

# CHILD CARE and workers' compensation

Imagine a workplace where everything has shrunk. Little chairs, little tables, little people. Welcome to the child care industry. Now consider how this impacts on your workers and their health.

**L**ike many industries, child care is physically demanding work. How do you protect your workers from injury and how does an injury impact the rest of your staff and your business? While having OH&S policies and procedures in place and doing regular in-house training with your staff regarding safe lifting practices can keep injuries to a minimum, human error and fatigue can always lead to injuries.

## NATURE OF THE WORK

When you embark on a career in child care, you don't think you are entering an industry with a high risk of injury. After all, you're looking after children, caring for them, nurturing them, setting up activities and educational experiences. I had many friends at university who were studying various other courses who were envious of me when I would return from a tutorial with paintings and various other art and craft activities that we had made in class! You don't consider that your work environment is designed for little people and therefore involves a lot of lifting, bending and sitting on small furniture.

The typical daily duties of a child care worker can involve anything from setting up and packing away outdoor equipment, wiping down little tables, sitting with the children at meal times on little chairs at little tables, changing nappies, putting children to bed (whether they be in a cot or on a bed or mattress on the floor), conducting group time (when you are usually

sitting on a little chair or on the floor with the children), lifting children in and out of high chairs. Even with the best of intentions and correct lifting procedures in place, it is common for workers to suffer a sore back and receive workers' compensation.

## THE PHYSICAL TOLL

For those who have children or who have ever looked after children, you would know that the younger the child, the more lifting and bending involved. In a large child care centre (60-plus children per day), you can have anywhere from 15 to 30 babies (from zero to two years old) in your nursery every day. All these children need to be fed, changed and put to bed, not to mention the various play and other activities you do with them.

The current staff to child ratio is one to five. This means that each worker, on average, is putting five children to bed then taking them out again (performing this more than once if they are young and not yet on one sleep a day), changing 20 or so nappies every day (five children, all being changed at least every two hours), and lifting five children in and out of a highchair for morning tea, lunch and afternoon tea. If just one worker is on restricted duties and is unable to fulfil their tasks, like all physical jobs, someone else has to do the work for them. The work (that is, nappy changing, feeding, etc) cannot be set aside until the injured worker has recovered. If the worker remains in the nursery, there are very few duties they are able to perform. What effect

does this have on the injured worker and the relationship they have with the staff they are working alongside? In an environment where you are caring for and nurturing children, you cannot afford to have hostility between staff as a result of some having to carry a larger workload than others.

There is one positive change that is coming into effect in January 2011 that will decrease the workload of those child care professionals who work with the zero-to-two year olds. The child care worker:child ratio is changing from one to five down to one to four. This will not only decrease the workload, but also the stress and strain on those workers caring for young babies who are so highly dependent on their caregivers.

## IMPLICATIONS OF RESTRICTED DUTIES

In some cases, workers who are on restricted duties that are limited only in terms of the weight that the worker can lift can be moved to a room with older children, who are more self-sufficient. Working with older children does not tend to involve as much lifting, as there are no cots, no high chairs and, for the pre-schoolers, no nappy-changing. At the same time, you want to provide as much stability and consistency for the children, staff and parents as possible. Moving staff around from room to room for short periods is not ideal.

If a worker has a more serious injury and, for example, always needs to sit on an adult chair, is unable to bend, or to lift or sit on the floor, there are very few duties that they can perform in the rooms with the children. Even when working with the older children (four to five year olds), most duties still involve some bending or being able to get down to the children's level. Pre-schoolers still need assistance in the bathroom, tying their shoe laces, going to sleep at rest time, completing activities on the floor (that is, floor puzzles, blocks, etc), to name only a few. Light cleaning duties also need to be carried out – wiping down little tables, sweeping, mopping, cleaning the bathroom, setting up beds, cleaning beds and putting them away,

setting up activities on low tables and packing them away again.

In the short term, you may be able to give the injured worker administrative duties to help out the director (this is every director's dream!) Meanwhile, you will need to replace the worker in the room, as there are ratios you need to maintain in terms of how many staff you have relative to the number of children. If you do not have your own casual staff you can draw on, you will then have the added cost of going through an agency to obtain a staff member to replace your worker. If you are unlucky enough to be missing one of your Early Childhood Teachers, the cost of obtaining a casual through an agency to cover them or replace them while they are injured can be around \$60/hour, which works out at \$2,480 for an average 40-hour week. Considering that a permanent teacher would be costing you less than half of that amount, gross, it is a large cost to have to cover.

Back injuries received from working in child care can result in staff having

to have anything from one or two days off, to needing months off. Like all injuries and all industries, the recovery time of your staff depends on a lot of factors. Their age, their health, their fitness level, whether the injury has happened over a short period of time or whether it is an ongoing, chronic issue are all factors that can influence their recovery and the time it is likely to take.

**HIGH STAFF TURNOVER**

Child care, in general, has a high turnover of staff. This is the result of many contributing factors, one of them being the physical strain on the body of this kind of work. Another is the emotional stress of looking after children. This is also quite common, but harder to define and treat. Anyone who has had anything to do with child care knows how demanding children can be. Whether they are a few months old or a few years old, there is a lot of responsibility involved in caring for someone else's children.

**IMPROVING CONDITIONS**

More changes will be coming into effect over the next few years that are going to improve the working conditions of child care workers. As mentioned before, the ratio of staff to children for the zero-to-twos is being decreased. The ratios for the older children will also be decreasing. For those working with the two to three year olds, the staff to child ratio will be going from one to eight down to one to five. This will automatically result in less physical and emotional stress and strain for child care workers, and have a flow-on effect of less workers' compensation. The healthier you can keep all your staff, the better for all involved. ■

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By Kasarne Robinson

# NSW Workers' Compensation Legislation Amendment Bill 2010

The Workers' Compensation Legislation Amendment Bill was introduced in the NSW Legislative Assembly on 23 June 2010. The Bill was debated, and amendments made to the first draft by the Legislative Assembly on 27 October 2010. The Bill was passed without further amendment by the Legislative Council on 9 November 2010.

**T**he object of the Bill is to amend the *Workers' Compensation Act 1987* and *Workplace Injury Management and Workers' Compensation Act 1998*. The most noteworthy amendments are as follows:

**DISPUTES CONCERNING FUTURE TREATMENT**

The most exciting news the Bill brings is that it extends the jurisdiction of the Workers' Compensation Commission (WCC) beyond disputes about treatment and services that have been provided to an injured worker to cover disputes about treatment and services that are proposed to be provided. Disputes are to be referred to an Approved Medical Specialist.

**RETIREMENT AGE**

An amendment is made to s1511A of the 1987 Act to refer to 'retirement age' rather than 'age 65', thus keeping the maximum age for determining economic loss for calculating work injury damages in line with the age for entitlement to the age pension. The amendment does not apply to an award of damages in proceedings commenced before the commencement of the amendment. >>