**‘Approved provider’ and NSW Department of Education [2016] ACECQARRPstr0022 (15 August 2016)**

**Ratings Review Panel**

***Decision Notice***

APPLICANT: ‘Approved provider’

**REGULATORY AUTHORITY:** NSW Department of Education

**Date of Decision:**  15 August 2016

**Application reference:**  STR0022

**Decision:**

The Ratings Review Panel (the Panel) by consensus decided to;

* confirm the rating level for Standards 2.1, 2.2, 2.3, 3.1, 3.2, 3.3, 4.1, 5.2, 6.1, 7.1, 7.2 and 7.3 as Meeting NQS
* amend the rating level for Standards 4.2, 5.1, 6.2 and 6.3 to Exceeding NQS.

**As a result, the Panel has also amended the rating for Quality Area 6 to Exceeding NQS however the overall rating for the service remains Meeting NQS**.

**Issues under review:**

1. The approved provider seeks a review of
   * Quality Area 2, all Standards
   * Quality Area 3, all Standards
   * Quality Area 4, all Standards
   * Quality Area 5, all Standards
   * Quality Area 6, all Standards
   * Quality Area 7, all Standards

on the grounds that the regulatory authority failed to take into account or give sufficient weight to facts existing at the time of the rating assessment.

1. After the draft assessment, the service was rated as Working Towards NQS for Quality Areas 1, 2, 6 and 7 and Meeting NQS for Quality Areas 3, 4 and 5. Following Provider feedback the first assessment rating was given as Working Towards NQS for Quality Areas 2, 6 and 7 and Meeting NQS for Quality Areas 1, 3, 4 and 5.
2. The approved provider applied for first tier review because they considered the authorised officer had failed to obtain sufficient evidence to enable an accurate rating of the service to be made.
3. At first tier review, the regulatory authority determined that Quality Areas 2, 6 and 7 be changed from Working Towards NQS to Meeting NQS and that Quality areas 1, 3, 4 and 5 remained at Meeting NQS. The overall rating was changed to Meeting NQS.
4. At second tier review, the approved provider states that the authorised officer failed to take into account or give sufficient weight to existing facts/evidence at the time of the assessment and rating visit. Also that the authorised officer’s failure to adequately document and collect evidence has disadvantaged the service and adversely affected its reputation. The approved provider submits that the service should be rated Exceeding NQS for Quality Areas 2, 3, 4, 5, 6, and 7.

**Evidence before the panel**

1. The Panel considered all the evidence submitted by the provider and the regulatory authority. This included:

* Assessment Evidence Summary (the regulatory authority’s assessment and rating instrument)
* Rating Outcome Summary (final assessment and rating report from the regulatory authority)
* Supporting evidence supplied at draft assessment and first tier review by the approved provider
* Assessment and Rating Feedback form (feedback from the approved provider on the draft report)
* First Tier Review application
* Review of Rating by the Regulatory Authority (First Tier Review findings)
* Second Tier Review application
* Second Tier Review evidence (from the approved provider)
* Regulatory authority submission to second tier review
* Regional information (provided by the regulatory authority).

1. The Panel was also provided with advice from ACECQA on the standards under review.

**The Law**

1. Section 151 states ‘Following a review, the Ratings Review Panel may:

(a) confirm the rating levels determined by the Regulatory Authority; or

(b) amend the rating levels.

**Review of rating levels**

1. The Panel considered each standard under review.

**Standard 2.1**

1. Standard 2.1 is that:

Each child’s health is promoted.

1. To achieve a rating of Exceeding NQS for this standard, the Panel may expect to see evidence of the following:

* Each child’s health needs are consistently supported, monitored and promoted.
* Each child’s comfort is provided for and there is a range of opportunities for both individuals and groups that effectively meet each child’s need for sleep, rest and relaxation.
* Effective hygiene practices are actively and consistently promoted and embedded in the everyday program.
* Preventative steps are evident in controlling the incidence and spread of infectious diseases. In addition, the management of injuries and illness accords with recognised guidelines, and best practice regarding these issues is embedded in the everyday program.

**Regulatory authority’s view**

1. The regulatory authority considered claims by the approved provider that element 2.1.2 should be Met*,* noting that that the suitability of sleep/rest practices offered to children during this period is in dispute, but that the length of the sleep/rest period is not contested by the approved provider or the officer. The question is whether the routine of having non-sleepers rest for a period of time meets element 2.1.2.
2. The claims made by the approved provider, which are supported by statements from educators, describe rest time practices that are consistent with contemporary views about sleep and rest for young children in education and care services. Though the officer recorded that a child approached an educator during rest time and asked if he could get up and the educator told him he could not, the officer has failed to clearly describe the details of the interaction and specify what was inappropriate about the rest time practice. When considered with evidence supplied by the approved provider, it is conceivable that this child was being encouraged to rest and had opportunities to choose how to do this through a range of appropriate rest time experiences.
3. Some of the practices described by the approved provider, such as basic hygiene practices and managing outbreaks of illness in line with recognised guidelines are minimum requirements consistent with practice that is Meeting the Standard. Evidence offered by the approved provider is limited and generally supports their claims about practices occurring at the service.
4. The regulatory authority concluded that there was sufficient evidence to determine that element 2.1.2 should be amended to Met. While the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 2.1.

**Applicant’s view**

*Draft report and first tier*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* Educators consistently support and monitor children’s health needs.
* Recently a child with a broken leg was supported by implementing changes to the physical environment to allow him easy access for the wheelchair.
* Speech therapists have been invited to assist children who have a language delay.
* All staff members attended a three-evening workshop on sensory perception after a child attending the service was diagnosed with this disorder.
* Each child’s comfort is provided for and there are opportunities that effectively meet each child’s need for sleep, rest and relaxation.
* The service pays for all educators to be fully trained in first aid and management of asthma and anaphylaxis, evidence of the high level of knowledge and training that educators undertake to support each child’s differing health needs.
* As noted by the authorised officer’s observations effective hygiene practices are consistently promoted and embedded in the everyday program.
* All steps have always been taken to prevent and control incidents that may spread infectious diseases.
* There are a number of risk management plans in place to assist staff in meeting specific health needs of children with diagnosed medical conditions.
* The service continually seeks to minimise the spread of infectious disease by adhering to best practice guidelines of NSW Health and Edition 5 *Staying Healthy in Childcare*.
* The service notifies families of current illnesses via notices, whiteboard and letters in their communication pockets. The service has also embedded and consistent cleaning procedures to reduce the risk of cross contamination eg colour cleaning cloths, clearing schedules, use of gloves, all observed on the day.
* The service does not require children to participate in a 45 minute rest/sleep time as stated in the regulatory authority’s evidence summary. The answers provided by educators on the service’s sleep routine were misunderstood.

1. The approved provider also submitted the following as supporting evidence:

* sensory perception course outline and invoice
* posters of handwashing: instructions and modelling
* educators’ accounts of what occurred on the day during sleep/rest time.

*Second tier review evidence*

1. At second tier review and in response to the first tier review panel’s findings, the provider submitted:

* All educators are inducted to identify medical conditions of children and this is overseen by an experienced educator (Master of Education – Special Education, early childhood). Her expertise is used to oversee and meet the health and needs of each and every child. Her role was explained to the assessment officer on the day. This included overseeing all enrolments with medical conditions and ensuring that action and communication plans are updated and fully complete. This role is instrumental in ensuring the required detail is successfully communicated to staff.
* Additionally, all staff are inducted to be aware of health needs through the service’s communication plan. First aid and medication is stored for speedy access in case of emergency with all information relating to medical plans, emergency medication, correct dosage and administration. Example of this practice observed and referred to on the day was a child with cystic fibrosis who is monitored and attended to continually by educators as per the advice provided and adhered by doctor and family. Additionally, a specialised nurse came to the centre to induct and train staff for this child’s care. This allows staff to have the expertise to monitor and respond to her needs.
* The approved provider gave a detailed list of procedures that educators follow for children with medical conditions, including for collecting, collating and communicating sickness/allergy awareness to all stakeholders.
* Educators consistently encourage children to drink water on a regular basis throughout the day, dress appropriately for the season, administer sunscreen and ensure all children are sun safe – this again is consistently embedded practice and observed on the day.
* Furthermore, the service monitors and promotes children’s health needs consistently by signage, induction of parents, staff and volunteers. The service closely monitors food and allergens, provides information in newsletters and continually in conversations with all families.
* Emergency bags are fully stocked with emergency provisions in an accessible area with first aid and emergency contacts for emergencies. Furthermore, the service has three medical officers who oversee any emergency planning and evacuation.
* The service diligently follows best practice recommended guidelines and advice from local and state health authorities.
* Each child’s comfort is provided for and there is a range of opportunities for both individuals and groups that effectively meet each child’s need for sleep rest and relaxation. Educators work with families and children to ensure consistency between the home and centre environments always considering the developmental needs of the child and their right to rest, sleep or make choices.
* The service demonstrates effective hygiene practices that are actively and consistently promoted and embedded in the everyday program.
* As noted in the reports and in draft and tier one documentation, the service’s practices include daily planned and spontaneous sustained sharing learning experiences with educators engaging in conversations and intentional teaching to promote learning regarding hygiene such as bathroom practice, washing hands, discussion on clean and dirty utensils, eating and so on. This consistent and embedded practice was evident throughout the assessment officer’s visit and is validated by the draft report and first tier review documentation.
* The service is committed to embedding preventative steps in controlling the incidence and spread of infectious diseases though:
* Email alerts highlighting cases of infectious diseases and immunisation information
* Displays of local community health services
* Close alliances with local doctors who are referred to for information
* Experienced long servicing educators who are consistently monitoring health needs and onset of illness
* Recommended exclusion periods are consistently adhered to and are referred to in the centre’s policies.

**Panel’s considerations**

1. The panel found there was evidence of quality practice that is consistent with meeting this standard and at times, evidence of practice that exceeds the standard. The panel noted how the service had made changes to accommodate wheelchair access, employed a specialist educator to induct staff on individual children’s health needs and arranged a visit by a specialist nurse to instruct educators on caring for a child with a serious health condition.
2. However, the requirement that each child’s health is promoted sets a high bar and overall the panel found the evidence did not show that Exceeding practice is maintained at all times or embedded across all areas of this standard.
3. The panel agreed that it did not have evidence that demonstrated how the service evaluates the effectiveness of its approaches to meet each child’s need for sleep, rest and relaxation.
4. The panel concluded that the rating for standard 2.1 remains at Meeting NQS.

