further Reading

For further recommendations from the Australian 24-Hour Movement Guidelines for the Early Years (birth to 5 years), access the link below.

[Being active](#)

1.3 Recognise and Respond to Interactions Initiated by Babies and Toddlers, and Provide Physical Comfort and Calm Reassurance to Facilitate Attachment



In services where you often must tend to large numbers of children, it can be difficult to respond appropriately to all their needs for attention. Children make constant efforts to grab the attention of the adults in their lives, and their methods for doing so are not always positive.

The previous subchapter discussed ways for you to identify verbal and non-verbal signs and cues. It is important that these interactions are recognised and that you can properly respond to them.

As an educator, you are responsible for recognising and responding to interactions initiated by babies and toddlers. Children need comfort and calm reassurance to help them feel calm and comforted and develop a sense of belonging. Facilitating attachment with the children under your care is essential for their growth and development.

1.3.1 Recognise and Respond to Interactions Initiated by Babies and Toddlers

Recall how in the previous subchapter, you learnt that being able to identify non-verbal signs and cues from children is important for communicating with them. There are different common signs and cues that indicate what a baby or toddler may want or need.

The following are some examples of the signs and cues that you may recognise and how you can appropriately respond to them.

Signs and cues that the baby or toddler is tired include:

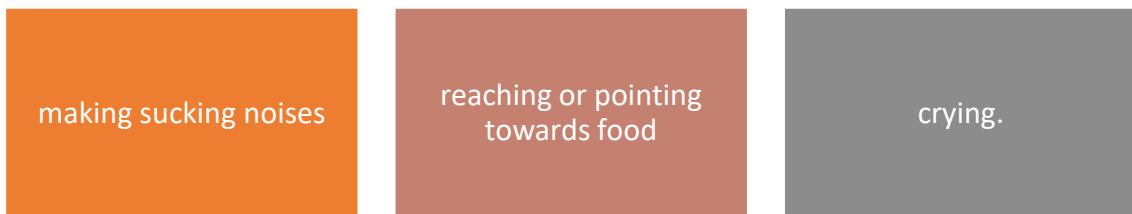


Response:

Babies and toddlers need to have enough sleep incorporated into their daily routines. It is vital for their growth and development to get the recommended rest for their age group.

When a child is showing signs of sleep, you can pick them up and cuddle them. See if they are ready for a nap or time in a quiet area. If a baby is having a hard time sleeping, reduce stimulants by dimming the lights or going to a dark, quiet room.

Signs and cues that the baby or toddler is hungry include:



Response:

Provide food according to meal plan. Each child may have a meal plan according to their dietary needs. If there are any dietary restrictions, this will be communicated during the enrolment period. Any doubts or concerns about a child's dietary needs should be consulted with your supervisor or the appropriate personnel.

Carry the child and show them the food or drink. Support the container with your hand when handling it to a child. Wait for them to finish eating.

Signs and Cues that the Baby or Toddler Wants Attention include:

- looking with bright, wide eyes
- maintaining eye contact with you
- smiling
- hands reaching out towards you

Response:



Provide necessary attention to the child. Pick up the child or sit them on your lap. Ask them what they want to do by showing them the object they are gesturing towards, such as a book, if they want to read or a toy. Recall Subchapter 1.2 for the different communication types you may use.

Signs and cues that the baby or toddler wants a break include:

- being irritable
- arching their back
- breathing quickly
- hiccupping
- sticking out their tongue
- showing a change in facial skin colour
- turning away from you

Response:

If a child is showing signs of wanting to take a break from their current activity, you may introduce a new activity to them. Show them different options of toys. You may also allow them some time on their own to play with other children.

These signs and cues are generally shown by babies and toddlers, and the corresponding responses are appropriate for various age groups. In the table below are some of the appropriate interactions based on different age ranges:

Age	Appropriate interactions
Birth to 12 months	<ul style="list-style-type: none"> ▪ Furnish consistent, caring and gentle interactions with adults. ▪ Hold, talk, sing and play with infants regularly.
12 to 24 months	<ul style="list-style-type: none"> ▪ Engage in one-on-one, face-to-face exchanges through games, singing and playing. ▪ Read aloud and encourage comments on pictures.
24 to 36 months	<ul style="list-style-type: none"> ▪ Give children options to make simple choices and feel a sense of control ▪ State rules and limits clearly and repeat them often.

Within the first couple of years of their lives, babies and toddlers are prone to crying. If a child continues to show the same signs and cues after you have tried the appropriate responses, do not hesitate to ask for assistance from other educators and caregivers or your supervisor to figure out if further medical assistance is necessary. Communicate with families to determine whether a child has certain cues that require special responses.

1.3.2 Provide Physical Comfort and Calm Reassurance to Facilitate Attachment

The previous section discussed ways to respond to different signs and cues. These responses are appropriate for daily interactions initiated by babies and toddlers and pave the way to facilitating attachment. Facilitating attachment is an important responsibility for educators because this builds trust and supports children's learning and development. When there is a healthy attachment formed, a child feels secure. They feel free to explore and try new things because a sense of safety encourages them.

Providing children with physical comfort and calm reassurance is a great way to facilitate attachment. Providing physical comfort refers to relieving feelings of discomfort or distress. On the other hand, providing calm reassurance is supporting someone to remove feelings of fear or doubt.

Providing Physical Comfort to a Child

Physical Comfort is achieved by safely holding children, hugging them or letting them sit on your lap during an activity. These activities allow children to be close to you and feel nurtured. It is particularly important to hold babies and children when they are sick, restless or upset, as physical contact will provide the calmness they need at this point.

Below are safe practices to remember when picking up or holding a child:

Baby (0 to 12 months)	
Pick up	<ul style="list-style-type: none">▪ Bend your knees when you lean down to pick up the baby.▪ Do not hold hot drinks while you are holding the baby.
Hold	<ul style="list-style-type: none">▪ Support the baby's neck and head.▪ Do not jiggle or bounce newborn babies.
Toddler (12 to 23 months)	
Pick up	<ul style="list-style-type: none">▪ Keep your feet close together when lifting.▪ Do not twist or tense your neck when lifting toddlers.
Hold	<ul style="list-style-type: none">▪ Occasionally switch the toddler from one hip to the other so that you are not always putting weight on one side.▪ Use your leg muscles to stand up after picking up the toddler.

Remember that just as what each person finds comfortable can vary, what each child is happy with in terms of physical contact will be different from child to child. Be sure that any contact you perform is for the child's benefit and does not instead cause them embarrassment or discomfort.

Comfort Items

An alternate way of providing comfort to a child who does not wish for physical contact is to use comfort items that children snuggle with, also known as ‘loveys’.

Comfort items help children settle into a new environment by giving them something they associate with home. In situations where the parent cannot be present, such as staying in the early childhood learning centre, the comfort item becomes something that represents them. The comfort item may also be part of a routine that needs to be replicated in the new environment to help children adjust to their environment.

Some examples of comfort items for children are:

- security blanket
- soft toys like teddy bears
- articles of clothing from their parents
- small pillows.

Providing Calm Reassurance to a Child

Providing calm reassurance means alleviating a person’s fear or doubt. It means to assure a person that everything is or will be okay. For children, this can be done by giving them calm reassurance either verbally or non-verbally.

Verbal Reassurance

Verbal reassurance is the use of words to calm a child and relieve them of their fears and doubts, which may be from trying out new things or being in a different environment. Recall Subchapter 1.2 and the use of parentese or higher-pitched sounds and exaggerated speech patterns to communicate with a child. Assure them that you are there to support them.

Non-verbal Reassurance

Calm reassurance may also be in the form of physical contact. Cuddling and gently patting babies and toddlers can help them feel reassured. When introducing new things, smile and nod your head to show that the object is good and safe. New environments may also trigger fear and cause crying. Provide reassurance by holding the baby and showing them around the new area. Younger babies are more prone to startle reflexes. To provide calm reassurance, you can swaddle them and keep them close to your body when laying them down.

1.4 Identify Ways of Enhancing Relationship-Building Skills Through Observation, Discussion and Reflection



Your relationship with the children you will be handling is important for several reasons. Maintaining a good relationship with a child will make the child feel loved, giving them a positive self-image and encouraging personal learning and growth. It also means having a bond of trust between you and the child, which leads to smoother communication down the line. Another reason is that having healthy relationships with children gives them a positive model for building healthy relationships with other children.

Once you have a relationship with each child and understand how they learn and their communication preferences, you can build on these in individual, small and large group times. Many educators use questions during group times to build on the group's understanding of a topic or idea. Asking children to raise their hands if they want to share their ideas or answer a question is one way to ensure that you allow children to participate when they feel confident.

If you consider all the routine times that children participate in, you can see the range of key learning points you can engage children at these times. Routine times, such as mealtimes, can be learning opportunities where children can experience social rules and become active participants in the routine.

This can be achieved in some ways, including the following:

- Breaking routines down into smaller tasks the child can complete with support
- Being creative
- Being flexible to enable the individual needs of the child to be addressed
- Labelling each task within the routine

1.4.1 Improving Relationship-Building Skills Through Observation



As an early childhood educator, one of your jobs will be to observe the children under your care. Observation is the act of noticing or looking for specific information. Observation will allow you to gather meaningful information that can help you improve your relationship-building skills. Meaningful information aligns with the objective of your observation.

To identify meaningful information, ask yourself the following:

- What is the purpose of the observation?
- What are the necessary outcomes of this observation?
- What are the expected outcomes of this observation?
- Does this information have an impact on what you are trying to understand?
- Will this information influence your interpretation of what happened?

Observation tools refer to the equipment or devices you may use during observations. Below are some observation tools that you may use:

Observation Tool	Description
Checklist	If there are expected outcomes or behaviours, you can create a list to anticipate what to look for. The list identifies knowledge, skills or aptitudes. It is normally created to meet certain criteria, and it is used to observe whether a child can meet these criteria.
Recorder or audiotape	You may choose to record a narration of your observations by using a recorder or an audiotape. This will allow you to replay everything you have noticed during the observation.
Pen and paper	You may prefer using the traditional pen and paper method to record your observations. This tool may be used to jot down significant information.

Observation processes are the actions that are done to satisfy or complete the purpose of your observation. Below are some samples of observation processes:

Observation Process	Description
Time sampling	It involves completing an observation of a child in short narrative form, usually around 10 to 15 minutes.
Tracking	It involves following a child's choices within their environment, such as transition preferences and play choices.
Specific targeting	It focuses on one-on-one observations, which can be used to look at something in particular or complete an open-ended observation.
Documenting	This documents children's preferences, interests, and specific signs and cues. Documents about the observations are usually kept as a portfolio or folder accessible to staff and parents.

Your observations will allow you to understand preferences, interests, and capabilities, which you can use to inform your practice and tailor your services towards the child's individual needs.

1.4.2 Improving Relationship-Building Skills Through Discussion

Discussion is the process of engaging in conversation to exchange ideas. It may be challenging to engage babies and toddlers in discussions. However, there are different ways you can communicate with them. Recall Subchapter 1.2 for different communication types.

Below are some tips on communicating with children:



- **Be patient.**

Children do not always have the capacity to voice out their ideas. Being frustrated and disregarding their thoughts may be detrimental to children's development.

- **Use context clues.**

Having a limited vocabulary is a challenge for children. When trying to understand what a child is trying to express, you can use context clues to help you figure out what they are trying to say.

- **Be attentive.**

Children have different ways of expressing themselves. They may not always voice out what they are thinking. For example, if a child is always reluctant to do an activity and tries to do something else, this may be a sign that they have a different idea of how they want to do things.

Discussion may also be used with your colleagues. Since they have first-hand experience with children, they are a great source of information and insight on how you can improve your relationship-building skills.

Your colleagues include anyone who interacts and works with the children in the centre, collectively known as early childhood professionals. These professionals include the following:

- Early childhood practitioners (or educators) and school teachers
- Centre supervisors and managers
- Health and developmental professionals (e.g. maternal and child health nurses, school nurses, early childhood intervention workers and play therapists)

It is a great practice to exchange ideas on how they comply with childcare requirements and how they build their relationship with children. It is also helpful to know their appropriate responses and techniques when dealing with the different signs and cues of children from different age groups.

Below are some of the opportunities you can use to discuss with colleagues:

Online Collaborations	Social media or online sites are a great way for educators to collaborate and encourage and support one another by sharing reflections. Blogs are also another way of a learning space online.
Meetings	Staff meetings provide an opportunity to discuss and reflect on practices with your colleagues. Meetings should have a facilitator to guide the reflective process and note down the discussions.
Discussions with Management and Mentors	These are a great source of feedback. By asking questions and being guided by your mentors, you will see different perspectives and feel challenged and encouraged.
Postings in Notice Boards	Reflective notice boards should be easily located, such as in the staff room, foyer and each room, to highlight reflective practice. You can use them to post events, quotes, questions, articles, pictures and anything related to reflective practice.

To gain the perspective of your colleagues, you may do the following:

- **Send requests for meetings and discussions.**

Take the initiative to discuss what you want to know from your colleagues. Ask them about their opinions and views.

- **Inquire about experiences.**

A great way to gain someone's perspective is by asking them about their experiences and opinions. Knowing about a person's experience can give you an insight into how they view certain situations.



Below are some things to remember when gaining the perspective of your colleagues:

- **Be open-minded.**

Every person has a different perspective on things depending on their experiences. Allow your colleagues to speak their minds and listen to what they have to share without bias.

- **Be respectful.**

Differences can cause tension and misunderstandings. Always respect other people's opinions and understand that their experience of similar situations may differ from yours. Avoid using profanities or any unprofessional language that may offend your colleagues.

- **Do not take things personally.**

Remember that you and your colleagues are professionals with similar reasons for observing children, and you all want to improve your practice. Every suggestion must be taken with a pinch of salt and considered.

