

Greenwith Campus Outside School Hours Care



POLICY DOCUMENT

GOVERNANCE AND MANAGEMENT

GOVERNMENT AND MANAGEMENT

BACKGROUND

The Education and Care Services National Regulations require policies and procedures to be in place in relation to governance and management.

PRACTICE PRINCIPLES

Our Lady of Hope Greenwith Campus OSHC is committed to good governance and management to deliver high quality outcomes:

- Robust effective governance and management policies and procedures
- Accountability to its stakeholders
- Effective systems of risk management, financial and internal control, and performance reporting
- Compliance with all regulatory and legislative requirements placed on the organization, including space, equipment and facilities, confidentiality of records and notifications and reporting
- The organization to remain solvent and comply with all its financial obligations
- The ongoing cycle of self-assessment, planning and review, embedding a culture of quality improvement

HOW THE POLICY WILL BE IMPLEMENTED

Roles	Responsibilities
<p>Approved provider</p>	<ul style="list-style-type: none"> • ensure that obligations under the Education and Care Services National Law and National Regulations are met, as well as all other laws relevant to governance and management of the service • display the prescribed information in section 172 (regulation 173) • provide information to the regulatory authority upon request in relation to being a fit and proper person (sections 13, 14, 21) • ensure that the service is insured and keep evidence of this (section 51; regulations 29, 180) • ensure that the number of children at the service does not exceed the maximum in the service approval (section 51) • ensure that the family of a child at the service is allowed to enter the premises (regulation 157) • adopt quality governance and management processes, procedures and practices, in line with the National Quality Standard, especially Quality Area 7 – Governance and leadership • establish systems of risk management, financial and internal control, and performance reporting. Monitor management and financial performance to ensure the solvency, financial strength and good performance of the service • develop, review and approve the service philosophy and purpose, strategic direction and initiatives (Element 7.1.1) • take reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the Governance and management policy and procedures • ensure that copies of the policy and procedures are readily accessible to nominated supervisors, co-ordinators, educators, staff, volunteers and families, and available for inspection • notify families at least 14 days before changing the policy or procedures if the changes will: <ul style="list-style-type: none"> • affect the fees charged or the way they are collected or • significantly impact the service’s education and care of children or • significantly impact the family’s ability to utilise the service.

Notifications and reporting

- ensure that all reporting and reporting requirements are met regarding the National Quality Framework, family assistance, taxation, child protection, and other relevant laws
- notify the regulatory authority about the approved provider and operational changes, and changes in relation to the nominated supervisor, as detailed in section 173 (regulations 174, 174A)
- notify the regulatory authority about changes to the 'fit and proper' status of the approved provider, any serious incidents, and complaints relating to a serious incident or that the Law has been contravened (section 174; regulations 175, 176, 176A).

Health, safety and wellbeing

- ensure the health, safety and wellbeing of children in the service and take every reasonable precaution to protect children from harm and hazard (section 51; Quality Area 2).

Quality Improvement Plan (QIP)

- ensure there is an effective self-assessment and quality improvement process in place, including a QIP that is kept at the premises or FDC principal office and is made available for inspection and to families (regulations 31, 55; Element 7.2.1)
- ensure that the QIP is reviewed at least annually (regulation 56).

Space, equipment, facilities

- ensure that requirements relating to the physical environment, space, equipment and facilities are met, including regulations 104, 106, 107, 108, 109, 110, 116, 117 (Quality Area 3).

Educational needs and program

- ensure that children's educational and developmental needs are met (section 51; Quality Area 1).

Educators and staff

- ensure that requirements relating to staffing are met, including implementing the Staffing policy and procedures (including regulation 84)
- ensure that roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service (Element 7.1.3)
- ensure that the performance of educators, staff and co-ordinators is regularly evaluated and individual plans are in place to support learning and development (Element 7.2.3)
- ensure that a nominated supervisor, educators, staff, volunteers and contractors to whom a prohibition notice applies are not engaged by the service (section 188)
- ensure the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle (Element 7.2.2).