**Standard 2.2**

1. Standard 2.2 is that:

Healthy eating and physical activity are embedded in the program for children.

1. To achieve a rating of Exceeding NQS for this standard, the Panel may expect to see evidence of the following:

* Food and drinks provided by the service are nutritious and appropriate for each child. Healthy eating is consistently and actively promoted and embedded in the everyday program.
* Physical activity that builds on children’s interests and development is embedded in all aspects of the program.

**Regulatory Authority’s view**

At first tier review, the regulatory authority noted:

1. Evidence supplied by the approved provider shows that physical activity is promoted through planned experiences, but fails to demonstrate how physical activity that builds on children's interests and development is embedded in all aspects of the program.
2. Similarly, evidence shows that food and drink provided by the service is nutritious and healthy eating is promoted, but does not show how it is embedded in the everyday program. Practices described by the approved provider are consistent with those that are required to meet the Standard.
3. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 2.2.

**Applicant’s view**

*Draft report and first tier*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* Healthy eating is consistently and actively promoted and embedded in the everyday program and has been since the service started.
* The ‘Munch and Move’ program is consistently promoted, as are healthy lunch ideas.
* The service doesn’t supply food, and only milk and water is given.
* Physical activity built on children’s interest and development has always been embedded in all aspects of the service’s program, as seen within the children’s indoor and outdoor programs.

1. The approved provider submitted the following supporting evidence:

* newsletter
* example of outdoor program, educator notes on activities and children’s interests; indoor/outdoor safety checklists; weekly/daily cleaning checklists

*Second tier review*

1. Evidence provided at draft report and first tier review stage considered by the panel.

**Panel’s considerations**

1. The panel agreed there was evidence of quality practice that is consistent with meeting this standard, such as the comprehensive information available to parents around healthy eating and the suitability of the physical environment and resources, but did not see evidence that these practices are embedded in all aspects of the program.
2. The panel noted that they would expect to see more active promotion of healthy eating among the service’s families, such as a parent education program around healthy eating and examples of how the service uses the physical environment to build on children’s interests, moving further towards child-led programming.
3. The panel concluded that the rating for standard 2.2 remains at Meeting NQS.

**Standard 2.3**

1. Standard 2.3 is that:

Each child is protected.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:

* Children are effectively supervised at all times and educators are attuned to the needs of all children to ensure each child’s safety and wellbeing.
* Effective steps are taken to identify and manage risks and the precautions taken to protect children from hazards and harm reflect best practice.
* Plans to effectively manage incidents and emergencies are developed and reviewed in consultation with relevant authorities. Strategies are regularly practised and implemented effectively.
* Educators, co-ordinators and staff members understand their roles and responsibilities in accordance with relevant child protection legislation and they actively raise family and community awareness of child protection issues.

**Regulatory Authority’s view**

At first tier review, the regulatory authority noted:

1. Practices described by the approved provider are consistent with those that are required to meet the standard and are generally supported by some of the evidence supplied, such as daily safety checklists and workplace inspection checklists. The provider has not demonstrated how effective steps are taken to identify and manage risks and how the precautions taken to protect children from hazards and harm reflect best practice or how plans to effectively manage incidents and emergencies are reviewed in consultation with relevant authorities. In relation to child protection, evidence supplied by the provider shows that educators have completed an approved course in child protection, but no evidence was provided to support the claim that family and community awareness of child protection issues is actively raised.
2. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 2.3.

**Applicant’s view**

*Draft report and First Tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* All educators are attuned to the needs of the children to ensure each child’s safety and wellbeing are met. Evidence of this is in the authorised officer’s observations, as noted in the Assessment Evidence Summary:
  + ‘An Educator supports the child, balancing a climbing frame offering help and assistance when needed, but encouraging the child to climb and balance independently.’
  + ‘An educator informs colleagues she is moving inside so they effectively supervise the water trough area.’
* The availability of the following risk management plans:
  + Bathroom cleaning
  + Maintenance book continually updated
  + Professional cleaning of carpets and floors each term
  + Professional window cleanings required
  + Family working bees
  + Weekly risk assessment checklist for indoor and outdoor premises.
  + Regular pest control
  + Annual Fire Safety Statement
  + Regular septic check
* All staff continually upgrade child protection and first aid qualifications.
* All staff have current Working with Children checks.
* The centre raises awareness of child protection by providing various media articles and magazines such as *Family – Private Parts*.
* All staff members know they are mandatory reporters.
* A staff member has also participated in various workshops run by the Office of the Children’s Guardian, promoting and regulating quality, child-safe organisations and services.

1. The approved provider also submitted the following as supporting evidence:

* Assessment Evidence Summary
* Safety, cleaning checklists, medication checklist, workplace inspection checklist
* Educator qualifications, ETARC statement of attainment, first aid certificates

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* All educators have many years of experience working in ECEC and have formed relationships with families and children which allows the service to be consistently in tune with the children’s health, needs and wellbeing.
* In relation to how the service protects children from harm and hazards the service has daily, weekly and monthly risk assessments. No comment in the report alludes to any risk taking in protecting children, nor any procedure not in line with current recommended guidelines. The service has also assessed its risk and implemented protective measures such as a snake warning system that prevents snakes entering the boundary. Furthermore, the service’s supervision has kept children safe from harm and hazard which is reflected in no serious incidents, no complaints lodged at the regulatory authority and minimal incident, accident and illness documentation at the centre level. The absence of evidence to indicate harm or not protecting children is evidence of how the service protects children at an Exceeding level.
* In relation to the suggestion that the approved provider had not demonstrated how plans to effectively manage incidents and emergencies are reviewed in consultation with relevant authorities, rehearsal information and review processes with the fire brigade were provided, as was a list of children with allergies, relevant procedures, photographs of children with allergies on display for staff recognition and epipen storage.

**Panel’s considerations**

1. In its discussion, the panel found there was considerable evidence to demonstrate that the service is meeting this standard, including that the supervision of children’s health and safety is well managed and that appropriate steps are taken to minimise risk, as demonstrated by the service’s comprehensive risk assessments.
2. The panel also noted positively the training of educators in child protection awareness but saw little evidence that this issue is actively raised with families, citing accreditation from respected child protection organisations or the conducting of community training as examples of the types of practice that might typically be provided as evidence of Exceeding this standard.
3. The panel also did not concur with the service’s claim that ‘an absence of evidence to indicate harm or not protecting children is evidence of how the service protects children at an Exceeding level’, observing that good supervision is indicative of meeting the standard.
4. The panel concluded that the rating for standard 2.3 remains at Meeting NQS.

**Standard 3.1**

1. Standard 3.1 is that:

The design and location of the premises is appropriate for the operation of a service.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:

* All outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources provide a stimulating learning and care environment for children.
* All premises, furniture and equipment are safe, clean and well maintained and enhance the learning environment for children.
* Facilities are designed or adapted to ensure active participation by every child in the service and promote flexible use and interaction between indoor and outdoor space at all times.

**Regulatory Authority’s view**

At first tier review the regulatory authority noted:

1. Practices referred to by the approved provider are those recorded by the officer in the Assessment Evidence Summary and are consistent with practices that Meet the Standard. The evidence supplied by the approved provider does not demonstrate how all outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources provide a stimulating learning and care environment for children or how the learning environment is enhanced by safe, clean and well maintained premises and furniture. Similarly, evidence was not provided to show how the flexible use and interaction between indoor and outdoor space is promoted at all times.
2. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 3.1.

**Applicant’s view**

*Draft Report and First Tier Review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* All outdoor and indoor spaces, buildings and resources were built to stimulate learning and a caring environment for the children.
* The Regulatory Authority’s Assessment Evidence Summary states:
  + ‘enhance the learning environment for the children’.
  + ‘Activities and experiences are placed thoughtfully in both the indoor and outdoor environments with consideration given to space and resources needed’
  + ‘Lots of resources are available to children with open shelving and bathroom facilities easily accessed by children in both the indoor and outdoor environments.’
  + ‘During morning block of free play children can access both the indoor and outdoor environments.’

1. The approved provider submitted the following as supporting evidence:

* Assessment Evidence Summary
* Photographs of the environment.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* The service has a large indoor and outdoor area with small rooms for group learning experiences. These areas can be used flexibly as was demonstrated on the day.
* There are many stimulating and interesting areas for children to explore both in natural and man-made environments.
* Environments are designed to reflect the interests, abilities and strengths of the children to extend learning and development. They are changed regularly as learning evolves over time into projects the children have initiated.
* Observations by visitors have been how involved the children are in play experiences. All children have the opportunity to choose their area of play and are free to move around that area as their interests change.
* Flexibility for children to choose from both indoor and outdoor experiences, with the support of educators who involve themselves in the experiences with the children, observing and noting children’s skills, level of involvement and interests.
* Children are involved in decision making in regard to the curriculum.
* Indoor and outdoor programs are developed weekly and are also flexible to the spontaneous learning and development opportunities that emerge. The team reflects on the program and based on those evaluations and interests, future planning evolves.
* Children confidently use all equipment which is age and skill level appropriate.
* Educators ensure that the interests and safety of all children is of significant importance, however children are encouraged to engage in risk taking and extending their learning and development in both natural and constructed environments
* The service is a well-resourced preschool and the learning environment is continually enhanced by new equipment and arranged in a variety of ways to ensure all areas of learning and exploring are stimulating for all children. Photos of areas that were on display in the environment on the day of the assessment were also provided.
* The learning environment is enhanced by a safe, clean and well maintained environment. There is a comprehensive cleaning schedule which is embedded into the daily routine. This was devised and available for the assessor on the day.
* There is also a maintenance recording system for any breakages or improvements to be made to resources, furniture and equipment both indoors and outdoors.
* The service’s programs show the flexibility of the outdoor and indoor spaces.
* Educators respond positively to children’s ideas and interests, evidence of positive interactions and relationships between children and educators.
* There are quiet spaces with books, puzzle and small-piece construction learning spaces, areas for role-play and dramatisation. There are creative spaces for children to explore resources. These are presented in a variety of ways for children, to ensure they have choice and flexibility in their play.
* Children assist with the setup of the many areas throughout the preschool, both indoors and outdoors. They often make suggestions about resources and equipment that they are interested in using in the centre.