1.4.3 Improving Relationship-Building Skills Through Reflection

Ongoing learning and reflective practice are some of the primary principles behind implementing the EYLF effectively. This entails continuously striving to enhance your skills.

Reflection is the act of exploring one's thoughts and feelings and trying to understand the reasoning behind them. Meaningful reflection is the deliberate act of reflection to thoroughly question your views and opinions and identify ways for improvement. Engaging in reflection is expected of you in early childhood education and care. It is a process of thinking about your perspectives, values, beliefs, skills and experiences about other views and being open to changing your own. As such, educators use reflective practice as a continuous learning experience to question and assess their practice.

Critical reflection involves closely examining all aspects of events and experiences from different perspectives. Educators often frame their reflective practice within a set of overarching questions, developing more specific questions for particular areas of enquiry.

Overarching questions to guide reflection include the following:

- What are my understandings of each child?
- What theories, philosophies, and understandings shape and assist my work?
- Who is advantaged when I work in this way? Who is disadvantaged?
- What questions do I have about my work? What am I challenged by? What am I curious about? What am I confronted by?
- What aspects of my work are not helped by the theories and guidance that I usually draw on to make sense of what I do?

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You can improve your relationship-building skills by reflecting on your experiences with the children under your care and understanding how your relationship with them has developed.

Below are some areas that you can reflect on based on your experiences:

- Tasks where you were not able to perform as efficiently as you could have
- Instances where you were not able to immediately address the needs of the child
- Instances where you were not able to completely address the needs of the child
- Tasks that you had difficulty performing

Your reflections may also include the relationship between other educators and the children in your centre. Below are some areas you can reflect on:

- Tasks where the other educator was not able to perform as efficiently as they could have
- Instances where the other educator was not able to immediately address the needs of the child
- Instances where the other educator was not able to completely address the needs of the child
- Tasks that the other educator had difficulty performing

Assessing how the relationships between other educators and the children developed can help you improve your relationship-building skills.

Based on your reflection, you will be able to recognise areas for improvement and identify opportunities to address them.

Areas for Improvement in Own Relationship-Building Skills	Opportunities That You Can Engage With to Address These Areas
<ul style="list-style-type: none">▪ Not immediately recognising the signs and cues of children▪ Not immediately addressing the signs and cues of children▪ Losing their temper when dealing with children	<ul style="list-style-type: none">▪ Being more attentive to children to spot their signs and cues▪ Finding ways to be more efficient in addressing the signs and cues of children more promptly▪ Learning how to be more patient when dealing with children



Checkpoint! Let's Review

1. Early childhood development is an important time for children's growth.
2. Positive personal care means providing personal care compliant with standards and guidelines to ensure quality and safety.
3. Consistency means that you provide the same level of care every day. This way, you can build trust and connect with the child.
4. Communicate with children regularly, whether verbally or non-verbally, and pay attention to their signs and cues.
5. Providing children with physical comfort and calm reassurance is a great way to facilitate attachment.
6. Providing physical comfort refers to relieving feelings of discomfort or distress.
7. Providing calm reassurance is supporting someone to remove feelings of fear or doubt.
8. Observe the children under your care and reflect on how you can improve as an early childhood educator based on your observations.
9. Reflection is the act of exploring one's thoughts and feelings and trying to understand the reasoning behind them. Meaningful reflection is the deliberate act of reflection to thoroughly question your views and opinions and identify ways for improvement.



Learning Activity for Chapter 1

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

II. Develop Effective Relationships With Family Members



Educators should recognise that the single most important resource to draw on in their efforts to care for and educate children is the children's families. By committing to developing a relationship based on mutual trust and respect, educators are laying the foundation for a long and successful collaboration.

This chapter will discuss how you can do the following:

- Gather information from the family to assist in the transition from home to education and care service.
- Recognise family signs of stress at time of separation and identify appropriate responses.
- Assist in the transition from home to care through initiating engagement with babies/toddlers while family is still present.
- Communicate daily with families about their child's activities, sleeping and eating patterns according to service procedures.

2.1 Gather Information From the Family to Assist in the Transition From Home to Education and Care Service



A crucial part of the enrolment process is the gathering of information that will facilitate a smooth transition for a child from home to care. Most organisations will have an orientation program for families to visit the service and share information about their children before formal attendance.

This is an opportunity for families to observe the care environment ‘in action’ to reassure them that all children are having their needs met, procedures are strictly followed and there are meaningful relationships between educators and children.

It is often an eye-opening experience for families to see so many children being cared for in one place. Even the youngest children can participate in activities and routines happily and confidently.

Gathering information from the families to assist in children's transition from home education to care service may be done through the following:



To consult with the families, you may do the following.

Identify Authorised Guardians and Family Members

This is vital because you want to identify who is privy to specific information. Your consultation may involve sensitive information, and you need to ensure that you comply with privacy and confidentiality requirements.

Set Up a Communication Plan

A communication plan is used to schedule when and what you need to communicate to someone. You may ask families when they prefer to be notified and what information is sensitive for them. You may also consult your organisational policies and procedures about mandatory reporting requirements.

The following are some helpful tips on communicating with families:

- Get to know each other on a first-name basis.
- Learn the names of all the family, including immediate and extended family members.
- Explain to parents why they need to communicate with the centre.
- Do not feel intimidated by a parent or community member, and be sure not to intimidate them.
- Adapt your language to suit the individual or group of people you speak to.
- Develop appropriate communication with parents and community members.
- Provide a comfortable environment when liaising with parents and staff.

Collate All the Information You Have Gathered

Keep all of the information you gathered organised. Knowing where you keep every specific information can help you convey information to relevant people. You can keep hard copies of important files, or you may opt for soft copies to ensure all information has a backup.

This information should include the various factors that can affect a child's transition from home to education and care services, including the following:



You will need to consult the family about these factors to determine how they may affect the child's behaviour or wellbeing.

Sensitivity to Food or Medicine

Certain food may affect a child's behaviour and wellbeing. Be sure to enquire about any food allergies that the child may have.

Some medicines can also affect the behaviour of a child. Some types of medication may sometimes make a child hyperactive or irritable. Children may be irritable after vaccinations.

If you think any medicine is making a child behave differently, talk to their parents. It may be that the child's behaviour is unrelated to the medicine. But if it is, the parents can arrange a GP appointment for the child.

It is imperative you learn how to manage the risk in situations where children are exposed to food allergens, so you are prepared to react in the unfortunate event one of the children under your care has an allergic reaction. Proper training will allow you to respond more quickly or prevent an incident from occurring because you are aware of what could lead to an allergic reaction.

Food Intolerances

Food allergies can be more severe than food intolerances, and a larger dose of suspect food is usually required to cause a reaction.

Symptoms include:

- headaches
- skin rashes
- upset stomach.

Food intolerance needs to be managed by working with parents to develop a plan that may include reducing exposure to children through particular food.

Special Diets

Some children will have special dietary requirements and restrictions due to food allergies and medical conditions, as well as cultural backgrounds. Communicate with the family to ensure that all restrictions and requirements are met for every child.

Managing the Risk of Food Allergies

Since there is currently no permanent cure for food allergies, the best way to avoid children having severe responses to food allergens is to avoid these allergens in the first place. Here are some ways to manage this risk:

- Ensure the centre has an up-to-date record of each child's food allergens, if any.
- Bar children from eating each other's food or borrowing utensils and lunch boxes. Communicate the reason for this to the children as simply as possible so they understand not to do it.
- In cases where a child has forgotten their food and another child offers to share, double-check if the children have any allergies to food and then check if the food being offered contains anything that could trigger the said allergic reactions.
- Any food or drink items, including the containers provided by the parents, should properly indicate which child they are intended for.
- Make sure that both the places where children eat and their utensils are rigorously soaped and rinsed with warm water. Put utensils in a dishwasher if needed to minimise the chance of a child having a reaction to traces of allergens.

- Remind both the children and fellow staff to perform proper handwashing before and after meals.
- In the case of children with severe allergies, advise the parents to provide meals for them.
- Ensure that food containers used in arts and crafts, such as milk cartons, egg trays, and other boxes, are thoroughly cleaned before use.
- Be mindful of allergies during activities involving food, such as cooking or baking.

Below are some of the predominant food allergens in Australia and New Zealand:

Cereals containing gluten

Crustacea

Egg

Fish

Milk

Peanuts

Soybeans

Sesame seeds

Tree nuts

Lupin beans

Diet and Nutrition

Poor nutrition and overuse of food such as high sugar food can affect a child's behaviour. Factors within the family that may affect child nutrition may include the following:

- Availability and affordability of nutritious food, including fresh fruit and vegetables
- Access and quality of breakfasts and lunches provided
- The ability of a family to provide adequate meals and snacks each day
- Knowledge of food and nutrition matters

Physical activity can have an impact on children's behaviour and may be affected by:

- access to local recreational and sporting facilities
- adequate time for children to engage in physical activities
- positive parental and sporting role models.

Limited Stimulation

A lack of positive stimulation at home may affect a child's behaviour. Research shows that a child's academic progress and level of engagement are affected by:

- the learning environment provided at home
- access to resources such as books and toys
- parents' attitudes and values towards education
- parents' involvement in the child's learning at home, including the level of engagement in centre activities.

A family's ability to provide for their home learning environment and engage in the educational process can be limited by:

- financial disadvantage
- low parental educational attainment
- parental mental health problems.

Lack of Interest and Attention

Children need adult attention and interest at home to feel valued. A lack of this may affect their behaviour. For example, some parents may not:

- read to children or engage with them in other learning activities
- play with them
- talk to them and ask questions
- show interest in the things that children are interested in
- involve children in sporting and physical activities.

Trauma

When a young child experiences a traumatic event, they may become more prone to feelings of helplessness, fear and anxiety, affecting their behaviour.

Traumatic events may also lead to cases of developmental regression, where children may experience a range of symptoms, such as:

- difficulty sleeping, especially alone
- experience separation anxiety from parents or guardians
- trouble learning or focusing
- engaging in aggressive, rage-filled and other behaviours.

Understanding these factors that can affect a child's behaviour will allow you to prepare for their needs and help them transition to an education and care setting. It is important that you can communicate effectively with family members to ensure that children can successfully transition into education and care.

Further Reading



ACECQA lists various resources about collaborative partnerships with families and communities. Click on the link below.

[Quality Area 6 – Collaborative partnerships with families and communities](#)



2.2 Recognise Family Signs of Stress at Time of Separation and Identify Appropriate Responses



Stress may be due to the new environment and change in the routine being introduced to the children. The following signs may suggest that a child is feeling stressed at the time of separation:

- Making whining sounds
- Still reaching for the primary caregiver after being handed to the educator
- Pouting and crossing arms
- Crying or throwing a tantrum
- Becoming suddenly subdued or growing quiet

Babies and toddlers who experience separation from their families for the first time can experience stress and anxiety. This can affect their experience with you and hinder relationship-building. High-stress levels in children prevent them from learning and developing their full potential. By recognising possible signs of stress, you can respond to them appropriately. When a child is showing signs of stress, it is essential to help them feel safe. Signs of stress will be evident when you pay attention to facial expressions and body language. Holding and cuddling them may be enough for babies or toddlers while making reassuring sounds. Use a calm and soothing tone of voice and distract them with their comfort items to get children excited about the day's activities. Recall the different ways you can provide physical comfort and calm reassurance in Section 1.3.2.



Similarly, families can feel the same stress when their children are separated from them. Below are some signs that families are feeling stressed at the time of the separation:

- The family member is reluctant to leave.
- The family member keeps finding excuses to stay behind, such as giving reminders about their child's needs or asking questions that they have asked before.
- The family member looks uncomfortable during drop-off.

You will be able to recognise these signs by paying attention to facial expressions and body language. Below are appropriate responses to help relieve families of stress during this time:

- Use a calm tone of voice when talking to the family.
- Answer all the family's questions and reassure them.
- Acknowledge their concerns and explain how you plan to address them.

2.3 Assist in the Transition From Home to Care Through Initiating Engagement With Babies/Toddlers While Family Is Still Present



As an educator, you need to aid children when they are having difficulty transitioning from home to care. The information you gathered from the families beforehand is essential to help you support children during their stay with you. However, it is also advantageous for children to be eased into the new environment with the presence of their families.

Initiating engagement refers to getting involved and actively supporting babies and toddlers to transition into their new environment. It is crucial that you can form a strong partnership with families at the beginning of their children's transition to establish expectations and attitudes. Their presence presents a great opportunity to introduce yourself to the child, which can greatly influence their reaction and lessen their fear and anxiety.

Below are some of the ways you can engage with babies and toddlers to assist in their transition while their families are present:

- Introduce yourself to the child and their family in a friendly manner.
- Be careful of negative non-verbal cues, such as crossing arms and frowning.
- Nod and smile to show acknowledgement.

- Get to know any nicknames that a child may have. Children are not always able to pronounce their names at a young age and may be more familiar with how they are called at home (e.g. Andrew may be pronounced as Andoo, or someone named Grace Ann may be more used to Gracie).
- Ask to hold the child in front of the family to reassure them that you are a safe person. When children see that their family trusts you, it can encourage them to be more comfortable with you.
- When it is time for the families to leave, encourage them to say goodbye rather than sneaking off or hiding. Although it may seem easier to distract a child and leave them to prevent crying and tantrums, this may actually worsen the situation and increase anxiety. Allow the families to say goodbye and reassure the child that they will come back.
- Recall Subchapter 1.2 on how you can initiate one-on-one communication with babies and toddlers, and Subchapter 1.4 on how to improve your relationship with the children in your care through observation, discussion and reflection.

Although children will need constant reassurance and engagement from you throughout their stay, their initial introduction to a new environment will be a challenging part of their transition. Some preparation with the families may also be done before their stay.

