**‘Approved provider’ and SA Education and Early Childhood Services Registration and Standards Board [2017] ACECQARRPstr0025 (28 February 2017)**

**Ratings Review Panel**

***Decision Notice***

APPLICANT: ‘Approved provider’

**REGULATORY AUTHORITY:** SA Education and Early Childhood Services Registration and Standards Board

**Date of Decision:**  28 February 2017

**Application reference:**  STR0025

**Decision:**

The Ratings Review Panel (the panel) by consensus decided to amend Standard 7.2 to Exceeding NQS.

The panel, by consensus, confirmed Element 1.2.3 is assessed as not met and the rating level for Standard 1.2 is Working Towards NQS.

The panel, by consensus, confirmed the following standards and quality areas are rated Meeting NQS:

* + Quality Area 3, Standards 3.1, 3.2. and 3.3
  + Quality Area 4, Standard 4.1
  + Quality Area 6, Standards 6.1 and 6.2
  + Quality Area 7, Standards 7.1 and 7.3.

The panel confirmed the overall rating for the service is Working Towards NQS.

**Issues under review**

1. The approved provider sought a review of the ratings for the above quality areas and standards on the grounds that the regulatory authority failed to take into account or give sufficient weight to special circumstances or facts existing at the time of the rating assessment.
2. After the service’s assessment, the service was rated as Meeting NQS for Quality Areas 2, 3, 4, 6 and 7 and Exceeding NQS for Quality Area 5. Elements 1.2.1 and 1.2.3 was assessed as not met and therefore Standard 1.2 and Quality Area 1 were rated as Working Towards and the service’s overall rating was determined to be Working Towards.
3. At first tier review, the regulatory authority amended Element 1.2.1 to ‘met’ and amended Standards 2.1 and 4.2 to Exceeding. The amendment to Standard 2.1 resulted in Quality Area 2 being amended to Exceeding.
4. The regulatory authority confirmed all other ratings under review and the overall rating remained at Working Towards NQS.
5. The provider submits that Quality Area 1 should be rated Meeting and that all other Quality Areas under review should be rated Exceeding.

**Evidence before the panel**

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

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| --- | --- | --- | --- |
| **Item** | | **Document** | |
| 1 | | Assessment and rating instrument | |
| 2 | | Draft assessment and rating report | |
| 3 | | Provider’s feedback to draft report | |
| 4 | | Evidence provided in response to draft report | |
| 5 | | Regulatory authority’s letter about draft feedback | |
| 6 | | Provider’s application for first tier review and supporting evidence | |
| 7 | | Assessment and rating report including first tier review comments | |
| 8 | | Provider’s application for second tier review and evidence | |
| 9 | | Photographs taken during the assessment and rating | |
| 10 | | Service’s newsletter | |
|  | |

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

**The law**

1. Section 151 of the National Law states that following a review, the Ratings Review Panel may:

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

(b) amend the rating levels.

**Review of rating levels**

1. The Panel considered each standard under review.

# Standard 1.2

1. Standard 1.2 is that:

Educators and co-ordinators are focused, active and reflective in designing and delivering the program for each child.

1. This standard is comprised of three elements, one of which is under review.

*Element 1.2.3*

1. Element 1.2.3 is that:

Critical reflection on children’s learning and development, both as individuals and in groups, is regularly used to implement the program.

***Regulatory authority’s view***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * The cycle of planning is used across the centre and incorporates children's current interests, previous learning and new ideas.
   * As described in Standard 1.1, programs are displayed along with photographic reflection books of children's learning.
   * All educators undertake observations on individual and groups of children that contribute to the development of the program. Observations are initially recorded of children, which include analysis of learning and future goals. Further information is gathered from parents and educators across the whole team and from children’s interests.
   * Alongside this, a project/group learning focus is also identified and incorporated into the program.
   * However, observation processes were inconsistent for all children, with consideration given as to how regularly children attend and how long they have been in attendance at the service. For example, assessment of some children’s learning was limited and planned experiences for each child were difficult to see. There was also a differing amount of information with regard to how these were evaluated and possible extensions for children’s future learning. This would indicate that although processes are developing positively, they are not embedded in practice for each child.
   * Programing and documentation demonstrates how educators respond to children ideas and was consistent in planning across the centre. Educators explained that they record children’s interests in the children’s voice book. These may be gathered through discussion with the children and observation. Another example was observed when a child requested a shape sorter from a shelf in the nursery. The educator understood the child’s cues and clarified what they wanted before responding.
   * An educator was requested by a small group of children to go and look at their digging. The educator and the small group of children sat chatting about bugs whilst they poked around in a small patch of dirt with sticks. The educators said 'I can't see any bugs I think they must all be sleeping!' The children giggled and said 'Let's keep looking, let's look here!'.
   * Reflective practices are in place for some children’s learning and development, both individually and in groups. For example, each educator has a reflection journal, the program is evaluated each week and there are daily learning reflections. However, there are inconsistencies in the levels of critical reflection undertaken for each child and for groups of children with gaps in recorded documentation. There is also a varied amount of information and content detail available that would be able to support educators to make judgments about areas of development for each child and what might support their progress and further extend their learning.
2. In its Quality Improvement Notes, the regulatory authority recommended the service:
   * ensure that children's individual cultural backgrounds are considered and used to inform the foundation of the program
   * review the routines established at the centre and implement strategies that further support children’s learning and skills for life
   * focus on how educators assess children’s learning in the planning cycle ensuring each child’s learning is evaluated and extended on as part of the planning process.

*First tier review and response to draft report*

1. The regulatory authority found the evidence provided at first tier review supported a change in the assessment of Element 1.2.1 to ‘met’, but did not support a change in the assessment of Element 1.2.3 which it confirmed as ‘not met’.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * The service meets the element as critical reflection on children’s learning and development, both as individuals and in groups, is *regularly*used to implement the program.
   * Educators consider how regularly to observe each child based on their attendance and the length of time they have been in attendance at the service. However, educators were not provided with the opportunity to discuss this with the authorised officer.