Nominated supervisors and responsible person

- ensure that requirements relating to the nominated supervisor and responsible person are met, including implementing the Staffing policy and procedures (including section 162, section 162A; regulation 117B).

	<p>Records and confidentiality</p> <ul style="list-style-type: none"> • keep a record of the service’s compliance with the information listed in regulation 167 • keep a record of enrolment and other documents listed in section 175 at the service or FDC residence or venue and be available for inspection by an authorised officer • ensure that records are kept confidential and not divulged except as permitted under regulations 181 and 182 • ensure that records are stored safely and securely for the period set out in regulation 183 • keep enrolment and attendance records (regulations 158, 159, 160, 161, 162) and other documents listed in regulations 160, 177 and 178, ensure they are accurate and available to families on request (section 175). If a service approval is transferred, the documents must be transferred to the receiving approved provider (regulation 184).
<p>Nominated supervisor/ Responsible person</p>	<ul style="list-style-type: none"> • ensure that regulatory obligations are met in relation to governance and management • adopt quality governance and management processes, procedures and practices, in line with the National Quality Standard, especially Quality Area 7 – Governance and leadership • implement systems of risk management, financial and internal control, and performance reporting. Monitor management and financial performance to ensure the solvency, financial strength and good performance of the service • develop and review the service philosophy and purpose, strategic direction and initiatives (Element 7.1.1) • ensure that the family of a child at the service is allowed to enter the premises when the child is being educated and cared for (regulation 157). <p>Notifications and reporting</p> <ul style="list-style-type: none"> • ensure that all notification and reporting requirements are met regarding the National Quality Framework and other relevant laws. <p>Health, safety and wellbeing</p> <ul style="list-style-type: none"> • ensure the health, safety and wellbeing of children in the service and take every reasonable precaution to protect children from harm and hazard (Quality Area 2). <p>Quality Improvement Plan (QIP)</p> <ul style="list-style-type: none"> • ensure there is an effective self-assessment and quality improvement process in place (Element 7.2.1). <p>Educational needs and program</p> <ul style="list-style-type: none"> • ensure that children’s educational and developmental needs are met (Quality Area 1). <p>Educators and staff</p> <ul style="list-style-type: none"> • ensure that roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service (Element 7.1.2) • ensure that the performance of educators, staff and co-ordinators is regularly evaluated and individual plans are in place to support learning and development (Element 7.2.3) • ensure that requirements relating to staffing are met, including implementing the Staffing policy and procedures (Quality Area 4)

	<ul style="list-style-type: none"> • ensure that the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle (Element 7.2.2.). <p>Records and confidentiality</p> <ul style="list-style-type: none"> • ensure that requirements relating to records and confidentiality are met.
Educators	<ul style="list-style-type: none"> • must be aware of and follow the Governance and management policy and procedures • must be familiar with and implement the service’s policies and procedures, philosophy, QIP and code of conduct • ensure that requirements relating to records and confidentiality are met.
Families	<ul style="list-style-type: none"> • be aware of the Governance and management policy and procedures and address any questions to the approved provider or nominated supervisor/responsible person.

DUTIES

Director

Duties:

Centre Management
Business/Financial Management
Legislation and Regulation Compliancy
Funding applications
ISS cases
Recruitment
Staff Management
Grievances – Staffing & Parents
Provide Leadership to Staff
Ensure High Quality Child Care
Responsible to the Principal of Sponsoring Body

Assistant Director

Duties:

Program Management
Behaviour Management
Medical Conditions and Medications Management
Staff Management
Grievances – Parents & Children
Provide Leadership to Staff
Ensure High Quality Child Care
Responsible to the Director

3IC (Grade 3)

Duties:

Work Health a Safety Representative
Special Needs Children
Kitchen management
Office Administration
Provide High Quality Child Care
Assist qualified and unqualified with direction and developing their skills
Responsible to the Assistant Director