Below are some of the ways families can help ease a child's transition from home to care:

- Encourage parents to visit the centre before enrolling their children on any class or service.
- During these initial visits, allow parents to spend some time in the classrooms with their children to familiarise them with the environment.
- Before the start of official classes or services, let the children meet new people and engage in activities while their families are with them.
- Provide the families with a classroom photo album that they can show to the child before attending the centre. This may contain pictures of educators and the classroom.
- Ask for pictures of family members that a child can bring and may look at when they are not around.
- Ask families to talk about the centre to their child. They can talk about the names of the educators, the activities and the daily routines that they will be doing.

- Allow the children to bring their comfort items to the centre (e.g. their favourite toy, blanket or book). Comfort items help children settle into a new environment by giving them something they associate with home. In situations where the parent cannot be present, such as staying in the early childhood learning centre, the comfort item becomes something that represents them. The comfort item may also be part of a routine that needs to be replicated in the new environment to help children adjust.
- Recall the discussion in Subchapter 2.1 for the different ways you can gather information from families. It is important that you establish regular schedules for drop-off and pick-up for predictability.



Further Reading

For further information on supporting children's transition, you may click on the link below.

[Plan effective transitions for children in education and care services](#)

You must understand that a child's transition from home to care is a formative experience in a child's life. Transitioning from being with family members to carers or educators is a crucial attachment experience for children. This experience can greatly affect their development and their relationships in the future.

Understanding the attachment theories can help you in answering the following essential questions:

- How responsive should you be to a child's emotional and safety needs?
- How can you support a child to signal distress and express their emotions effectively?
- What are the factors that affect a child's attachment?
- Why is it important to support children in developing positive relationships?
- How can you support children's attachment?

Attachment is a child's natural inclination to be close to another person. The child chooses this person based on the response to their needs. Therefore, the most important attachments in the centre that children form at a young age are with their carers or educators.

A child's attachment carries significant weight on whether they can build strong bonds and develop healthy relationships.

As an early childhood educator, you are responsible for ensuring that the children under your care develop strong, secure attachments. Failing to support a child's attachments may lead to poor brain development. Different attachment theories explain the results of failing to support children's attachment.

Attachment Theories

The importance of attachment has been the subject of psychological research for decades. Below are the two most common theories of attachment and how they affect a child's brain development.

Theorist	Description
John Bowlby	Attachments formed influence the development of how children deal with anxiety in relationships. Children who fail to develop secure attachments may not be able to properly develop the part of their brain that allows capacity for empathy or compassion or have problems with emotional regulation.
Mary Ainsworth	Different children have different attachment styles, and these styles are the result of how children interact with their parents. Children with secure and healthy attachments have healthier brain development compared to children with resistant or avoidant attachment styles.

John Bowlby (1907–1990)

John Bowlby put forward one of the earliest theories of social development. Bowlby concluded that early caregiver relationships play a major role in children's development and continue to influence life-long social relationships. He said that early childhood experiences had a significant impact on growth and behaviour.

Bowlby claimed that attachment has four distinctive features:

Proximity maintenance

- It refers to the desire to be near the people you are attached to.

Safe haven

- It refers to returning to the attachment figure for comfort and safety in the face of a fear or threat.

Secure base

- The attachment figure acts as a base of security from which the child can explore the surrounding environment.

Separation distress

- This refers to the anxiety that occurs in the absence of the attachment figure.

Children who have not formed strong attachments are generally more fearful and spend most of their energy searching for stability and security, hindering their development.

When the child has a strong and secure attachment, they are generally more adventurous and explore their surroundings.

Mary Ainsworth (1913–1999)

Mary Ainsworth built on Bowlby's work as she developed an experiment to test the quality of attachments between mothers and children. Ainsworth initially described three major styles of attachment and added a fourth later on, and they are as follows:

Secure attachment

Ambivalent
(insecure)
attachment

Avoidant (insecure)
attachment

Disorganised or
disoriented
attachment

- **Secure attachment**

A child who is firmly attached to his mother plays openly when his mother is present, interacts with strangers, becomes visibly upset when his mother leaves and is relieved to see his mother return.

- **Ambivalent (insecure) attachment**

A child with an anxiety-resistant attachment style, even when the mother is present, becomes nervous about discovery and strangers. Once she returns, the child will be ambivalent – trying to stay close to the mother but resentful, and also reluctant when the mother provides attention.

- **Avoidant (insecure) attachment**

A child with the anxious-avoidant style of insecure attachment will avoid or ignore the caregiver and show little emotion when the caregiver leaves or comes back. The child will not explore much, no matter who is there. Strangers are not going to be treated differently from the caregiver. No matter who is in the room or if it is quiet, there is not much emotional space.

- **Disorganised or disoriented attachment**

This fourth category was added by Ainsworth's colleague, Mary Main, and Ainsworth accepted the validity of this modification. It can be characterised by a lack of a clear 'organised' behavioural strategy for dealing with stress.

Children who develop strong, secure attachments to one or more significant adults have better brain development and are able to form healthy relationships. Those who experience a lack of attachment develop an insecure attachment that can negatively impact their brain development. Children with insecure attachments tend to have higher risks of being in unhealthy relationships or having poor social skills.

As an educator, you are responsible for ensuring that the children under your care can have a secure attachment with you as their primary carer while in the centre. This means that you need to provide for their needs and assist in their transition to support their development.



2.4 Communicate Daily With Families About Their Child's Activities, Sleeping and Eating Patterns According to Service Procedures



Educators and families need to continue to share information about a child's development, health, and general wellbeing beyond the initial settling-in process.

Communication must be a two-way process as each person takes responsibility for their part in the process. When people communicate effectively, it helps them feel more comfortable talking about important information, sharing concerns or asking for help.

Information about the child's daily activities, sleeping and eating patterns is important for families to let them know about any progress or change that their children are going through. Services will have policies and procedures for communicating information. You may consult your supervisor and your service policies and procedures to ensure that you comply with requirements.

Most service procedures commonly highlight the following.

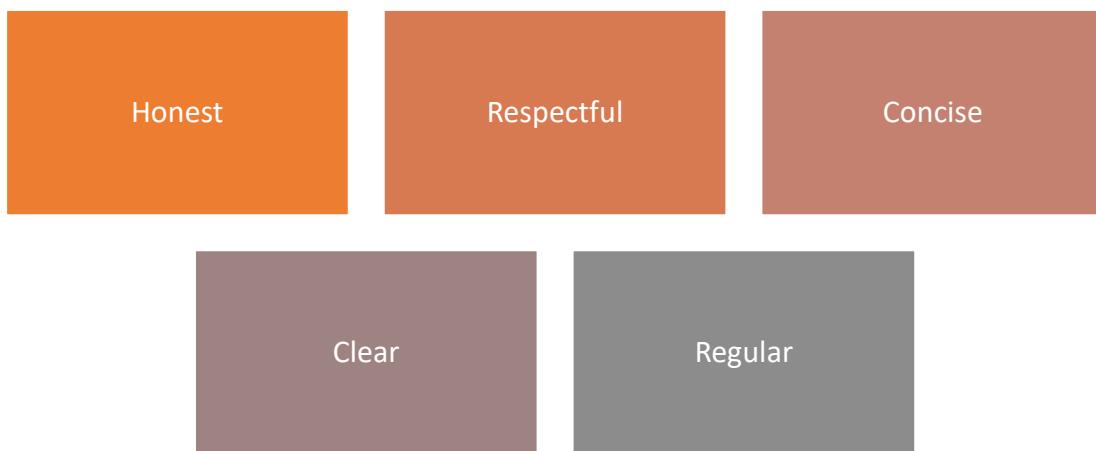
Information Confidentiality

When a family or other secondary source provides you with information, it is essential that you handle it confidentially. Confidentiality applies to all types of shared information. It may include details on enrolment forms, developmental information or day-to-day information shared at drop-off and pick-up times.

Privacy

When dealing with children's records, be sure to act in accordance with privacy laws, particularly the *Privacy Act 1988*. The *Privacy Act 1988* outlines [13 Australian Privacy Principles](#) that service providers must observe when handling personal and sensitive information of people.

Below are the features of effective communication with families:



- **Honest**

You need to be truthful about the purpose and use of all information that you will be gathering about a child. Similarly, any significant information that you gather about the child under your care must be communicated with authorised personnel and family members.

- **Respectful**

Remember that all families are unique and have varying beliefs and backgrounds. Be respectful of differences and acknowledge personal preferences accordingly.

- **Concise**

Provide relevant information in a simple and comprehensive way.

- **Clear**

Be clear about the information that you are looking for or giving away. Be straightforward and explain all important details to ensure understanding.

- **Regular**

Communicate as regularly as necessary. Families may want regular updates about how their children are coping with their transition and how they are developing under your care.

Common topics that families and educators might communicate about include:

- sharing developmental milestones or children's achievements
- sharing concerns about children's wellbeing or behaviour
- talking about relevant information relating to family events or changes
- sharing early childhood development and parenting knowledge
- talking about children's friendships and play
- talking about changes in the service that might affect children
- updating each other on any community activities or resources.

Communicating with the children's families is important to plan the best and most inclusive program. Families know about their children's interests and can inform you about what the child might like and dislike. Collaboration is key here. Include everyone and work towards creating the greatest experiences for the children so that it will run much more easily overall.

Effective communication between educators and families of children under their care is evident where:

- centre behaviour codes are developed, through the management committee or governing council, in partnership with families and the community and are reviewed annually
- centre behaviour codes are provided to and discussed with enrolling families
- families and educators communicate effectively and work together to ensure that children's behavioural and developmental needs are met

- confidentiality is observed in discussions with families and in exchange of information with other services
- transition to another setting is carefully planned and monitored with staff from the new setting and families for children with behaviours of concern (e.g. preschool to school).

Below are some ways you can effectively communicate with families.

By Listening

- Make it apparent to parents that you are listening to them by occasionally nodding or briefly voicing agreement.
- Do not interrupt parents while they speak. Instead, let them finish, then recap what they said and ask if you understood what they wanted to say right.
- Listen not only to what the parent is saying but how they say it. Pay attention to their tone of voice and how they feel when they are communicating.
- When gathering more information from parents, avoid using questions that can be answered with yes or no. Use open-ended questions to give them a chance to go into detail about what they wish to communicate.
- Try to see things from their point of view, even if you do not necessarily agree with what they are saying.

By Speaking

- Remember to share positive things about their child's development.
- Consider what you are about to say carefully, particularly when touching on hard or delicate topics.
- Do not do all the talking yourself. Let the parents be involved in the discussion. Ask for their opinions.
- Be respectful. Do not make decisions for the parents.
- You can ask for more time if you are unsure of what to say or how to word it. It is better to ask for time than to give a clear answer you are uncertain about.
- Use simple, concise language so the parents have no difficulty understanding.

By Raising and Addressing Concerns

As an early childhood educator, it is possible to find yourself in situations where you have concerns about a child, whether it is their attitude, wellness or growth. Taking a proactive, problem-solving approach can help ease this process.

- Determine the issue that needs to be addressed.
- Come up with several potential answers to the issue.
- Work with the parents to weigh the advantages and disadvantages of each solution you propose.
- Let the parents decide on a solution they would like to attempt.
- Help them enact the solution.
- Reflect on whether the solution has solved the issue or if it is helping.
- Defensiveness can be a barrier to communication. To avoid it, remember that at the end of the day, you and the families want what is good for the child.
- Sometimes, parents simply need to vent their worries and know they are being heard.





Checkpoint! Let's Review

1. A crucial part of the enrolment process is the gathering of information that will facilitate a smooth transition for a child from home to care.
2. As an early childhood educator, part of your duties is to ease the child's transition from home to childcare.
3. Stress refers to being overwhelmed and experiencing emotional strain.
4. High-stress levels in children prevent them from learning and developing their full potential.
5. Identify the signs of stress produced by separation and stranger anxiety and work with the family to help address them.
6. Initiating engagement refers to getting involved and actively supporting babies and toddlers to transition into their new environment.
7. Transitioning from being with family members to carers or educators is a crucial attachment experience for children.
8. Maintain daily communication with the parents of the children under your care. Be honest, concise, but respectful. Ensure these talks are clear and happen regularly.



Learning Activity for Chapter 2

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

III. Promote Safe Sleep



Even as an adult, you can experience discomfort when sleeping incorrectly. However, for very young children, the consequences of sleeping in an improper manner are much more pronounced, sometimes even leading to unexpected death.

This chapter will discuss how you can do the following:

- Share information with families about sleep and confirm arrangements for sleep and rest.
- Prepare cots, bedding and equipment according to service hygiene and safety procedures.
- Monitor sleeping children according to service policies and procedures.

3.1 Share Information With Families About Sleep and Confirm Arrangements for Sleep and Rest

It is essential that all early childhood educators have a current and thorough understanding of creating a safe sleeping environment for babies and toddlers in their care.

To help you further in applying sleep and rest practices, you can consult with families and ask about each child's individual needs to be able to sleep, rest and relax properly. Below are some things you need to consider during consultations with families:



- **Sleeping times**

Some children will sleep during the centre's scheduled sleeping times, while others will not or cannot. Thus, it is better to have the latter do resting activities, such as reading books and listening to music.

- **Clothing for sleeping**

Children may prefer to wear clothing they use at home when they sleep.

- **Familiar items**

Some children may have familiar items they bring to sleep, such as dummies, toys or blankets. Therefore, it is better to have families bring these to the centre for children's use.

- **Sleep-inducing methods**

While some children can be left to sleep on their own, others are not used to being alone and require some methods to help them sleep, such as rubbing the back or patting.

Additionally, in consulting with families about their children's individual needs, you may encounter families expressing their beliefs regarding sleep, rest and relaxation. You must take their concerns with sensitivity. The service may choose to determine alternate practices in consideration of any request that contradicts recommended guidelines (i.e. guidelines by Red Nose) and endorse this practice only if the child's medical practitioner supports it.