* The service has a thorough process for checking observations and the director monitors this process. For example, the director does a weekly program check for each room, which is displayed in the staff room with notes and feedback. A rewards and recognition system is in place to reward and recognise staff if all areas are completed with high quality planning and reflection across the month.
* The director and educational leader have monthly discussions where they review the checklist of every child in the service to ensure they have an observation for each month and that the reflective planning cycle is evident. If the child did not attend, educators will note in the child’s file that the child did not attend for that month.
* Observations are also displayed on the weekly program so all educators can see which child is pre-planned and see the month which the observation has been reflected and followed on from.
* The service’s strategies ensure that all children’s learning and development is regularly used to implement the program.
* The assessment and rating report states: ‘the cycle of planning is used across the centre and incorporates children’s current interests, previous learning and new ideas’. For previous learning to be incorporated, reflection on both group and individual learning occurs and, as the report states, the cycle is used across the centre.
* All children have an individual observation/ learning story as well as a milestone or developmental piece, such as a photo of something they have achieved, and a write up from that day of the events that occurred. This goes in each child’s profile as an extra piece of documentation alongside the detailed observation for the month and is completed once every four weeks. The planning cycle is consistent across all rooms in all documentation.
* Intentional teaching is pre-planned and spontaneous. Projects and daily learning in each room comes from children’s ideas, voice and play observations.
* Critical reflection is implemented in all rooms in the weekly plan books and a critical reflection book for the service is completed by the centre director once a week. All educators have a personal reflection book that they contribute to three to four times each month.

1. The provider submitted evidence of individual and group critical reflections as evidence. The provider submits the reflections inform each room’s program on a weekly basis.
2. The provided stated it found it difficult to provide evidence which responded to the comments in the assessment and rating report, as individual child’s portfolios were not identified by the regulatory authority.

*First tier review*

1. The provider submitted the following as evidence:
   * weekly evaluation showing extension of learning from critical reflection
   * weekly plan showing experiences following previous critical reflection
   * individual observation including critical reflection
   * daily learning showing critical reflection.

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report includes:
   * Critical reflection on children’s learning and development both as individuals and in groups, is consistently used to implement, review and revise the program.
   * Educators consistently reflect on children’s learning, development and skills in their weekly programs in their summative assessments which are completed for all children at the service regardless of how often they attend.
   * The daily learning journals have a reflection section where educators review the learning that has occurred that day, whether it be planned or spontaneous.
   * Educators have reflected on their environments and have made changes following these reflections.
2. The provider submitted the following as evidence:
   * educational leader planning cycle and documentation process review tool
   * summative assessments form, all rooms
   * daily learning journals
   * reflections on the environment
   * observations – planning cycle – last section critically reflects and informs ideas to go on the program – this is consistent monthly refer to evidence in 1.1.1.

*Panel’s considerations*

1. The panel noted it needed to see that critical reflection is regularly used to implement the program to find the element met. The panel discussed that ‘regularly’ does not mean ‘consistently embedded’ and also noted that the element did not refer to critical reflection for ‘each child’. The panel discussed that it would not expect the same volume of reflection for children who do not attend as regularly, which means that ‘regular reflection’ would be different depending on how often children attend.
2. The panel noted there was evidence of a cycle of planning and daily learning journals. However, the evidence summary showed lack of detail for some children and that planned experiences appeared to be missing for some children. The panel noted that inconsistencies in the planning raised questions about whether it was occurring regularly.
3. The panel agreed that the evidence demonstrated that reflective practices were occurring for some children and confirmed the element is assessed as ‘not met’.

# 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[[1]](#footnote-1):

* 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:

* The centre is purpose built and has three education and care rooms which all run directly off the corridor. There is also a fourth room which has been developed into a sensory room.
* Each room has appropriate sleeping and toileting/bathroom facilities. For example, the nursery room has a separate sleep room containing cots and direct access to nappy change facilities.
* A laundry room, kitchen, office, staffroom and planning/parenting room is also available.
* Each room used by children is bright and airy with direct access to the outdoor area with a separate area for the babies.
* Facilities have been organised with space available both indoors and outdoors to ensure that children and educators are able to move freely between these environments which are both fully inclusive to all children and families attending.
* Furniture and resources across the centre were child sized with equipment like 'step ups' provided to support younger children, child sized toilets and low level hand washing basins, encouraging children's self-help skills.
* The sensory room has been created in consultation with the speech pathologist and family support worker, to provide a break out space for children and educators to use in small and large groups as well as with individual children. Equipment and resources offer children the chance to relax and explore or participate in specific aspects planned within the program.
* There is a suitable range of child sized furniture and materials available appropriate to children's age and abilities in each room. Children have access to small tables and chairs, benches, soft seating, mats and carpeted areas. The indoor area is organised to provide areas for children to play in small groups or individually.
* Resources and play equipment were observed to be clean and in good condition. All equipment is regularly checked and either repaired or replaced as detailed in the centre policy regarding cleaning and maintenance.
* Educators maintained routine cleaning tasks throughout the day, with a contracted cleaning service in place outside opening hours. For example, wiping tables before and after meals and snacks, sweeping and cleaning floors after activities and meal times and ensuring regular checks take place in the bathroom and nappy changing areas to maintain hygiene.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report had been captured in the assessment and rating report. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * Through the implementation of a specific program, the educators have worked closely with a family practitioner, speech pathologist and an occupational therapist to use evidence informed practice when choosing all resources, furniture and equipment for indoor and outdoor spaces, to ensure that they provide adequate stimulation for all of the children’s individual sensory needs. This process was used to create the sensory room.
   * All rooms are set up to reflect the strengths, interests and needs of the current group of children enrolled into that environment. The room is forever changing as is the complexity of the individual children that come and leave the service.
   * All resources and equipment are suitable for and serve a purpose when being set up or situated when planned for.
   * Educators reflect on the set up and facilities regularly to ensure that they are designed and adapted to enhance active participation by each child. This occurs through the weekly plan evaluation for the room, completing SAFERS, when adding new equipment to the room, and when reviewing room routines when more or new children commence in the room.
   * In addition to the daily, monthly and quarterly checks, the service engages in a centre presentation audit every 6 months to ensure that the premises, furniture and equipment are safe, clean and well maintained.
   * The audits and checks ensure all premises, furniture and equipment are kept safe, clean and well maintained at all times across the centre.
   * Educators take pride in the appearance of their rooms, especially the foyer area as it is the face of the service.
   * As stated in the report, ‘Facilities have been organised with space available both indoors and outdoors to ensure that children and educators are able to move freely between these environments which are both fully inclusive to all children and families attending’.
   * The centre encourages the children to choose where they would like to play throughout the day including accessing outdoors. With the assistance of educators, children help to set these areas up by choosing what they would like to engage in for the day. This is communicated on the weekly plan under ‘children’s voice’.
   * The majority of experiences are set up after reflecting on the previous week.
   * Children are able to access the verandah area even during wet weather.
   * Indoor and outdoor play is offered regularly and children can choose to go from indoors to outdoors freely with educators positioned in both areas allowing for flexibility in children’s choice and interest at all times. Indoor and outdoor areas are set up to build on all areas of children’s development, including fine motor and gross motor, allowing for both small and large group engagement.

