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PURPOSE

This policy provides guidelines to enable Whittlesea Family Day Care to:

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



POLICY STATEMENT

The safety, health, wellbeing, rights and best interests of every child are the paramount consideration and must guide all decisions, actions and practices of educators within the education and care service.

VALUES

Whittlesea Family Day Care is committed to:

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

SCOPE

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

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Educators	Parents/guardians	Contractors, Volunteers and Students
Providing a safe and healthy environment for educators, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs	R	R	√		

and activities of the service (<i>Regulation 103, National Law: Section 167</i>)					
Ensuring that children being educated and cared for by Whittlesea Family Day Care are provided with an environment that is free from the use, visual and reach of vaping, tobacco/e-cigarettes, illicit drugs and alcohol (<i>Regulation 82 (1)</i>)	R	✓	✓		✓
Ensuring that a nominated supervisor, educators, contractors, volunteers, students on placement at Whittlesea Family Day Care are not affected by alcohol or drugs, including prescription medication (<i>refer to Definition</i>) to impair the person's capacity to supervise or provide education and care to children at Whittlesea Family Day Care (<i>Regulation 83 (1)</i>)	R	✓	✓		✓
Not consuming alcohol or be affected by alcohol or drugs (including prescription medication) that impairs capacity to supervise or provide education and care to the children (<i>Regulation 83 (2) (a) (b)</i>)	✓	R	✓		✓
Ensuring household members or visitors do not consume drugs or smoke/vape whilst Family Day Care children are in care			✓		
Developing procedures that include steps to remove an affected educator from Whittlesea Family Day Care so they do not further endanger other educators and children. Procedures should provide guidelines to ensure that the children are able to get home safely, the educator is able to get home safely (if not already at home) and outline steps for initiating police or ambulance intervention if the situation cannot be safely managed by the approved provider (<i>refer to Code of Conduct Policy and Compliments and Complaints Policy</i>) (<i>National Law: Section 167</i>)	R	R	✓		✓
Developing, updating and reviewing the <i>Tobacco, E-Cigarettes, Alcohol and other Drugs Policy</i> in collaboration with the nominated supervisor, educators, parents/guardians, children and others involved at Whittlesea Family Day Care	✓	✓	✓	✓	✓
Providing the nominated supervisor, educators, contractors, volunteers, students and families with information about policy requirements, with opportunities to provide feedback and input	✓	✓	✓	✓	✓
Considering diversity and cultural practices when implementing this policy and tobacco, e-cigarettes, alcohol and other drugs initiatives	✓	✓	✓	✓	✓
Ensuring the <i>Tobacco, E-cigarettes, Alcohol and other Drugs Policy</i> is included in educator induction/orientation	R	✓			
Preventing and managing risks associated with the use of alcohol and other drugs	R	✓			
Monitoring the health and safety of educators, contractors, volunteers, students on placement, parents/guardians and children	R	✓	✓		
Providing information and training to educators, including information and training on vaping, tobacco, e-cigarettes, alcohol and other drugs	✓	✓			

Providing educators who identify as having an alcohol and/or other drug problem referrals to professional assistance	√	√			
Ensuring the registered home and outside areas are totally smoke and vape free at all times during Family Day Care operation			√		
Promoting a smoke and vape free zone (<i>refer to Definition</i>) within four metres of the entrance and within ten metres of children's outdoor play areas at Whittlesea Family Day Care premises running programs		√	√		
Ensuring that all service events, on and off site, are smoke, vape and drug-free	R	√	√	√	√
If there is alcohol at educators or family events, ensuring all legal requirements related to the sale and supply of alcohol are met and that responsible consumption of alcohol is promoted	R	√	√	√	√
Ensuring that the nominated supervisor, educators, families and visitors adhere to legislation and Whittlesea Family Day Care policies related to smoke and vape-free areas and are asked not to smoke in sight of children	R	√	√		√
Encouraging the nominated supervisor and educators who smoke or vape to take appropriate hygiene measures after smoking so that children are not exposed to second-hand (<i>refer to Definition</i>) and third-hand smoke (<i>refer to Definition</i>) (<i>refer to Hygiene Policy</i>)	R	√	√		√
Not consuming or being under the influence of alcohol or affected by drugs when attending Whittlesea Family Day Care	√	√	√	√	√
If an educator believes a parent is intoxicated or adversely affected by drugs when they arrive to collect their child/ren they must: - Suggest the parent delays collecting the child until the effects of alcohol or drugs have diminished or until another authorised person can come collect the child - If the parent insists on taking the child and the educator believes the child is at risk they must let the child go with the parent and report the situation immediately to the local police station and then contact the Family Day Care Coordination Unit to inform them of the situation - The educator, with support of the Coordination Unit, will report the situation to the Officer in Charge at the local police station and/or Child Protection	√	√	√		
Ensuring all vehicles used in transporting children for Family Day Care are totally smoke free			√		
Refraining from smoking in the car with children under the age of 18				√	
Ensuring the consumption of alcohol as a part of events, celebrations, awards, gifts and fundraising is done so responsibly	√	√	√	√	√
Supporting the nominated supervisor, educators and families who want to quit smoking, vaping, drinking or using other drugs to access appropriate agencies and maintaining confidentiality	√	√			

Providing resources about the health risks related to smoking, vaping, excessive drinking and taking drugs to educators	✓	✓	✓		
Providing information about health risks related to smoking, vaping, excessive drinking and using other drugs to families and community members, including information about accessing support services	✓	✓	✓		
Guiding age-appropriate, sensitive discussions about health issues related to vaping, tobacco, e-cigarettes, alcohol and drug use as opportunities arise (e.g. if a child is pretending to smoke)		✓	✓		✓
Engaging in professional development and resources that guide age-appropriate, sensitive discussions about health issues related to vaping, tobacco, e-cigarettes, alcohol and drug use as opportunities arise		✓	✓		✓
Ensuring that partnerships are established with relevant organisations and health professionals to support smoke and vape-free, drug-free and responsible consumption of alcohol initiatives where appropriate	✓	✓	✓		✓
Ensuring that there are no partnerships with organisations that market or supply alcohol, tobacco, vapes or e-cigarettes	✓	✓	✓		✓
Taking reasonable care for their own health and safety in the workplace, and the health and safety of others who may be affected by their acts or omissions (<i>OHS Act section 25(1)(a) and (b)</i>)	✓	✓	✓		✓

BACKGROUND AND LEGISLATION



BACKGROUND

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

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

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

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

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

Tobacco, E-Cigarettes, Alcohol and other Drugs

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

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
- Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au



DEFINITIONS

The terms defined in this section relate specifically to this policy.

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

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

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

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

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

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

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

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

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

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



SOURCES AND RELATED POLICIES

SOURCES

- Alcohol and Drugs Foundation: www.adf.org.au
- Better Health Channel – Drugs: www.betterhealth.vic.gov.au

- Cancer Council Victoria: www.cancervic.org.au
- Department of Education – Drugs Education: www.education.vic.gov
- Health.Vic: www2.health.vic.gov.au
- National Drug Strategy: www.health.gov.au
- Quit Victoria: www.quit.org.au
- Raising Children Network: raisingchildren.net.au
- Tobacco in Australia: www.tobaccoinaustralia.org.au

RELATED POLICIES

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

EVALUATION



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

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



ATTACHMENTS

- Nil

AUTHORISATION



This policy was adopted by the approved provider of Whittlesea Family Day Care on 30 July 2026

REVIEW DATE: 30 July 2029

Review History		
Version	Date	Responsible Person
1.0	30/10/2024	FDC Coordination Unit
1.1	30/07/2026	FDC Coordination Unit