Sleep and rest requirements, which may range from bedtime to sitting quietly, vary from child to child according to the sleep patterns established at home. Even when the patterns are established, they may change with changes in routines, such as disruptions at home, illness or change in primary caregiver. Sleep can also be affected if there are changes in noise levels, light, temperature or room ventilation. Additionally, sleep patterns may be affected if the sleeping methods are changed, such as if the toy or blanket the child sleeps with is missing.

Because not all families will have access to exactly the same information on safe sleeping practices, they may utilise the advice from other family members or draw on their own childhood experiences when creating a routine for their baby.

Unfortunately, this advice may contradict the information given by recognised health authorities, as well as the safe sleep and rest time policy of the service. It is your role, as an educator, to provide families with information that will help them to provide the safest possible environment at home for their child, which will also reflect the environment at the service.

Confirming arrangements for sleep and rest involves discussing with families the best way to handle sleep and rest routines. Below are some of the things you need to consider:

- How many times the child sleeps/rests during the day
- How long the child sleeps per sleep/rest time
- Specific requests or instructions from the child's family

You are responsible for explaining the best sleep and rest arrangement for the child. Make sure that you can clearly explain your recommendations. In Subchapter 2.4, you learnt how to communicate with the families of children under your care effectively. You can use those ways to share information about safe sleeping practices for their children and confirm arrangements for their sleep and rest.



Further Reading

For further information, read the NQF fact sheet linked below.

[Safe sleep and rest practices](#)

3.2 Prepare Cots, Beddings and Equipment According to Service Hygiene and Safety Procedures and Approved Safety Standards



In the simplest terms, bedding equipment is what you sleep on. It includes the following:

Beds

Cots

Sheets

Blankets

Safety Standards

Australia employs a regulatory system for manufactured products to ensure that they are safe and unlikely to cause injury or illness during their use. Mandatory safety standards are made for extremely hazardous products. Governments protect consumers by making mandatory safety standards with minimum requirements that specify what they must meet before being supplied. Goods must require safety standards and comply with composition, contents, design, methods of manufacture or processing, construction, particular performance or packaging rules. These standards are crucial in ensuring the safety of babies and children. It is a legal requirement that all services use products that comply with these standards.

The safety of baby and nursery products is governed by both Commonwealth and Territory Legislation. Consumer Product Safety Standard: household cot is a mandatory standard whose purpose is to ensure that children's cots have key safety. Requirements to reduce serious injuries, such as suffocation, choking and broken limbs, include:

- elimination of head and limb traps, protrusions and sharp points
- side height at a minimum to prevent infants from falling or climbing
- child-resistant side latches
- only two legs are to have castors without brakes
- durability testing.



Further Reading

For further information, you may access the Product Safety Australia website and browse the different types of products listed in the baby and nursery category. For each product listed in this category, review the mandatory standard.

[Product Safety Australia: Babies & kids](#)

Hygiene Procedures

As the infant grows, cots should be regularly maintained and cleaned, considering the following:

- The mattress should be lowered when the infant can sit up.
- Bed linen must be washed at least once a week.
- Cots must also be washed if they will be shared with another child.



In the nursery environment, it is important to provide each child with their own clean bedding. It is not acceptable to allow children to sleep on linen that another child uses due to the possibility of infection transmission.

Cots, stretchers, beds and mattresses should be cleaned after each child has used them, meaning that the bedding is stripped and all surfaces wiped down with the service's cleaning agent.

Checkpoint! Let's Review



1. As an early childhood educator, part of your duties is to inform families of standardised practices regarding safe sleep according to recognised health authorities.
2. Australia has stringent regulations for safe sleep and the correct preparation of bedding materials. Refer to the previously linked readings for more details.
3. Mandatory safety standards are made for extremely hazardous products. Governments protect consumers by making mandatory safety standards with minimum requirements that specify what they must meet before being supplied.

3.3 Monitor Sleeping Children According to Service Policies and Procedures



Ensuring that the equipment is properly set up and maintained is not enough. Like any other people, children will sometimes move while they sleep, which puts them at risk even if precautions have been taken. The worst outcome of unsafe sleep for a child is called sudden infant death syndrome or SIDS. This occurs when, during a child's sleep, they suffer an unexpected death due to unsafe sleep practices such as falling off the bed or suffocating because they rolled over.

Many cases of SIDS in Australia in the past make it necessary for their caregivers to monitor babies during sleep. As an educator, you are responsible for the safety of all the children under your care. You need to know about safe sleep practices to secure every child.

3.3.1 Preparing Children to Sleep

To help children rest, you can perform a sleep ritual before putting them to bed. A sleep ritual is simpler than it sounds. It is essentially a set of activities done before bedtime to help babies and toddlers relax and fall asleep more easily. Sleep rituals help babies and toddlers fall asleep by soothing them. They help babies and toddlers learn when it is time to go to bed and wind down for the day.

The activities involved can vary, but the important thing is developing a routine. You must set an expectation that these similar activities are performed roughly in the same way before each bedtime.

A baby's sleep ritual can look like this:

- Feeding
- Nappy-change
- Talk and play
- Settling in for sleep

On the other hand, a toddler might have a sleep ritual like this:

- Quiet play for 15 to 20 minutes
- Settling for sleep

Preparing children for sleep also requires checking oral health and hygiene:

Oral Health for Toddlers

Toddler teeth should be cleaned twice daily, first in the morning and again before bed. Ensure the toothbrush is small, soft, and meant for use by children younger than 2 years, unless a dentist says otherwise. Use only water until the child reaches 18 months. Once they have reached 18 months, low-fluoride toothpaste can be used, but only in small dosages about the size of a pea.

Children can assist in cleaning their teeth at the age of 2, but they need to be supervised for the first 8 years of their life.

Hygiene for Babies

Hygiene is critical because this prevents diseases and allows babies to sleep more comfortably and safely. Be sure to follow service policies and procedures for hygiene before sleep. Below are some of the common hygienic practices for babies before sleeping:

- Ensure your hands have been washed before washing the baby's face, head, mouth and teeth. Use a piece of clean cotton wool wet with warm water to clean around the baby's eyes. Wipe going from the inside corners to the outside corners. Each wipe should be done with a different, clean piece of wool.
- A cotton ball should be used to wipe only the outside of the baby's ears. Do not use anything to clean the inside.
- Splash water tenderly on the baby's head to wash their hair.
- Use a clean towel to dry the baby's hair by carefully moving it back and forth over the baby's scalp.
- If the baby does not have teeth yet, clean their gums using a washcloth and some water after morning and evening meals.
- Once the teeth start to appear, refer to the oral hygiene section in the previous section.
- A specialised nail cutter for babies or an emery board can be used to trim the baby's nails. Ask a fellow caregiver to hold the baby while you manage their nails. Alternatively, you can attempt to trim nails while the baby is sleeping or contained by a high chair.
- Make sure your hands are clean before washing the baby's umbilical cord. Use water to clean. Dry the stump after bathing. To help it heal, do not cover it with plastic pants or nappies. Avoid touching the stump with nappies.
- For baby girls, a wet cotton ball can be used. Hold her legs apart and wipe any traces of poo away from the labia with the cotton ball. Go from front to back, gently.
- For a baby boy, you can clean them while you bathe them by rinsing the genital area with water. Only the outside of the foreskin should be cleaned.



Further Reading

For additional information on brushing children's teeth, you may refer to this guide:

[Dental care for toddlers](#)

3.3.2 Monitor Children During Sleep Time

Ensure that the children are closely monitored when sleeping and that all sleeping children are within hearing range and observed.

Things to consider when watching the children during sleep include the following:

- Make sure that the children's faces are uncovered when they sleep.
- The resting area should be quiet and away from other groups of children who might be doing interactive activities.
- Be mindful of anything that could pose a hazard to the children around the sleeping environment.
- Take notice and assess how the children breathe, as well as if their faces seem to change colour, as these could indicate breathing problems such as sleep apnoea.
- Consider the health and sleep needs of each individual child when keeping an eye on them.
- Babies under the age of 5 to 6 months should be placed on their backs and replaced in that position if they move out of it to prevent sudden death in infants. Babies at the age of 5 or 6 months can safely take their preferred sleeping position as long as their breathing is not obstructed.

A safe sleeping environment has all the potential hazards removed. Babies must ideally sleep in a safe cot with a mattress and bedding. You must also consider factors that can affect a child's sleep, such as:

- temperature
- ventilation
- air quality
- lighting
- noise level
- space provided for each child.

Every child has an individual sleeping habit. Their habits may be affected by their routines and temperament. Some children can easily adapt to new routines, while others may have a harder time adjusting to new sleeping routines.

Infants and toddlers may have a more erratic sleeping pattern and sleep at different hours of the day. Older toddlers would be more adaptive to sleep schedules and patterns. Observe body language and signals to plan sleeping routines effectively. You will have to adjust to the body clocks of babies and toddlers.

Because children will have different sleeping schedules based on their age group, you will need to set up a safe place where all children can rest. A resting or sleeping area must be a place that can be supervised easily and is accessible to children when they feel tired or sleepy. Having a safe area where children can sleep anytime will help them feel more at ease and can lessen anxiety. Although some children may take a rest at any time, older toddlers will need you to initiate a sleep schedule.

Safe Sleep Practices and Patterns

To ensure children sleep safely and well, you must provide a comfortable sleeping environment. Make sure the room temperature and the child's temperature are adequate by allowing ventilation or using a light fan away from the child.

Do not overdress the baby or cover their heads (i.e. with a beanie) to prevent overheating. Once the baby starts attempting to roll over, you can put them in safe sleeping bags with a fitted neck, armholes and no hood.

Adequate clothing is also important for babies and younger children when sleeping. It is crucial to dress babies in clothing that is not too loose because it lowers the risk of suffocation. One-piece suits are great, and avoid clothing that can ride up over the baby's head. At age 1, babies are no longer at risk of SIDS; at this point, suitable pyjamas can be worn. Cotton clothing is the most ideal as it provides softness and breathability.

When children reach toddler age, they will move more easily in bed, possibly move into a kid-bed and can now wear a pyjama of their choice.

You also need to establish a pattern of sleeping, such as a regular time when the child goes to sleep or midday rest. The amount of sleep a child needs varies depending on the individual and certain factors, including the child's age.

Caring for multiple babies means considering different factors such as age and sleep pattern. It is normal for babies to have different sleeping patterns, and one might start sleeping for more extended periods than the other. Sleep patterns will also differ depending on their development. Even if the babies have different sleep patterns, it is also recommended to establish similar rituals to help them get settled.

It is better to provide twins (and other multiples) with their beds or cots. This will also reduce the chances of one baby waking up the other. Beds or cots can be placed beside each other so that the babies can still see each other.

Below are the sleep patterns and duration of different age groups:

Age	Sleep Patterns	Hours of Sleep Needed
Newborn	Do not have regular sleep patterns	14 to 17 hours per day
3 to 6 months	May sleep through the night, although many continue to wake once or twice during the night	12 to 16 hours per day
12 months	Usually sleep longest at night, for around six or more hours, but still have naps during the day	11 to 14 hours per day
12 to 24 months	Sleep through the night for 10 to 12 hours but may still have naps during the day	12 to 13 hours per day

Checkpoint! Let's Review



1. Because of sudden infant death syndrome or SIDS, safe sleep practices have become crucial in Australia's childcare system.
2. Part of your responsibility as an early childhood educator includes ensuring that the families of the children under your care are aware of the safe sleep practices endorsed by recognised health authorities.
3. It is not enough to ensure children adhere to safe sleep practices when they fall asleep. They must be monitored carefully to avoid unexpected changes during sleep or medical conditions like sleep apnoea.
4. Considerations when caring for multiple babies need to be applied. Different age groups may have differing sleep patterns and needs.

Learning Activity for Chapter 3



Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

IV. Provide Positive Nappy-Changing and Toileting Experiences

When working with babies and toddlers, it is possible to use every facet of their day as a learning experience, and toileting and nappy-changes are no exception. Changing a child's nappy allows one-to-one interactions that allow you to build trusting relationships through your undivided attention. It provides you with the chance to sing a favourite song or have a conversation about the events of the day to teach them about their bodies and develop self-help skills.

Toileting is an important part of a child's development. It is an opportunity to improve their self-help skills and learn and control their bodies and functions. However, since toileting requires time, control and maturity, it can be a negative and frustrating experience for some children. As an adult and educator, it is your responsibility to be patient and consistent when toilet training toddlers.

This chapter will discuss how you can do the following:

- Change nappies according to service policies and procedures.
- Provide positive nappy-change and toileting experiences that enhance relationships and support learning.
- Adapt experiences to meet the individual child's routines.
- Support children sensitively and positively when they are learning to use the toilet.
- Work with families and other educators to support children's toilet learning by sharing information and using consistent approaches.



4.1 Change Nappies According to Service Policies and Procedures



Hygiene standards should be established when initially coming up with the routine for nappy-changing or toileting. These standards should be based on guidelines from relevant authorities. Educators must be familiar with these hygiene standards and their service policies and procedures.

By following correct nappy-change and toileting procedures, you are protecting not only the children in your care but also yourself and fellow educators from coming into contact with diseases. It is in everyone's best interests that educators are vigilant in maintaining clean and hygienic change areas.

Service policies and procedures are set to ensure that you provide positive experiences that support children. These also promote a healthy, clean and hygienic environment. Service policies and procedures are usually found in employee handbooks. You may also consult your supervisor or any authorised personnel for advice on addressing the nappy-changing policies and procedures in your centre.

Each centre may have its own policies and procedures related to nappy-changing based on the applicable laws and regulations in their state or territory. Be sure to check with relevant personnel like your supervisor or human resource personnel to ensure that you are compliant with the appropriate policies and procedures.