*First tier review*

1. The provider submitted centre presentation audit forms as evidence.

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report includes:
   * All rooms are set up to reflect the strengths, interests and needs of the current group of children enrolled into the environment. The rooms are regularly reviewed to ensure that resources and equipment are suitable for that environment.
   * As indicated in the report, the environment was purpose built and is inclusive to all families and children.
2. The provider submitted the following as evidence:
   * interdisciplinary approach to developing a sensory room
   * weekly plan for indoor and a weekly plan for outdoor so it is purposeful
   * maintenance man task list
   * toy cleaning roster
   * cleaners 5 days a week
   * kindy room routine with planned inside outside time
   * inclusive individual weekly plan for children with additional needs
   * outside learning plans with evaluations
   * indoor and outdoor play is offered to children including when the weather is wet/hot – outdoor learning under the verandah.

*Panel’s considerations*

1. The panel noted that for an Exceeding rating, it would need to see more than the spaces and equipment being suitable. It would also need to see evidence of interaction between the spaces and equipment and how that translates into a stimulating learning environment. Similarly, the panel would need to see not only that the environment is maintained, but how the program and learning environment is enhanced by the environment.
2. The panel noted there were descriptions of the environment, but evidence about how they are enhancing the programs and learning environments for children was lacking.
3. The panel noted the provider had emphasised the specific program it uses and agreed this demonstrated a stimulating learning and care environment, but that it needed to see this in all indoor and outdoor spaces.
4. The panel confirmed the evidence supports a rating of Meeting.

# 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:

* Indoor and outdoor spaces have been organised to provide an environment for the children that allows for flexibility and the chance for children to experience independent play.
* Children were observed during the assessment and rating visit actively engaged in their environment, which reflected their current interests and supported flexible choices. For example, in the baby room shakers have been made by educators from recycled plastic bottles filled with rice, coloured paper and pasta.
* A trolley has been set up in the kindy room for children to sort and collect natural objects like small logs, wood chips and seed pods using magnifying glasses. In the toddler room bark, twigs and fir cones are available for the children to explore.
* Outside the area is divided into two areas for the different age groups of children. There are shaded sandpit areas, recycled tyres and ride on equipment.
* In the toddler and kindy area herbs and vegetables had been planted and an area has been developed using decking to create a platform. Spaces are also available where children can sit and play in small and large groups.
* Some representation of culturally diverse materials and resources were observed at the centre. For example, there were dolls representing different skin colours, story books that reflect other cultures and recycled cooking utensils. Displays detailed 'hello' and 'goodbye' in different languages alongside pieces of indigenous art work. A displayed feature in the toddler room that reflects different countries around the world with representation of animals and flags.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report had been captured in the assessment and rating report. At first tier review, the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report: ‘Indoor and outdoor spaces have been organised to provide an environment for the children that allows for flexibility and the chance for children to experience independent play. Children were observed during the assessment and rating visit actively engaged in their environment, which reflected their current interests and supported flexible choices’.
   * With the assistance of various support teams and children’s feedback, spaces are designed to provide the flexibility to respond to each child’s needs and development at all times. Both outdoor and indoor spaces are designed and organised to engage every child in quality experiences ensuring both small and large group experiences are accessible throughout the day. The natural environment is an extension from the indoor environment. The environment ensures both gross and fine motor learning experiences are catered for and quiet areas are available for children to relax in.
   * Educators have been supported by the family practitioner, speech pathologist and occupational therapist to make informed choices around the selection of resources, materials and equipment that are provided for each child’s learning. This information helps to ensure that the program is implemented effectively and provides multiple uses for children of all developmental levels. For example, scooter boards are used to encourage leg or arm movements which support social interactions and fine motor coordination.
   * Resources, materials and equipment are sufficient in number, and are organised in ways that ensure appropriate and effective use by all children. To extend on the resources that we have, educators add further resources to the experience, to extend the learning and imagination of children. This encourages children’s interaction in the experience. For example, instead of just having sea animals in a water trough, later in the day we can extend on this and add to the experience by adding boats and fishing rods, rather than just packing it away.

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report include:
   * The resources allow for all children to participate within the service, as the kindy children have specific learning plans for children with additional needs to enable the service and its resources to be fully inclusive. This is further highlighted by the sensory room and its purpose.
2. The provider submitted the following as evidence:
   * photo evidence of natural experience table, amygdala, bottles, bark pit and natural loose parts trolley
   * kindy outside learning
   * nursery outside learning.