**Panel’s considerations**

1. The Panel noted the suitability and flexibility of the environment, that it makes good use of both natural and built environments, is well maintained, and that a large range of stimulating resources are available for children’s use. However the Panel agreed the evidence did not demonstrate that flexible use and interaction between indoor and outdoor spaces was promoted at all times, such as children having access to all spaces as part of, and outside of, the structured program.
2. The panel concluded that the rating for standard 3.1 remains at Meeting NQS.

**Standard 3.2**

1. Standard 3.2 is that:

The environment is inclusive, promotes competence, independent exploration and learning through play.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:

* Outdoor and indoor spaces are designed and effectively organised to engage every child in quality experiences involving the built and natural environments. The spaces provide the flexibility to respond to children’s individual needs, development, self-initiated play and exploration.
* Resources, materials and equipment are sufficient in number, organised in ways that extend every child’s participation in the program and are consistently used in numerous ways.

**Regulatory authority’s view**

At first tier review the regulatory authority noted:

1. While the approved provider mentioned some positive aspects of the physical environment, the evidence provided does not sufficiently show how spaces provide the flexibility to respond to children's individual needs, development, self-initiated play and exploration, or how resources, materials and equipment are organised in ways that extend every child's participation in the program and are consistently used in numerous ways.
2. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 3.2.

**Applicant’s view**

*Draft report and first tier*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and submitted evidence:

* There are lots of open spaces that allow flexibility to respond to the children’s needs for play and exploration:
  + a sensory garden with a bridge and water
  + a water fountain
  + two cubby houses
  + sandpit
  + bicycle track
  + chicken pen
  + various climbing equipment that is changed daily
  + a vegetable and herb garden and a fairy garden that was built by the children
  + a very large undercover veranda also allows for various play activities if raining.
* Resources, equipment and materials are also organised in ways that extend every child’s participation in the program and are consistently used in numerous ways. The playground has five different types of ground cover – bark, grass, soft fall sand, rocks and pebbles.
* The sensory garden is built with all natural materials. Equipment is changed daily and can be used in many ways, eg cubby as a hospital.
* The preschool is well-resourced with a variety of materials and resources and two outdoor sheds and two resource rooms indoors.

1. The approved provider submitted the following as supporting evidence:

* Assessment Evidence Summary
* Photographs of resources and equipment.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* There are many open spaces that allow flexibility to respond to the children’s needs for play and exploration. The outdoor area is built on several levels to encourage the children to explore the spaces and the contours, which, aided by their imagination helps them initiate spontaneous play scenarios in small or large groups.
* The service provides an environment that allows individual children to respond to his or her own play needs as they interact with their peers and change the environment. Educators are as involved as the children in these play scenarios. The ‘rainbow shop’ (photographs provided) is an example of this.
* The vegetable and herb garden was established by the children and over time has grown with the help of the children watering and weeding. The children often pick and smell the herbs which are used in cooking, taken home or set up as a sensory corner indoors, for the children to explore. Appreciation of the environment is continually embedded in everyday learning experiences and the staff respond appropriately at all times.
* A very large undercover veranda allows for another space of learning and exploring. This is used in a variety of ways with a wide range of resources. This area is also used for meal times where children spend time together with their educators. It is also invaluable in rainy days as the children are able to play ‘outdoors’.
* Resources, equipment and materials are also organised in a way that extends every child’s participation in the program. The outdoor and indoor programs highlight the use of resources and how they are used in numerous ways.

**Panel’s considerations**

1. The panel noted examples of quality practice that demonstrate the service is meeting this standard. The assessment evidence shows children have access to effectively organised spaces and a variety of resources, which can be used flexibly. The panel also noted the efforts to encourage children’s participation in experiences in built and natural environments but found the service did not demonstrate Exceeding practice in relation to opportunities for self-initiated play and exploration.
2. To achieve Exceeding in this standard the panel agreed the service needed to demonstrate how the environment extended children’s participation in the program and also provided the flexibility to respond to children’s self-initiated play and exploration outside of the structured program.
3. The panel concluded that the rating for Standard 3.2 remains at Meeting NQS.

**Standard 3.3**

1. Standard 3.3 is that:

The service takes an active role in caring for its environment and contributes to a sustainable future.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:

* Sustainable practices are embedded in service operations and consistently promoted in the everyday program.
* Children are actively involved in being environmentally responsible and supported to continue this involvement within the program and in the broader community.

**Regulatory authority’s view**

At the first tier review the regulatory authority noted:

1. Some of the evidence supplied by the approved provider shows that sustainable practices are promoted in the everyday program but fails to demonstrate how children are supported to continue their involvement with environmental responsibility in the broader community.
2. The regulatory authority noted the Assessment Evidence Summary contains no mention of the service's QIP plans recorded against this standard, so there is no evidence to confirm if these practices were occurring at the time of the Assessment and Rating visit or are yet to be implemented.
3. The regulatory authority concluded that while the service demonstrated some practice that goes beyond Meeting the National Quality standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 3.3.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and submitted evidence:

* Sustainable practices are consistently promoted in the everyday program
* As per QIP the service has recycle bins with logos indoors
* Recycle bins on tables at lunch and morning tea
* Food scraps are fed to the chickens by the children and children are encouraged to bring scraps from home to feed the chickens
* Water wise – water trough tipped onto the grass at end of play
* Children use watering cans to water the garden
* Children are taught to turn off the taps in bathroom
* Water tank installed for watering garden
* Solar panels installed
* Air conditioners are individual in each room which also have fans. Professional decisions made daily as to whether to use fans or air conditioners or open windows, depending on the weather per child health and safety.
* The Bin Wise program, an initiative of the local council, was undertaken last year and is booked again for this year.
* Children plant vegetable seeds and then transplant into the garden or take home to plant
* Eggs from chickens are given to the children to take home and often are brought back as muffins, cakes or slices to share with others. Similarly with the passionfruits and strawberries.

1. The approved provider submitted the following as supporting evidence:

* Assessment Evidence Summary
* Sustainability statement and photographs.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Children are encouraged with their families to bring clean recyclable materials to preschool from home. These are used in a variety of ways. The small containers are used for paint and paste. These are washed and reused as many times as possible. Some of the materials are enjoyed as open-ended resources and made into other items, then taken home to be enjoyed in another form. There have been numerous group projects where children and educators work together to make an interesting, exciting object from recyclable materials and which along the way, has extended children’s thinking and continual discussions about the importance of reusing materials.
* The children interact easily with the resident hens. Hens have been part of the program for many years and food scraps are used to supplement the hen’s diet. The children are educated about saving food scraps for the hens using the green containers on the meal tables. Other rubbish is placed into the purple containers on the tables. This learning process is constantly embedded in the program as educators talk to children during meal times and children interact and help each other in regard to which container is to be used for different items.
* Educators engage in conversation with the children about turning off taps in the bathroom. This is reinforced each time children use the bathroom and the majority of children are aware of the importance of saving water. The children ask for water when required for outdoor play, for example for use in the sand and watering the gardens. The educators assist children in monitoring the use of water outdoors and continually discuss conserving water.
* The majority of children come from housing areas where tanks have been installed to help households conserve water. This forms part of the regular discussions as the service also has a rain water tank on the side of the cubby which the children can access to water the garden. Children’s households also have ‘purple’ outdoor taps from which clean recycled water is used to water gardens.
* Educators discuss with children how conservation of water is done at home and how garbage is recycled at home and many children are aware of composting food scraps. The services has literacy materials that involve stories of sustainability and these are great tools to reinforce the importance of sustainable practices being embedded in the program.
* Paper is rarely purchased as families are asked to donate used paper for craft, drawing, etc. Children do not ask for clean blank paper but accept what is offered. Educators discuss why donated paper is used for creative experiences – this way children learn to use recycled materials and find them acceptable at home and in the community.
* Paper use is also being reduced in the near future as the service introduces online programming.
* The passionfruit vine is of great interest as the children observe the passionfruit developing from flower to fruit. They have learned that picking the flowers will result in there being no fruit on the vine and also realise that green fruit is inedible. This learning experience is highlighted in evidence provided. The rationale for choosing the area of interest of ‘The Environment’ was that in the previous two weeks, new children to the centre were pulling the green passionfruit from the vine. It was then decided all groups would focus on the environment early in the term with learning experiences, intentional teaching and hands on experiences for the children about how things grow and live and everyone’s responsibility to take care, avoid waste and value what they have in the environment at preschool, at home and in the local community. This also emphasises the service’s involvement in recycling, waste collection at morning tea and lunch time, which is consistently embedded in the program.

**Panel’s considerations**

1. The panel commented on the examples of quality practice in this standard and that the evidence provided at second tier review showed not only that sustainability initiatives were embedded in service operations but that through this practice children were learning about the importance of sustainability.
2. The panel did agree however that the evidence provided did not show how children are leading and actively contributing to sustainability. The panel considered that the practice provided as evidence appeared to be mostly educator-led and noted that to achieve Exceeding, they would expect children of this age cohort to have a more active, leading role in being environmentally responsible.
3. The panel also said they would expect to see the sustainability program extended to greater community involvement to achieve Exceeding is this standard.
4. The panel concluded that the rating for Standard 3.3 remains at Meeting NQS.

**Standard 4.1**

1. Standard 4.1 is that:

Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:
   * educator-to-child ratios and qualification requirements are maintained at all times, and the organisation of educators contributes to a high quality learning and care environment for children.

**Regulatory authority’s views**

At first tier review, the regulatory authority noted:

1. While the approved provider has provided evidence of educator qualifications, the evidence does not demonstrate how the organisation of educators contributes to a high quality learning and care environment for children.
2. The regulatory authority concluded that while the service sometimes exceeds minimum regulatory staffing requirements, this practice meets the National Quality Standard, and there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 4.1.
3. The rating for Standard 4.1 remained at Meeting NQS.