Below are the steps for changing nappies:

1. Make sure the changing area is clean and your supplies (e.g. clean nappy, baby wipes, a new set of clothes and water) are ready.
2. Wash your hands.
3. Put a piece of paper on the changing table and place the child there.
4. Wear a pair of disposable gloves.
5. Undo and remove the used nappy and dispose of it in a hands-free lidded bin. If any of the child's clothing is soiled, place it in a plastic bag and hand it to the parents/guardians at the end of the day.
6. Clean the child's bottom by using wipes.
7. Remove the paper from the changing table and dispose of it, together with your gloves, in a hands-free lidded bin.
8. If applying nappy cream, wear a new pair of clean gloves.
9. Put on a clean nappy and dress the child.
10. Take the child away from the changing table.
11. Wash your hands and the child's hands.
12. Clean the nappy-changing area and disinfect the nappy table with warm water and detergent. Then wash and dry.
13. Wash your hands.
14. Record the nappy-change.

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Further Reading

For further information, read NHRMC's article on Staying Healthy, pages 45 to 47 on changing and toileting, and pages 48 to 51, to learn how to deal with spills safely. Click on the link below to access the site.

[Staying healthy: Preventing infectious diseases in early childhood education and care services](#)

4.2 Provide Positive Nappy-Change and Toileting Experiences That Enhance Relationships and Support Learning

Besides sleeping, there is probably no other activity that causes parents so much anxiety as toilet training. Toddlers will show signs of their readiness to toilet train, and each will master control of their bowels and bladder at their own pace. Some children may learn to use the toilet in weeks – others can take months. Remember that children can still have ‘accidents’ a few years after they have mastered using the toilet.

Positive nappy-changing experiences are hygienic and safe. They also include making sure the child feels relaxed and comfortable, not showing any displeasure or disgust, and encouraging children to communicate when they need their nappies changed.

To provide positive toileting experiences, educators should be supportive and never chastise children for urinating or defecating in their underwear. Punishing a child for having ‘accidents’ can have far-reaching and serious consequences. If children are fearful of soiling themselves, they may become constipated from trying to hold on to bowel motion. This can become a distressing and painful condition for young children, and they will begin to associate using the toilet with experiencing pain.

Rewarding children with praise, stamps or stickers for using the toilet or even just trying are ways that you can support children’s attempts at toileting independently. Using positive words and facial expressions, rather than wrinkling your nose in disgust or referring to the smell or appearance of their stool, are also important.

Facilities available, such as the toilet or potty, should be accessible, clean, comfortable and safe to provide positive toileting experiences to toddlers effectively. Giving privacy to older children can be beneficial as well.

Besides helping children be clean and hygienic, positive nappy-changing experiences also strengthen relationships, contribute to children’s growth and maturity, and widen their perspectives on self-care and their bodies.

Here are ways to make nappy-changing a positive experience for children:

- Make sure equipment and area used are safe and disinfected regularly.
- Allot time and give your undivided attention so children will feel relaxed and comfortable.
- Respond to cues and encourage children to be active participants in the process.
- Be inclusive and considerate of individual needs and feelings of children and adjust routines and procedures if needed.
- Talk with children using appropriate and familiar vocabulary while changing nappies.

- Maintain positive non-verbal communication by not showing negativity and disgust.
- Encourage carers to dress children in clothes that make nappy-changing convenient.
- Follow correct policies and procedures as mandated by recognised authorities.

Below are the steps of a toileting procedure:

1. Walk with the child to the toileting area.
2. Encourage the child to remove their clothes. Help the child if needed.
3. Encourage the child to wipe their bottom. If needed, put on a pair of gloves and help them.
4. Throw away the dirty gloves if you used a pair, and flush the toilet.
5. Remind the child to get dressed. Help the child if needed.
6. Help the child wash their hands.
7. Wash your hands.
8. Make a record of the toileting if the child is undergoing toilet training.

Here are ways to make toileting experience a positive experience for children:

- Encourage the child to do some parts of the routine themselves if they think they can do it.
- Answer the child's questions about the toileting routine using language appropriate for their age.

Below are practices that you can implement to create a supportive environment during nappy-changing or toileting:

- Not rushing children during the process
- Allowing children to take an active role in the process by responding to their cues
- Using consistent terms across the home and the early years learning centre
- Taking the child's individual needs into consideration during nappy-changing or toileting
- Asking the child if they need to go to the toilet
- Being positive about toileting and nappy-changing through your language and actions
- Ensuring a focused and positive interaction between you and the child during nappy-changing or toileting
- Respecting the children's right to privacy and dignity

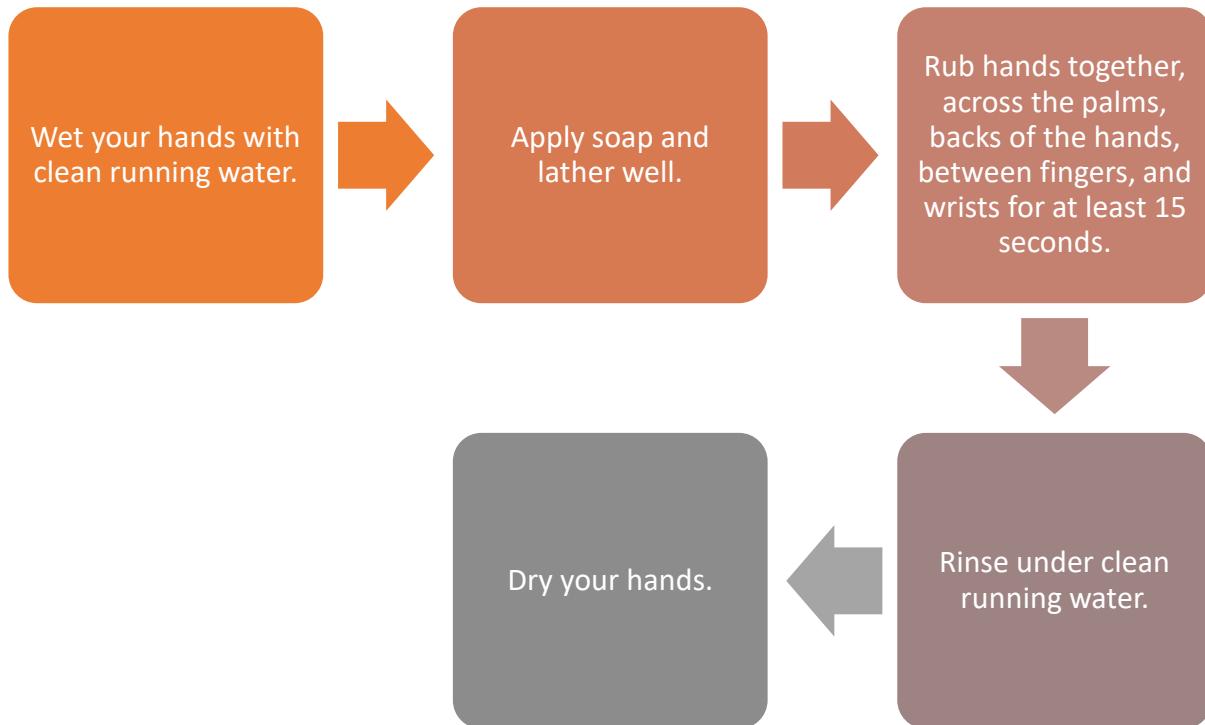
Providing positive nappy-change and toileting experiences keeps children away from infections and illnesses. Infections are caused by germs such as viruses, fungi, bacteria and protozoa and spread through various modes of transmission.

Below are the different modes of transmission of infections:

Mode of transmission	Description
Droplet transmission	<ul style="list-style-type: none">▪ Infections can be transmitted through coughing or sneezing.▪ Infections can be passed on through a person's mouth, nose or eyes.
Airborne transmission	<ul style="list-style-type: none">▪ Infections can be caught when inhaling contaminated air.▪ Infections can spread when someone infected talks and breathes.▪ Close contact is not needed to be contaminated with the infection.
Contact transmission	<ul style="list-style-type: none">▪ Infections can be transmitted through contact with affected bodily fluids (saliva, blood, urine or faeces).
Food	<ul style="list-style-type: none">▪ If not prepared and kept safely, food can be contaminated with germs and may cause illnesses and infections.
Animals	<ul style="list-style-type: none">▪ Infections can be caused by animal skin, feathers, saliva, scales, urine and faeces.

Young children may not fully understand the risk of infections and how their actions increase the risk of germs spreading. Children should also be supported to learn and develop personal hygiene practices to limit the spread of infectious diseases in services. Educators should role-model appropriate hygienic behaviours, discuss hygiene with children and encourage them to use appropriate practices.

Washing hands should also be done after using the toilet or changing nappies. Below are the steps in washing your hands based on the National Health and Medical Research Council Staying Healthy guidelines:



Further Reading



For further information, read ACECQA's article on toileting and nappy-changing principles and practices. Click on the link below to access the link.

[Toileting and Nappy Changing Principles and Practices](#)

4.3 Adapt Experiences to Meet the Individual Child's Routines

A routine is a sequence of actions regularly followed. As an educator, it is essential for you to think about how you organise your time and space, including space for routines. Routines are significant in early childhood settings to ensure a smoothly running and predictable environment for children.

When setting routines, you must remember that not all children and not every household are the same, so practices may differ. Specifically, every child you encounter will have their own needs and routines for nappy-changes and toileting. These differences depend greatly on how the family approaches these tasks. While it is generally preferred that babies use disposable nappies in early childhood settings, some children may need to use cloth nappies due to skin conditions or cultural beliefs.



Continuity and consistency within home and service should be maintained to make learning and training easier for children. Educators then need to communicate and work with the families of each of the children to effectively manage differences in a sensitive, respectful and professional manner. In addition, collaborating with families enables educators such as you to create individual plans and strategies more effectively since you know more about the children and their readiness for toilet training and other tasks.

Once you have collected enough data, set up routines for the whole group and individually. Remember that some rules and routines can be adapted to suit the child's needs, and some will not. Approved standards and policies guide you on the procedures that can be adjusted and procedures that are non-negotiable.

4.4 Support Children Sensitively and Positively When They Are Learning to Use the Toilet



A significant milestone for a child is toilet training. This will allow them to learn to attune to their body functions and know it is toilet time. Be patient and encouraging during this time as the child is learning a new skill and will be at a trial-and-error stage, so some accidents can take place.

When toilet training as an educator, you need to remember the following:

- As problems arise, such as having a bad day, being too busy, or if you are feeling tired, consistency is still the key to toilet training.
- Children can become distracted easily during activities, playing, experiences that can be missed out on. A child can have an accident in these circumstances.

Toilet training should be done by taking the child to the toilet at regular intervals (approximately every half hour). The following are ways to support children when using the toilet:

- Constantly reminding the child to go to the toilet as a reminder is needed
- Letting the child go to the toilet consistently and regularly throughout the day
- Making sure the child sits on the toilet for a few minutes before getting off
- Using an egg timer, counting and singing a song are great ideas if the child is finding it difficult to stay on the toilet for a few minutes
- Ringing a bell, clapping to a rhythm, or singing a special song is helpful to remind the child to go to the toilet
- Introducing to the child the correct procedure for handwashing and ensuring they wash their hands well
- Giving the child encouragement as this will help get them to the toilet more often
- Encouraging family to dress children in clothes that are easy to take off and wear again
- Reading books on toileting and having group discussions during group time will help children feel more comfortable

Positive actions and language are effective in helping a child use the toilet. Communicate to children that it is not disgusting and let them know it is a normal, natural process. Soiled clothing should follow policies and procedures, so read and be familiar with them. Wrap clothing in a plastic bag and give it to parents on pick-up. A bucket with a lid is another helpful way to keep soiled clothing in. You can also put the clothes in a plastic bag and clearly write the child's name on it so parents can identify what needs to be taken home and washed.

Assisting and supporting parents to help a child use the toilet will be a positive experience for their independence.

Supporting and communicating with families can also contribute to the child's independence and experience using the toilet. Collaborating with families allows you to know more about the children and their readiness for toilet training. Moreover, it gives you a chance to learn and discuss the family's cultural practices, how it follows procedures set by authorities, and what you can do to support and abide by these.

When supporting children in using the toilet, it is also important to respect their privacy, rights and dignity. When accidents occur, never make it a big deal, do not let other children know, and do not shame the child for accidents as these will happen. Always show the child respect by giving privacy when changing in front of others.

4.5 Work With Families and Other Educators to Support Children’s Toilet Learning by Sharing Information and Using Consistent Approaches

Before embarking on toilet training a child, it is crucial to discuss with the family how they wish to manage the task and provide them with information and strategies to use at home so that the child does not become confused.

Families may wish to follow their toilet-training method, and it is important that the service mirrors this to provide consistency with the home environment.

Some families may wish their child to use a potty, while others may want their child to sit on the toilet. A point of difference that occurs between most families is the language used to describe the urge to urinate or empty the bowels. It must be very frustrating for a child if they are trying to communicate to you their desire to use the toilet, but you do not understand the meaning of their request.

Rewarding the child’s attempts at toileting will also differ from family to family; some may wish for you to give the child a sticker or stamp, while others may want their child to receive verbal praise. Each child’s attempts at toileting can be recorded on a chart to reflect the child’s progress through the day. The term ‘attempts’ is used because often, children will access the toilet without producing a result. This should be praised, so the child forms a positive association with using the toilet.

To effectively support children’s toilet learning, educators must constantly communicate and collaborate. As mentioned, consistency is vital in the child’s toilet learning, so educators within a service should be consistent with their approaches and practices.