*Panel’s considerations*

1. The panel noted a key indicator for Exceeding under this standard is that indoor and outdoor spaces provide flexibility to respond to children’s individual needs, development, self-initiated play and exploration.
2. The panel noted that the evidence summary showed flexibility between the indoor and outdoor spaces occurs and that flexible choices are supported. The panel noted these aspects of the evidence summary reflect some of what is required for an Exceeding rating but agreed all other evidence demonstrated practice at a Meeting level. For this reason, the panel confirmed the rating is Meeting.

# 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:

* Educators at the centre have developed sustainable practices which are implemented in the program and everyday operations. For example, recycling bins are available across the centre and were seen being used by educators and children for paper and waste food scraps.
* In the toddler and kindy room containers are in place to collect waste drinking water with evidence recorded of children collecting their drinking water and placing in a bucker ready to water the plants.
* Information was displayed to support children to understand the different types of waste and how this is collected and recycled with a record of children’s discussion detailing their suggestions for energy saving. Practices included: turning off lights at certain times of the day and when leaving rooms, trying to use the outside line when possible rather than the tumble drier. A worm farm is also provided.
* The centre involves families in recycling practices by encouraging donations of materials that can be used in craft activities and with a recent survey undertaken. Parents’ comments were seen which confirmed that the centre considers sustainability in centre operations. For example, one comment stated that they ‘understood why the centre looked so dark when they arrive to collect their child’. The centre has developed a sustainability strategy and plan which details what will be planned for the week to support children understanding.
* Although it was observed during the assessment and rating visit that a few children were reminded about recycling, it was the educators who mainly collected the food scraps and placed in recycling bins. There were missed opportunities to support children's learning as no narrative was provided by educators for the children with regard to composting and recycling in general that would enhance their learning about sustainable practices.
* Children are encouraged to be environmentally aware and supported by educators to understand how to respect and care for the world around them. For example, recently children and educators have been planting and caring for the centres garden areas. Photographic evidence was seen of a group activity when children were planting sunflower seeds and a children’s interest in caterpillars in the outdoor environment.

1. In its quality improvement notes, the regulatory authority recommended the service continue to develop its approach to sustainability and give consideration to how this can be developed to further support children to understand and learn about their environment.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not demonstrate how practices reflect an exceeding level. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report: ‘educators at the centre have developed sustainable practices which are implemented in the program and everyday operations. Parent’s comments were seen which confirmed that the centre considers sustainability in centre operations. The centre has developed a sustainability strategy and plan which details what will be planned for the week to support children understanding’. These statements indicate that sustainability is embedded in day to day practice at the service.
   * The service has a large skip style bin for recycling. The service minimises its use of paper by printing documents back to back. Families’ statements and communication are emailed to minimise the use of paper.
   * Sustainable practices are embedded in the service operations through having sustainability pre-planned in the rooms’ weekly plans, having a sustainability plan for the service that all educators abide by and talking to the children about what the service is doing and why. For example, educators explain why the service turns off lights during relation time and turns off the air conditioner when going outside.
   * Educators actively plan and reflect weekly, using the service’s sustainability plan as a guide, to engage children in experiences related to their environment. For example, children feed the worms and water the plants with leftover water.
   * Children are supported to become environmentally responsible by being encouraged to help set up experiences and then pack them away. In the quiet area, children observe the surrounding world such as the trees (we can see the birds), cars driving past (we can hear), and what shape the clouds are making. These conversations and observations show a respect for the environment, that the environment has purpose and it belongs to us all. By watering the garden, we help it to grow and see the small miracles nature has to offer, as well as prompting more questioning from children that can lead into projects and discussions.

*First tier review*

1. The provider submitted the following as evidence:
   * weekly plans and evaluations
   * outdoor learning experience
   * photographs.

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report includes:
   * each room has sustainability on the weekly program and educators reflect up this each week, further embedding sustainability in the service’s practices
   * comments from parents confirm that the service considers sustainability in its operations.
2. The provider submitted the following as evidence:
   * kindy daily learning x 2
   * weekly plans
   * sustainability strategy – reviewed
   * parent input on sustainability surveys – family folder
   * sustainability strategy
   * children’s responses to why we turn the lights off
   * recycle bins
   * water from cups after lunch in the bucket to tip on the plants – toddlers/kindy

*Panel’s considerations*

1. The panel agreed the service has sustainable practices in its operation and that there was some evidence of parent input on sustainability. However, the panel noted that for an Exceeding rating, there needed to be evidence of consistent promotion of sustainable practices in the everyday program and of children being supported to continue their involvement in being environmentally responsible in the broader community.
2. The panel agreed there was limited evidence to show consistent promotion in the everyday program and information about how children are supported to extend their involvement into the broader community was missing.
3. On this basis, the panel confirmed the rating is 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 view***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:

* Educator to child ratios and qualifications are maintained at all times. All educators hold a relevant qualification with a ratio leader taking responsibility to monitor ratio checks throughout the day.
* The staffing arrangements require that some educators move around between the three care rooms to ensure that an overall ratio for the children is met alongside permanent room members. Educators are also employed to float across the centre to cover for lunch and breaks and to ensure that ratios are being met. There are also designated educators who have responsibility for opening and closing the centre.
* Each room has a team leader, with the educational leader (EL) based in the kindy room. The director also spends time working within the rooms. A leadership group has also been developed and includes the director, the room leaders, the early childhood teacher (ECT) and the EL.
* The majority of educators at the centre hold a diploma qualification or are working towards one. Other educators hold a Certificate III in Early Childhood Education and Care. Appropriate qualifications with regard to first aid, asthma and anaphylaxis training are held, ensuring a qualified staff member is on duty at all times.
* Organisational information is displayed in the entrance foyer for families and visitors to see detailing educator’s roles and responsibilities. This also details the certified supervisors for the day.