**Applicant’s views**

*Draft report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The organisation of educators contributes to a high quality learning and care environment for the children.
* The centre exceeds the educator to child ratio and the requirement to have more than 50 per cent of educators being Diploma level or higher.
* There is 1 full time ECT and 3 part-time ECTs, 2 part-time Diplomas and 3 part-time educators:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** |
| **Children** | 40 | 53 | 53 | 56 | 34 |
| **ECT** | 2 | 3 | 2 | 2 | 2 |
| **Dip** | 1 | 1 | 2 | 1 | 1 |
| **Educator** | 2 | 2 | 2 | 3 | 2 |

* In addition, the approved provider is also an ECT who holds an approved qualification and is also available to work with children, and lead the educators, five days a week. Further, there is an administration assistant three days per week which provides substantial evidence that the service exceeds the element and therefore the standard.

1. Other qualifications that contribute to practice and service include:

* Educators’ professional standards are embedded in practice to promote positive relationships and a safe and predictable environment.
* Various staff members have multiple qualifications that assist in promoting positive relationships and learning outcomes.

1. The approved provider submitted the following as supporting evidence:

* Copies of qualifications and training certificates.

*Second tier review*

1. Evidence provided at draft report and first tier review stage considered by the panel.

**Panel’s considerations**

1. The panel acknowledged the importance the service placed on educator qualifications, ensuring educator to child ratios were maintained, and the positive impact of long-term employed staff, but agreed with the first tier review assessment, which found this to demonstrate evidence of meeting practice.
2. To achieve Exceeding the panel agreed the service would need to show how the organisation of educators, through for example rostering and making deliberate decisions about the placement of educators with particular individuals or groups, contributed to a high quality learning and care environment for children.
3. The panel concluded that the rating for Standard 4.1 remains at Meeting NQS.

**Standard 4.2**

1. Standard 4.2 is that:

Educators, co-ordinators and staff members are respectful and ethical.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:
   * professional standards are embedded in practice, interactions and relationships and this promotes positive relationships, and a safe and predictable environment both for children and adults
   * educators and staff consistently demonstrate a high level of collaboration. They affirm, challenge, support and learn from each other to continually improve skills to enhance practice and relationships
   * interactions consistently demonstrate mutual respect, equity and recognition of each other’s strengths and skills, promoting a positive atmosphere within the service.

**Regulatory authority’s view**

At first tier review, the regulatory authority noted that:

1. The approved provider has stated that educator strengths are used to guide quality improvement, but has failed to show how this happens or how this promotes a positive atmosphere in the service. Similarly, the approved provider has mentioned that educators reflect on the code of ethics and United Nations Convention on the Rights of the Child, but has not demonstrated how professional standards are embedded in practice, interactions and relationships and how this this promotes positive relationships, and a safe and predicable environment both for children and adults.
2. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 4.2.

**Applicant’s view**

*Draft report and first tier*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The high level of professionalism, qualifications of all key staff embeds the high level of professional practice at the service.
* All staff are committed to continuous improvement, reviewing and “living” the centre philosophy, following service policies and procedures, reflecting on and considering the Code of Ethics and the United Nations Rights of the Child. This is evident in the seamless delivery and consistency of practice of the service in all interactions.
* The approved provider is committed to continuous improvement, reviewing and drawing on the strengths of her educators to guide quality improvement eg specialist educator mentors the team in quality practice, team members mentor each other.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Professional standards guide decision making and are evident in practice through observation of positive relationships with children, families and staff. As a team, educators respect each other, listen to each other, and learn from each other on a daily basis.
* All educators share ideas and contribute to the curriculum, ensuring a safe and predictable environment for children and adults. As the staff work as a team, all jobs are completed and ensure a smooth running centre.
* Regular team meetings give staff the opportunity to discuss issues and concerns, new requirements, changes to policies and procedures. This gives staff agency in their working environment and motivates them to work more efficiently and effectively. Therefore, the environment is safe and predictable for all stakeholders.
* The team meet together socially outside of working hours. This gives them the opportunity to get to know each other on a level other than professional. This gives each team member an insight into the needs and welfare of not only themselves but the children and their families in their care.
* Staff share feedback from workshops and in-services and visits to other centres.
* Staff mentor new team members by encouraging and supporting their ideas. Staff listen to and learning from each other and respect each other’s knowledge. This is particularly evident when young staff members and older members interact and share their strengths. Reciprocal support develops respect for each other’s point of view, training and individual strengths. For example, at the services there is a mix of experienced educators who collaborate with more technologically advanced, younger educators. The skills shared by all team members enhance the skill basis of the team, as can be observed as the service moves towards an online curriculum.
* Development giving parents access to children’s records on a daily basis as well as an additional avenue for collaboration in all aspects of the curriculum. This is a win-win situation for all stakeholders.
* A daily positive atmosphere is created as staff interact with each other, families and children in a positive, friendly manner. This is one of the service’s strengths and many families arrive at the service by word of mouth. This is particularly evident when the centre is recommended by health professionals whose patients are children with specific health needs.
* The service has experienced comments by visitors expressing appreciation and wonder at the vibes coming from the centre as children and staff interact in positive, collaborative ways.
* Staff are confident professionals and their skills and abilities create a positive atmosphere for the service. This is reflected in the number of families that return year after year.

**Panel’s considerations**

1. The panel agreed that the evidence available showed educators consistently demonstrated a high level of professionalism, citing examples of collaborative planning, mentoring, long-term employment at the service for the majority of staff, overseeing of student practicums, professional assessment and goal setting, and overall, extensive evidence of being a high functioning team.
2. The panel found the service’s collaborative, respectful and reflective practice promoted a safe and positive atmosphere for children and educators in line with the standard expected at the Exceeding level.
3. The panel concluded that based on the evidence available Standard 4.2 should be amended to Exceeding NQS.

**Standard 5.1**

1. Standard 5.1 is that:

Respectful and equitable relationships are developed and maintained with each child.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:

* Interactions with each child are consistently warm, responsive and build trusting relationships that promote children’s sense of security and belonging.
* Every child is consistently encouraged and supported to engage with educators in meaningful, open interactions that enhance the acquisition of skills for life and learning.
* Each child is consistently included and involved in the program and displays confidence and security.

**Regulatory authority’s view**

At first tier review, the regulatory authority noted:

1. The approved provider says that educators pride themselves on their practice in this area, but has not provided any evidence to demonstrate how children are consistently encouraged and supported to engage with educators in meaningful, open interactions that enhance the acquisition of skills for life or what educators do to create an environment where each child is consistently included and involved in the program. The family feedback examples are positive, but parent satisfaction alone cannot be relied on as evidence that educator practice Exceeds the standard.
2. The regulatory authority noted evidence EV030502, where the officer recorded that in all rooms ‘children show confidence in their environment joining in and accessing resources from around the service’. The regulatory authority agreed that this statement could imply practice that exceeds the standard, however it was unclear because the officer had not recorded any specific practice examples to support the statement. It was the regulatory authority’s view that though some evidence recorded by the officer against this standard lacked clarity, the evidence used to determine the rating for this standard and recorded in the Assessment Evidence Summary was generally consistent with a rating of Meeting NQS. The regulatory authority concluded that while the service demonstrated practice that was Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 5.1.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted the following supporting evidence:

* Assessment Evidence Summary
* Parents’ feedback.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Children and families are greeted with genuine sincerity every day on arrival at the preschool and farewelled at the end of each day, usually accompanied by a quick word of how the child’s day has progressed.
* There is opportunity in the morning and afternoon for parents and educators to share information from home or in the case of the educators, share aspects of the child’s day with families, thus building trusting relationships and promoting a sense of security and belonging.
* The service environment is relaxed and there are many opportunities for educators to engage in positive, meaningful conversations during indoor and outdoor play, educator initiated experiences, transition times and mealtimes.
* Educators are very experienced in responding to children’s ideas, feelings, emotions and humour, further building on that sense of security and belonging.
* Educators sit with children during morning tea and lunch, giving everyone the opportunity to share ideas. These informal conversations are important as they draw small groups of children into conversations, again promoting an all-inclusive environment.
* Ideas from conversations and interactions can be further developed to enhance a child’s learning.
* Children are always viewed as individuals, with their own interests and contributions to the program. It can be as simple as assisting them finding a resource, game, book, construction or can be as involved as planning more complex projects as in the examples provided. These examples are typical of an experienced educator’s ability to involve each child in the program which displays skills in promoting a child feeling a sense of confidence and security.
* Educators involve themselves in children’s play. They are experienced enough to know when to be involved and when to stand back and observe the children negotiating their own learning experience. This is evident as the educators position themselves thoughtfully in the learning environment to ensure they make the most of every opportunity to support every child.

**Panel’s considerations**

1. The panel noted that the first tier review acknowledged the lack of clarity of some of the evidence collected against this standard. However the commentary and evidence provided at second tier review, which appeared to be available at the time of the original assessment and rating visit, shows children are consistently engaged with their learning, that they are consistently included and involved in the program and that there is genuine warmth that is consistently demonstrated in the relationships between educators, children and families.
2. The panel also highlighted the evidence that children displayed confidence in their environment, recorded by the assessor, as another indication of Exceeding practice.
3. The panel concluded that based on the evidence available Standard 5.1 should be amended to Exceeding NQS.

**Standard 5.2**

1. Standard 5.2 is that:

Each child is supported to build and maintain sensitive and responsive relationships with other children and adults.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:

* Collaborative learning opportunities are effectively facilitated and every child is consistently supported to work with, learn from and help others.
* Each child is consistently encouraged and supported to manage their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
* The dignity and rights of every child are consistently supported and promoted at all times.