You can also collaborate with families and other educators by doing the following:

- Incorporating toilet learning and hygiene practices in lessons and activities
- Sharing new knowledge acquired from training and research
- Brainstorming and planning new approaches if current procedures and practices are ineffective
- Supporting and guiding each other when extra help is needed
- Documenting and sharing observations, improvements and other information
- Providing constructive feedback





Checkpoint! Let's Review

1. Nappy-changing and toileting experiences are important milestones of a child's development that can affect how children understand their bodily functions. It can also help in building relationships and improving learning and engagement.
2. Educators must be consistent, patient and positive in handling children and situations related to nappy-changing and toileting to provide positive and sensitive experiences and avoid complicated problems in the future.
3. Because of the risk of infection, it is vital to teach, model and train young children in hygienic practices early.
4. Positive actions and language are great for helping a child use the toilet. Communicate to children that it is not disgusting and let them know it is a normal, natural process.
5. Encourage families to be involved as they play a significant role in implementing appropriate approaches and strategies for nappy-changing and toilet training of children.



Learning Activity for Chapter 4

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

V. Promote Quality Mealtimes Environments



Babies and young children are attending childhood education and care services in increasing numbers, so they spend long periods of time there. Children's services need to pay particular attention to the type of food they serve and the environment in which it is prepared and consumed. Food should be nutritious and should meet the social, cultural and educational needs of every child.

On-site, early childhood services have the responsibility for the nutrition of children in their care. Practices and policies need to address issues of nutritional balance, mealtimes environment, food hygiene, safety and individual dietary needs, including allergies. You are accountable for the food being consumed by the children under your care while they are within the centre premises.

For services that provide care to babies and toddlers, extra education in the preparation, handling, and storage of breast milk and formula is essential, as is training in the introduction of solid food.

This chapter will discuss how you can do the following:

- Promote positive mealtime environments that are adapted to meet the individual child's routines and needs.
- Attend to babies' individual needs during meal times.
- Follow approved standards for safe storage, preparation, heating and serving of formula, breast milk and other pre-prepared food and drinks.
- Follow approved standards for cleaning of associated equipment and utensils.
- Offer a supportive environment for mothers to breastfeed according to service protocols.

5.1 Promote Positive Mealtime Environments That Are Adapted to Meet the Individual Baby and Toddler's Routines and Needs



The attitude, atmosphere and behaviour of educators are significant in the development of healthy eating practices. Children should be relaxed and happy when eating, and educators can use mealtimes to encourage healthy eating patterns and positive attitudes towards food. Children can learn from others about food preferences and how to eat from being in a setting where educators share mealtimes with them. In addition, mealtimes are good opportunities for children to learn and practice proper handwashing, which is also essential to developing their hygiene routines and practices.

Positive mealtime environments help shape children's development, health and learning. This can be done through appropriate physical environments, nurturing relationships and promoting healthy eating.

A positive mealtime environment is not when they are allowed to constantly move to and from the table or aimlessly wander with food. For safety reasons, children should be seated when eating and encouraged to have calm conversations as they concentrate on the task of eating. No child should be force-fed. Quiet encouragement and patience are often all that are needed for children to eat their meals.

When trying new food, introduce one food at a time and incorporate activities such as reading books to familiarise children with what they will eat. Modelling, tasting and eating a variety of food by other children and educators are big motivators as well.

The individual needs of each child during mealtimes can be determined by:

- age
- presence of a medical condition
- cultural and/or religious background
- family's beliefs and preferences about food.

Further Reading



The Department of Health website has a guide for healthy eating practices. Click on the link below.

[Get Up & Grow – Healthy eating and physical activity for early childhood – Resource collection](#)

Specifically, with toddlers, positive mealtime entails the following:

- Having opportunities for social time with educators and other children. Mealtimes should allow toddlers to learn through observations, conversations and interactions. This is also a good opportunity for adults to sit and eat with children and model healthy eating and trying new kinds of food.
- Using appropriate and safe equipment (utensils and furniture)
- Developing children's self-help skills by allowing them to help in setting the table, preparing simple food and filling glasses with water
- Having smooth and calm transitions to and from mealtimes and other activities
- Having an adult who is ready to assist if needed (e.g. cutting food and refilling water)

Below are some of the things you can do to assist toddlers during mealtimes:

- Make sure that every child has room for them to eat their food comfortably.
- Encourage children to share their food with one another.
- Make sure that every child has healthy food.

Recall Subchapter 1.2 for appropriate verbal and non-verbal communication. Besides building relationships and modelling, it is important that educators eat with children to complement good eating habits and assist toddlers if needed (e.g. cutting food and cleaning a mess).

Patterns need to be established for all children to promote eating properly for better wellbeing and healthy life. Major impacts on several children and their parents include food allergies, obesity and particular issues with intolerances. Children should learn and get into healthy habits from positive role models.

The government and organisations provide guidelines about food and drink to help parents make good choices. Good habits must be implemented for families to have conversations and give the children opportunities to ensure good health and show food with the most nutrition. Children with healthy eating habits when they are still young will have a lasting effect.

Parental involvement during mealtimes is also a great way to promote a positive environment tailored to each child's individual needs. Below are the different ways a parent can be involved and how you can support them:

Parental Involvement	How Educators Can Provide Support
Breastfeeding	They should ensure that there are spaces within the centre where parents can breastfeed their children in privacy. The centre can also provide areas where parents can express or store breastmilk.
Provision of prepared food or drinks	They can let parents provide home-prepared food for their children instead of forcing them to eat food provided by the centre. Educators can also make sure that there are storage areas in the centre where parents can leave the food they prepared for their children.

Parental Involvement	How Educators Can Provide Support
Parental direction regarding feeding	They can coordinate with parents regarding the child's feeding, note any specific instructions they provide and ensure that these instructions are followed closely. Educators can also update parents on the child's mealtimes for the day.
Informing the centre about the child's food allergies	They can coordinate with parents regarding the child's allergies, ensure they are documented in the centre and regularly update the documents as needed. Educators can also provide parents with instructions on updating the child's records as needed.
Ensuring the child practices healthy eating	They should coordinate with parents regarding healthy eating lessons for the day and how this can also be practised at home to provide consistency for the child.



Further Reading

Obesity in children will significantly contribute to their wellbeing and health. Get Up & Grow can provide an abundance of information containing healthy eating and physical activity to children and families in English and nine non-English languages. Resources include information for families, guidelines, recipes and posters. Indigenous families will also have resources specific to their families. Click on the link below to access these resources.

[Get Up & Grow – Healthy eating and physical activity for early childhood – Resource collection](#)

5.2 Attend to Babies' Individual Needs During Meal Times



There is an increased risk in babies and young children of choking on drinks and food. Children must be set down whenever eating, and supervision is a must.

When bottle-feeding babies, follow these steps:

1. Make sure the milk (breastmilk or formula) is at room temperature.
2. Check the teat and ensure the milk is dripping from the bottle steadily.
3. Find a comfortable spot and position for yourself.
4. Hold the baby in your arms gently but firmly. You can hold the baby on a slight incline to make burping easier.
5. Place the teat against the baby's lips and give the bottle to the baby in a titled position.
6. While feeding, always check the teat and milk flow for any clogs or leaks.
7. Observe signs that the baby is already done eating. If sucking stops, gently remove the bottle and help the baby burp.

Gagging (coughing or spluttering) is common in young children when learning to eat. Gagging is different to choking and is not a cause for concern. A medical emergency is choking that prevents breathing.

Supervising babies when feeding is crucial. Never leave the baby with a bottle or a bottle propped up. Propping the bottle is dangerous, as choking or developing an ear infection is a risk. Babies benefit from interaction with carer or parent when feeding while under supervision. Here are some practices to consider when preparing and feeding babies with solid food:

- Ensure babies are ready developmentally before solids are offered.
- Feed babies only when they are awake and alert.
- Never force babies to eat.
- Start with soft and smooth food first with suitable texture before progressing to family food.
- Grate, cook or mash hard fruits and carrots or vegetables before offering them to the baby.
- Never offer raw fruits and vegetables, nuts, popcorn or other hard food to babies.
- Check babies for any food allergies.
- Check babies for any dietary restrictions (e.g. being lactose intolerant).

Maintaining good mealtime routines helps provide a regular meal pattern into adolescence and adulthood. A balanced healthy diet builds a foundation for a healthy child formed from regular meal patterns. A child's energy and nutrient requirements are best through frequent and small nutritious meals and snacks due to their small stomachs.



Further Reading

The Eat for Health website has comprehensive guidelines for feeding infants. To access the site, click the link below.

[The Guidelines](#)

5.3 Follow Approved Standards for Safe Storage, Preparation, Heating and Serving of Formula, Breast Milk and Other Pre-Prepared Food and Drinks.

Ensuring food is healthy and safe is critical for children's health. Babies and toddlers' digestive and immune systems are immature. Therefore, food poisoning can be especially severe. Approved standards should be consistently practised, and hands should always be cleaned and washed before and after handling food to protect children, yourself and others from illnesses.



Formula Milk

Microorganisms that are harmful, such as *Cronobacter sakazakii* (previously known as *Enterbacter sakazakii*) and salmonella, naturally occur in the environment and food, including instant formula. There are strict controls in place with manufacturers to minimise contamination, but powdered infant formula is not sterile, so it is vital that the manufacturer's instructions for storage and preparation are followed. Once formula products are opened, prepared and stored, they can be contaminated. Careful preparation and storage will help minimise any opportunity for harmful microorganisms to grow.

To prepare formula, wash your hands, check if the sterilised bottles and other equipment are clean, and follow the manufacturer's instructions. When a bottle needs to be heated, place the bottle in a container with hot water for 15 minutes or less. Before giving the bottle to a child, make sure the milk's temperature is safe by dropping a little amount inside your wrist. Formula milk, just like breastmilk and other food, can only be reheated once.

Formula milk is best made fresh for every feeding. However, if not possible and the formula milk needs to be stored, it should be placed inside the refrigerator where it is coolest for no more than 24 hours. If there are any leftovers, dispose of them.

Breastmilk

Educators must practise the safe handling of breast milk as with all food and drinks. Safe handling is particularly important for breast milk because it is fluid from the body. Care should be taken to ensure that breast milk does not spill or drip onto other food and that a mother's breast milk is provided only to her baby.

Babies will accept breastmilk as normal food. The baby's mother and baby will be guided on how much to feed in one sitting. Babies who are not fed breastmilk will have smaller feeds.

For health reasons, expressed breast milk (EBM) should only be provided by a mother to her own baby. Never mix milk from different mothers.

Most mothers will leave ready bottles of EBM in the fridge. EBM can be safely kept in the fridge for up to 72 hours. Cold EBM can be warmed by standing bottle in a container of hot water (not boiling) until EBM has reached body heat. Dropping a little on the wrist is a good way to test warm milk. Nutrients in breastmilk can be destroyed by overheating or boiling EBM. A microwave should not be used to heat or thaw EBM.

Storage bags or other containers can be used to keep EBM frozen. It can be thawed slowly in the fridge or warmed quickly. Frozen EBM should never be left at room temperature. Move the bag or bottle of frozen EBM to warm water to thaw quickly. As water is cooled, add small amounts of hot water to a bowl and move EBM around until it becomes liquid. EBM may need to be placed into a clean feeding container. Ask parents when a baby will likely need to be fed, so time is allowed for EBM to thaw. Milk that is thawed in the fridge should be stored for 24 hours or not any more than 4 hours at room temperature or used to feed the baby immediately.

Like other food, EBM can harbour germs, especially after freezing and thawing. Teats, spoons, bottles, cups or other equipment for feeding must be washed in hot soapy water and well rinsed (drying with a paper towel if not used straight away or air dry). Personal hygiene is a must. Before preparing the feed, remember to wash your hands well.

Heating or freezing breastmilk should never be done more than once. Offer the baby small amounts of EBM at a time. EBM will have to be thrown out in large amounts if the baby is not hungry. Prepare another small amount if the baby needs more.

Food and Drinks

Do the following when storing, preparing, heating, cooling and serving food and drinks:

- Ensure raw food and cooked food are stored separately and safely, and utensils used for each are different and separated.
- If using glass containers for storage, food must be kept in a cool place.
- Before preparing food, wash your hands with soap and dry using disposable towels.
- Wear an apron or overalls.
- Make sure the kitchen and all equipment are clean.
- Separate the portion of food that will be prepared/cooked. Return the rest to storage.
- Maintain cold food at 5°C or less and hot food at 60°C. You can use a food thermometer to check if temperatures are safe.
- When reheating, make sure the food's temperature reaches 70°C for 2 minutes. You can reheat food only once.
- Before serving hot food, get a small piece with a spoon and use your hand to check the temperature. Throw the small piece after checking.
- If there are any leftovers, dispose of all of them in the proper bin.

Babies and toddlers have a variety of nutritional needs. As an educator, you need to ensure that these are being met. Babies commonly need nutrients such as calcium and zinc, while toddlers require vitamin B12 and protein. The National Health and Medical Research Council has released Infant Feeding Guidelines that can help you with their feeding recommendations.



Further Reading

For further information on the current National Health and Medical Research Council's Infant Feeding Guidelines, click on the link below.

[Infant Feeding Guidelines: information for health workers](#)

5.4 Follow Approved Standards for Cleaning of Associated Equipment and Utensils

During children's mealtimes, educators and children use various equipment to prepare and intake food. Equipment that is used by toddlers should be easy to handle, child-friendly and age-appropriate to make mealtimes easy, enjoyable and beneficial to their development.

These are some equipment items used for mealtimes:

- Bottles (for breastmilk or formula milk)
- Feeding cups
- Short-handled utensils (e.g. fork, spoon and tongs)
- Wide-rimmed and shallow plates and bowls
- Clear plastic squeeze bottles
- Glasses for drinking
- Pots and pans
- Appliances (e.g. refrigerator, dishwasher and stove)
- Furniture (e.g. table, chair and booster seat)



Equipment and food premises, such as the kitchen and eating areas, must always be kept clean to minimise the likelihood of food contamination and the spread of diseases among children, their families, and educators. Germs can easily develop and reproduce through food and the equipment used, so following proper cleaning standards is essential.