1. In its quality improvement notes, the regulatory authority recommended the service consider the arrangement and continuity of educators and how consistency of regular staff builds relationships with the children and their families and supports familiarity, trust and emotional wellbeing when complying with minimum ratio requirements.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not demonstrate how practices reflect an exceeding level. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report:
     + ‘Strategies are in place to ensure continuity of care for the children in the case of staff absence with additional shifts given to existing staff from the centre’.
     + ‘The staffing arrangements require that some educators move around between the three care rooms to ensure that an overall ratio for the children is met alongside permanent room members’.
   * The educators that move between rooms are the same each day in order to maintain consistency for the children, this also allows children to build trusting relationships with multiple educators throughout the service.
   * The service has 14 educators of which 12 work five days a week and the other two educators work four days a week. All educators are on set permanent shifts the same each day across the week.

*First tier review*

1. The provider submitted an educator daily plan as evidence

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report includes:
   * Educator to child ratios are maintained at all times. The service has a ratio leader who also checks throughout the day to make sure everyone is in the right rooms at the right times to maintain ratios and quality care. All team leaders are can assess educator to child ratios. The service maintains a minimum of 50 percent qualified workers in an operating day.
   * Staffing arrangements ensure continuity of care for children creating an environment that allows all educators to contribute to the learning and care environment for the children.
2. The provider submitted the following as evidence:
   * 2 x special authority to teach from the teacher’s registration board
   * daily plan with colour coordinated educators and qualifications
   * roster
   * ratio leader to support and work alongside CD and 2IC each day – a strength approach

*Panel’s considerations*

1. The panel noted the service is clearly meeting ratio and qualification requirements and satisfying the requirements for a Meeting rating. The panel considered if there was evidence to support an Exceeding rating and noted that for an Exceeding rating, it would need to see that the arrangement and organisation of educators contributes to a high quality learning and care environment for children.
2. The panel noted there was some mention of the arrangement and organisation of educators, but saw limited evidence about how this contributed to the learning and care environment. The panel considered it would expect to see critical analysis about the organisation of educators to show how this is done in a planned and purposeful and considered way to show that the organisation of educators leads to a high quality learning environment. In the absence of this evidence, the panel confirmed the rating for this standard is Meeting.

# Standard 6.1

1. Standard 6.1 is that:

Respectful and 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * There is an effective enrolment and orientation process that supports families and children as they begin attending the centre. The enrolment pack supports parents to understand what to expect from the centre and the partnership approach that educators encourage. The director spends time going through this pack and enrolment form with each family and help is available to translate for families if required.
   * Orientation usually consists of an initial visit offered for parents prior to enrolment followed by further visits for the child during transition, where the children's ability to settle is closely monitored and adjusted accordingly. Arrangements are negotiated with families to ensure that they feel fully involved and a primary carer can be offered initially to support the child to settle. A family orientation survey is also completed.
   * Families are offered a range of opportunities to be involved and contribute to centre decisions. For example, families are invited to the centre for special events such as information nights that are held every six months, regular feedback opportunities relating to the sensory room and sustainability. Refer to standard 3.3. Documentation was available that confirmed parents’ involvement in the review of the centre philosophy and policies. The director explained that parents are also consulted if new equipment or resources are to going to be purchased and about what parents would like to see at the centre. Aspects raised included: How often is my child checked when sleeping? Can there be more outdoor play and how is my child cared for when they are upset? The director said that families received responses in a variety of ways such as an individual chat or general circulation of information.
   * The entrance foyer is organised to display a range of information about the centre and community support services along with photographs of educators, centre policies currently under review and the EYLF. Information is also displayed with regard to the nominated supervisor, EL and the centre Quality Improvement Plan (QIP).
   * There is a parent’s notice board in each room with an invitation to families to share their views and make suggestions. Details of the program as well routines are also displayed together with photographs and reflections of children's participation and learning in activities which is recorded in a variety of books in each room along with displays featuring annotated photographs. The centre menu, children’s daily learning and reminders about forthcoming events are available in the entrance foyer.
   * Prescribed information was displayed for all families to view and included emergency evacuation procedures and plans, certificates of service and provider approval, contact details of the Regulatory Authority and grievance procedures.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not add to or strengthen evidence already considered by the regulatory authority. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report: ‘There is an effective enrolment and orientation process that supports families and children as they begin attending the centre’.
   * The orientation process for families consists of an initial tour of the centre and an information pack. The family is also provided with their own individual book about the room they are going into. These books are age specific and include what the room provides from a child’s perspective. The service holds follow up ‘play dates’ (orientation visits) before the child commences at the centre. On the child’s first day, the service calls the family to let them know how the child is going. The service provides the family with a first day observation, photos and a certificate. Over the next few weeks the service checks in with the families about how they are feeling (notes are recorded in the transition booklets in each room).
   * As stated in the report: ‘Families are offered a range of opportunities to be involved and contribute to centre decisions’.
   * Families are actively involved in the service decision making processes and are encouraged to significantly contribute through a variety of different methods that suit the individual needs of the families. For example, an email is sent to families about which photo companies they would like the service to use.
   * Feedback forms are available to families and there are note books in the foyer where families can provide feedback on the menu and the daily learning books for each room.
   * Through the program used at the service, a survey has been provided to the families asking what external services they would like the service to connect with to support their needs.
   * Families are provided with an opportunity to give feedback on the service’s vision, philosophy and purpose through feedback forms which are placed in their pockets and sent by email. The service displays new policies that are due to be reviewed and requests families provide feedback. The service releases surveys of likes, dislikes, strengths, interests and areas children are working on at home so that educators can include this information when planning for children. The service also holds information nights, morning teas and other nights/days for families to attend. Family feedback walls are located in each room, small books in the foyer and an online portal is also available for families to provide feedback.
   * Families are provided with a monthly newsletter outlining events, both within the community and the service. News from individual rooms and the service is also relayed.
   * Families are also provided with calendars outlining special events and important dates to remember. The service has created a book called ‘commonly asked questions about starting childcare’ which is a resource pack that helps families understand government requirements and provides some service specific information to support their transition into the centre.
   * Current information about the service is available to families on display in the rooms and all around the service, on the foyer black boards, in newsletters, through the daily learning, displays in frames on the walls, on the service’s website and readily available on request through verbal communication with educators.