**Regulatory Authority’s view**

At first tier review, the regulatory authority noted:

1. The approved provider states in the service's QIP that children have many opportunities to work and play independently and in groups, and they are supported to respond appropriately to others, manage their own behaviour, effectually resolve conflicts, help others and contribute to rule making. These practices are consistent with those required to Meet the standard and are supported by evidence recorded by the officer in the Assessment Evidence Summary eg ‘Children show confidence at the service approaching educators and joining in activities and experiences throughout the day’; and ‘Educators use positive body language and speak warmly to all children’. The approved provider has identified plans to ensure children's dignity and rights are maintained by educating staff and students about service the policy to guide their response to children's challenging behaviour, but has not provided evidence to demonstrate if or how the dignity and rights of every child are consistently supported and promoted at all times.
2. The regulatory authority noted the Assessment Evidence Summary contained no mention of the key improvements recorded against element 5.2.3 of the service's QIP, so there was no evidence to confirm if the planned outcome was occurring at the time of the Assessment and Rating visit or if strategies were yet to be implemented. Similarly, there was no mention of the service’s identified strengths recorded against this standard in the service's QIP, so there was no explicit validation by the officer that they were occurring at the time of the Assessment and Rating visit.
3. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 5.2.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted the following supporting evidence:

* QIP
* Assessment Evidence Summary

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Children are encouraged in their friendships at all times and staff model positive, respectful behaviour toward each other, promoting an environment where educators can work with, learn from and help each other.
* The centre often develops learning experiences and projects based on the interests of one or several children. As these projects evolve, many learning opportunities emerge where children’s learning is enhanced and new skills acquired. Children share ideas and educators challenge the children’s thinking.
* Educators encourage children to create general rules/group expectations together at the start of the year. These rules are consistently reinforced by positive interactions with educators and other peers. They are reviewed throughout the year and these enable children to work collaboratively to ensure a safe, secure and happy environment for everyone.
* Children are consistently encouraged to manage their own behaviour and be involved in decision making regarding behaviour. Educators support children when necessary to manage behaviour to ensure a calm, enjoyable environment.
* Educators encourage children to work together to resolve conflict. This is achieved through interactions and discussions involving children concerned in the conflict and working out a suitable outcome.
* Role play, games, group learning experiences such as blocks, sand, puzzles, play dough, sharing resources are examples of opportunities where children can learn and play together in a positive learning environment.
* Children are encouraged to treat peers, educators and families with respect.
* Educators, students and visitors working at the preschool are required to read and become familiar with *Guiding Children’s Behaviour Policy* as part of their induction and ongoing improvement planning.
* Educators discreetly interact, plan and discuss issues and strategies with each other to support individual children’s behaviour when necessary. This is to ensure that consistency is promoted at all times across the service, which provides a sense of security and predictability.
* Positive guidance is provided towards socially acceptable behaviour at all times and positive guidance never takes the form of a child being frightened or humiliated.
* Educators ensure that they and their colleagues respond to children at all times with respect and that the dignity and rights of children are supported at all times.

**Panel’s considerations**

1. The panel noted that the service’s QIP shows good evidence of how they are working to help children manage their own behaviour, consistently looking at how they are supporting children’s development. The evidence shows this is done during team meetings and the panel observed that it shows good practice for this to be regularly under review by a service, as there will always be challenging behaviours that educators need to be equipped to deal with.
2. To receive Exceeding, the panel commented that they would expect to see evidence of how appropriate reference documents, such as the Convention on the Rights of the Child, are reflected and promoted in the service’s practice. The panel also noted that while the service has indicated that it seeks to ensure consistency in the way staff manage children’s behaviour – through shared information, policies and staff discussions – this was not substantiated with evidence about how that it is happening in practice.
3. The panel agreed that the provider shows an understanding of how to support children to build relationships with other children and adults, and how to support children in their own behaviour management, but to be rated at Exceeding, there is an expectation that there will be evidence of consistency in the support provided to children. The panel acknowledged that this may be happening, but that they did not have evidence upon which to confirm that it was embedded in practice.
4. The panel concluded that the rating for Standard 5.2 remains at Meeting NQS.

**Standard 6.1**

1. Standard 6.1 is that:

Respectful supportive relationships with families are developed and maintained.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:

* There is an effective enrolment and orientation process based on active communication, consultation and collaboration with families that supports all families.
* Families are offered a range of opportunities to be actively involved and are encouraged to significantly contribute to service decisions.
* Comprehensive and current information about the service is provided to families in an accessible format.

**Regulatory authority’s view**

At first tier review the regulatory authority noted:

1. The approved provider describes an effective enrolment and orientation process and states that opportunities to "consult, collaborate and communicate" are available, but has not provided sufficient evidence to demonstrate what this means in practice and how this supports all families. The approved provider mentions oral communication and parent surveys but fails to elaborate or provide evidence that families are offered a range of opportunities to be actively involved and make significant contributions to service decisions. Though current information about the service is available to families, evidence provided by the approved provider does not demonstrate how the information is comprehensive or that the format is accessible to all families.
2. The regulatory authority noted the Assessment Evidence Summary where the officer has recorded that newsletters are delivered to families each term, the service has a Facebook page and is in the process of collecting family email addresses to distribute information. The officer also recorded that a variety of information about the service is available on the website but has not been updated since 2013.
3. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 6.1.

**Applicant’s view**

*Draft and first tier report*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The service collaborates and communicates, initially through Office Admin/Director by phone, followed by a visit with their child, able to stay for first hour, allowing the child to participate in the program.
* Families are invited back for further visits during which time they are encouraged to talk to other families and members of staff.
* Programming board located at the entry of the centre.
* Suggestion box is located at the front of the centre.
* Oral communication with parents ie. requesting graduation ceremony in the evening, changing Christmas concert format, extended hours.
* The centre offers comprehensive and current information about the service to all families in an accessible format.
* Current policy folder is always available on front desk, along with QIP and information brochures.
* Each family is provided with a Parent Pack which includes a parent handbook, enrolment form, philosophy, daily program. It also outlines routines and spontaneous and planned experiences, as well as individual intentional teaching in areas of communication, writing, maths and music learning experiences.
* Staff qualifications are on display, along with display of curriculum framework (BBB) and the five learning outcomes, and seven quality areas of assessment.
* Code of Ethics is on display, as well as in the handbook and policy book.
* Along with the sign-in book, the complaint procedures and allergy awareness sign is on display.
* The service’s provisional assessment under the NQF is on display.
* An information evening is scheduled annually in February which introduces staff and management, and invites collaboration and an overview of the service’s aim and goals.
* Communication pockets allow for daily communication between parents and management. Communication book allows for daily communication between staff and management.

1. The approved provider submitted the following as supporting evidence:

* Program, daily and weekly planning
* Parent feedback

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* A detailed list outlining evidence of active communication with every family, including a parent pack, enrolment requirements, orientation information and data collection (parent feedback form “About Me”)
* Educators continue to collect and collate data from individual families through conversations initiated by both parents and staff in a reciprocal communication manner as the year begins.
* Ongoing observations, jottings, anecdotal stories, time samples, work samples and interest areas, friendship groups all add to the plethora of knowledge staff collect about children and families. This knowledge base, added to the parent knowledge base, allows for genuine and active interactive communication in which the child is constantly involved.
* This process was already underway even though the assessment and rating day was the eighth day of operation. It was also the first day for the centre’s new ECT.
* Enrolment and orientation are not only the building blocks for long term partnerships with families but initially establish the sense of belonging all stakeholders need to develop and maintain positive relationships for the future.
* Parent feedback and questionnaire indicate the service encourages families to significantly contribute to service decisions.
* Parents are actively involved in learning experiences, eg. safety around pets, respecting paramedics and how they help us, visit by local police, parent cooking demonstrations.
* Local grandparents get together for a working bee during the Christmas holiday period. This has been ongoing since the inception of the centre.
* Invited to help with bushwalks
* Healthy food cooking demonstrations as learning experiences
* Initiate and organise Ramadan celebrations
* Local firemen sharing their skills with the children and staff
* Parents spontaneously sharing gifts with the children and staff for Chinese New Year
* Parents from a variety of cultures spontaneously share food with staff. For these reciprocations to be so natural, it has to be embedded in the centre’s interactions with families.
* A well-known singer wrote and produced a song for Australian school children to perform as part of a program he is taking to local schools. This song was debuted at the service’s concert this year and the singer has also helped with the music for service Christmas celebrations over the years he has been connected with the centre.
* Parents with more time to give cover new library books on an annual basis after the book fair.
* Comprehensive and current information is provided to families in an accessible format through newsletters, communication pockets, email, display boards, comprehensive information available (brochures), texted messages, local business pamphlets – swimming dancing, sports, medical, dental, and state and federal government communications that come through the post and are designed to be displayed.
* Team members use these forms of communication to tell parents of upcoming events, special experiences that have happened at the centre during the day, asking parents for environmental materials for learning experiences, requesting help with sewing, costumes.
* The Director’s PA uses many of these forms of communication when letting parents know of outbreaks of infectious diseases, changes to policy, policy review, changes to fees, upcoming events, accounts, invoices and local news such as the local school’s open days, local businesses that drop off pamphlets advertising sporting clubs and children’s swimming schools.

**Panel’s considerations**

1. The panel noted the service showed quality practice that is consistent with meeting this standard, with an effective enrolment and orientation processes, parent information evenings, strong relationships with feeder schools, some opportunities for parent contribution to planning and a well-established mechanism for seeking feedback.
2. They also noted the plan to move towards online curriculum content was likely in response to parental requests for this and recognised the opportunities for parents to be involved in the program and children’s learning, such as the cooking demonstrations and visit by a parent who is a paramedic.
3. However the panel found that practice did not reach the Exceeding standard in terms of offering families a range of opportunities to be actively involved and significantly contribute to service decisions. They noted that to achieve Exceeding in this standard they would expect to see examples of how families’ feedback is evaluated and used to inform operational service planning and improvement, and evidence that parents are actively encouraged to contribute to service decisions that impact upon how the overall service functions.
4. The panel concluded that the rating for Standard 6.1 remains at Meeting NQS.

**Standard 6.2**

1. Standard 6.2 is that:

Families are supported in their parenting role and their values and beliefs about child rearing are respected.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:

* The expertise of families is actively sought and valued and they have the opportunity to share in decision-making about their child’s learning and wellbeing and contribute to the service program.
* Current information about community services and resources is provided in a variety of accessible forms to all families to support parenting and family wellbeing.

