



Date of Decision: 11 September 2015

File number: STR0017

Applicant: 'Approved Provider'

Regulatory Authority: WA Department of Local Government and Communities

Decision

The Ratings Review Panel (the Panel) by consensus decided to amend the rating level for standard 7.1 to 'Exceeding NQS', and to confirm the rating level for standard 7.2 at 'Meeting NQS'.

As a result, the Panel by consensus amended the rating level for Quality Area 7 to 'Exceeding NQS'.

The service's overall rating is amended to 'Exceeding NQS'.

Issues under review

1. The approved provider (the provider) sought a review on the grounds that the regulatory authority in making its determination, failed to take into account or give sufficient weight to facts existing at the time of the rating assessment (section 144(3)(b) *Education and Care Services National Law* (National Law)).
2. The provider sought a review of standards 7.1 and 7.2.
3. After the initial assessment, the service was rated 'Meeting NQS' for Quality Areas 2, 3, 4, 6 and 7, and 'Exceeding NQS' for Quality Areas 1 and 5.
4. The provider applied for first tier review of Quality Areas 3 and 7.

Regulatory authority's view

5. At first tier review, the regulatory authority amended its original rating of standards 3.1, 3.2 and 7.3 to 'Exceeding NQS' (standard 3.3 was originally rated as 'Exceeding NQS'). Therefore, the service's rating for Quality Area 3 was amended to 'Exceeding NQS'. However, the regulatory authority confirmed its original rating of 'Meeting NQS' for standards 7.1 and 7.2. The service's overall rating remained unchanged at 'Meeting NQS'.



6. In making its decision at first tier review, the regulatory authority stated that there was not sufficient evidence to change the rating of Quality Area 7 to 'Exceeding NQS'.

Applicant's view

7. The provider claims in its application for second tier review that the assessing authorised officer (the assessor) did not consider or give sufficient weight to all of the evidence available on the day of the assessment and rating visit. The provider claims that this evidence supports a rating of 'Exceeding NQS' for Quality Area 7.

Evidence before the panel

8. The Panel considered all the evidence submitted by the provider and the regulatory authority. This included:
 - the application for second tier review and its attachments, including the service's feedback on the draft Assessment and Rating Report
 - the Assessment and Rating Instrument and the final Assessment and Rating Report
 - the application for first tier review and its attachments
 - the regulatory authority's findings at first tier review, and
 - the response from the provider to the regulatory authority's submissions for second tier review.
9. The Panel was also provided with advice from ACECQA on the standards under review.

The law

10. Section 151 of the National Law states that following a review, the Ratings Review Panel may:
 - (a) confirm the rating levels determined by the Regulatory Authority; or
 - (b) amend the rating levels.

The facts

11. The service is a centre-based long day care service caring for children from birth to preschool age.



12. The assessment and rating visit took place in March 2015.
13. The regulatory authority sent the assessment and rating decision in May 2015.
14. The provider applied for first tier review in May 2015. The regulatory authority made a decision on the review in June 2015. The provider received the decision in July 2015 and subsequently applied for second tier review.

Review of rating levels

15. The Panel considered each standard under review in turn.

Standard 7.1

16. Standard 7.1 is that:
Effective leadership promotes a positive organisational culture and builds a professional learning community.
17. The Panel noted that to achieve a rating of 'Exceeding NQS' for this standard, it may expect to see evidence of the following:
 - well-established governance arrangements, which are regularly reviewed, contribute to the effective management of the service.
 - the induction of educators, co-ordinators and staff is comprehensive and contributes to sustained quality relationships and environments that facilitate children's learning and development.
 - effective processes are in place to consistently achieve continuity of educators and co-ordinators resulting in the establishment and maintenance of secure relationships with children.
 - a suitably qualified and experienced educator or co-ordinator consistently leads the effective development of the curriculum, and ensures the establishment of clear goals and high expectations for teaching and learning.