Specialised Staff

Maintenance Officer

Duties: Facilities and Equipment Maintenance
Grounds Maintenance
Responsible to the Director

Cook

Duties: Plan, prepare, and cook healthy, balanced meals and snacks for children.
Cater for dietary requirements including allergies, intolerances, cultural or religious preferences, and special health needs.
Follow food safety regulations (e.g., HACCP, local health authority guidelines).
Maintain cleanliness and hygiene in the kitchen and food preparation areas.
Monitor and record food temperatures, cleaning schedules, and stock rotation.
Menu planning
Order groceries and manage food stock, including budgeting and cost control.
Maintain records for health inspections and audits.
Comply with workplace policies and procedures, including food safety plans
Collaboration and communication with educators
Responsible the 3IC

Educators

Qualified Staff

Duties: Daily parent Liaison
Responsible for junior primary collection
Group facilitation on Campus grounds
Provide High Quality Child Care
Observations, evaluations, activity suggestions
Safe and active supervision
Positive interactions
Assist unqualified staff with direction and developing their skills
Responsible to the Assistant Director & 3IC

Unqualified Staff

Duties: Always working with qualified staff
Provide High Quality Child Care
Observations, evaluations, activity suggestions
Safe and active supervision
Positive interactions
Responsible to the Assistant Director

Contractor Staff

Cleaning Contractor

Responsibilities: Maintain Hygienically Clean Equipment and Facilities
Restocking of toilet rolls, hand towels and hand soap
Responsible to the Director

Committee/Board

Advisory Committee

Responsibilities: Policy & System Development and Review
Developing and Reviewing Business and Strategic Plans
Budget Setting, Overview Finances, Program, Maintenance, OHWS
Recommending proposals to the Sponsoring Body School Board
Grievances – Staff and Families
Responsible to the Sponsoring Body School Board

Sponsoring Body School Board

Responsibilities: Review Advisory Committee's Recommendations
Ratify, Modify or Decline Advisory Committee's Recommendations
Responsible to the Catholic Education South Australia, the South Australian Government & the Federal Government
Responsible to the Catholic Church Endowment Society

Meeting Schedule

Advisory Committee

- Meetings scheduled at least once a term.
- An additional meeting can be scheduled if required in Term 4 to set the budget for the following year.
- A staff representative and the Director facilitate the communication between staff and the Advisory Committee.
- The Principal is the Our Lady of Hope Board representative on the Advisory Committee.

Leadership Team

- Meetings once a week

All Educators

- 2.45pm Staff meeting daily
- Meetings scheduled once a term.

PHILOSOPHY AND POLICIES

In Our Lady of Hope Greenwith Campus OSHC, there is a periodic review of all policies and procedures in consultation with all stakeholders. These policies (and procedures) provide clear documentation that defines agreed and consistent ways of doing things to achieve the stated outcomes.

The service philosophy and policies will be readily available for all stakeholders and reference to this can be found in general service information.

The statement of philosophy will also be included in the Quality Improvement Plan for the service.

FINANCIAL MANAGEMENT

Our Lady of Hope Greenwith OSHC service must be financially accountable and be operated as a financially viable and sustainable business.

The service will develop a budget in consultation with the school, incorporating all known costs regarding income and expenditure, including maintaining provisions for planned future expenditure. All specific provisions should be formally approved and noted in meeting minutes. Further information on budgeting and fee setting is set out under the Fee Policy.

It is a requirement of our Service, that there are provisions held for employee entitlements as per the Enterprise Agreement. Such money will be available as needed. Employees should be advised of their available entitlements with each pay.

FACILITIES AND ENVIRONMENT

Regulations 103–115 relate to the physical environment required for an OSHC service. Our OSHC service complies with these regulations.