**Regulatory authority’s view**

At first tier review the regulatory authority noted that:

1. The regulatory authority considered claims by the approved provider that element 6.2.2 should be Met. The approved provider has described practice and provided evidence to demonstrate that current information is available to families about community services and resources to support parenting and family wellbeing though the parent library, resource folders and notes displayed and distributed to families. Though the officer recorded in the Assessment Evidence Summary that the limited information available to families was discussed with educators and no further information was provided, the officer's evidence record does not sufficiently detail this discussion, so it is conceivable that as proposed by the approved provider, the information was available and not seen by the officer.
2. Some of the practices mentioned by the approved provider, such as supporting families because of her counselling qualification, may indicate practice that exceeds the standard, but a clear description of exactly what type of support has not been provided, nor has any supporting evidence. Other practices described by the approved provider are consistent with those required to meet the standard.
3. The regulatory authority concluded that there was sufficient evidence to determine that element 6.2.2 should be amended to Met. While the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 6.2.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The expertise of families is actively sought and valued and they have opportunities to share in decision making processes about their child’s learning and wellbeing and contribute to the service program.
* As outlined in the service philosophy, the service goes to great lengths to obtain information from parents both verbally and in written form about their children’s individual needs, interest and goals.
* An information folder full of community services brochures is available on the secondshelf in the locker area, below the signing-in sheet.
* The administration officer updates the families’ information area with current information and places this in the parent information area.
* Newsletters are regularly distributed and include health and wellbeing items such as nutrition, immunisation, Sid and Kids, NAPCAN, raising children network and allergy and illness.
* Parent library with books and publications on parenting, relationships, child development.
* White boards provide information for families eg. breastfeeding and facilitated a new mothers group with the assistance of a professional parent.
* Reciprocal relationships with families are genuine and two-way communication which allows families and educators to discuss family needs and access to support.
* The approved provider is also a counsellor and provides access to support at a professional level of expertise providing an integrated family/education service which Exceeds the NQS.
* Examples of supporting families includes organising and funding medical support for a mother in crisis, supporting families financially in times of family illness and duress.

1. The approved provider submitted the following as supporting evidence:

* Families in Philosophy Statement
* Local community notice board
* Brochures
* Newsletter with item about a family catch up, where to get support, pamphlets providing local information of professional practices
* Health and safety fact sheets, local health services, photos of library and the service environment.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* The expertise of families is actively sought and valued and contributes to the service program:
* One parent with a paramedic background initiated and organised a talk for the children on who paramedics are and how they are there to help the community
* A parent in the police force came in and gave an excellent talk to the children demonstrating how they work in the community for the safety and wellbeing of children. The children were also able to look at the police vehicle.
* Parents and families constantly bring family pets, snakes, dogs, birds, rabbits, and lizards. They help the children to handle pets carefully, talk about feeding and it also allows children to talk about their own pets and experiences with them. Staff gain insights into families and individuals and their associations outside of preschool.
* Daily interaction with team members, educators, families and children brings shyer parents into closer relationships and parents are empowered by the respect shown to them and want to share and offer the expertise that they have.
* Current information is available in a variety of accessible forms to support families, as listed at paragraph 122 and supplied in the supporting documentation.
* The service’s policy and the QIP are available at the front desk for parents to peruse and question at any time. The admin officer points all these things out to parents as part of their initial orientation visit.

**Panel’s considerations**

1. The panel considered that the evidence provided demonstrated that the service actively seeks and values the involvement of families in the educational program. Opportunities are provided for parents to share their expertise, there is evidence of significant parental involvement in children’s learning and wellbeing. Feedback from parents shows the service is meeting their expectations and there is evidence of the expertise of parents being reflected in the service program.
2. The panel also considered there was evidence of a substantial amount of information available to parents on community services, in a variety of formats and agreed that the evidence provided matched what would be expected at the Exceeding level.
3. The panel concluded that based on the evidence available Standard 6.2 should be amended to Exceeding NQS.

**Standard 6.3**

1. Standard 6.3 is that:

The service collaborates with other organisations and service providers to enhance children’s learning and wellbeing.

1. To achieve a rating of Exceeding under this standard, the Panel may expect to see evidence of the following:

* Links with relevant community and support agencies are well established and maintained consistently.
* Continuity of learning and transitions for each child are systematically promoted by sharing relevant information, clarifying responsibilities and building collaborative strategies with relevant stakeholders.
* Inclusion and support assistance is consistently facilitated, ensuring each child is able to participate fully in the program.
* The service establishes effective relationships and actively engages with their local community.

**Regulatory Authority’s view**

At first tier review the regulatory authority noted:

1. The regulatory authority considered claims by the approved provider that element 6.3.1 should be Met*.* The approved provider has described practice and provided evidence to demonstrate that links with relevant community and support agencies are established and maintained. Most evidence recorded by the officer in the Assessment Evidence Summary also describes practice that indicates this element is Met. The single evidence point that refutes this assessment (EV031155) does not sufficiently detail the information gathered through discussion with educators in relation to this element and therefore holds less weight in the context of other evidence.
2. The regulatory authority considered claims by the approved provider that the service demonstrated practice consistent with a rating of Exceeding NQS for this standard. Practices described by the approved provider are consistent with those required to meet the standard.
3. The regulatory authority concluded that there was sufficient evidence to determine that element 6.3.1 should be amended to Met. While the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 6.3.

**Applicant’s view**

*Draft Report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and submitted evidence:

* The Centre has links with a number of relevant community and support agencies that are well established and maintained consistently such as:
* The service has forged many links to the Children’s Hospital at Westmead and collaborates with their professionals in developing learning support programs, safe learning environments and medical action plans.
* Similarly the service has formed a reciprocal partnership with a local dentist who approached the service to provide regular talks on the importance of dental hygiene.
* Links with local speech pathologists support children at the service and children’s language development is constantly screened through observation and parent input.
* Partnership with The Steps program allows all children to be screened before school for sight development.
* Since the centre opened it has had a partnership with the local bush fire brigade, which many service parents belong to. Children are taught about the importance of fire safety. This information is also shared with families.
* The fire brigade visits annually and gives a water display, as well as helps put together the Christmas stable display.
* The service subscribes to the Cancer Council and endorses their Sun Smart policy.
* Children and staff visited a local nursing home to perform their Christmas concert.
* Children contribute and bring in a variety of food products to create Christmas hampers for underprivileged families at Christmas time.
* The service is a member of the Child Care Alliance, ECTARC, Lady Gowrie and Children Services Central.
* The services has been involved in the establishment of the local Men’s Shed and they are regular supporters, with their members visiting the centre, having made a number of resources such as the puppet theatre, see-through garden, and wet and dry tables.
* In consultation with the local council the service established and launched the ‘Welcome to Australia Way of Life’, which emphasises the importance of belonging and being part of our Australian way of life.
* The service has a reciprocal relationship with the dementia unit at the local retirement village, which has produced and provided numerous rhythm sticks used in the children’s music learning experiences.
* NSW Kids and Families conduct annual eyesight screening of children.
* Staff and parents collaborate with local schools to have teachers visit and discuss the needs of individual children prior to commencement at their respective schools.
* Infant teachers are invited to attend the centre and discuss with qualified staff children’s readiness to commence school in the following year. Often this is at the request of parents.
* In 4th term, children attend a series of orientation visits offered by respective schools, which opens dialogue between all stakeholders on the transition process for each child.
* Transition between rooms is discussed through ongoing, spontaneous communication between educators.
* The service consistently facilitates and ensures that each child is able to participate fully in the program, including children with additional needs as outlined in Standard 3.1.
* Staff meet with and discuss with relevant medical personnel requirements for individual children attending the centre and needing inclusion and support as outlined in examples at Standard 2.1.
* As a member of this community for over 50 year the approved provider has built a strong and effective relationship with many members of the community, including various Members of Parliament, while attempting to improve outcomes for early childhood services.
* The approved provider has been a committee member of the Migrant Services and the local Community Services.
* Ongoing relationship with schools in the area who send:
* their Deputy Principal annually to speak to parents about school readiness; students to complete community service for Duke of Edinburgh awards; students as part of their Out Reach program, TAFE students who the service for their practicum allocations.
* Children were happy to forego their own Christmas presents to donate them to preschools that were damaged in the bushfires.

1. The approved provider submitted the following as supporting evidence:

* Meeting minutes and list of staff responsibilities
* *Get sensory savy* workshop outline and receipt
* Allergy list
* IEP, details of evidence listed above
* Thank you letter for donation of books

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Links with relevant community and support agencies are well established and maintained consistently, and include:
* Each year the centre fundraises for a charity. The children are involved in collecting and designing hampers of food for those at Christmas time who are needy in the local environs. A representative of the charity comes to collect them and always gives a talk to the children and the children then help to carry the hampers to the waiting van. The children also sing some of their Christmas concert songs for any charity members who are at the centre. Staff use the filling of the hampers as a time to talk to the children about the needs of families in the community and how everyone can help. Children are encouraged to share this knowledge at home and to bring suitable items of food. This happens every year and will continue to do so for many years to come.
* During the bushfires in the Blue Mountains in 2013, families collected gifts which the children delivered to the Mayor of the local council in Katoomba.
* In 2013, four staff members visited preschools in East Timor. They took gifts of books and pencils and a variety of equipment useful to the preschools. As a follow up the centre runs special event days at the centre such as the sausage sizzle, which happens in 2nd and 3rd term, every year. The children all bring a gold coin donation which goes to the East Timor preschool and the director also adds a donation of $2000. This is a learning experience that connects them to a world far different from what they experience daily. These connections were made through the local diocese where the director, some of the educators and many of the service’s families have relationships with local schools and churches.
* Continuity of learning and transitions systematically promoted, sharing relevant information and building collaborative strategies.
* Children moving from room to room in the centre.
* Information given by ECT and educators on the influences on children in the centre.
* Considerations at what age parents want their child to start school, whether a child moves through the various rooms by age / development grouping
* Religion and culture are also taken into account as parents discuss the child’s readiness for a move. Parent expectations can differ greatly across cultures and how they perceive readiness.
* Transition from preschool to school – round table discussions by all stakeholders regarding readiness for school.
* Early in 2nd term a parent night hosted by a local principal on school readiness helps to set parent expectations of what school readiness entails and what children will be required to learn in the first year.
* During the year children and ECT team work through parent goals, adding their own in for school readiness. Teachers look at the emerging skills and build on these through scaffolding, planning learning experiences under the umbrella of the five outcomes.
* Big school is a discussion item for preschool children and is often brought up by the children themselves.
* 4th term children practice being totally independent with food items, lunch boxes, recognising their names, expected to be more responsible with personal items.
* Preschool lunch breaks are adapted to meet the experiences children will encounter at school.
* Children and parents encouraged to attend their new school’s orientation program.
* Team encouraging agency, independence, and self-help, empowering children to become more resilient.
* Children wear their new school uniforms to school for a day during the last week of term.

