

[REDACTED] 2021

Decision Notice

Panel members

[REDACTED]
[REDACTED]
[REDACTED]

Panel date

[REDACTED] 2021

Applicant

[REDACTED] on behalf of [REDACTED]
[REDACTED]

Regulatory Authority

Queensland Department of Education

Decision:

The Ratings Review Panel confirmed all ratings under review as follows:

- **Quality Area 1: Working Towards NQS**
 - Standard 1.1: Working Towards NQS
 - Element 1.1.1: Not met
 - Element 1.1.3: Not met
 - Standard 1.3: Working Towards NQS
 - Element 1.3.1: Not Met
 - Element 1.3.2: Not met
- **Quality Area 2: Working Towards NQS**
 - Standard 2.2: Working Towards NQS
 - Element 2.2.1: Not met
 - Element 2.2.2: Not met
- **Quality Area 5: Working Towards NQS**
 - Standard 5.2: Working Towards NQS
 - Element 5.2.2: Not met
- **Quality area 6: Working Towards NQS**
 - Standard 6.2: Working Towards NQS
 - Element 6.2.2: Not met
- **Quality Area 7: Working Towards NQS**
 - Standard 7.2 – Working Towards NQS
 - Element 7.2.2: Not met

The overall rating for the service was confirmed as Working Towards NQS

Issues

1. The approved provider (the provider) applied for a review of the ratings for the above standards and elements 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
(s 144(3)(b) of the *National Law*)

Overview

2. After initial assessment, the draft report recorded the service's rating as Working Towards NQS. Following feedback on the draft report submitted by the service, elements 3.1.2 and 7.1.2 were amended to met, and therefore standards 3.1 and 7.1 were amended to Meeting NQS.
3. Further amendments were made at first tier review, where a further six elements were amended to met, resulting in three standards being amended from Working Towards NQS to Meeting NQS. At second tier review, the service sought to have nine remaining elements amended to met, which would result in six standards being amended from Working Towards NQS to Meeting NQS. The service's current ratings are set out below. Areas not under review at second tier are in grey text:

Quality Area 1: Working Towards NQS

Standard 1.1: Working Towards NQS

Element 1.1.1: Not met

Element 1.1.2: Met

Element 1.1.3: Not met

Standard 1.2: Meeting NQS

All elements met at assessment and rating

Standard 1.3: Working Towards NQS

Element 1.3.1: Not met

Element 1.3.2: Not met

Element 1.3.3: Met

Quality Area 2: Working Towards NQS

Standard 2.1: Meeting NQS

Standard 2.2: Working Towards NQS

Element 2.2.1: Not met

Element 2.2.2: Not met

Element 2.2.3: Met

Quality Area 3: Meeting NQS

Standard 3.1 and 3.2 rated Meeting NQS at assessment and rating

Quality Area 4: Meeting NQS

Standard 4.1 rated Meeting NQS following first tier review

Standard 4.2 rated Meeting NQS at assessment and rating

Quality Area 5: Working Towards NQS

Standard 5.1 rated Meeting NQS following first tier review

Standard 5.1: Working Towards NQS

Element 5.2.1: Met

Element 5.2.2: Not met

Quality Area 6: Working Towards NQS

Standard 6.1 rated Meeting NQS at assessment and rating

Standard 6.2: Working Towards NQS

Element 6.2.1: Met

Element 6.2.2: Not met

Element 6.2.3: Met

Quality Area 7: Working Towards NQS

Standard 7.1 rated Meeting NQS at assessment and rating

Standard 7.2: Working Towards NQS

Element 7.2.1: Met

Element 7.2.2: Not met

Element 7.2.3: Met

Evidence summary

4. The panel considered all the evidence submitted by the provider and the regulatory authority. This included:
 - The application for second tier review and its attachments
 - The application for first tier review and its attachments
 - The regulatory authority's submissions to second tier review

- The regulatory authority's decision at first tier review
 - The assessment and rating instruments and the draft and final reports
 - The service's feedback to the draft report
 - The authorised officer's response to the service's feedback
5. The panel was also provided with advice from ACECQA on the areas under review.

The law

6. Section 151(1) of the *Education and Care Services National Law Act 2020* (the National Law) 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'

The facts

7. [REDACTED] is a long day care service with [REDACTED] approved places. The service is based in [REDACTED] Queensland.
8. The assessment and rating visit took place on [REDACTED] 2020.
9. The provider received the draft report on [REDACTED] 2020, with a draft rating of Working Towards NQS. The provider supplied feedback on [REDACTED] 2020.
10. The provider received the final report on [REDACTED] 2020. While some changes to ratings were made in response to feedback on the draft report, the overall rating for the service remained Working Towards NQS.
11. The provider applied for first tier review by the regulatory authority. The regulatory authority made some changes to ratings, however the overall rating for the service remained Working Towards NQS. The provider received the first tier review decision on [REDACTED] [REDACTED] 2020.
12. The provider applied for second tier review on [REDACTED] 2020.
13. The second tier review decision was made on [REDACTED] 2021

Items for review by Ratings Review Panel at second tier review:

Standard 1.1

14. Standard 1.1 is:

The educational program enhances each child's learning and development

Standard 1.1: Assessment and rating

15. The regulatory authority assessed the service as Working Towards NQS for Standard 1.1. Elements 1.1.1 and 1.1.3 were not met.
16. In the notes and evidence collected by the authorised officer during the visit, the following is set out in relation to Standard 1.1:

Eds support children to prepare their beds for rest time. Positive language and scaffolding is used to guide skill level.

Eds sit with children on the floor and engage in interests, for example educators talk about trucks and cars and the noises they make.

██████████
Lead ed keeps a reflective journal about children's interests and participation in the program. This helps to inform the planning and focus on children's interests when creating opportunities for learning and development.

Example, child talking about going to the basketball, educator provides basketballs for practicing ball skills

Separation in the morning – ed introduced a roll system to children to identify their photo and place it on the attendee record for the day, ed commented that this enables parents to engage in language development and identify with their children

Creating activities based on previous knowledge of children's likes, interests and abilities (ed has moved up to the room with the children)

Eds encourage children to set up the outdoor environment prior to transitioning inside

Transition Talking about transition and packing up and singing – toddlers

Nappy change - barrier method and gloves are worn. Limited interaction with child during nappy change, nappy changes have a sense of urgency and rushing.

Educators in 15 months to 2 years age group sit with children during meal times - meal times are relaxed, calm and allow for learning opportunities through conversation and role modelling.

Morning tea in Toddlers 1 - 3 educators - children all share bowls and food and throw food and bowls and spoons on the floor. Educators do not sit with children as they are busy getting things from the kitchen and picking up food off the floor.

Children walking on beds as they are waiting for instruction from educators who are changing nappies, preparing the food tables for lunch and preparing food in the food prep area. A child tripped over while walking on the beds and jumping from one to another. - 15 minutes into it an educator notices and asks the child not to climb on the beds. No follow up is attempted with the children.

Three children involved in group play with dolls. Uninterrupted by educators and children are able to manage the play.

20 mins of unstructured play ends with educator led playdough activity. Children are assisted to pack up the resources in the room.

Food delivered to room at 11.23am

Food is put into smaller bowls and children are encouraged to service their own food

Children eat food at 11.40am

██████████ transition from group time to make beds is staggered (5 children at a time to make beds) remains children engage in singing with educator on the mat. 2 educators support children making beds,

Educators scaffold children's skills in making their beds, 'can you find the corners of the sheet?' And celebrate success when achieved.

██████████ Children line up at 11.34am to prepare to wash hands. 2 children wash hands at a time.

2 mins into lining up, educators leads a follow the actions game. "

Infants individual routines are displayed in the lockers, stating times of usual arrival , breakfast, sleep times and other relevant information for their day.

██████████ children engage with table top activities on the verandah space while others in the group are resting and sleeping on beds in the room

██████████

Transition to pack away the room and get ready for afternoon tea. Children are not sure what is happening.

Group time. Child kicking another child, unnoticed by 2 educators who are in direct area.