The centre consists of two double transportable buildings, a toilet block, storage shed, several extensive verandas and outside seating and tables for children to enjoy their snack and mealtimes. The centre has a fully operational commercial kitchen managed by a cook. The centre also accesses the campus' buildings and resources such as the resource centre and community hall.

Our environment is large, flexible, diverse and aesthetically pleasing facilitating children's learning and development. The environment is designed to ensure children's visibility whilst also taking into consideration the autonomy of the child.

Premises are well cleaned and maintained by our maintenance officer and cleaning adhering to CESA guidelines and operational procedures.

The environment is designed to be accessible to all children and stakeholders. The layout provides flexibility enabling the group dynamic to be large, small or singular. All stakeholders including the children are actively involved in creating our aesthetically pleasing environment.

We have adequate storage space for equipment; minimal space for administrative tasks as well as space where confidential meetings can be undertaken and our areas for food preparation is also minimal but meet the requirements of the Food Safety Standards.

EQUIPMENT AND MAINTENANCE

The centre needs to be inviting for children as well as meeting their needs, OSHC services need to have appropriate equipment that is well maintained and safe. This is an ongoing process and so the service budget should reflect this expense.

There are processes set down for routine cleaning of toys and equipment. These processes and cleaning charts can be found in the OSHC office and are accessible to educators at the service. The service has a commitment to acting on items that require cleaning. Furniture will be checked to ensure it is safe.

REVIEW AND EVALUATION OF SERVICE

Ongoing review and evaluation will underpin the ongoing development of the service. Such evaluation should involve all stakeholders, especially families, children and educators/staff.

Our OSHC service has developed a Quality Improvement Plan which form part of the review process. The development of a plan will require reflection on what works well and what aspects of the service can be further developed. The Plan will be reviewed annually.

MAINTENANCE OF RECORDS

Our OSHC service has an obligation to keep adequate records about staff, families and children to operate responsibly and legally. The service will protect the interests of the children and their families and the staff, using procedures to ensure appropriate privacy and confidentiality.

Regulation 177 outlines requirements and includes references to records that services must keep. Regulations 183–184 detail storage of records. The school Principal/Nominated Supervisor will assist in determining the process, storage place and timeline for storage of OSHC records.

All documents relating to children and parents will only be made available to the parent/guardian or approved persons enrolling the child, staff and authorised members of the Advisory Committee who require relevant information, or Government officers when requested.

All documents relating to staff will only be made available to the individual staff member, the Director and an authorised member of the sponsoring body or police.

All documents relating to fee payment and CCS will only be available to the parent/guardian or approved persons enrolling the child, staff and authorised members of the sponsoring body or Government officers.

WORKPLACE HEALTH AND SAFETY

The establishment and maintenance of a safe workplace is a joint responsibility of employers and employees. Our OSHC service will have practices and procedures to address the legal requirements relating to safety in the workplace and this information will underpin any service specific requirements, including grievance/complaints procedures.

At Our Lady of Hope Greenwith Campus OSHC site, the Our Lady of Hope School OHS&W Coordinator will include OSHC in their oversight of the site practice. OSHC has a WHS representative who has undertaken the responsible officer training.

ROLE OF ADVISORY COMMITTEE

Role

The Greenwith Campus OSHC Advisory Committee is appointed to:

- Assist the School Board in meeting relevant Commonwealth and State Government legislation and standards;
- Support and assist the School Board, Principal and OSHC Director to ensure that the quality of care being offered is in keeping with the values, principles and policies of the school and CESA;
- Advocate for, represent and ensure that children, families and staff have a voice in advising the School Board on issues relating to the management of the OSHC service;
- Support and assist the OSHC Director and staff on a day-to-day basis, and
- Make recommendations to the School Board on major decisions affecting OSHC for its consideration and final decision.

Composition

Membership of the OSHC Advisory Committee is open to all parents who have enrolled their child(ren) in the service in the current year. The OSHC Advisory Committee will elect a chairperson, secretary and treasurer from its parent user group.