1. Inclusion and support is accessed consistently through:

* Experienced ECTs and educators
* Educator with Master of Education - Spec. Ed. (EC) oversees inclusion, support, medical conditions and curriculum differentiation.
* Validating a parent’s role in their desire for better outcomes for their children is supported in staff development individual educational plans.
* Physical set-up – ramps indoors and outdoors
* Discussions, stories, puppets, used to breakdown bias which is exclusive
* Modelling of acceptance by staff and inclusive relationships
* Scaffolding to support learning needs
* Broad range of facilities and textures to enhance sensory play
* Water, clay, sand, play dough used as calming play and learning experiences and care.
* Working with local community specialists in the field of medicine, speech pathology, occupational therapy, developing and writing IEPs in consultation with other specialists in particular field of need, working with parents, following up, keeping notes and conferencing whenever the need arises.

**Panel’s considerations**

1. The panel acknowledged the evidence provided by the service to demonstrate a range of activities undertaken to engage and be actively involved with their community. They noted the range of cultural celebrations and events included in their programming that consistently support the inclusion of individual children and their families; the way the service has effectively established relationships, and actively engages with, relevant community agencies such as medical and allied health practitioners; and the steps taken to ensure each child is able to participate fully in the program, and agreed there was sufficient evidence to amend this standard to Exceeding.
2. The panel concluded that based on the evidence available Standard 6.3 should be amended to Exceeding NQS.
3. With two standards in Quality Area 6 amended to Exceeding the panel also noted that the overall rating for Quality Area 6 be amended to Exceeding NQS.

**Standard 7.1**

1. Standard 7.1 is that:

Effective leadership promotes a positive organisational culture and builds a professional learning community.

1. To achieve a rating of Exceeding NQS under this standard, the Panel 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**

At first tier review the regulatory authority noted:

1. The approved provider mentions their experience and qualifications, but has not provided sufficient evidence to demonstrate how this equates to well established governance arrangements, which are regularly reviewed and contribute to the effective management of the service. The approved provider has made a statement that recently inducted staff have become involved in all areas of planning, but has not provided sufficient evidence to show what makes their induction comprehensive or how this contributes to sustained quality relationships and environments that facilitate children's learning and development. The evidence of an educator meeting led by the educational leader is positive, but this meeting occurred for days before the assessment and rating visit and alone this is insufficient evidence to demonstrate how the educational leader ensures the establishment of clear goals and high expectations for teaching and learning.
2. The regulatory authority noted the Assessment Evidence Summary where the officer recorded that newsletters are delivered to families each term, the service has a Facebook page and is in the process of collecting family email addresses to distribute information. The officer also recorded that a variety of information about the service is available on the website but had not been recently updated.
3. The regulatory authority concluded that while the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 7.1.

**Applicant’s view**

*Draft Report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* Well-established governance arrangements are regularly reviewed and contribute to the effective management of the service.
* The Approved Provider has owned and operated three services in the local area over the past 30 years. She also lives in the area and is well connected with community members. She has continually upgraded her studies from 3 year /Dip to B.Ed (ECT) Master of Counselling and is a practicing JP for the local community.
* She has received a number of local awards including ‘Services to the Community’ Local Community Service Award.
* In 35 years, as an owner-operator, there has never been a complaint lodged to the regulatory authority.
* The induction of educators is sustained and contributes to quality relationships and environments that facilitate children’s learning and development.
* New staff members recently inducted into the service are highly qualified and have become involved in all areas of planning to develop children’s learning and development.
* The service’s newest staff member has already updated and refreshed the website and added extra links for parent resources.
* Another new member, who is highly qualified with B.Ed (ECT) B.Ed (primary) M. Special Ed, has been instructing other members of staff in improving their IEPs.
* The service filled the vacant position of ECT within two weeks after being given notice.
* 90% of staff have been employed at the service for over eight years, with one member filling in a maternity leave position.
* The service’s original PEDAL curriculum, which was based on the circle of learning, was developed and implemented before the EYLF was introduced. It was developed with the educators who fully understand the developmental stages of all children, and based on Play, Explore, Discover and Learn for each child.
* The current curriculum has been developed with all educators and changes have occurred as the curriculum is always evolving based on observations, evaluations and reflections of educators.
* The service has fully qualified educators who are experienced in providing a suitable environment for children’s learning. There is a high expectation of their teaching skills and all educators are aware of these high expectations and are true professionals in all aspects of early childhood education.
* Clear goals were set with the educators and have been on display for parents to view. These goals were displayed in the main room for the assessor to view.
* The Educational Leader was appointed to the position last year and has already undertaken several meetings with educators to ensure ongoing critical reflective practise, goal setting, evaluation and planning.
* The highly qualified Educational Leader is respected by all families, in particular long term families in the centre, as well as the educators and children.

1. The approved provider submitted the following as supporting evidence:

* Outline of PEDAL curriculum, service goals, educational leader’s goals, questions for reflection to support learning, staff meeting outline and outcomes, meeting planning.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Both the previous and current Educational Leaders have established clear goals for high expectations for teaching as is evident in their pedagogical practice. Example of this is the establishment of the PEDAL curriculum developed with the overarching EYLF.
* The services sees the evidence for this standard as being evident in the high quality level of practice demonstrated by educators on the day, enacting contemporary educational practice. This has been achieved through collaboration, mentoring and transfer of knowledge, skills and professional development.
* The service QIP is regularly contributed to by staff and available on the day.
* Policy books are in the foyer at all times and reviewed annually or when there is a need to amend for continuous improvement.
* Educational Leader has been nominated by the Approved Provider and signed acceptance of the role.
* Nominated Supervisor has been nominated and accepted the position.
* Certified Supervisors have been nominated and accepted their role.
* Qualification certificates on display.
* The responsible person’s details for the day are on display in foyer.
* Staff team meetings with minutes, held regularly, where NQS and goals of the Educational Leader are focus of continuous improvement.
* Service Manager who greets visitors, accepts phone calls and acts as the first contact with the centre.
* Supervisor’s Certificate and number clearly on display.
* Service Approval number clearly on display.
* Comprehensive induction process for new staff members.
* New team members are given a team pack which contains a comprehensive check list for orientation, a contract, job descriptions, privacy and confidentiality policy, staff employment form, staff immunisation record, rules/guidelines for lifting.
* During the induction process staff are made aware of the professional responsibilities and standards expected in the centre.
* Support is given through mentoring, team meetings and modelling of current staff.
* Transition of new staff ensures parents and children can expect the same sustained quality of relationships and learning environments as documented by parents in their feedback forms, which has been part of the service practice for the past 12 years.
* Children’s learning and development is facilitated as relationships and the environment is strongly maintained, as attested to by parents frequently.
* Management and team members provide consistency through effective communication, so that the secure relationships that children build daily interactions can be maintained when team members are on leave for various reasons. (For instance, team members have taken long service leave, maternity leave.) As the staff job-share, there is the opportunity for team members to fill in for absent members. In regard to the maternity leave position, the position was advertised, filled and the new team member inducted and had spent some days with the children before the maternity leave was due to start, again ensuring the maintenance of secure relationships. There was time for meetings between the outgoing team member and the incoming team member to share information, both written and verbal. All this ensures secure relationships are maintained at all times with professional, caring team members.
* The Educational Leader and the director/owner have worked together for 20 years and have similar views on children’s education. Before the EYLF commenced they felt strongly enough about the care and education of the children at the centre to establish their own curriculum with parent input, aims and goals. It was therefore an easy process to embrace the EYLF and the learning outcomes. This curriculum evolved over years of teaching and interactions with educators, children and their families. The current Educational Leader has had years of experience guiding, mentoring and supporting staff in an effective development of the curriculum which ensures high expectations for teaching and learning.

**Panel’s considerations**

1. The panel commented on the service’s commitment to staff training and qualifications, thorough induction and staff appraisal process and the way these contributed to high expectations for the service overall. They also noted that the service’s accounts of low staff turnover, which would signal good management practices and provision of the consistency needed for children to develop secure relationships, as did the service’s efforts to ensure effective handover practices.
2. However, the panel did not consider that there was evidence at an Exceeding level as to the regular review of the service’s governance arrangements, and how such review is used to contribute to the effective management of the service. To achieve Exceeding for this standard the service needed to demonstrate how governance arrangements are reviewed and contribute to the effective management of the service.
3. The panel concluded that the rating for Standard 7.1 remains at Meeting NQS.

**Standard 7.2**

1. Standard 7.2 is that:

There is a commitment to continuous improvement.

1. To achieve a rating of Exceeding NQS under this standard, the Panel 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**

At first tier review, the regulatory authority noted:

1. The regulatory authority considered claims by the approved provider that element 7.2.2 should be Met. The approved provider supplied evidence to demonstrate that the performance of educators, coordinators and staff members is evaluated and individual development plans are in place to support performance. The regulatory authority agreed that the format of evaluations need not be formal in order for this element to be Met and that the development of individual goals based on the evaluation of performance equates to planning to support performance improvement in this context. Evidence recorded by the officer in the Assessment Evidence Summary (EV031356) does not sufficiently detail the information gathered through discussion with educators in relation to this element and therefore holds less weight in the context of other evidence.
2. While the approved provider states that educators are involved in the annual review of the service philosophy, there is no evidence to support this claim or to demonstrate how the philosophy is consistently evident in all aspects of the service's operations. Similarly, the approved provider states that families provide feedback that is analysed for ongoing self-improvement, but has not offered any detail about how this feedback is sought or used, and no evidence has been provided to substantiate the claim.
3. The regulatory authority concluded that there was sufficient evidence to determine that element 7.2.2 should be amended to Met. While the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 7.2.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The service philosophy is annually reviewed by members of staff and was evident in the material presented to the assessor.
* The staff appraisal had only been conducted at the end of the year, with plans in place for individual analysis to be conducted at the commencement of the year. However, as there was only one week from commencement of term 1 to submit the QIP and then only one and a half weeks before assessment, it had to be postponed. Continuing and ongoing discussions with all educators take place in informal meetings on an ongoing basis and the content of these meetings is not always formally documented.
* The NQS does not stipulate that the performance, evaluation and individual development plans have to be documented in a specific document.
* Families and children are able to contribute to effective self-assessment through family feedback which is analysed for ongoing service improvement, although anecdotally parents are very pleased with the service offered.