██████████

All children move to the locker area to collect hats in a group. Crowded, children pushing each other. Educator is unable to scaffold children's learning and agency as the area is crowded and educator stops to talk to a child individually about a separate topic.

██████████

After collecting their hats, children sit on a mat with one educator while they wait for their peers to collect their hats and join them on the mat.

Lead educator asks another educator to instruct the children to wash their hands. Children are wondering around the room, instructions are unclear.

17. In the draft report, the authorised officer recorded the following in relation to Standard 1.1:

APPROVED LEARNING FRAMEWORK [1.1.1 – Not met]

Educators gathered information about children's interests, learning and development including photographs, jottings and written records of children's communication with peers and educators.

The service took a collaborative approach to organising the planned learning focus for children. This consisted of a focus on a specific outcome, principle and practice of the Early Years Learning Framework for a period of approximately 10 weeks, this was in line with the

The Early Years Learning Framework was used within the program to make links to teaching and learning opportunities.

However:

Documentation of planning for some children and groups of children did not represent each child's individual development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators. A Compliance Notice was issued in relation to Section of the Education and Care Services National Law, details of the compliance is documented in the compliance notes section of this report.

Planning was inconsistent in relation to documenting children's displayed learning. For example, an observation of a child indicated that the child drew a picture of their family and used various colours to make the pictures. This observation was linked to two areas of the Early Years Learning Framework; however the actual learning taking place was not made clear and the observation was not used to inform future planning.

The Educational Leader explained that children entering the service throughout the year would join the focus area of the program at the time of enrolment. Therefore opportunities for children to practice skills and gain knowledge needed for specific learning outcomes may not be presented to children.

CHILD-CENTRED [1.1.2 – Met]

Educators used a range of strategies to learn about and gather information about children from their families. For example, educators in the room used blackboards displayed in the rooms to gather information from families about their children, including 'what is your child interested in at home?' and "what would you like to see your child focus on in regards to their development?'

Children contributed to play experiences based on their interests and ideas. For example, an educator in the room explained that experiences were set up to consider children's current interests and experiences, such as children attending a basketball game with their family and educators setting up a basketball experience for the children to extend their learning.

PROGRAM LEARNING OPPORTUNITIES [1.1.3 – Not met]

Educators and children engaged in communication and singing during routine transition times. For example, educators made use of singing to engage children in the routine task of

packing away resources, children were familiar with the task and joined in with singing while completing the packing away.

Children were afforded opportunities to share learning experiences through play, interact with peers and engage in a range of social and independent skill development.

However:

In some rooms educators completed daily cleaning and organising tasks while children were eating, and at times limited interaction occurred during nappy changes, therefore learning opportunities during daily tasks were not afforded to all children.

The organisation of some programs and routines did not support each child's learning. For example, during transitions to meal times and rest times, children were observed waiting for instructions from educators, educators appeared unsure of the regular routines and children were guided to complete tasks such as hand washing and collecting hats as a group, by lining up and waiting which created crowded areas and did not maximise the learning opportunities for each child.

Opportunities for children to engage in unstructured play throughout the day were presented in limited periods. Educator planned experiences and daily routine tasks impacted on children's ability to experience large amounts of uninterrupted play. For example, children were provided a short period of time of unstructured play prior to educators guiding the children to tidy up the room and participate in a guided play dough activity, this included educators guiding children to pack away resources that children had begun their engagement with five minutes prior.

Standard 1.1: Provider's feedback on the draft report

18. The provider submitted a response to the draft report in relation to Standard 1.1 in the form of a letter addressing Quality Area 1 in general. The letter stated:

"We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report. We strongly believe that the service is at least meeting all Quality Standards.

19. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence items. In relation to Standard 1.1, Element 1.1.1, the table set out the following:

"We believe we are meeting this standard because the Service follows all educational program and practice requirements. Curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators

At the time of the visit planning was provided from one room. However, if you look at a wider sample, we believe you will see that this evidences that our documentation for all

children represents their individual development outcomes. For example, the [REDACTED] project was planned with the direct intention of helping children learn about themselves, their families, their peers, and their community.

Children's interests and ideas are evident in all documentation. At the point of enrolment, the Service gathers detailed information about the needs and interests of each child. Page [REDACTED] of the Child Enrolment Form provides parents with the opportunity to share additional information regarding their child's routines. This information is then shared with the child's Educator before they enter the Service.

The compliance notice issued in relation to Section [REDACTED] of the Education and Care Services National Law has since been confirmed by you that this area is remedied. We believe that you were satisfied that the evidence we provided in this response evidenced that we were meeting this element of the standard at the time of the service visit.

Children commenced term one week one in their new learning spaces the week commencing [REDACTED] 2020. The focus for all rooms over the next 2 weeks was to develop relationships with their new team and children.

The week of Assessment and Rating many children had only attended for an average of 1 -2 days in their new learning spaces. All learning spaces had been prepared for term 1, learning displays from 2019 had been removed in readiness for the new term. This provided children and educators with the opportunity to create a learning space that reflected their identities and promoted inclusion and participation of all children.

Many of our children take extended leave over the [REDACTED] holiday period; returning to care in the beginning of term one. This also added another element to the transition period where returning children were revisiting / rebuilding relationships with familiar educators and new educators in their 2020 learning spaces after a period of absences from the Service.

A large majority of our educators work consistently throughout the year and take extended leave when occupancy is generally lower through the [REDACTED] period. Staff come from a variety of backgrounds and some require extended leave to travel to their home countries. Their return to the centre requires them to also reconnect with their peers and children existing and new. We did not return to full staffing capacity until the week of the [REDACTED] 2020 – Assessment and Rating week.

20. In relation to Standard 1.1, Element 1.1.3, the table set out the following:

"We believe we are meeting this standard because all aspects of the program, including routines, are organised in ways that maximise opportunities for each child's learning.

In your draft Assessment and rating report you use the word 'some'. This does not represent the practice within the majority of rooms at the service.

The EYLF Outcome 3 stipulates that children develop a strong sense of wellbeing when Educators provide safe environments for them to learn and develop. As children develop their independence within the room i.e. self-feed it is inevitable spills of food and drink will occur and daily cleaning duties must be facilitated during meal times to create a safe environment for both children and educators. When Educators undertake general cleaning

duties during meal times and complete organizational tasks such as making beds, to make safe the room they are also role modelling skills for life, therefore creating further learning opportunities. When children develop a strong sense of identity within their new learning space they draw on these learning opportunities and offer their support to carry out child safe daily cleaning duties and organizational tasks demonstrating a sense of community as they contribute to their world and their personal health and wellbeing (EYLF – Outcome 2 – Children are connected with and contribute to their world/Outcome 3 – Children have a strong sense of wellbeing/Outcome 1 – Children have a strong sense of Identity)

At the time of the assessment and rating visit the children were [REDACTED] into the new [REDACTED] year transition period and were in the observation stage of developing their identity within the room.

We recognize that routines are an important part of every child's day, they provide a sense of predictability which creates feelings of safety and security, key factors in fostering a child's sense of Identity in their new learning environment. When children transition into new learning spaces, it becomes necessary for them to adjust to different ways of being which includes learning new routines and this is not something that can be rushed.

Educators need to trial various techniques, observe how the children respond and critically reflect on their success. This was evidenced within the Service's planning. The learning spaces can look unorganized and the children can appear unsure however this is an important part of the children's learning journey as they inform our Educators of their preferred learning styles through active participation.

The daily routine and program facilitate opportunities for unstructured free play, quiet activities and combined free supervised outdoor play. For example, in the [REDACTED] Room' over four hours of the day is dedicated to this with planned experiences making up just 1.5 hours of the day. Quiet activities and supervised outdoor play contribute to unstructured play."

Standard 1.1: Final report

21. No changes were made to the draft report following the provider's feedback.
22. The rating for Standard 1.1 following the final report remained Working Towards NQS.