*First tier review*

1. The provider submitted the following as evidence:
   * free to learn book
   * reflections
   * email to family about photos
   * feedback forms
   * program feedback form
   * letter to families about vision/purpose
   * newsletter
   * calendar of events
   * resource pack.

*Feedback to the draft report*

1. The provider submitted the following as evidence:
   * transition booklet
   * follow up phone calls with parents who have had a tour
   * email from family contributing ideas to the vision statement
   * family feedback regarding the vision, philosophy, image of child and the sensory room
   * family feedback about program
   * family feedback about sustainability
   * room surveys – in family folder
   * survey – contributing to the QIP – family folder
   * individual resource pack
   * program story PowerPoint slides
   * resources purchased for the sensory room
   * newsletters asking for feedback
   * small room picture books.

*Panel’s considerations*

1. The panel noted families are provided with a range of opportunities to be involved and are given opportunities to contribute to service decisions. The panel also considered there was evidence of communication and collaboration with families, which demonstrated aspects of Exceeding level practice.
2. However, the panel considered there was limited evidence of how families were offered opportunities to be ‘actively’ engaged and to ‘significantly’ contribute to service decisions, which might occur, for example, through parent advisory groups or other additional ways for families to have a significant and active influence on the service. The panel considered that while families were offered opportunities to be involved, evidence of significantly contributing to service decisions was limited. The panel confirmed the rating for this standard is Meeting.

# Standard 6.2

1. Standard 6.2 is that:

Families are supported in their parenting role and their values and beliefs about childrearing 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * Educators were observed engaging in conversation with families at arrival and collection times, sharing information about activities that have taken place and their child's day. For example, in the nursery room a parent was observed explaining to an educator their wishes around sleep routines now that their child was changing their sleep patterns at home. The educator confirmed that they would begin this new arrangement the next day and that they would let the parent know how things went. Another example was observed when an educator supported a family with their children when they arrived at the centre.
   * Educators gather information from families about their individual cultures and skills so that an understanding and appreciation can be developed and used to influence events that take place. Parent volunteers are encouraged to spend time at the centre with information evenings, morning tea and other events offered to encourage families to attend. Across the centre lists were sighted of the children's needs for various nappy creams, sleeping preferences, comforters and routine times.
   * Information about community services and different support services is available for families and displayed in the entrance foyer at the centre. This includes relevant health information with regard to immunisations, healthy eating and asthma. Contact details for other community organisations are displayed. Details about the EYLF and the NQS are also readily available.
   * The centre also accesses speech pathology and family support services via their involvement in a project with regular visits by these specialists to the centre who lease between educators and families. Families are offered information and supported to access services.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not add to or strengthen evidence already considered by the regulatory authority. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * The service actively seeks and values the expertise of families and families are invited to share in the decision making that affects their child. The service holds family nights where families and educators meet about the child’s development. Children’s observations include a space for parent comments which educators use to support further learning for the individual child. The service also uses newsletters, surveys, emails and feedback books which are kept in the foyer next to each room’s daily learning books. These combined enable families to share in the decision making for their child.
   * Children’s home routines are followed as much as possible at the service. The service’s environment has also been adapted to have a home like feel for children and families. All rooms have areas such as quiet areas, eating areas and construction areas. Home languages are displayed in the room and cultural books, dolls, musical instruments and puzzles from different countries are available. The service understands that the family knows the child best and seeks their input in as many areas as possible. The service’s philosophy reflects this practice. The philosophy states ‘we acknowledge and respect families as the first and foremost integral part of a child’s life therefore we truly value and respect their ideas, experience, beliefs and requests’.
   * Current information about community services and resources is provided to families in a variety of accessible forms. A pin board in the foyer is updated with community notices and information to support families to ensure the health and wellbeing of their children. Current information is available to families about community services, parenting and family wellbeing. This information is kept in the foyer in folders and booklets made by the service. The service is linked to many organisations within the community that support families. The service also makes available folders of pamphlets, bound books of information and notice boards.

*First tier review*

1. The provider submitted the following as evidence:
   * parent and educator interview night
   * observations.

*Feedback to the draft report*

1. The provider submitted the following as evidence:
   * parent voice on the weekly plan
   * parent voice on observations
   * black board showing feedback has been followed up
   * family feedback portal
   * small books in front of daily learning – stapled to the daily learning
   * parent nights
   * emails, surveys
   * foodbank and its purpose.

*Panel’s considerations*

1. The panel noted that for an Exceeding rating, it would need to see evidence of families’ expertise being ‘actively sought and valued’ and contributing to the program through following up and implementing the expertise. The panel noted this was a two-step process involving hearing feedback and implementing it. The panel considered there was evidence of expertise being actively sought, but this was limited with regard to how it contributed to decision making about the program. The panel considered that for an Exceeding rating, families would need to ‘contribute’ to the program and that contributing is a higher bar than consulting and requires families be more involved.
2. The panel confirmed the rating is Meeting.