In cleaning bottles, follow these steps:

1. Wash your hands and dry.
2. Separate all parts of the bottle.
3. Check teats for any damages. Dispose of them if any cracks are present.
4. Wash bottles and teats using hot water and detergent.

5. Clean and scrub the inside of the bottles and teats with a bottle brush. Make sure no traces of milk are left.
6. Rinse well.
7. Sterilise the equipment (you can choose among four methods).

The table below shows the different sterilisation methods for equipment and utensils:

Sterilising Method	Steps
Boiling	<ol style="list-style-type: none"> 1. Place all equipment in a large pot. 2. Fill the pot with enough water until all equipment is covered. 3. Make sure the bottles are completely submerged in water and there are no bubbles present. 4. Boil for 5 minutes. 5. Let the equipment cool. 6. Use tongs or your clean hands when taking the equipment out of the pot. 7. Place sterilised bottles and teats in a clean and secured container and place them in the fridge. 8. Only use the equipment within 24 hours of sterilising.
Steam	<ol style="list-style-type: none"> 1. Place clean equipment in the steriliser. 2. Make sure there is enough space between the equipment so steam can circulate around all surfaces. 3. Follow instructions or the product manual. 4. Place sterilised bottles and teats in a clean and secured container and place them in the fridge. 5. Only use the equipment within 24 hours of sterilising.

Sterilising Method	Steps
Chemicals (antibacterial solution)	<ol style="list-style-type: none"> 1. Prepare a container that will fit all the equipment you will sterilise. 2. Follow the manufacturer's instructions carefully when preparing the solution to ensure its effectiveness. 3. Fully submerge all clean equipment in the solution. 4. Leave the equipment for the recommended time. 5. Use tongs when taking the equipment out of the container. 6. Place sterilised bottles and teats in a clean and secured container and place them in the fridge. 7. Only use the equipment within 24 hours of sterilising. 8. Dispose of the solution after 24 hours and thoroughly clean the container used.
Microwave	<ol style="list-style-type: none"> 1. Follow the manufacturer's instructions or product manual carefully. 2. Check microwave power and settings and adjust accordingly. 3. Do not place any metals inside.

When cleaning other equipment such as utensils, pots and pans, you can use a dishwasher on the highest setting. If a dishwasher is unavailable, these are the steps to follow:

1. Rinse all equipment with warm water.
2. Use a detergent and a sponge/brush to scrub and remove dirt and other residues.
3. Rinse with clean, warm water.
4. Dry the equipment and keep them in a clean and safe area.

To ensure cleanliness and food safety, it is also important to have the proper cleaning equipment. It is recommended that a particular colour for sponges and cloths is assigned per area to keep them separate. Cleaning equipment should also be disinfected or changed regularly, depending on its use and condition.

5.5 Offer a Supportive Environment for Breastfeeding According to Service Protocols

A significant role that services can play in promoting breastfeeding is to support nursing mothers openly. Breastfeeding is the right of every woman to breastfeed her child, enforced by the *Sex Discrimination Act 1984*.

Further Reading



For further information, read the *Sex Discrimination Act 1984*, 7AA Discrimination on the ground of breastfeeding. Click on the link below to access the legislation.

[Sex Discrimination Act 1984](#)

According to the guidelines set for protecting mothers who practice breastfeeding, a childcare provider:

- cannot refuse an application for a childcare place or not offer a place because the child is breastfed
- cannot ask the mother to stop breastfeeding when the child starts in care
- must let the mother breastfeed or express milk on the premises
- cannot refuse to feed the mother's EBM to the child
- must support the mother to keep breastfeeding or giving breast milk to the child while they are in the care.



Service protocols need to comply with these guidelines and reflect recommendations for supporting breastfeeding in their policies and procedures. You can assess your service's protocols for breastfeeding and offer support to families who choose to do so. Collaborate with your colleagues and supervisor to ensure that you comply with the service requirements.

Childcare providers can be made more ‘breastfeeding friendly’ by doing the following:

- Letting parents know they support breastfeeding when first contact is made with parents
- Setting up a comfortable and clean place in the service for mothers who want to breastfeed or express milk
- Being positive about the baby’s mother leaving breast milk for the baby
- Ensuring parents that the expressed breastmilk will be properly and safely stored

Parents, on the other hand, are expected to:

express expectations and concerns regarding breastfeeding

collaborate with educators and staff in creating support plans

label their own milk with their child’s name, date and time expressed

inform the service for any changes.

Checkpoint! Let's Review



1. Positive mealtimes are a social time. This can provide opportunities for children to develop healthy eating practices, interact with one another, build relationships and improve self-help skills. As an educator, it is vital that you carefully supervise babies and toddlers and be a good role model.
2. Positive mealtime environments help shape children's development, health and learning. This can be done through appropriate physical environments, nurturing relationships and promoting healthy eating.
3. Following standards for food storage, preparation and heating is essential to minimise the chances of diseases developing and spreading. Breastmilk, formula and food should be heated only once so no contamination occurs.
4. Cleaning equipment is as important as safely preparing food. Use warm water and detergent to disinfect utensils and other equipment used.
5. Services should promote, encourage and support breastfeeding among families. Support plans may be created if needed.

Learning Activity for Chapter 5

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.



VI. Create a Healthy and Safe Environment



To achieve the best learning outcomes and developmental results, babies and young children need to have a safe and supportive environment.

Environments are safe for babies and toddlers when they make children feel respected, valued and encouraged to grow. These environments must be proactive and take a preventive approach to protect children's safety and wellbeing. They must also value the opinions and views of children.

A safe and supportive environment allows all children to feel socially, emotionally and physically safe and valued. You must support children's physical, cognitive, social and emotional development to provide a good foundation for their wellbeing and success in later life.

Babies and young children learn about relationships through world experiences. This is how they develop a self-concept through life, a sense of identity and their place in their family and community. Providing a safe and supportive environment experience helps them develop a positive and secure self-concept and a sense of inclusion and belonging.

A child needs opportunities to develop social and emotional skills young in life. These form the basis of their lifelong social and emotional development and have an effect on mental health later in life. This is why when children experience environments that do not feel safe and secure, they may develop negative behaviour patterns and coping strategies that could lead to mental health difficulties in adolescence or adulthood.

You should plan and set up a safe and supportive environment that encourages positive relationships and good communication. Such an environment will have a warm and relaxed atmosphere that promotes relationships built on trust and mutual respect. Educators should demonstrate this in their relationships with each other, with children and with families. Communications will be carried out in a sensitive, patient and respectful manner, even during busy times or when dealing with difficult situations.

This chapter will discuss how you can do the following:

- Provide safe areas and appropriate resources for babies to practise gross motor skills.
- Supervise babies and toddlers appropriately, according to development and environmental factors.
- Ensure babies and toddlers can safely explore their environment with their hands, mouths and bodies.
- Provide a relaxed and calm environment that is responsive to the individual wellbeing of babies and toddlers.



6.1 Provide Safe Areas and Appropriate Resources for Babies to Practise Gross Motor Skills



Promoting physical activity and developing meaningful routines are ideal opportunities to help children acquire and practise gross motor skills. Gross motor skills include rolling over, sitting up, crawling and walking. Additionally, self-feeding, independent dressing, hygiene practices, toileting, helping set the table, and setting up and cleaning up are all purposeful and meaningful activities related to one's gross motor skills.

Gross motor skills are large muscle movements that allow children to perform everyday tasks (e.g. walking, running and dressing up). Milestones associated with gross motor development are as follows:

- Infants develop head and neck control and can reach, grasp, roll, kick, sit, crawl, pull themselves around, and such.
- Toddlers develop more controlled movements, such as walking steadily, jumping, running, bending, stretching and climbing.
- Preschoolers continue to develop physical skills, such as running, jumping, climbing, balancing and hopping.

Babies and young children need to have a variety of activities and different learning environments. Activities that can be conducted outdoors and indoors provide opportunities to promote new physical skills and stimulate their senses. Babies up to 1 year of age should be allowed supervised floor-based physical activities. They should have a safe environment where they are encouraged to play.

You can have a safe area for babies to practise gross motor skills by providing:

- closely supervised, safe areas for rolling, sitting, crawling and walking
- firm, soft surfaces for laying, stretching, rolling and moving
- quiet spaces as well as spaces to watch and interact with others
- soft, supportive furnishings, such as cushions to aid sitting and reaching
- sturdy furniture at an appropriate height to practise pulling up and walking
- safe, sturdy push/pull toys to interest babies as they learn to walk
- exercise balls for practising sitting
- safe feeding and sleeping areas that comply with Australian Safety Standards and recommendations concerning SIDS.

Children's gross motor skills may also be developed with appropriate resources that promote creativity and encourage experimentation. Provide children with open-ended materials that they can play with in any way they want.

By providing a range of materials that can be used in various ways, you create opportunities for children to explore and create in individual ways. Providing art and craft materials for children provides them with the opportunities to make things and use the materials in their own unique and creative way.

Providing colouring books, stencils or dot-to-dot drawings, ready-made cut-outs of birds, butterflies and animals or traced drawings for children to colour in, or paint-by-numbers does not make a creative experience. These are adult-directed activities and only provide practice in fine motor skills. Educators need to give the children opportunities to create for themselves rather than always be involved in adult-directed experiences. Children can become frustrated when blocked from expressing their creativity.

Open-ended materials are those that harness the children's imagination and have no limit to how they can be used. These could include plasticine, clay, dress-up materials such as hats and gloves, and cooking utensils, which could all be used in various games and experiences.

By providing children with open-ended materials, they have the opportunity to dip into their imagination and find creative new ways to use everyday objects.

6.2 Supervise Babies and Toddlers Appropriately, According to Development and Environmental Factors



Educators perform a difficult balancing act each day: managing risk while encouraging active play. However, being overprotective impedes children's physical development, undermines their confidence and creates a sense of anxiety. The vital key to managing risk is **active** supervision. Active supervision means much more than simply being on your feet and watching children. You have other senses that you can utilise to ensure that children are accessing their environment safely. Listening for sounds of distress or fear will signal the need for intervention, and constantly communicating with children will allow you to assess their level of comfort with the activity they are engaging in. Touching, either by offering a supportive hand to help them regain their balance or grasping them around their midsection, is also an example of providing active supervision.

The way you supervise babies and toddlers would also depend on developmental and environmental factors. Developmental factors may include the child's age, their current level of cognitive development and their current level of physical development. Meanwhile, environmental factors may include the number of children sharing the area, the number of educators working with you and the furniture in the area. Supervision may differ in time and proximity depending on the age and needs of a child. For example, babies demand more supervision time than toddlers as they depend more on carers, and their motor skills have not been developed yet. Babies also require close and undivided supervision during feeding and nappy-changing. While the supervision requirements for toddlers are not as demanding, it is still important that they are within your reach just in case any accidents occur.

Besides keeping everyone safe from harm, active supervision allows educators to know and understand each child, assess their strengths and weaknesses, and incorporate interests in activities. Moreover, it develops relationships built in trust and respect among educators and students.

Development Factors

It is recommended that the skills, abilities and knowledge of each child are the focus of your program. In this way, you are providing children with a positive environment in which they feel capable of participating.

It is vital to supervise children based on development factors for the following reasons:

- It allows you to adjust the necessary attention and interaction you provide (e.g. babies without the gross motor skill to walk yet do not need as much supervision as toddlers who can freely walk and hurt themselves).
- It helps you understand what kind of support each child requires.
- It enables you to allocate your attention accordingly based on who needs the most support.

A stage of development is used to refer to a particular age period when needs, behaviours, experiences and capabilities are common and different from other age periods. There are some behaviours you might expect to see at certain stages. At each stage of development, children learn in several areas at the same time.