Standard 1.1: First tier review

23. The Provider applied for first tier review, seeking to have the rating for Standard 1.1 amended to Meeting NQS.
24. At first tier review, the panel considered evidence gathered by the Authorised Officer at the assessment and rating visit (set out above at **paragraph 16**). The panel also considered the provider's submissions in feedback to the draft report (set out at **paragraph 18-20**)
25. In relation to Element 1.1.1, the panel's reasons for confirming the rating of not met were as follows:

"The evidence shows that the service implemented a [REDACTED] program' over the end of year period for up to [REDACTED] calendar weeks. During this [REDACTED] program', planning was inconsistent

and was not based on the Early Years Learning Framework. In the [REDACTED] program' it was not evident that curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators

Although planning for the remaining year was linked to the EYLF, to demonstrate met for this element, the service would need to show consistent practice of the use of the EYLF over time, throughout the service, and year-round. It is a fundamental expectation under the National Quality Framework that all children in an early childhood education and care setting benefit from an Approved Learning Framework. There must be a consistent focus on addressing developmental needs, interests and experiences of each child, while taking into account individual differences, regardless of [REDACTED]."

26. In relation to Element 1.1.3, the panel's reasons for confirming the rating of not met were as follows:

"The evidence showed that routines were not predictable and did not maximise children's learning. For example, children were expected to do the same thing at the same time and it was evident that children waited for long periods without engaging in play or interactions.

The reviewers note there was inconsistent practice across the service. In some rooms, it was demonstrated that routines were organised effectively, however in other rooms this was not demonstrated. It was evident that in these rooms, educator-planned experiences and daily routine tasks impacted on children's ability to experience opportunities for learning.

Evidence submitted to support the review included room routines. This evidence demonstrated that there is forethought about routines and planning of children's learning. However, the practices observed at the time of the visit did not maximise opportunities for each child's learning. For example:

- *Limited amount of unstructured play*
- *All children expected to pack up and participate in a group activity*
- *Educators participating in cleaning rather than interacting with children*
- *Limited interactions at nappy changes*
- *Children expected to do the same thing at the same time in transitions to meal and rest time*

27. Following first tier review, the rating for Standard 1.1 remained Working Towards NQS, as Elements 1.1.1 and 1.1.3 were Not Met.

Standard 1.1: Second tier review

28. At second tier review, the provider sought to have the rating for Element 1.1.1 and Element 1.1.3 amended to met, and the rating for Standard 1.1 amended to Meeting NQS.
29. In their second tier review application form, the provider made the following submission in relation to Element 1.1.1:

30. *"In our feedback we submitted [redacted] attachments to demonstrate that curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, well being, confidence as learners and effectiveness as communicators.*

These attachments are not referenced at all in the final report. The report instead references statements we made in our feedback. This is different to the pattern in the rest of the report where all attachments sent by us in our feedback are listed. We did reference the attachments as [redacted] so they may have overlooked these as supporting [redacted] however, in another part of the report we did the same and they referenced these.

Additionally, we have a confirmation from [redacted] the tool we used to send the first tier response, that the attachments were not downloaded. Therefore we suspect some of the sent information was not in fact reviewed.

Two days before the Assessment and Rating visit, all children were transitioning to their new rooms as it was the [redacted]. This vital fact was overlooked at the time of the visit and also in the feedback that we gave in our first tier review.

Furthermore, the compliance notice mentioned in this section of the report was remedied so we do not believe this should be used to determine the rating for this element

31. In relation to Element 1.1.3, the provider submitted the following:

The report states 'It is acknowledged that the evidence used to make a determination of element 1.1.3 as Not Met is based on observations of educator's interactions, organisation and actual practice in daily routines, rather than written routines and planned interactions'. We feel that a variety of evidence should be used to determine the final rating and that evidence provided in our QIP and tier 1 feedback were not considered.

We believe that Assessing Officer overlooked the detailed feedback given in our tier 1 feedback.

Standard 1.1: Second tier review decision

32. The panel began by discussing elements 1.1.1 and 1.1.3 together, and were in agreement that insufficient new or additional evidence (that was in existence at the time of assessment and rating) had been put forward by the provider to convince the panel that the decision of the first tier review panel should be altered. The panel noted that a lot of the examples of practice contained within the evidence were recent and not consistent, which was also reflected in the authorised officer's notes taken at the time of the visit.
33. The panel also noted that due to the recent nature of much of the evidence, it could not be considered as it was not all available to the authorised officer at the time of assessment and rating. The panel also observed that the evidence occasionally lacked specificity, for example, it was not possible to see how all aspects of the program, including routines, are organised in ways that maximise opportunities for *each* child's learning. In relation to

routines, the panel felt that what the service had described as free supervised play was actually evidence of a routine being imposed on children.

34. The panel noted the service's explanation that the visit occurred early in the year, as a reason for there being less evidence than usual or why some practices were not yet fully embedded. However the panel agreed that the time of year was not a reasonable justification for the EYLF being less evident in the program, and that this appeared to be evidence that the service was not yet meeting the standard in this area.
35. The panel discussed that the first tier review panel had already noted that there must be a consistent focus on addressing needs of each child while taking into account individual differences – regardless of the time of year, or whether it was a [REDACTED]. The panel agreed that not all children are new at any one time, nor were staff all new or inexperienced.
36. Lastly, the panel discussed that some of the strengths noted by the service in its Quality Improvement Plan were not directly related to the Elements under review for Standard 1.1. Additionally, the authorised officer's collected evidence showed little was available in some areas to reflect meeting practice for this Standard. The panel noted that documentation was in some cases not up to date, and there was inconsistency between rooms, nor was there evidence to show consistent implementation of a considered planning cycle understood by all staff across all rooms. An example cited by the panel related to a child who had shown interest in dolls – however there was no clear evidence that this interest was meaningfully investigated, and was addressed only at a surface level. The panel would have liked to have seen consideration of why the child found dolls interesting, what knowledge or skills this interest might suggest, and how these could be extended. The panel agreed that there was evidence that experiences or activities were implemented or recorded, but then follow up or revisiting of those ideas was generally done at a surface level, and did not extend on key ideas and themes.
37. The panel also considered that there were insufficient links with the service's philosophy in the evidence of the service's practice under Standard 1.1.
38. The panel agreed by consensus to confirm the rating for Elements 1.1.1 and 1.1.3 as not met, thus confirming the rating for Standard 1.1 and Quality Area 1 as Working Towards NQS.

Standard 1.3

39. Standard 1.3 is:

Educators and co-ordinators take a planned and reflective approach to implementing the program for each child

Standard 1.3: Assessment and rating

40. The regulatory authority assessed the service as Working Towards NQS for standard 1.3. Elements 1.3.1 and 1.3.2 were not met.

41. In the notes and evidence collected by the authorised officer during the visit, the following is set out in relation to Standard 1.3:

Children's portfolios displayed in the rooms are reflective of 2019 and some of 2018.

Children's portfolios are empty or contain last years observations.

██████████ - *children's ideas and thoughts are recorded by educators in a large book*

██████████ - *Children's portfolios contain information from previous 2 years*

Infants planning is based on observations of children's movements throughout the room, educators use maps of the room to document children's areas of interests and makes plans for intentional learning opportunities. For example, noticing that a child crawls to the light board area in the room often.

Families access information about the educational program through an online application titled ██████████ where educaotrs document observations of childrens interaction with thier environments and their participation in the program.

Educators share aspects of childrens day with families as they arrive to collect their children.

42. In the draft report the authorised officer set out the following in relation to Standard 1.3:

ASSESSMENT AND PLANNING CYCLE [1.3.1 – Not met]

Planning in the ██████████ room was based on observations and analysis of children's movements throughout the room, educators used maps of the room to document children's areas of interests and made plans for intentional learning opportunities based on analysis of children's demonstrated interests and skills. For example, educators analysed the learning displayed by a child to determine the child's use of senses and made plans to extend the child's learning and developmental stages through creating a sensory themed tummy time activity.