Membership of the OSHC Advisory Committee is to include:

- Board Representative either the Principal or Principal's delegate
- The OSHC Director
- The Assistant Director
- A staff representative
- Parent representatives from OLOH
- Parent representatives from Greenwith Primary School

Process for Appointment to the Committee

- All parent users are actively encouraged to nominate for positions on the Advisory Committee.
- Elections for Advisory Committee representatives are held via a ballot system, with candidates elected on a majority basis, where necessary.
- Where possible, only half of the committee member positions should be up for re-election at one time, to ensure continuity of knowledge.

Management

- Parents and staff are to be kept informed about the committee's membership, meetings, decisions and have opportunities for input.
- Committee members need to be clear about the extent of their responsibilities with the OSHC service, through reference to this policy.
- The OSHC Advisory Committee should report regularly to the School Board. Both a financial report and a general operational report should be presented as required by the board.
- The financial position of the OSHC service should be monitored, budgets developed and financial planning undertaken for future objectives. The financial position of service should be a major consideration in all management decisions.
- The school is responsible for any deficits or losses incurred by OSHC.

- The OSHC budget must cover OSHC staffing costs, consumables, food, drink, craft and play equipment, toys, computer, electronic equipment, office and administration expenses and excursions.
- The school is legally responsible for the management of Commonwealth Government funding as per the funding agreements.
- The school is responsible for organising an annual audit to ensure that ALL OSHC expenditure is accounted for including accruals and staff entitlements.

CONTINUOUS IMPROVEMENT/REFLECTION

Our “Governance and Management Policy will be reviewed every 5 years in consultation with all stakeholders. The policy will be reviewed earlier if required.

RELATED POLICIES

- A-1 Enrolment and Orientation
- A-2 Fees
- A-3 Philosophy Statement
- A-4 Authorisations
- A-5 Governance and Management
- A-6 Complaint Response and Resolution
- A-7 Confidentiality
- A-8 Sustainability
- A-9 Code of Conduct - Families & Visitors
- B-1 Facilities and Equipment
- C-1 Staffing
- C-2 Social Network
- D-1 Interactions with Children
- D-2 Nutrition
- D-3 Child Safe Environment
- D-4 Child Protection
- D-5 Sun Protection
- D-6 First Aid
- D-7 Infectious Diseases and Infestations
- D-8 Incident, Injury, Trauma and Illness
- D-9 Dealing with Medical Conditions in Children
- D-10 Safe Delivery, Arrival and Collection of Children
- D-11 Excursions/Incursions/Safe Transport
- D-12 Water Safety
- D-13 Emergency & Evacuation
- D-14 Risk Assessment
- D-15 Bushfire Action Plan
- D-16 Sleep and Rest Policy
- D-17 Sick Child Policy
- D-18 Coronavirus (COVID-19) Management Policy
- D-19 Safeguarding Children and Young People