# Standard 7.1

1. Standard 7.1 is that:

Effective leadership promotes 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * There are well established governance arrangements in place at the centre that are part of structures of the approved provider. Information about the company and management structure of each centre is available for families on the approved provider’s website and are clearly identified in information given to families at enrolment and through information available at the centre.
   * Families are aware of the decisions that are made by the centre through notifications given via newsletters, email and on the website. Educators at the centre have a clear understanding of the decision making process and leadership team responsibilities with the director managing the daily organisational aspects of the centre.
   * An area manager is allocated to the centre in a supporting role for the director. The centre also has access to a range of support services such as human resources and finance personnel employed by the approved provider. Alongside these roles the director is also supported by a leadership group at the centre. This team includes the second in charge (2IC) and the EL.
   * There are systems in place that require monthly reporting from the service through the company structure, to the approved provider with regard to the centre’s operations. The director discussed the information that they supply to the area manager as part of these reports and how this provides reflection on practice at the centre on a regular basis.
   * The centre has a company induction program in place that all centres use with new educators. Educators complete a series of on-line training modules informing them about policies and procedures used at the centre and when possible visit prior to their first shift. The director also spends time with new educators inducting them. A checklist is used to ensure that procedures have been followed. A new educator explained to the authorised officer that they had felt very supported during their induction and how helpful existing educators had been.
   * Strategies are in place to ensure continuity of care for the children in the case of staff absence with additional shifts given to existing staff from the centre.
   * The educational leader (EL) is suitably qualified and experienced and has been in this role for approximately three months. A process has begun to be established across the centre where the EL can support and mentor leading educators in planning and delivery of the program with six hours per month allocated for programming time as well as a day per week supporting educators.
   * This support is focused on assessing the quality of programming with the centre director checking that programming has been completed. The EL explained that together with the director, a professional training session around planning has been delivered as well as individual visits to all rooms to talk with room leaders.
   * In the staff room, there is information displayed detailing ideas and explanation regarding the development of the program, with other supportive information that educators can reference to help them to develop their observational skills. There are room and educator incentives established such as rewards and certificates that acknowledge educator’s efforts.
   * All educators at the centre hold a current relevant history assessment. The director has strategies in place to trigger when relevant history assessments are about to expire.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not add to or strengthen evidence already considered by the regulatory authority. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report: ‘There are well established governance arrangements in place at the centre that are part of the approved provider’.
   * The organisation has well established governance arrangements and educators are provided with opportunities to give feedback when items are due to be reviewed. Items for review, such as service polices, are placed on the notice board and updated regularly. Families are encouraged to provide feedback that the service can forward on for them.
   * A comprehensive induction process for permanent educators and relief educators contributes to quality relationships and environments. This involves an orientation, engage booklet, policies, philosophy and vision review as well as centre standards and an overview of the programs the service is involved in. The Educational Leader, Centre Director or both spend time going through how programming and documentation is completed at the service.
   * The service uses an induction program for new educators which is also delivered in a modified format for returning to work educators. New educators are provided with regular check-in points to ensure that they are settling in to the service and are provided with time with the educational leader to help them understand the service’s programming. Each new educator is provided with a mentor during their transition into the service. Any updates to the program are communicated to all educators through the staff room notice board. When an educator returns from maternity leave, they review the staff booklet to ensure that they are aware of any changes.
   * Effective processes are in place to ensure continuity of educators at all times. The educators are well established, with most having been at the service for more than five years.
   * As stated in the report: ‘Strategies are in place to ensure continuity of care for the children in the case of staff absence with additional shifts given to existing staff from the centre’. When needing casual employees, the service uses a regular pool of educators who are familiar with the families and children.
   * Educators have been at the service for a long period of time and the service has a supportive team that works closely together to support weaknesses and draw on strengths. Room and individual educator incentives, such as rewards and congratulation certificates, ensure educators are thanked for their efforts and team work is supported.
   * The educational leader attends bi-monthly meetings with an early learning consultant and other educational leaders to support further learning and development in the NQS. The recent focus has been on embedding the practice guide.
   * The service has strong educators who are passionate about their work with children. The service has a ‘leadership square’ which meets as often as possible to discuss the service and its progress across all quality areas. The leadership team consists of the Centre Director, Educational Leader, second in charge and Early Childhood Teacher.
   * The service strives to position the right people in the right roles. The roster is designed to reflect the ‘circle of security’, with people in each room on the top and bottom half of the circle of security, so the service can provide high quality care for individual children by supporting children socially and emotionally.

*First tier review*

1. The provider submitted the following as evidence:
   * Newsletter

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report includes:

* all information required to be displayed under the National Regulations is displayed.

1. The provider submitted the following as evidence:

* engage books for all educators
* engage books done again for educators that go on maternity leave
* rosters leave requests
* leadership meeting minutes.

*Panel’s considerations*

1. The panel noted that some information in the assessment and rating report suggested elements of Exceeding level practice. For example, there are well established governance arrangements, the induction process is comprehensive and there is strong continuity of care provided.
2. The panel found there was limited evidence that governance arrangements were regularly reviewed, particularly at the service level, or how inductions contributed to sustained quality relationships and environments that facilitate children’s learning and development. The panel noted the service appeared to have a distributed leadership model but found there was limited information to show that this took the next step to establish high expectations for teaching and learning in the service. The panel noted the educational leader had been in the role for a short time and that the process has begun to be established.
3. While the service demonstrated some aspects of Exceeding, on balance the panel considered the service shows practice at the Meeting level.

# 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * Company philosophy is displayed alongside the centre’s philosophy which emphasises the centre's commitment to valuing every child and family. For example, the philosophy states ‘We understand every child is unique and learns in different ways’. Review includes consultation with families as well as educators during the process.
   * The organisation has a comprehensive performance appraisal and development plan process in place which is used across all centres. The regional manager undertakes discussion with the director, who has planned discussions with each educator including casual educators and support staff. The objectives and aims are identified to support educators with an opportunity to build on their skills and abilities as well as reflect job descriptions, EYLF and the NQS. Educators have three meetings per year and undertake self-reflection prior to these meetings.
   * Professional development opportunities for educators are identified with educators having opportunities to attend group and individual training. Currently staff are encouraged to develop an evidence folder to gather evidence of successes. This will be changing to an online system where educators will be able to access their plans and add additional information.
   * The QIP is displayed at the centre and readily available for families and educators. The process for updating is ongoing throughout the year with three monthly questionnaires for families. Educators contribute through discussion at staff meetings and by adding ideas or suggestions as they arise. The directors then collate actions together for final ratification by the approved provider before any amendments are adopted. Educators have also undertaken a self-assessment process in April 2016 against the NQS and as a result identified priorities for development that have been included into the QIP.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not add to or strengthen evidence already considered by the regulatory authority. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * The statement of philosophy is regularly reviewed by educators, staff and families and is consistently evident in all aspects of the service’s operations. Families have input into the statement. The philosophy is reflected through the service’s planning and documentation.
   * Before the service’s final philosophy and vision were agreed, families and educators provided feedback and several drafts were created. Educators are mindful of the philosophy when documenting children’s learning and use it as a guide when planning.
   * As stated in the report: ‘The organisation has a comprehensive performance appraisal and development plan process in place which is used across all centres’.
   * The service evaluates educators’ performance regularly. The educational leader assists educators in setting individual and room goals to support their learning around program and practice. The goals are reviewed with the educators and continued where required. In implementing the Practice Guide, educators set goals for their rooms and outline practice changes that they would like to embed. These goals are also evaluated regularly.
   * The performance of educators is documented and educators are developed with goals, strengths and possible improvements for future learning and performance improvement. The performance review process is implemented and reflected upon throughout the year with educators individually.
   * All educators, families and children contribute to the self-assessment process. Each room has a self-assessment book which outlines the standard and the educators answer the questions ‘what are we doing?’ and ‘what could we be doing?’. These books are brought to every staff meeting and discussed. This information is then placed in the QIP when needed.
   * Children are provided with the opportunity to provide feedback on the service’s QIP. Children’s feedback is gathered through conversations with children about the things they enjoy and things they would like to be different. Children’s comments are recorded on a children survey which is kept in the service’s family feedback folder. Some feedback is also displayed in speech bubbles around the kindy room.
   * A self-assessment is conducted annually. Strengths and areas of improvement are added to the QIP with progress notes across the year from each room using the small NQF booklets.