A variety of formats were used to summarise children's learning at the end of a focus areas, from the previous ten weeks. For example, a summary of development for ██████████ was developed for some children which included the skills and development that educators had observed in relation to physical development, social and emotional development, cognitive development and language development.

Children's learning was observed as individuals and in groups and documented by educators through the use of ██████████. Observations included aspects of what children can do and some of the skills required for such tasks.

However:

While group learning documentation focused on whole group learning in relation to specific learning outcomes of the Early Years Learning Framework, links to individual children's ideas and interests were not evident.

The cycle of planning was not evident in documentation, for example observations stated what children were observed doing, the questions or communication between children and educators and relevant links to the Early Years Learning Framework. No additional evidence suggested that children's learning was analysed to make plans for further learning,

implemented into the planning or reflected on. A Compliance Notice was issued in relation to Regulation [REDACTED] of the Education and Care Services National Regulations, details of the compliance is documented in the compliance section of this report.

Some educators had begun to document each child's learning and development through the use of individual plans, such plans were in the beginning stages of development and were not consistently produced for all children.

CRITICAL REFLECTION [1.3.2 – Not met]

Educators used a variety of methods to document children's comments and conversations and to record examples of children's skills. For example, educators in the [REDACTED] room documented children's ideas and comments during a planned self-portrait activity and educators in the [REDACTED] room used a journal to record moments of displayed learning, information about children and jottings about the day.

Information gathered through observations of children's learning was sometimes reflected on to inform future planning and learning opportunities for children. For example, educators in the [REDACTED] room used observations to reflect on and make changes to the design of the furniture and equipment in the room to meet the development stages and current interests of the children.

However:

Evidence of critical reflection within the program was not evident. For example, observations of children's involvement in the program was documented, however critical reflection of children's learning was not documented.

Guidance offered to educators through a planning resource titled [REDACTED] indicated that critical reflection was one of the key elements of the planning cycle, however no further guidance was offered to support educators understating of critical reflection.

INFORMATION FOR FAMILIES [1.3.3 – Met]

Information about the educational program was made available to families through an online application titled, [REDACTED] where educators documented observations of children's interactions with their environments and participation in the program.

Educators shared aspects of children's days with families as they arrived at the service to collect their children, this included routine information such as how long they slept for as well as spontaneous information about their child's learning and participation in the program throughout the day.

An overview of the current whole group term intentions in relation to planning for groups of children's learning and daily overviews of activities offered to children each day was sometimes displayed in the rooms for families. Educators used [REDACTED] to communicate the activities children had participated in, through the use of photographs and short sentences in daily and weekly summaries posted to [REDACTED]

Standard 1.3: Provider's feedback on the draft report

43. The provider submitted a response to the draft report in relation to Standard 1.1 in the form of a letter addressing Quality Area 1 in general. The letter stated:

"We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report. We strongly believe that the service is at least meeting all Quality Standards."

44. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence submitted with their feedback. In relation to Standard 1.1, Element 1.3.1, the table set out the following:

"We believe we are meeting this standard because each child's learning and development is evaluated as part of an ongoing cycle of observation, analysing learning, documentation, planning, implementation and reflection.

Children's interests and ideas are evident in all documentation. At the point of enrolment, the Service gathers detailed information about the needs and interests of each child. Page [REDACTED] of the Child Enrolment Form provides parents with the opportunity to share additional information regarding their child's routines. This information is then shared with the child's Educator before they enter the Service.

The cycle of planning is evident in all documentation. Observations are collected to demonstrate the individuality of the child. These are then analysed in relation to the learning outcomes of the approved learning framework so that the Educators are able to plan, implement and evaluate the effectiveness of the experience.

For the example given, the child's interest in 'baby dolls' is clearly observed, analysed, documented, planned for and reflected on.

Documentation is consistently produced for all children at the Service. We do not feel that a large enough sample was sighted on the day of the Assessment and Rating. Nor do we feel that the assessor understood or considered that all children were new to the rooms as the visit was undertaken two weeks [REDACTED]. Therefore, all individual learning plans were in the beginning stages of development as all children were new to the Educators and their new rooms.

The Compliance Notice issued in relation to Regulation [REDACTED] of the Education and Care Services National Regulations has since been noted as remedied in this area. Children's learning is heavily analysed and is then used to inform future plans for further learning. The Service's programming document clearly evidences this. The Educators also complete daily [REDACTED] entries which evidence a depth of reflective practice. They also have daily team [REDACTED] meeting's where the staff in the room share notes, reflecting on how the day's learning has gone. They also reflect on their physical environments during environment walks. This is all recorded and clearly evidenced. We do not feel that enough effort was made to ask for documents that evidence critical reflection or engage in professional discussions with our Educators on the day of the visit.

45. In relation to Standard 1.1, Element 1.3.2, the table sets out the following:

"We believe we are meeting this standard because Educators produce critical reflection on children's learning and development, both as individuals and in groups, which drives program planning and implementation

Critical Reflection is fully embedded to all aspects of the Service's practice, including the [REDACTED] Document.

Children's learning is heavily analysed and is then used to inform future plans for further learning. The Service's programing document clearly evidences this. The Educators also complete daily [REDACTED] entries which evidence a depth of reflective practice. They also have daily team [REDACTED] meeting's where the staff in the room share notes, reflecting on how the day's learning has gone. They also reflect on their physical environments during environment walks. This is all recorded and clearly evidenced. We do not feel that enough effort was made to ask for documents that evidence critical reflection or engage in professional discussions with our Educators on the day of the visit.

The Service regularly conduct training specifically on the subject of critical refection. This is noted in staff meeting agendas."

Standard 1.3: Final report

46. No changes were made to the draft report following the provider's feedback.
47. The rating for Standard 1.3 following the final report remained Working Towards NQS.

Standard 1.3: First tier review

48. The provider applied for first tier review, seeking to have the rating for Elements 1.3.1 and 1.3.2 amended to met and Standard 1.3 amended to Meeting NQS
49. At first tier review, the panel considered evidence gathered by the authorised officer at the assessment and rating visit (set out above at **paragraph 41**). The panel also considered the provider's submissions in feedback to the draft report (set out at **paragraph 43-45**).
50. In relation to Element 1.3.1, the panel's reasons for confirming the rating of not met were as follows:

"The evidence showed that the response to the compliance action was insufficient and therefore, the non-compliance still remains.

To support the application for review, a document was submitted that outlined a child's interest in baby dolls. This document did not sufficiently demonstrate that each child's learning and development is assessed or evaluated as part of an ongoing cycle of observation, analysing learning, documentation, planning, implementation and reflection

For Element 1.3.1, the application for review contained a number of statements about practices that were not supported by specific examples or evidence. For example the Approved Provider stated that children's interests and ideas are evidence in all documentation and that the cycle of planning is evidence in all documentation. Documentary evidence was not submitted in the first tier review to support these statements.

51. In relation to Element 1.3.2, the panel's reasons for confirming the rating of not met were as follows:

"The evidence showed that critical reflection was not being implemented consistently throughout the service. There was insufficient evidence to demonstrate that critical reflection drives program planning and implementation.

The feedback contained a number of statements about practices that were not supported by specific examples or evidence. For example, the Approved Provider stated that critical reflection is fully embedded to all aspects of the service practice and that children's learning is heavily analysed and is then used to inform future plans for further learning. Documentary evidence was not submitted in the first tier review to demonstrate these statements.

An example given with the application for review in support of Element 1.3.2 outlined that an educator visited another educator's room and did a reflection on what they believed was working and what needed changing. An [REDACTED] template was completed and submitted to support the review. Although this document could be used as a basis for starting critical reflection on the environment, no supporting documentation was submitted on what discussion occurred or what changes were implemented from this reflection. Furthermore, documentation submitted aligned more to reflection rather than critical reflection. For example, planning an experience from an observation would be classified as reflection rather than critical reflection. Additionally, a diary entry or daily journal describing a child's or children's experiences during the day would not demonstrate critical reflection.