LEGISLATIVE REQUIREMENTS

Section 13	Matters to be taken into account in assessing whether fit and proper person
Section 14	Regulatory Authority may seek further information
Section 21	Reassessment of fitness and propriety
Section 51	Conditions on service approval
Section 162	Offence to operate education and care service unless responsible person is present
Section 172	Offence to fail to display prescribed information
Section 173	Offence to fail to notify certain circumstances to Regulatory Authority
Section 174	Offence to fail to notify certain information to Regulatory Authority
Section 175	Offence relating to requirement to keep enrolment and other documents
Section 188	Offence to engage person to whom prohibition notice applies
Regulation 29	Condition on service approval – insurance
Regulation 31	Condition on service approval – quality improvement plan
Regulation 55	Quality improvement plans
Regulation 56	Review and revision of quality improvement plans
Regulation 84	Awareness of child protection law
Regulation 104	Fencing
Regulation 106	Laundry and hygiene facilities
Regulation 107	Space requirements – indoor space
Regulation 108	Space requirements – outdoor space
Regulation 109	Toilet and hygiene facilities
Regulation 110	Ventilation and natural light
Regulation 117	Glass
Regulation 117B	Minimum requirements for a person in day-to-day charge
Regulation 157	Access for parents
Regulation 158	Children’s attendance record to be kept by approved provider
Regulation 161	Authorisations to be kept in enrolment record
Regulation 162	Health information to be kept in enrolment record
Regulation 165	Record of visitors
Regulation 167	Record of service’s compliance
Regulation 168	Education and care services must have policies and procedures
Regulation 170	Policies and procedures to be followed
Regulation 171	Time to notify certain circumstances to Regulatory Authority
Regulation 172	Notification of change to policies or procedures
Regulation 173	Prescribed information to be displayed
Regulation 174	Time to notify certain circumstances to Regulatory Authority
Regulation 174A	Prescribed information to accompany notice
Regulation 175	Prescribed information to be notified to Regulatory Authority
Regulation 176	Time to notify certain information to Regulatory Authority
Regulation 177	Prescribed enrolment and other documents to be kept by approved provider
Regulation 180	Evidence of prescribed insurance
Regulation 181	Confidentiality of records kept by approved provider
Regulation 183	Storage of records and other documents
Regulation 184	Storage of records after service approval transferred
Regulation 185	Law and regulations to be available

KEY TERMS

ACECQA	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources, and services to support the sector to improve outcomes for children.	Aceqa.gov.au
Approved provider	A person who holds a provider approval (National Law). A provider approval authorises a person to apply for one or more service approvals and is valid in all jurisdictions.	Guide to the NQF (Glossary)
Authorised person	Means: (a) a person who holds a current working with children check (WWCC), or equivalent; or (b) a family member of a child who is being educated and cared for by the service or the family day care (FDC) educator; or (c) an authorised nominee of a family member of a child who is being educated and cared for by the service or the FDC educator; or (d) in the case of an emergency, medical personnel or emergency service personnel; or (e) a person who is permitted under the jurisdictional working with children law to remain at the service without holding a working with children check (WWCC), or equivalent.	National Law (Section 170)
Continuous Improvement	Ongoing improvement in the provision of quality education and care services. The National Quality Framework aims to raise quality and drive continuous improvement through the National Quality Standard and quality rating processes. Quality rating encourages continuous improvement and engages the approved provider and their service teams in self-assessment and documenting their performance against the National Quality Standard. Providers of high-quality services regularly monitor and review their performance to guide planning and make improvements.	Guide to the NQF (Glossary)
Development of professionals	A system of regular performance review, individual learning and development plans for educators, staff and co-ordinators. Performance planning and review ensures that the knowledge, skills and practices of educators and other staff members are current, and that areas requiring further development are addressed.	Guide to the NQF (Element 7.2.3 – Development of professionals)

Educational leader	<p>The educational leader is an appropriately qualified and experienced educator, co-ordinator or other individual designated in writing by the approved provider under regulation 118 to lead the development and implementation of educational programs in the service.</p> <p>For more information about the role of the educational leader, see: acecqa.gov.au/media/26531</p>	Guide to the NQF (Glossary)
Educational program	<p>A program that:</p> <ul style="list-style-type: none"> • is based on an approved learning framework • is delivered in a manner that accords with the approved learning framework • is based on the developmental needs, interests and experiences of each child; and • is designed to take into account the individual differences of each child. 	National Law (Section 168)
Fit and proper person (to be an approved provider)	<p>The regulatory authority assesses whether an approved provider or a person with management or control of a service is a fit and proper person to be involved in the provision of an education and care service.</p> <p>In determining whether they are a fit and proper person, the regulatory authority will consider:</p> <ul style="list-style-type: none"> • the person’s history of compliance with any education and care services, children’s services or education law, and any decision under one of those laws to refuse, refuse to renew, suspend or cancel a licence, approval, registration or certification issued to the person under that law • their criminal history, to the extent that it may affect their suitability for the role of provider (including working with children clearance, such as a WWCC, or teacher registration details, jurisdiction dependant) • whether they are bankrupt or insolvent • whether they have the financial circumstances to enable them to sustain ongoing operation of a service • whether they have a medical condition that may cause them to be incapable of being responsible for the service • whether they have the management capability to operate a service • actions taken under Commonwealth Family Assistance Law, including sanctions and suspensions. 	National Law (Section 12) Guide to the NQF (Provider and service approvals – Considering an application for fitness and propriety)
Governance	<p>Refers to the systems in place to support effective management and operation of the service, consistent with the service’s statement of philosophy. Good governance requires effective management systems and clearly delineated roles and responsibilities to support the effective operation of a quality service.</p>	Guide to the NQF (Quality Area 7 – Governance and leadership)