*First tier review*

1. The provider submitted the following as evidence:
   * children’s voice in the QIP

*Feedback to the draft report*

1. The provider submitted the following as evidence (Item 4):
   * philosophy review
   * report with development plan
   * NQF booklet evidence
   * self-assessment for the service booklet.

*Panel’s considerations*

1. The panel noted evidence the service’s philosophy is regularly reviewed with consultation with families. The panel saw the performance of educators is regularly reviewed through the broader provider implemented performance appraisal process. The panel noted self-assessment and quality improvement processes are in place with evidence in the assessment and rating report that families provide input and children’s voices are included in the service’s QIP.
2. The panel considered on balance the evidence supported a rating of Exceeding, but noted the service could further extend how the service’s philosophy could be ‘consistently evident’ in all aspects of the service’s operations.

# 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***

*Assessment and rating report*

1. In the assessment and rating report, the regulatory authority states:
   * The centre has an organised and effective administration system in place to ensure confidentiality, accuracy of record keeping and availability according to legislation. For example, all documentation was readily available, up to date and is regularly reviewed. There is a well-managed IT system with appropriate software in place that ensures computers are password protected. Access to some electronic documentation is restricted to nominated leadership staff. Educators all have access to the company intranet and portal.
   * Overall targets are set by the provider with the director taking responsibility for the day to day running of the centre and budgets. There is designated admin support two days per week supporting with aspects such as fees and filing.
   * The director and the EL confirmed their understanding with regard to notifications within specified time scales and the role of the Regulatory Authority with processes in place that involve the director and area manager reporting to the provider. Information is displayed with regard to required notifications and the centre's policy in relation to grievance and complaints. Information detailed shows how these will be addressed for staff and parents with information is also available to families in the parent handbook.
   * The centre has documented policies and procedures which are available at the centre at all times. Families are encouraged to contribute to a central policy review which is undertaken nationally by newsletter and during face to face discussion with comments recorded by educators. A notice is also displayed detailing which polices are currently being reviewed. Policy amendments are ratified generically by the provider’s policy team.

*First tier review and response to draft report*

1. The regulatory authority considered the information submitted by the provider in response to the draft report did not add to or strengthen evidence already considered by the regulatory authority. At first tier review the regulatory authority determined the evidence supported a rating of Meeting.

***Approved provider’s view***

*Second tier review*

1. At second tier review, the provider submitted:
   * As stated in the report: ‘The centre has an organised and effective administration system in place to ensure confidentiality, accuracy of record keeping and availability according to legislation’.
   * Records and information are regularly reviewed. Archiving is completed as required by the regulations each year and only the required documents are left on premises as per the provider’s archiving procedure.
   * The service has shared leadership roles to support the effective operation of the service. The director has created a ‘code red’ book that outlines step by step instructions of important operations in her absence. The director has created a table to outline each day’s work to ensure that nothing is missed.
   * The centre director has introduced the ‘no triangles’ approach after attending training with the area manager. The approach involves educators talking to the source of the issue and having open communication which works effectively within the service. The director has an open door policy and makes time for private conversations in a safe space. Agreed actions are set in these meetings with further follow up meetings where required.
   * Educators are aware of the service’s policies and procedures and are notified when policies are due to be reviewed through the internal intranet, their personal email and the notice board in the staff room. Educators can give their feedback to the centre director to pass on to the editor of the policies or they can email their feedback directly to the editor. Families are also notified of these reviews and family feedback is requested.

*First tier review*

1. The provider submitted the following as evidence:
   * contents page of service procedure book
   * schedule of tasks.

*Feedback to the draft report*

1. Additional information submitted by the provider in response to the draft report include:
   * The QIP is displayed at the service and is readily available for families and educators. The QIP is updated on an ongoing basis with three-monthly questionnaires for families. Educators contribute through discussion at staff meetings and by adding ideas or suggestions as they arise. The directors collate action which is approved by the provider before any amendments are adopted. In April 2016, educators also undertook a self-assessment process against the NQS and, as a result, identified priorities for development that have been included in the QIP.
2. The provider submitted the following as evidence:
   * staff meeting minutes
   * self-assessment booklet April 2016
   * grievance and complaints procedure
   * family feedback portal.

*Panel’s considerations*

1. The panel noted the assessment and rating report showed documentation is regularly reviewed. The panel also considered administrative systems were well managed. However, the panel considered the evidence presented for the most part demonstrated Meeting level practice.
2. The panel confirmed the rating is Meeting.

1. *Text is underlined where the Exceeding descriptor is different to the Meeting descriptor.* [↑](#footnote-ref-1)