The evidence showed that critical reflection notes and [REDACTED] were not completed effectively to demonstrate that critical reflection has taken place as part of the cycle of planning. It was not evident that there was close examination of all aspects of events and experiences from different perspectives, with a focus on implications for equity, inclusion and diversity. It was not evident that documentation submitted drives program planning and implementation.

Critical reflection helps educators to build on their knowledge and skills, identifying practice that can be continued as well as what might need to be improved or changed. It also helps educators to identify ways to improve opportunities for children's participation, learning and development.

52. The regulatory authority then referred to a guidance document on the ACECQA website which may be helpful to the service in further developing their understanding of critical reflection.
53. Following first tier review, the rating for Standard 1.3 remained Working Towards NQS, as Elements 1.3.1 and 1.3.2 were not met.

Standard 1.3: Second tier review

54. At second tier review, the provider sought to have Elements 1.3.1 and 1.3.2 amended to met, and Standard 1.3 amended to Meeting NQS.
55. In their second tier review application, the provider set out the following submissions in relation to Element 1.3.1:

Attachments submitted to support our tier 1 feedback for this element are again not referred to or listed. These include; [REDACTED] document, [REDACTED] entries and Critical Reflection showing a depth of reflective practice.

The [REDACTED] assessment clearly shows that children learning was documented.

We feel this information was overlooked in our tier 1 feedback and that there was a lack of effort to ask for documentation to evidence critical reflection and for the Assessing Officer to engage in professional dialogue with our Educators at the time of the visit.

The compliance notice mentioned in this section of the report was remedied, so we do not believe this should be used to determine the rating for this element

56. The provider set out the following submissions in relation to Element 1.3.2:

The feedback we provided for this element was described as 'insufficient' by the Assessing Officer in the final report.

However, we believe that critical Reflection is fully embedded to all aspects of the Service's practice, including the [REDACTED] Document.

Children's learning is heavily analysed and is then used to inform future plans for further learning. The Service's programing document clearly evidences this but was overlooked by the assessing officer.

The Educators also complete daily [REDACTED] entries which evidence a depth of reflective practice. They also have daily team [REDACTED] meeting's where the staff in the room share notes, reflecting on how the day's learning has gone. They also reflect on their physical environments during environment walks. This is all recorded and clearly evidenced.

We do not feel that enough effort was made to ask for documents that evidence critical reflection or engage in professional discussions with our Educators on the day of the visit.

The Service regularly conduct training specifically on the subject of critical reflection. This is noted in staff meeting agendas.

Standard 1.3: Second tier review decision

57. The panel's primary observation with evidence submitted for Standard 1.3 (Elements 1.3.1 and 1.3.2) was that it did not appear that the provider had taken into account the outcome of their first tier review in reframing or rethinking their evidence in such a way that would give the panel something further to consider. The panel observed that the service did not appear to have evidence of a leadership space where all educators had a voice and an ability to implement ideas and practices.
58. The panel also noted that the authorised officer appeared unable to observe and record much evidence in relation to this area, particularly for Element 1.3.2. Additionally, the service's evidence, which was intended to show critical reflection, consisted generally of short notes and brief examples, and content which was more appropriately described as feedback rather than critical reflection.

59. Evidence provided of the service's planning cycle was minimal, and the curriculum plan was not sufficiently developed and fairly minimal in demonstrating well developed practice in this area.
60. The panel agreed by consensus to confirm the rating of Elements 1.3.1 and 1.3.2 as not met, thus confirming the rating for Standard 1.3 and Quality Area 1 as Working Towards NQS.

Standard 2.2

61. Standard 2.2 is:

Each child is protected

Standard 2.2: Assessment and rating

62. The regulatory authority assessed the service as Working Towards NQS for Standard 2.2. Elements 2.2.1 and 2.2.2 were not met.
63. In the notes and evidence collected by the authorised officer during the visit, the following is set out in relation to Standard 2.2:

Teething gels for infants are recorded on a Long term medication for and labelled clearly in the fridge of the nursery.

Reheating food in the microwave and serving directly to children without temperature testing of food prior to serving to children.

Educators use their own guidance when serving food to children. Eg, serving food into smaller bowls and waiting 15 monies before giving to children and trying the food themselves before giving it to children

10.29- [REDACTED] Room

Children making beds, children are jumping and walking over beds, child trips and hits her shoulder on cupboard, is visually upset however educators is unable to understand why she is upset. Child continues to jump on bed and Lead educators spots her from the bathroom. Directs child to stop jumping on bed.

[REDACTED]

11.13am Lead educator is in the kitchen and assistant educator is seated with the children at the table, child in sleep room wakes in cot room. Assistant educator leaves table and goes into cot room and brings child out to have her nappy changed.. At this point no educator is in the immediate room with the children. One child is standing on a chair and falls off with the chair landing on her foot. Another child is able to grab the food from the child in the high chair and eat.

Educator supports a child to access a spare T-shirt to ensure sun safety.

Educators ensure supervision of children through the use of lanyards to ensure each area of the outdoor environment is adequately supervised during shared outdoor time.

Educators observed completing ratio checks with the name of each child marked off and the number of educators recorded.

Emergency evacuation maps displayed in rooms with policy.

Outdoor first aid kits

Reflection on child's medical conditions - reflections on how to ensure safety and maintain accountability for child with severe anaphylaxis to multiple triggers.

Fire extinguisher training

██████████

██████████ - emergency evacuation plans and exits

Rehearsals for evacuation and Lockdown

Lockdown procedure and where are the lock down places.

Dates of last 3 rehearsals for lockdowns

Dates of last 3 rehearsals for evacuations

Staff meeting minutes and attendance of staff on ██████████ 2020 for emergency staff meeting called to train staff on the newly developed procedure for evacuations from the building in the event of an emergency.

██████████ (12 months to 15 months)

Use of cot for evacuations??

Educators respond to children's injuries with appropriate first aid. Educator puts a band aid on a child's knee

Ed is ██████████ - no specific recent training on new procedures for evacuation. ██████████ ██████████ sought feedback from staff. Some issues with children with no shoes and needed to be carried and some consideration top the exit point for children in 2-3 years rooms as needed to walk over rocks to exit.

64. In the draft report, the authorised officer set out the following in relation to Standard 2.2:

SUPERVISION [2.2.1 – Not met]

Educators utilised risk assessments to prepare for and manage any increased risk with planned activities such as water play and cooking experiences.

Supervision plans were in place to guide educators to adequately supervise children.

Consideration to the large open, shared spaces in the outdoor environment were considered and managed through the use of a lanyard system which ensured each area of the outdoor environment was assigned to an educator, and actively supervised at all times.

Educators completed regular ratio checks with the name of each child marked off and the number of educators recorded.

Sun safety was discussed with children and implemented on a daily basis. Children had access to sunscreen at all times and educators reminded children to wear hats and sun safe shirts.

A range of processes were in place to ensure any persons entering the service building were known to staff and a record of visitors was maintained. Access to the service building was acquired through the use of an [REDACTED] system which was provided to all families and staff.

However:

Precautions were not taken to ensure food safety when reheating food for children. A Compliance Notice was issued for a breach of regulation [REDACTED]

During a transition to lunch where children were making beds, washing their hands, having their nappies changed and setting the tables under the supervision of three educators, children were observed jumping and walking over beds. A child became upset after tripping and hitting their shoulder on a cupboard; educators were unable to understand why the child was upset.

The child continued to jump on the beds, which was noticed by an educator who was in the food prep area of the room and who verbally instructed the child to stop jumping on the bed. Two educators in the room did not attempt to follow the educators led and guide the child's behaviour. The child continued jumping on the beds until lunch was placed on the table and the child sat at the table.

During a meal time in the [REDACTED] room, an educator was completing tasks in the kitchen and another educator was seated with children at the table. When a child in the sleep room woke, the educator left the table to attend to the child, including taking the child to the bathroom to change their nappy. Children were unattended at the table while eating and during this time a child, aged approximately 15 months of age fell from a chair after standing on it. Another child consumed a peer's food after taking it from the high chair tray. Educators responded to the child who fell from the chair and verbally asked the children to eat their own food.