Regulatory authority's view

18. The regulatory authority stated in its first tier review findings that the review of all the evidence provided did not support a change to the existing rating of 'Meeting NQS'. The regulatory authority further stated that "it is acknowledged that element 7.1.2 was assessed as exceeding". However, it decided to uphold the rating of 'Meeting NQS' for standard 7.1.



19. Additionally, the regulatory authority stated that after reviewing all the information in relation to standard 7.1, it was identified that the supporting documentation contained information regarding the service governance and an induction program, which were acknowledged in the final Assessment and Rating Report.
20. The regulatory authority referred to the provider's service visit form, which is dated '24 April 2015'. This form identifies the "induction process for agency staff members is not always comprehensive" as an issue, with a proposed outcome that "every casual educator that enters the service will have an extensive induction and orientation". The proposed date for this outcome is 22 May 2014. The regulatory authority concluded that "this identifies that further action is required to support casual educators".

Applicant's view

21. In its application for second tier review, the provider claims that the service has appropriate and comprehensive governance in place.
22. The provider states that there is a well-established and highly experienced early childhood teacher at the service, who is supported by the educational leader and the director, who in turn is supported by the provider.
23. The provider claims that evidence was made available to the assessor that demonstrates that there is a comprehensive induction process for all new educators and casual relief educators at the service. This is a four hour paid induction. The provider states that "the induction covers all subjects that are relevant to the service to ensure quality relationships and environments are sustained to facilitate children's learning and development".
24. The provider states that, in addition to the induction program, the service has created an 'orientation checklist' and guide that is used on the first day of employment for permanent, casual or agency educators. The provider states that this orientation is specific to the service's operations and enables it to embed the practices, procedures and expectations distinct to the service's families and children's needs. Additionally, "each room also has room expectations that are relevant to the age, environment and individuality of all children".



25. The provider states that there is high retention of educators at the service, and over 75% of its educators have been at the service for over three years. The provider states that “this demonstrates that educator continuity builds and maintains secure relationships giving the children and families a sense of belonging, security and trust”. Additionally, the provider states that there are subsidised health funds and activity memberships as part of the employment packages that are relevant to maintaining continuity of educators and staff at the service.
26. The service also maintains a pool of relief educators who are called upon to cover staff absences. The service states that these educators are familiar to the service and have knowledge of the service’s philosophy and vision.
27. The provider states that educator continuity is also evident at the beginning of each school year when children transition into new rooms with a familiar educator, to ensure children and families have continuity, familiarisation and a sense of belonging. The service states that children's needs and cultural heritage are considered, ensuring that a familiar educator is onsite during the child's hours of attendance. For example, when a Brazilian family joined the service, the child and family were supported by a Portuguese speaking educator.
28. The provider states that staff cohesion is evident as, during team meetings, room meetings and professional development times, educators engage in constructive conversations on topics of interest and importance.
29. The service’s educational leader has developed a number of tools, such as a ‘tracking tool’ and ‘focus group tools’, to inform educators’ programming. The provider states that the educational leader “sets individual action plans with goals that reflect on professional conversations and continually improve program and practices”.
30. The service’s educational leader reviews each room's documentation files at the end of every week. In addition to identifying children’s needs, the provider states that the curriculum plans also give a clear picture of each educator's understanding of the principles, practices and outcomes of the Early Years Learning Framework. This process is then used to identify any required areas of support or teachings that an educator will benefit from and leads to individual plans being completed with the educational leader.



31. The educational leader is rostered in different rooms to further support opportunities for discussion and mentoring, and to identify and set goals for educators to support their professional growth. For example, the educational leader set a goal for the early childhood teacher to create a display format of her curriculum for the preschool room, so that families could view the display and approach the early childhood teacher if they wished to discuss the program in detail.
32. The provider states that, after attending a professional development course, the educational leader implemented an outdoor curriculum at the service, which “follows the same high and Exceeding expectations as the indoor curriculum”.
33. The educational leader facilitates professional development workshops at monthly staff meetings, which includes setting goal plans for all educators. Additionally, memos are sent to individual or groups of educators and training programs are designed to share research and relevant information.