Inappropriate person	<p>Means a person:</p> <p>(a) who may pose a risk to the safety, health or wellbeing of any child or children being educated and cared for by the education and care service; or</p> <p>(b) whose behaviour or state of mind or whose pattern of behaviour or common state of mind is such that it would be inappropriate for him or her to be on the education and care service premises while children are being educated and cared for by the education and care service.</p>	National Law (Section 171)
Management system	A system to manage organisational risks and enable the effective management and operation of a quality service.	Guide to the NQF (Element 7.1.2 – Management systems)
Quality Improvement Plan (QIP)	<p>A document created by an approved provider to help self-assess service performance in delivering quality education and care and to plan future improvements.</p> <p>Regulatory authorities consider the service’s QIP as part of the quality assessment and rating process. The QIP does not have to be provided in any specific format, but must include:</p> <ol style="list-style-type: none"> 1. an assessment of the quality of service practices against the National Quality Standard and the National Regulations 2. identified areas for improvement 3. a statement of the service’s philosophy. 	National Regulations (Regulation 55)
Service philosophy	<p>A statement the approved provider must develop and include in their QIP that outlines the purpose and principles under which the service operates. It:</p> <ul style="list-style-type: none"> • underpins the decisions, policies and daily practices of the service • reflects a shared understanding of the role of the service among staff, children, families and the community • guides educators’ pedagogy, planning and practice when delivering the educational program. 	Guide to the NQF (Element 7.1.1 – Service philosophy and purpose)
Working with children check (WWCC)	<p>A notice, certificate or other document granted to, or with respect to, a person under a working with children law to the effect that:</p> <ul style="list-style-type: none"> • the person has been assessed as suitable to work with children; or • there has been no information that if the person worked with children the person would pose a risk to the children; or 	National Law (Definitions)

	<ul style="list-style-type: none"> the person is not prohibited from attempting to obtain, undertake or remain in child-related employment. 	
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NATIONAL QUALITY STANDARDS

The following quality areas link to Governance and Management

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.2.2	Education Leadership	Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service.
7.2.3	Development of Professionals	Educators, co-ordinations and staff members performance is regularly evaluated, and individual plans are in place to support learning and development

SUPPORTING INFORMATION

- CESA Early Childhood Education and Care Services Protocols
- Australian Government. Department of Education. Child Care Provider Handbook. (2019).
- Early Childhood Australia Code of Ethics. (2016).
- ACECQA Compliance Guide Approved Provider (2017)
- Education and Care Services National Law Act 2010. (Amended 2018).
- Education and Care Services National Regulations. (2011)
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
- Guide to the National Quality Framework. (2018). (Amended 2020).
- Revised National Quality Standards. (2018)
- Work Health and Safety Act 2011 (Cth)

RECORD HISTORY

This policy and procedure are approved and in place until the review date, unless during that time the Principal of Our Lady of Hope instructs a revision.

Approved date: June 2020

Last Review Date: June 2025

Next review date: March 2030

Revision record: 1

(Chairperson)

(Date Reviewed)

(Principal)

(Date Reviewed)