INCIDENT AND EMERGENCY MANAGEMENT [2.2.2 – Not met]

All rooms throughout the service were equipped with a working telephone and a list of emergency numbers.

First aid kits were well maintained, stocked and clearly labelled.

Child enrolment records included all relevant health information, including medical management plans, risk minimisation plans and communication plans. Processes were in place to ensure children with identified medical conditions were supported and relevant health information was shared with educators to ensure each child's safety.

However:

On [REDACTED] 2020 a Verbal Instruction was offered to address non-compliance of Regulation [REDACTED] as a set of instructions was not displayed with the evacuation maps at each emergency exit. The Nominated Supervisor and [REDACTED] revealed that a

set of instructions were not developed as part of the services policies and procedures. The Authorised Officer instructed service leaders to have a set of emergency evacuation instructions prepared and displayed by [REDACTED] 2020. The development of a set of instructions to follow in the event of an emergency were developed and reviewed by the Authorised Officer, it was noted that the evacuation processes, did not consider the use of cots for children who could not walk, which was revealed as the services preferred method of assisting children who could not walk. The procedure listed all children to stand in a line and hold a rope to exit the service premises. This was amended on [REDACTED] 2020. Additional instruction was offered by the Authorised Officer to ensure that the procedures were communicated to educators and placed in a prominent position near each emergency exit.

At [REDACTED] 2020, the verbal instruction was not carried out. The Authorised Officer raised this with the Nominated Supervisor and [REDACTED] who advised that it had been completed and requested to display these at the emergency exits. A set of instructions for what to do in the event of an emergency requiring an evacuation and lock down were displayed at each emergency exit throughout the service.

Discussions with the [REDACTED] indicated that thought had not been given to creating a procedure for an emergency evacuation, as this had not been a requirement in other services managed by the [REDACTED].

Educators were not trained in the emergency evacuation and lock down procedures of the service. Some educators at the service had not been present at the service while planned rehearsals took place and therefore had not experienced an evacuation or lock down rehearsal in their time of employment.

Records indicated that an evacuation rehearsal did not take place for 12 months, with the most recent record available as evidence was dated [REDACTED] 2019. This was inclusive of a four month period of renovations at the service for the purposes of upgrading the outdoor area. When the Authorised Officer discussed a breach of regulation [REDACTED] of the National Education and Care Services Regulations, service leaders indicated that an emergency evacuation rehearsal was to be completed on [REDACTED], this being a day the Authorised Officer did not attend the service as part of the assessment and rating visit dates.

Records indicated that lock down rehearsals were not completed for an 8 month period from [REDACTED] 2019 to [REDACTED] 2019, in addition a rehearsal had not been completed for a period of 4 months from [REDACTED] 2019. In response to this, a lockdown rehearsal was completed on [REDACTED] 2020 and [REDACTED] 2020

Discussions with the [REDACTED] indicated that a process for scheduling and recording the scheduling of planned evacuation and lockdown rehearsals was not in place.

During conversations with educators following the evacuation rehearsal on [REDACTED] 2020, it was revealed that the layout of the furniture in the [REDACTED] room impeded on educators ability to maneuver the emergency evacuation cot from the back of the room to the exit door. An educator stated that they were required to stop and move two tables and some children's chairs to be able to move the cot through the environment.

A record of the emergency evacuation rehearsal which took place on [REDACTED] indicated that some reflective practice had been documented, however in conversation with the Nominated Supervisor it was revealed that the leadership at the service were pleased with educator's efforts to evacuate all children from the building in 13 minutes. The record indicated that it took 30 minutes to account for and assist all children to return to the building.

A compliance notice was issued for breaches of Regulation [REDACTED], details of the non-compliance is recorded in the compliance section of this report.

On [REDACTED] 2020, a verbal instruction was offered to address non-compliance of National Regulation [REDACTED] Premises, furniture and equipment to be safe, clean and in good repair. The intended evacuation path for use by educators and children on the [REDACTED] side of the building was obstructed by a range of gardening equipment. Through the verbal instruction, the Nominated Supervisor and the [REDACTED] cleared the gardening equipment from the path to create an unobstructed path for evacuation.

CHILD PROTECTION [2.2.3 – Met]

Educators were provided with information regarding child protection responsibilities through information provided in the induction process.

Educators were observed listening and responding to families' comments about their day-to-day observations of their child and the events occurring in their lives.

Standard 2.2: Provider's feedback on the draft report

65. The provider submitted a response to the draft report in relation to Standard 2.2 in the form of a letter addressing Quality Area 2 in general. The letter stated:

We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report.

We strongly believe that the Service is at least meeting all Quality Standards

66. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence submitted with their feedback. In relation to Standard 2.2, Element 2.2.1, the table set out the following:

We believe we are meeting this standard because, at all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

The Compliance Notice that was issued for a breach of regulation [REDACTED] has since been noted as being remedied.

We had robust procedures in place at the time of the visit to ensure food safety when reheating food. Since the visit, additional training was also provided to reiterate and communicate these procedures. This was evidenced in our compliance response.

The Service have many systems in place to ensure the safe supervision of children. These include the completion of [REDACTED] sheets, where Educators assess the risk of each individual child eg risk of biting another child and the high risk times within the classroom eg sleep or meal time.

The Service also track the number of incidents recorded each month in order to identify trends and implement training accordingly. It is important to know however that [REDACTED] are advocates of reporting incidents.

Whilst we acknowledge any accident, the example given in the report is not defined by ACECQA as a serious incident under regulation [REDACTED] so an incident report was not completed. Furthermore, under the Duty of Care, we would hope that that the assessor would have intervened if they felt the incident was serious.

67. In relation to Standard 2.2, Element 2.2.2, the table sets out the following:

We believe we are meeting this standard because plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

We have robust policies and procedures in place to ensure the effective management of emergencies. This includes the Service's requirement to display the policy, evacuation diagram and instructions.

We work in consultation with [REDACTED] to develop and implement all emergency evacuation processes.

We action feedback from external reports which inform the Service's Emergency Management Plan.

Previous emergency evacuations were conducted. The Service was granted a temporary waiver in relation to regulation [REDACTED] of the Education and Care Services National Regulations. The waiver covered the period of [REDACTED] 2019 – [REDACTED]. The waiver allowed the Service [REDACTED] [REDACTED]. Therefore, [REDACTED], it was not deemed safe for the Service to conduct evacuation rehearsals during this period. However, records were still kept on actual emergencies, resulting in evacuations.

Staff are trained at induction on work place health and safety, including fire evacuation. They are aware of and have been trained in the requirement to conduct rehearsals of the emergency and evacuation procedures and the documentation of these rehearsals. The [REDACTED] regularly schedules emergency evacuations, including lockdown, medical emergencies and fire evacuation rehearsals.

During the Assessment and Rating, the Service was asked by the Assessor for additional information relating to the Emergency Evacuation Policy and Procedure. The information being requested by the Assessor was already adequately documented, either in the Emergency Evacuation Policy or in the Procedure, however, this appears not to have been read or referred to by the Assessor. Additionally, it was also noted that the Assessor was requesting specific information to be created that had no clear link to or reference to the National Law and Regulations. These requests placed undue stress on the nominated

Supervisor, Second in Charge and [REDACTED]. Therefore, the Approved Provider requests that a review is to be conducted of the Assessment and Rating process, regarding the request for additional information that is not related to the National Law and Regulations.”

Standard 2.2: Final report

- 68. No changes were made to the draft report following the provider’s feedback.
- 69. The rating for Standard 2.2 following the final report remained Working Towards NQS.

Standard 2.2: First tier review

- 70. The provider applied for first tier review, seeking to have the rating for Elements 2.2.1 and 2.2.2 amended to met and the rating for Standard 2.2 amended to Meeting NQS.
- 71. At first tier review, the panel considered evidence gathered by the authorised officer at the assessment and rating visit (set out above at **paragraph 63**). The panel also considered the provider’s submissions in feedback to the draft report (set out at **paragraph 65-67**).
- 72. In relation to Element 2.2.1, the panel’s reasons for confirming the rating of not met were as follows:

“The evidence did not demonstrate that at all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard. This was evidenced when an educator left children who were 12-18 months of age unsupervised whilst eating.