The following tables provide an overview of developmental aspects and the skills and abilities you may expect to observe in children of different ages and stages of development:

Age	Physical Aspects
0 to 4 months	<ul style="list-style-type: none">▪ Brings hand to mouth▪ Takes swipes at dangling objects▪ Opens and shuts hands▪ Raises head and chest momentarily while lying on stomach▪ Reflexively grasps finger or object placed in their hand

Age	Physical Aspects
4 to 8 months	<ul style="list-style-type: none"> ▪ Can reach for things voluntarily ▪ Holds head upright in a sitting position ▪ Holds head upright for longer periods while lying on stomach ▪ Crawls with hands and feet ▪ Plays with feet and toes ▪ Tries to sit by themselves
8 to 12 months	<ul style="list-style-type: none"> ▪ Sits independently (may still use furniture as support) ▪ Uses hands for eating ▪ May try to stand (with help from furniture) ▪ Picks up and throws small things ▪ Crawls fast
1 to 2 years	<ul style="list-style-type: none"> ▪ Walks, runs, climbs, dances, squats and kicks ▪ Can feed themselves (with hands or spoon/fork) and drink from a cup ▪ Scribbles with crayon/pencil held in the fist
2 to 3 years	<ul style="list-style-type: none"> ▪ Walks, runs, climbs, jumps, dances, squats and kicks ▪ Able to balance, open and close doors and eat by themselves ▪ Actions are more controlled (can stop readily, hold crayons and pencils, and avoids obstacles)

Age	Cognitive/Intellectual Aspects
0 to 4 months	<ul style="list-style-type: none"> ▪ Copies adult tongue movements when talked to ▪ Observes patterns (light/dark contrast and faces) ▪ Glances towards the direction of a sound
4 to 8 months	<ul style="list-style-type: none"> ▪ Fond of games (e.g. peekaboo) ▪ Enjoys shaking, staring and mouthing at toys in hand ▪ Can coordinate touching, looking and hearing
8 to 12 months	<ul style="list-style-type: none"> ▪ Gains information through all senses: sight, hearing, smell, taste and touch ▪ Explores objects in a variety of ways (e.g. by shaking, banging or dropping them) ▪ Is fond of playing with water ▪ Expresses interest in picture books, music and sound-making toys ▪ Uses and understands simple gestures
1 to 2 years	<ul style="list-style-type: none"> ▪ Recognises own facial features in photos and mirrors ▪ Acquires the notion of object permanence ▪ Begins to sort shapes and colours ▪ Recognises and points to body parts
2 to 3 years	<ul style="list-style-type: none"> ▪ Increases problem-solving skills ▪ Can complete a four-piece puzzle ▪ Participates in make-believe and symbolic play ▪ Can sort by shape and colour ▪ Notices similarities and differences ▪ Follows more complex instructions

Age	Social Aspects
0 to 4 months	<ul style="list-style-type: none"> ▪ Smiles and laughs ▪ Glances towards the direction of a sound ▪ Becomes alert with faces
4 to 8 months	<ul style="list-style-type: none"> ▪ Responds to own name ▪ Extends arms to be picked up ▪ Remembers familiar people
8 to 12 months	<ul style="list-style-type: none"> ▪ Displays caution and apprehension in the presence of strangers
1 to 2 years	<ul style="list-style-type: none"> ▪ Can play with other toddlers ▪ Active and curious but may still be dependent on adults
2 to 3 years	<ul style="list-style-type: none"> ▪ Participates in make-believe and symbolic play ▪ Plays with other children ▪ May not share toys and other things with others

Age	Emotional Aspects
0 to 4 months	<ul style="list-style-type: none"> ▪ Cries to express negative feelings (e.g. hunger, being uncomfortable) ▪ Displays excitement when about to be fed
4 to 8 months	<ul style="list-style-type: none"> ▪ Shows happiness and excitement when seeing familiar faces ▪ Can interact with others ▪ Becomes more settled in sleeping and eating patterns
8 to 12 months	<ul style="list-style-type: none"> ▪ Actively explores and plays when parent or caregiver is present ▪ Displays discomfort and worry when a trusted adult is not present

Age	Emotional Aspects
1 to 2 years	<ul style="list-style-type: none"> ▪ May display anxiety and worry when important people are not present ▪ Develops empathy and attempts to comfort other toddlers ▪ Asks for comfort when negative emotions are felt
2 to 3 years	<ul style="list-style-type: none"> ▪ Is strongly attached to a parent or caregiver ▪ Shows guilt towards wrongdoings ▪ May react negatively when things do not happen the way they want them to be

Age	Language/Communication Aspects
0 to 4 months	<ul style="list-style-type: none"> ▪ Coos back and forth with caregiver ▪ Pays attention to human voices more than any other noise ▪ Cries
4 to 8 months	<ul style="list-style-type: none"> ▪ Is capable of responding to their name ▪ Imitates and responds to someone speaking ▪ Repeats and copies sounds
8 to 12 months	<ul style="list-style-type: none"> ▪ Communicates by shouting, crying, cooing, babbling, imitating, making facial expressions, and using body language and gestures ▪ Can respond to simple verbal requests ▪ Begins to imitate spoken words ▪ May speak their first words (e.g. 'dada' or 'mama') ▪ Copies words and actions (e.g. waving goodbye and clapping)

Age	Language/Communication Aspects
1 to 2 years	<ul style="list-style-type: none"> ▪ Has a vocabulary of approximately 5 to 20 words ▪ Has a vocabulary made up chiefly of nouns ▪ May repeat a word or phrase over and over ▪ Can follow simple commands ▪ Copies other toddler's actions ▪ Is fond of music and rhymes
2 to 3 years	<ul style="list-style-type: none"> ▪ Can name a variety of common objects in their surroundings ▪ Can use at least two prepositions, usually 'in', 'on' or 'under' ▪ Approximately two-thirds of what the child says is intelligible ▪ Has a vocabulary of approximately 150 to 300 words ▪ Can use two pronouns correctly (e.g. 'I', 'me', or 'you', although 'me' and 'I' are often confused) ▪ Is often curious, so asks many questions ▪ Begins to use 'my' and 'mine' ▪ Can respond to commands such as 'show me your nose'

In the table below are the different developmental stages and why they vary across individual children:

Development Stage	Why This Stage Vary Across Individual Children
Cognitive	Cognitive development may vary across individual children because of differences in their play opportunities. Children who have been provided with safe spaces to play and explore may be more advanced in their cognitive development.
Emotional	Emotional development may vary across individual children depending on how the adults in their life react to how they express their emotions. Children whose emotions are taken seriously or are not dismissed will probably be more advanced in their emotional development.
Language	Language development may vary across individual children because of how or how often the adults in their life speak to them. Language development will typically be more advanced if the child's parents talk to them more often.
Physical	Physical development may vary across individual children because of their opportunities to engage in physical activities. Children who have had more opportunities to be active, through physical play or exercise, for example, will be more advanced in their physical development.
Social	Social development may vary across individual children because of the size of their social circle or the number of people they usually interact with within a day. Children who have siblings, for example, may be more advanced in their social development compared with children with no siblings.

To effectively supervise children's developmental milestones, continuously monitor and document all information and data collected. If you observed any of the children showing the following, communicate with the child's family, your fellow educators and your supervisor to talk about the next steps in supporting the baby/toddler.

Age	Additional Support Is Needed When the Child Is:
0 to 4 months	<ul style="list-style-type: none"> ▪ Floppy or stiff ▪ Unresponsive and uninterested in sounds and familiar faces
4 to 8 months	<ul style="list-style-type: none"> ▪ Unable to roll, babble and create sounds ▪ Unresponsive and uninterested in sounds and familiar faces
8 to 12 months	<ul style="list-style-type: none"> ▪ Unable and uninterested in creating sounds and babbling ▪ Not attempting to sit, crawl, eat solids and play with feet ▪ Unresponsive and uninterested in sounds and familiar faces
1 to 2 years	<ul style="list-style-type: none"> ▪ Unable to communicate through simple words and actions ▪ Unresponsive and uninterested in familiar faces and moving
2 to 3 years	<ul style="list-style-type: none"> ▪ Uninterested in playing, eating, and other people ▪ Falling often ▪ Not able to comprehend words and instructions



Further Reading

For further information, read the Department of Social Service's article on Developmental Milestones and the Early Years Learning Framework and the National Quality Standards. Click on the link below to access the resource.

[Developmental Milestones and the EYLF and NQS](#)

Environmental Factors

Environmental factors include the different objects and elements of your learning environment in the centre, such as the following:

- Furniture (e.g. shelves and tables)
- Appliances (e.g. fans and television)
- Electronic devices (e.g. phones, tablets and computers)
- Outdoor areas
- Weather or climate
- Any animals present in the area
- Other children present

All of these factors contribute to the safety and security of a child. The supervision needed when children playing outside is significantly more than when you are inside a constructed environment like your classroom. You need to consider environmental factors when supervising children to ensure that they are safe and receive enough attention and support.

Safe spaces also mean that you have addressed any hazards in the area. Below are some examples of hazards and how you can address them:

Hazard	Best Practice to Address the Hazard
Changing table	Make sure the changing table has raised edges of at least 10 cm. Keep one hand on the baby at all times.
Toys with small parts	Regularly check if any parts have come loose. Avoid giving toys with parts smaller than a size D battery to children below 3 years old.
Furniture	Anchor heavy furniture against the wall to prevent them from falling over. Place heavy objects on the bottom shelves to make the bookshelves more stable.

6.3 Ensure Babies and Toddlers Can Safely Explore Their Environment With Their Hands, Mouths and Bodies



Exploration is a major part of children's growth and development. Through exploration, they are given opportunities to learn more about themselves and their world.

One of the ways babies and toddlers explore their environment and learn is by mouthing objects. This can include anything from your shoulder to the family pet, so it is important that you provide adequate supervision and constantly monitor their environment. Recent media reports have shown the dangers of children swallowing small objects, such as batteries, causing near-fatal damage to their vital organs.

Children also use their bodies and hands when exploring. Babies, for example, roll, crawl and grab things they can reach. Toddlers, on the other hand, use their hands and bodies during indoor and outdoor activities (e.g. playing on the playground, gardening, preparing food, playing with toys and reading books).

To ensure children can safely explore their environment, you can do the following:

- Regularly clean all equipment used.
- Make sure the furniture used is sturdy and in good condition.
- Provide age-appropriate toys and activities.

- Keep babies and toddlers away from electrical outlets. If not possible, use outlet covers.
- Provide safe objects they can hold on to.
- Use firm padding for indoor play and exploration areas.
- Check playground equipment regularly.
- Practice proper hygiene.
- Keep medicines, chemicals and potential poison away from children.

Another way to make sure that babies and toddlers are safe to explore their environments is by checking their immunisation. Parents or guardians must provide evidence when applying to enrol their child into early childhood education and care service to prove that their child is vaccinated for their age or has a medical exemption for vaccines. However, there may also be exemptions, such as religious beliefs.

Safe Environment

In any risk assessment, educators need to identify the risks, judge how hazardous the risks are and then remove or reduce the risks. Safety checklists are a simple tool that makes checking for hazards easier. These are usually made up of a list of possible hazards, a column for indicating whether it is indeed a risk in the environment you are looking at and then an action column for you to indicate what should be done about the risk.

Follow the service policies and procedures to ensure all service areas are regularly and thoroughly checked for safety, with particular attention to the areas to which the children have access. Safety and maintenance checklists are helpful as they guarantee that no areas are neglected. Review these checklists regularly to include or remove changes to the environment. Remember to view the areas from different angles and heights and look both up and down in scanning for possible risks.

Further Reading



You might find the resource ‘Family Day Care Safety Guidelines’ useful to further understand the importance of implementing preventative strategies to reduce the likelihood of injury in home-based education and care service. For more information on Family Day Care Safety Guidelines, click on the link below.

[Kidsafe Family Day Care Safety Guidelines](#)

6.4 Provide a Relaxed and Calm Environment That Is Responsive to the Individual Wellbeing of Babies and Toddlers

Besides affecting how children feel, learning environments also influence their attitudes towards learning and how they interact with others. *Relaxed* refers to the state of the learning environment that promotes unhurried interactions and supports children to feel at ease and free of anxiety. *Calm*, on the other hand, refers to the state of the learning environment that is gentle and understanding.

An environment is relaxed, calm and safe when it is built in trust and respect. Children should feel that they, as well as their wellbeing, cultures and beliefs, are valued. Nourishing environments also entail flexibility and adaptability to student needs and the availability of diverse opportunities for children to grow physically, intellectually and emotionally.

To provide a relaxed and calm environment, recall the safe and unsafe practices for working with babies and toddlers as well as the different ways you can address hazards in the environment. You should also consider the following:



Have Well-Designed Spaces

An attractive or aesthetically pleasing environment will offer choices, space, time, variety and ownership (i.e. soft spaces, comfortable spaces and quiet places).

A well-planned activity room is set up, ready for the children to use and incorporate appropriate equipment, toys, materials and furniture.

First and foremost, the room should be geared towards the children and consider their needs. Have space where the children can store their personal belongings, provide child-sized and child-friendly furniture and equipment, and provide equipment that all children can use regardless of ability and without the help of an adult. Other considerations include the following:

- Installing and using low shelves so children can access equipment and toys on their own
- Maintaining neat and tidy storage spaces so children can see what is there
- Arranging equipment in logical ways so that children can find them (e.g. storing shovels with pails)
- Labelling shelves with images so children can easily put items away themselves
- Displaying children's artwork where they can appreciate it
- Including photos and pictures relating to all different cultures and social backgrounds, especially those of the children within the group
- Providing equipment that the children can move and personalise to create their custom spaces
- Hanging mirrors and photographs of the children and their families to support and promote children's self-esteem

Include a Range of Areas and Experiences

Some areas remain a part of the environment, although their content and experiences might change. You might also move these areas themselves around the room to new locations. These might include the 'house' area, block area, reading corner, art and craft section, musical space and nature zone.

Provide Experiences With Overlapping Developmental Areas

All play areas link together and support each other to assist the overall development of children all at the same time.

Examples include the following:

- Constantly providing both individual and group opportunities to encourage social development across all play areas
- Challenging the children, so their sense of individuality expands, and their cognitive and emotional development are promoted

Provide Soft, Cosy and Comfortable Spaces

Providing soft spaces will allow children to relax and escape the energetic play around them. These spaces are effective in quieter or more passive areas and can be created using cushions, pillows, blankets, and child-sized chairs and couches. Soft spaces also add some textures for children to explore, so consider having a range of different fabrics in these areas.

Manage Hazards

Recall Subchapter 6.2 for samples on how to manage hazards. Educators need to be vigilant with hazards that may negatively affect the environment children are in. These include the following:

- Unsanitary areas
- Lack of supervision
- Broken and inappropriate furniture and equipment
- Discrimination among cultures and beliefs
- Children's thoughts and opinions that are not heard
- Toys and materials unsuitable for children



Checkpoint! Let's Review



1. Supervision is important to ensure children's safety, learning and development. It is recommended that educators are aware of expected developments and milestones, and everything is monitored and documented to be able to provide additional support if needed.
2. It is the educator's responsibility to provide safe spaces for children to play, grow and develop.
3. Logistics, equipment, attitudes and relationships are essential in establishing environments that are safe and relaxed.



Learning Activity for Chapter 6

Well done completing this chapter. You may now proceed to your **Learning Activity Booklet** (provided along with this Learner Guide) and complete the learning activities associated with this chapter.

Please coordinate with your trainer/training organisation for additional instructions and guidance in completing these practical activities.

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