Panel's considerations

34. The Panel discussed the meaning of 'suitably qualified and experienced educator' and noted that this term was not defined by the National Law or Regulations. The Panel agreed that there was no requirement for the educator to hold a Bachelor's degree in order to be 'suitably qualified'. The Panel noted that the information submitted by the provider demonstrated the strong leadership qualities of the service's educational leader, and agreed that she was a suitably qualified and experienced educator.
35. The Panel also noted that the service's final Assessment and Rating Report acknowledged that “the educational leader has established a clear role to support, mentor and guide all educators” and that she has “developed many tools to support and assist educators with curriculum planning”. The Panel agreed that this demonstrated that the educational leader has an ongoing relationship with staff and that she consistently leads the effective development of the curriculum, and ensures the establishment of clear goals and high expectations for teaching and learning.
36. The Panel noted that the service received a rating of 'Exceeding NQS' for Quality Area 1, which demonstrated the high standard of the service's educational program and practice and that an effective curriculum had been developed.



37. The Panel noted that the service advised ACECQA that the date recorded on the provider's service visit form referred to by the regulatory authority at first tier review is incorrect, and should read '24 April 2014' (not '24 April 2015'). Additionally, the provider advised that 'the follow up and progress to the action form were completed on the outcome due date or just before'.
38. The Panel agreed that the service has provided evidence of well-established governance arrangements, and evidence of these arrangements being reviewed. The Panel agreed that this demonstrated that the governance arrangements contributed to the effective management of the service.
39. The Panel agreed with the regulatory authority's assessment that there was evidence that the induction of educators, coordinators and staff is comprehensive and contributes to sustained quality relationships and environments that facilitate children's learning and development.
40. The Panel noted that the rosters and information provided by the service demonstrated that the service has effective processes in place to consistently achieve continuity of educators and co-ordinators.
41. The Panel unanimously agreed that, on balance, the evidence provided sufficiently demonstrated that the service was 'Exceeding NQS' for standard 7.1.

Standard 7.2

42. Standard 7.2 is that:
There is a commitment to continuous improvement.
43. The Panel noted that to achieve a rating of 'Exceeding NQS' for this standard, it may expect to see evidence of the following:
 - a statement of philosophy is regularly reviewed by educators and staff and is consistently evident in all aspects of the service's operations.
 - regular evaluation of the performance of educators, co-ordinators and staff members leads to individual development plans that provide a focus for continuous performance improvement.
 - all educators, co-ordinators, staff members, and where possible, families and children contribute to an effective self-assessment and quality improvement process that promotes ongoing service improvement.



Regulatory authority's view

44. The regulatory authority stated in its first tier review findings that the review of all the evidence provided did not support a change to the existing rating of 'Meeting NQS'. The regulatory authority further states that "it is acknowledged that the additional evidence provided supports an assessment of exceeding for element 7.2.3". However, it decided to uphold the rating of 'Meeting NQS' for standard 7.2.
45. Additionally, the regulatory authority stated that after reviewing all the information in relation to standard 7.2, in both the draft report and the response to additional evidence, it was noted that the service statement of philosophy is reviewed annually.
46. The regulatory authority noted that evidence of a "follow up meeting" was held, however as this occurred after the Assessment and Rating visit it could not be considered. The regulatory authority further noted that this documentation states that "the service plans to create a centre philosophy that guides all aspects of the service operations".
47. The regulatory authority stated that the evidence provided, "dated from February 2014", was considered as part of the service's continuous improvement efforts. The regulatory authority notes that there was only evidence of one meeting to set individual goals that occurred on 19 March 2015 (four days before the Assessment and Rating visit). The regulatory authority concluded that this does not demonstrate that individual development plans provide a focus on continuous performance improvement.
48. The regulatory authority notes that the service's director reviews the qualifications, skills and aspirations of staff.
49. The regulatory authority stated that, as only one agenda from a professional development program was provided, this did not demonstrate the regularity of the conference and development opportunities.
50. The regulatory authority notes that information from families is collected and used to modify practice.