The Guide to the national Quality Standard states that educators should be supervising children closely when they are in a situation that presents a higher risk of injury. This aligns to when children are eating.

The Royal children’s Hospital website states: babies and toddlers have small airways that are easily blocked. In addition, their reflexes are not well developed and their bodies are not very strong, so they may have difficulties getting themselves out of trouble. Children under the age of three years may not have their full set of teeth and can’t chew properly, so any food that is small and firm is a choking hazard. Ensure young children sit quietly while eating or drinking.

It is reasonable to expect that the staff in the [REDACTED] room would have systems in place to maintain adequate supervision at all times. For example, the educator in the kitchen area could have come out of the kitchen and supervised children while the other educator supported the child who woke up and required a nappy change.”

- 73. In relation to Element 2.2.2, the panel’s reasons for confirming the rating of not met were as follows

“Although the non-compliance for this element has been rectified, to demonstrate met for this element, the service would need to show a consistent practice of implementing emergency procedures over a period of time. It was evident that emergency procedures were not consistently practiced. There must be a consistent focus on practicing the legislated procedures frequently to ensure safety of children and educators. This is a serious matter

and could have devastating consequences if procedures are not followed. Children have a fundamental right to be protected and kept safe when they attend an education and care service.

It is important to reflect on the emergency procedures and ensure that all staff are aware of the procedures they are required to follow in an emergency.”

74. The regulatory authority then set out what would be expected in a service demonstrating that they had met Element 2.2.2 as per the *Guide to the NQF*.
75. Following first tier review, the rating for Standard 2.2 remained Working Towards NQS, as Elements 2.2.1 and 2.2.2 were not met.

Standard 2.2: Second tier review

76. At second tier review, the provider sought to have Elements 2.2.1 and 2.2.2 amended to met, and Standard 2.2 amended to Meeting NQS.
77. In their second tier review application, the provider made the following submission in relation to Element 2.2.1:

“At the time of the Assessment and Rating visit, an observation was made of one staff member who did not follow our robust procedures in relation to the safe serving of food. The evidence we provided in our tier 1 feedback regarding this being an isolated incident was not considered.”

78. In their second tier review application, the provider made the following submission in relation to Element 2.2.2:

“We believe we are meeting this standard because plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

We have robust policies and procedures in place to ensure the effective management of emergencies. This includes the Service’s requirement to display the policy, evacuation diagram and instructions.

We work in consultation with [REDACTED] to develop and implement all emergency evacuation processes.

We action feedback from external reports which inform the Service’s Emergency Management Plan.

Previous emergency evacuations were conducted. The Service was granted a temporary waiver in relation to regulation [REDACTED] of the Education and Care Services National Regulations. The waiver covered the period of [REDACTED] 2019 – [REDACTED]. The waiver allowed the Service [REDACTED]

[REDACTED] Therefore, [REDACTED] it was not deemed safe for the Service to conduct evacuation rehearsals during this period. However, records were still kept on actual emergencies, resulting in evacuations.

Staff are trained at induction on work place health and safety, including fire evacuation. They are aware of and have been trained in the requirement to conduct rehearsals of the

emergency and evacuation procedures and the documentation of these rehearsals. The [REDACTED] regularly schedules emergency evacuations, including lockdown, medical emergencies and fire evacuation rehearsals.

During the Assessment and Rating, the Service was asked by the Assessor for additional information relating to the Emergency Evacuation Policy and Procedure. The information being requested by the Assessor was already adequately documented, either in the Emergency Evacuation Policy or in the Procedure, however, this appears not to have been read or referred to by the Assessor. Additionally, it was also noted that the Assessor was requesting specific information to be created that had no clear link to or reference to the National Law and Regulations. These requests placed undue stress on the nominated Supervisor, Second in Charge and [REDACTED]. Therefore, the Approved Provider requests that a review is to be conducted of the Assessment and Rating process, regarding the request for additional information that is not related to the National Law and Regulations.

Standard 2.2: Second tier review decision

79. The panel discussed the evidence collected by the authorised officer, and agreed that it showed examples of poor supervision practice, and also noted the evidence around poor microwave use. Additional evidence provided included room supervision summaries, however these were not dated, and provided an example from one room which the panel felt was insufficient to justify a change of rating, particularly in the context of such a large service with many rooms operating. Other evidence such as data on incident reporting was not contextualised nor any analysis provided – the panel would have liked to have seen engagement with this data including information about what was learned from it, how the information was used, or what changes were made based on the data. The panel noted that though some of this evidence included the word “analysis” there was no analysis provided.
80. In relation to Element 2.2.2 the panel was pleased to see that the service uses an emergency manual, but noted that the external consultants who participated in the development of this resource appeared to be others working within the larger organisation, not independent authorities on the various aspects of emergency management. Additionally, evidence of an audit showed that this was completed two days before the visit, and there was no further evidence of consistent audits happening over time. Evidence of evacuation rehearsals also showed inconsistency, and the panel noted that one rehearsal occurred on a day between assessment and rating visits, while the previous one occurred four months earlier.
81. The panel acknowledged that the service had checklists in place but felt that evidence of effective systems was absent, which are required to promote safety and protection of all children. It was not clear to the panel that emergency and incident management systems were reliably established and able to be executed effectively regardless of which staff were present on any given day. There was also limited, clear evidence to show that children were active participants in ensuring safety in the environment, and the panel noted the wide range of ages at the service. Another concern raised by the panel, noting the large size of

the service, was that often evidence under this Standard was in the form of an example from one room and the service could not extrapolate from this any information about the broader service and practices which may be in place in other rooms.

82. A further factor of concern for the panel was the evidence around the waiver currently in place in relation to [REDACTED] and the service's decision not to conduct evacuation rehearsals during this time. However, the panel noted that the waiver did not exempt the service from conducting evacuation rehearsals, and approval of the waiver did not bring with it any reduced emergency management requirements. Although the service had determined that [REDACTED] made evacuation rehearsals unsafe, the panel noted that it would have been appropriate to revise the evacuation procedure to take into account the [REDACTED], and this revised emergency plan would need to have been the subject of rehearsals. The panel was concerned about what may have occurred if an emergency had occurred during the time that the [REDACTED] waiver was in place.
83. The panel decided by consensus to confirm Elements 2.2.1 and 2.2.2 as not met, therefore confirming Standard 2.2 and Quality Area 2 as Working Towards NQS.

Standard 5.2

84. Standard 5.2 is:

Each child is supported to build and maintain sensitive and responsive relationships

Standard 5.2: Assessment and rating

85. The regulatory authority assessed the service as Working Towards NQS for Standard 5.2. Elements 5.2.1 and 5.2.2 were not met.

[ACECQA notes that element 5.2.1 was amended to met at first tier review, and is not included in the advice below.]

86. In the notes and evidence collected by the authorised officer during the visit (**item 02**), the following is set out in relation to Standard 5.2:

Scaffolding childrens behaviour- what do we do if we want to talk in the group? - We raise our hands don't we?

Educator calls across the room to guide a child's behaviour

Educators move around the outdoor environment responding the children's play and scaffolding involvement in groups as needed. For example, a group of children riding the bikes, one child stopped and the remaining children couldn't get through. Educator guided children to keep the line moving.

Educator is observed carrying a child and sitting with a child on there lap for extended periods of time, when the child is left to walk around the room and act independently, he appears to show behaviours that are undesirable and educators appear unsure how to manage the child behaviour and react by picking the child up and carrying them again.

10.51am

Educator and child engaged in play in home corner, educator encourages child to engage in play with other children. Children are playing with babies and cots and child becomes upset about other children being present. Educator talks to the child and asks her to play nicely with her friends and to share the dolls. Child cries briefly and reacts when another child take her doll away. The educator reacts and tells the child to stop screaming and to use her words. After approx. 2 minutes Lead Educator redirects child's behaviour by handing her a spare doll that was not being used.