1. The approved provider submitted the following as supporting evidence:

* Approved Provider evaluation, copies of staff appraisals, self evaluation, diary entry for staff reflections
* Qualification certificates and training attended.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* The statement of Philosophy is prominently displayed in the foyer of the centre. It also appears in the parent information pack, the staff handbook and in educator’s rooms. The service is committed to its service Philosophy and all aspects are consistently relevant to the service’s operations, relationships, ethical considerations and pedagogical practice.
* Regular evaluation of performance of all team members leads to individual development plans for continuous improvement. Staff have annual written appraisals which are followed up by a meeting with the director to clarify any issues that may have arisen. There are also open and spontaneous discussions as well as discussions at team meetings. These are imperative and invaluable to continuous performance improvement.
* Verbal reviews. Educators constantly discuss with the director, the Educational Leader and all team members how to improve planning, recording and programming of the curriculum. Wanting to work smarter and ease the burden of paperwork and its time consuming elements, all staff meet to brainstorm ideas to achieve a positive outcome and performance improvement. Currently the service is focusing on an online programming program to further provide families with access to children’s learning and documentation. All staff decided to adopt this new initiative which was a goal for this year in the service QIP. This has been an ongoing process over the last six months as team members learn new computer skills and become more proficient. This would not have happened if there had been no critical reflection and vision to improve in the digital area.
* All educators, the director, staff members, families and children contribute to an effective self-assessment. Daily verbal interactions allow for discussions on specific needs of children and all their families. These are effective in improving ongoing service improvement. Some issues are resolved immediately, others require professional input such as parenting questions, school readiness questions, developmental questions. Each term the service runs an evening for parents that answers some of these concerns, listening to other allied professionals outside the service. The results of these seminars support the centre’s professional opinion. This builds greater trust between parents and educators for the decisions that are made to improve the children’s sense of belonging, being, and becoming. This must promote ongoing service improvement.
* As outlined at Standard 6.1 the centre provides feedback forms covering many areas of the curriculum. These forms also ask specifically where families perceive areas for change and improvement.
* Spontaneous notes, greeting cards, suggestion box all add to the process of effective self-assessment and quality improvement of the service.

**Panel’s considerations**

1. The panel found there is evidence the service seeks feedback from parents and educators but as noted previously, it is not clear how the service evaluates this information and uses it to help with planning and as a focus for continuous performance improvement for the service.
2. The panel noted that while the service philosophy was last amended in 2016, there was no indication as to how it was updated as part of a cycle of continuous improvement, who was involved in its review, or how the philosophy is consistently evident in all areas of the service’s practice.
3. The panel commented that the service shows quality practice that is consistent with meeting this standard. However, the panel considered that linkages to show how the review process drives continuous quality improvement would be needed to achieve Exceeding for this standard.
4. The panel concluded that the rating for Standard 7.2 remains at Meeting NQS.

**Standard 7.3**

1. Standard 7.3 is that:

Administrative systems enable the effective management of a quality service.

1. To achieve a rating of Exceeding NQS under this standard, the Panel may expect to see evidence of the following:

* Records and information are regularly reviewed, stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements
* Well-managed administrative systems ensure effective operation of the service and contribute to continuous service improvement
* The Regulatory Authority is notified of any relevant changes to the operation of the service, of serious incidents and any complaints which allege a breach of legislation
* Effective practice and consultation processes minimise escalation of grievances and complaints. Any grievances and complaints are actively addressed, investigated fairly, resolved and documented in a timely manner. Action taken by the service contributes to continuous improvement
* Service practices are based on effectively documented policies and procedures that are readily available at the service and reviewed and evaluated regularly in partnership with educators, co-ordinators, staff members and families.

**Regulatory authority’s view**

At first tier review the regulatory authority noted:

1. The regulatory authority considered claims by the approved provider that element 7.3.3 should be Met. Evidence recorded by the officer in the Assessment Evidence Summary (EV030563) does not sufficiently detail the information gathered through discussion with the approved provider in relation to this element and therefore holds less weight in the context of other evidence. The officer gathered no additional evidence to substantiate the claim made in the Assessment Evidence Summary that the service was not compliant with Regulations 174, 175 and 176 at the time of the Assessment and Rating visit. While the officer may have had concerns that the approved provider did not understand her reporting obligations, this element only requires that relevant information is reported to the regulatory authority. It would not be appropriate to make an unfavourable finding about this element based on an assumption that that the approved provider may not comply with this obligation in the future.
2. It is the regulatory authority’s view that evidence recorded by the officer against this element in the Assessment Evidence Summary and then used to determine the rating for this standard was not consistent with the rating that was applied.

The regulatory authority concluded that there was sufficient evidence to determine that element 7.3.3 should be amended to Met. While the service demonstrated practice that is Meeting the National Quality Standard, there was insufficient evidence in the documents presented for the review to support an overall higher rating for Standard 7.3.

**Applicant’s view**

*Draft report and first tier review*

1. The approved provider submitted that the service is Exceeding the standard based on the following examples, practice and evidence:

* The authorised officer confirmed there is a system for grievances, complaints, changes to service operations.
* The service has always notified the department as required and has never been questioned about non-compliance in notifying. The notifications that have been submitted by the service confirm the awareness and commitment of the service in ensuring notifications are provided as per the requirements.
* Recent notifications to the department include nominated supervisor change, changes to the hours and numbers of the service and certified supervisor approvals.
* The service’s incident, injury and illness form has an embedded information section that refers to the need for reporting serious incidents or incidences, which highlights the responsibility of the service to report to the regulatory authority.

1. The approved provider submitted the following as supporting evidence:

* Incident, injury, trauma and illness record
* Statement by the approved provider, letters of appreciation from parents.

*Second tier review*

1. At second tier review and in response to the first tier review panel’s findings, the approved provider submitted:

* Children’s records and information are filed and store in a locked filing cabinet in the office. This has been in place since incorporation of the centre.
* The centre’s office administrator collates and stores all records and information which is ongoing as per regulations.
* All 35 requirements requested by the authority were laid out in order on a table in the music room for the assessor.
* Old records which require keeping are filed and stored in boxes with relevant year and paperwork labelled on the outside.
* Computer systems, a large photocopier, land line with three extensions, all office supplies, all emergency phone numbers located near each telephone handset, easy access.
* Administrative files, a large, well laid out office, accounting systems covering taxation, insurance, workers compensation, receipting systems for parents, staff confidential papers in locked filing cabinets, banking information, shopping system accounts with local supermarket, visitors sign-in book at the front door, educational service awards for teachers and children’s services awards, a very clear chain of command – Director, Nominated Supervisor, Certified Supervisor, all ensure effective operation of the service and contribute to continuous service improvement.
* The regulatory authority is notified of any relevant changes to the operation of the service, of serious incidents and any complaints which allege a breach of legislation (reviewed policies provided).
* The service has never had a complaint filed against it alleging a serious breach of legislation. This can be confirmed through the regulatory authority.
* The provider has a thorough understanding of the law and regulations. She has completed a Working with Children check and continually upgraded her Statement of Attainment in CHCPRT001 Identify and Respond to Children and Young People at Risk. All team members have also continued to upgrade their Certificates for CHCPRT001.
* First Aid forms 25/01/16 as per staff meeting minutes, all staff looked at copies of the new Incident, Injury, Trauma and Illness forms which has a detailed section on notifications. There is a section which clearly points out if further notification to Regulatory Authority is required.
* The centre’s Grievance and Complaints policy is clearly visible on the parent communication board in the locker room and is reviewed and updated annually.
* The staff communicate in a mature, professional manner and are caring, which eliminates any type of formal complaint.
* The service is proud of its reputation for establishing and maintaining strong relationships with families.
* Families return year after year and recommend the service to their friends even though there is no fee relief available at this centre.
* Parent suggestions are recorded in the communication book for all staff to read. These suggestions are noted and discussed.
* Families have indicated that they would like to view children’s work progressively throughout the year by having access to online communication for day books, observations, newsletters and notifications. These have been noted and initiatives are in place for online access.

**Panel’s considerations**

1. The panel noted the service demonstrated well-managed administrative systems and that office procedures are effectively organised. They also commented on the service’s use of the QIP to document strengths and areas for improvement, the involvement of families in some programming and opportunities to provide feedback, as signifying good evidence of meeting the standard.
2. However, the panel found there was limited detail provided around the service’s grievance and complaints procedures, noting that a lack of formal complaints cannot necessarily be considered as evidence of Exceeding practice. There was also little evidence as to how the service documents and acts upon feedback and how regular evaluation of service policies and procedures is undertaken in partnership with families.
3. The panel agreed that the service demonstrates practice that is meeting this standard but not that it is Exceeding the standard.
4. The panel concluded that the rating for Standard 7.3 remains at Meeting NQS.

**Other considerations**

1. Throughout their second tier review application the approved provider noted their concerns with the way the assessment and rating visit was conducted because in their view the authorised officer failed to view or take into account all available evidence, and that it is the authorised officer’s responsibility to identify sufficient evidence to validate the standard, not the approved provider’s.
2. However, the Panel noted that its role is to make a decision on the service’s ratings levels based on evidence that it has been provided, and that the onus is on the provider to demonstrate to the Ratings Review Panel why and how they are exceeding the NQS. The Panel’s role is then to determine the correct rating level for the service based on this evidence, not to review the way in which the assessment and rating service visit was conducted.

**Decision**

1. The Ratings Review Panel by consensus decided to:

* confirm the rating level for Standards 2.1, 2.2, 2.3, 3.1, 3.2, 3.3, 4.1, 5.2, 6.1, 7.1, 7.2 and 7.3 as Meeting NQS
* amend the rating level for Standards 4.2, 5.1, 6.2 and 6.3 to Exceeding NQS.

1. **As a result, the Panel has also amended the rating for Quality Area 6 to Exceeding NQS, however the overall rating for the service remains Meeting NQS**.