Applicant's view



51. In its application for second tier review, the provider states that the service's philosophy is regularly reviewed by educators, children, families and the community, and "where possible after this it is rewritten on an annual basis". The provider further states that families have access to the philosophy as part of the enrolment pack, and it is visible in all rooms. Families are regularly asked for their input verbally, through emails and newsletters. Educators have input at educator meetings, mentoring times and during performance reviews.
52. The service states that any new employee, whether permanent or casual, has a copy of the service's philosophy statement to read and keep when they are recruited to ensure they know what the service's beliefs and operational qualities and expectations are.
53. The provider states that the performance of educators is part of a regular cycle of review, and that there are many ways that educators' performance is reviewed during the year at the service. The service has developed a performance reflection tool. The provider claims that on the day of the Assessment and Rating visit the assessor was offered the performance reflection reviews, and additional evidence was submitted to the regulatory authority at first tier review.
54. The provider notes that any performance issues that occur outside of the performance reflection reviews are managed immediately to prevent the event escalating and for educators to learn from and change their practice where appropriate. Discussions are documented and a development action plan is written and agreed upon. Action plans can be for an individual or a room and are included in the QIP where appropriate.
55. All educators are able to access training, with some training content being mandatory and others optional. All educators are required to review the mandatory training annually. The service states that the centre director monitors how this training is accessed, which informs updates to professional development.
56. The provider states that the service's QIP is reflected upon every month to ensure there is consistent and continuous improvement. Additionally, the provider schedules monthly visits with the service, and reflects on the service's QIP every three months. The QIP is also displayed for families to read, and is set up to provide suggestions or any additional comments.



57. The service receives family feedback and the provider states that “children's voices are also evident within the QIP. Their voices are captured during classroom discussions, mat sessions and through observation”.
58. The service's self-assessment is reviewed by the provider, and once finalised the results are discussed as a group. The provider states that this is a baseline for quality improvement actions that the service will focus on for the next twelve months.
59. The provider states that “during assessment and rating” the service commenced “a four-month professional development program”, which focuses on critical reflection that is a part of continuous improvement at the service. This involves each educator watching a video taken of themselves during an activity with the children. The provider states that this “has proved to be an invaluable opportunity for educators to professionally self-reflect on their practices and interactions with the children” and that the “information gathered was then used to inform the service's QIP”.

Panel's considerations

60. The Panel again noted that the provider recorded the incorrect date on the provider's service visit form, and it should have read '24 April 2014' (not '24 April 2015'). The Panel noted that this documentation supported the service's statement that its philosophy had been reviewed, however it was unclear how regularly this occurred.
61. The Panel agreed that the provider's visits and follow ups, along with the minutes from staff meetings, contribute to an effective self-assessment and quality improvement process that promotes ongoing service improvement.
62. The Panel noted that the regulatory authority acknowledged that there is evidence that all educators, co-ordinators, staff members, and where possible, families and children contribute to an effective self-assessment and quality improvement process that promotes ongoing service improvement.
63. The Panel agreed that, while two individual development plans had been submitted by the service, there was not sufficient evidence to demonstrate that the regular evaluation of the performance of educators, co-ordinators and staff members leads to individual development plans that provide a focus for continuous performance improvement.



64. The Panel concluded that while it is clear that the service is meeting standard 7.2, there is insufficient evidence to find that the service is exceeding the standard.

Decision

The Panel by consensus decided to amend the rating level for standard 7.1 to 'Exceeding NQS', and to confirm the rating level for standard 7.2 at 'Meeting NQS'. As a result, the Panel by consensus amended the rating level for Quality Area 7 to 'Exceeding NQS', and the service's overall rating is amended to 'Exceeding NQS'.