Educator responds to a child who has knocked a peers construction creation over. Ed asks child to say sorry and explains that the peer spent a long time making it. Ed then walks away to continue supervising from the room entry towards the verandah.

Child is supported to manage emotions after becoming involved in a disagreement with a peer. Educators support child to understand others point of view and to wash face as a calming technique.

87. In the draft report, the authorised officer set out the following in relation to Standard 5.2, Element 5.2.2:

SELF-REGULATION [5.2.2 – Not met]

Educators used teachable moments to guide children's understanding of socially acceptable behaviour and courtesy for others. For example, an educator responded to a group of children who were using the bike path after two children stopped to help each other put helmets on, causing a blocked path for the other children to get through. An educator approached the group and guided the children to make a decision to move to the side of the path to assist with putting helmets on and allow the other children to get through.

However:

Children's developing skills to self-regulate and act in independently were not supported by educators. For example, educators carried a child and sat with a child on their lap for extended periods of time. At times when the child was not sitting on an educators lap, educators responded to signs of distress and at times, behaviours which were not in line with the routine, by picking the child up and carrying them again.

Educators missed opportunities for children to learn skills required for self-regulation. For example, when a child became upset about other children being present and engaging with resources in close proximity, an educator asked the child to play nicely with their friends and to share the dolls. The child responded by becoming upset and reacted when another child took the doll from them. The educator told the child to stop screaming and to use their words. After approximately two minutes another educator approached the child to hand them a spare doll that was not being used.

Standard 5.2: Provider's feedback on the draft report

88. The provider submitted a response to the draft report in relation to Standard 5.2 in the form of a letter addressing Quality Area 5 in general. The letter stated:

We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report.

We strongly believe that the Service is at least meeting all Quality Standards

89. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence submitted with their feedback. In relation to Standard 5.2, Element 5.2.2, the table set out the following:

"We believe we are meeting this standard because each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

We trust that our Educators know the children very well. They use a variety of information sources to provide care for each child, including verbal conversations with families at drop off times. In the example given, the Educators may have received information regarding the state of the child's emotional or physical wellbeing that led them to adapt their practice to make the child feel reassured. Whilst placing children on laps or carrying them is not a huge part of our daily practice, it is sometimes necessary in order to help the child self regulate for example when they are feeling poorly or distressed.

There is no set rule for addressing issues of self regulation. Again, we trust our Educators to know how to respond to each individual child. This particular child may have a personal development target to use their words to help them progress with their emotional development."

Standard 5.2: Final report

90. No changes were made to the draft report following the provider's feedback.
91. The rating for standard 5.2 following the final report remained Working Towards NQS, as Element 5.2.2 was not met.

Standard 5.2: First tier review

92. The provider applied for first tier review, seeking to have the rating for Element 5.2.2 amended to met, and the rating for Standard 5.2 amended to Meeting NQS.
93. At first tier review, the panel considered evidence gathered by the authorised officer at the assessment and rating visit (set out above at **paragraph 86**). The panel also considered the provider's submissions in feedback to the draft report (set out at **paragraph 88-89**).
94. In relation to Element 5.2.2, the panel's reasons for confirming the rating of not met were as follows:

"In relation to the observation of a child being carried and placed on educator's laps for extended periods of time, the reviewers identified that this may have hindered the child from interacting and exploring the environment. Developing effective relationships with others is a key part of children's social development and these relationships also provide a base for children's learning. The reviewer has also considered the explanation provided for this

behaviour ('...the Educators may have received information regarding the state of the child's emotional or physical wellbeing that led them to adapt their practice to make the child feel reassured'); however without evidence supporting this statement, or more specific explanatory information such as a documented behaviour guidance plan, the reviewer considers that this child has not been adequately supported to self-regulate.

It is reasonable to expect that a service which could not allow a child to safely interact with others would have a documented plan, or detailed approach, for how that child would be progressively supported over time to develop the self-regulation to allow for the child to play and learn independently and safely with others.

In relation to the observation of a child being directed to "stop screaming and use your words", this appears to be an isolated incident. However, it is important to note that educators should ensure that all children are supported to develop the skills, dispositions and understandings they need to interact sensitively and empathetically with others. This was not demonstrated in this interaction. It is reasonable to expect that the educator would support the child through their emotions and remain with the child and discuss the words that should be used to coach them through the situation, rather than providing only a direction. Overall, the evidence supports a finding that at times, educators did not effectively support children to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

As outlined in Element 5.2.1, an interaction was observed between two children, where one child knocked over another child's construction creation. In this incident, educators in the room were aware that one of the children was upset. This child was left for a period of time unsupported before educators chose to offer the child to go and wash their face to calm down. This interaction did not show that educators adequately supported children to regulate their own behaviour. The educators involved in the interaction did not model best practice about encouraging children to respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

95. The regulatory authority then included a list of what they would have expected to see in a service which meets Element 5.2.2.
96. Following first tier review, the rating Standard 5.2 confirmed as Working Towards NQS as Element 5.2.2 was not met.

Standard 5.2: Second tier review

97. At second tier review, the provider sought to have the rating for Element 5.2.2 amended to met, and the rating for Standard 5.2 amended to Meeting NQS.
98. In their second tier review application, the provider made the following submissions in relation to Element 5.2.2:

We note that the commentary provided by the regulatory authority in the final report in response to our feedback significantly reduces at this point in the report. For example, the commentary in section 1.1.1 contains 180 words, giving us the level of detail expected. In contrast, the word count of the commentary provided in section 5.2.2 is just 57 words. We

feel the final report was rushed due to the fact that we challenged the extensive length of time it took the Assessing Officer to write this.

In our feedback we gave 3 examples of how children are supported to self regulate. These were overlooked and not considered at all.

Standard 5.2: Second tier review decision

99. The panel's initial assessment of the service's practice under Standard 5.2 was that the service, particularly in some rooms, appears to have specific, rigid routines in place, which may not be the ideal approach to regulating children's behaviour and ability to communicate. The panel also discussed links between this Standard and Element 1.1.3 discussed above, noting that there is no evidence that routines are used as a guide or a flexible tool. The panel considered that it may be possible that the need for various behaviour management strategies (for example, Pikler) the service had introduced may be connected to children's responses to a routine which may need more flexibility.
100. The panel felt that evidence of practice in this area differed from evidence in the Quality Improvement Plan, and although there were some positive pieces of evidence showing, for example, educators getting down on the same level with children, there was no evidence of consistency and educators following through on these interactions.
101. The panel were not convinced from the evidence that all educators across the service were instilled with an understanding of letting children explore and communicate emotions and find space to become comfortable with routines and changes.
102. The panel also cited some evidence which was included in relation to Standard 2.2, but noted that it shed light on practices under Standard 5.2 as well: in particular, the panel discussed the evidence of an educator who was supervising children from a passive position (i.e., not down on children's level) only leaving that position when necessary and then returning. The panel also noted evidence of educators raising voices to communicate across a room to another educator to get them to guide a child's behaviour, which the panel felt did not show a full understanding of the role of the educator and agency of the child.
103. The panel agreed by consensus to confirm the rating for Element 5.2.2 as not met, therefore confirming the rating for Standard 5.2 and Quality Area 5 as Working Towards NQS.

Standard 6.2

104. Standard 6.2 is:

Collaborative relationships enhance children's inclusion, learning and wellbeing

Standard 6.2: Assessment and rating

105. The regulatory authority assessed the service as Working Towards NQS for Standard 6.2. Elements 6.2.1 and 6.2.2 were not met.

[ACECQA notes that Element 6.2.1 was amended to met at first tier review, and is not included in the evidence below.]

106. In the notes and evidence collected by the authorised officer during the visit, the following is set out in relation to Standard 6.2, Element 6.2.2:

Child with suspected developmental needs and [possible language delay. Ed has approached family and has not had a response that is supportive of gaining support for the child.

Child with medical condition

██████████ Training on anaphylaxis, hands on and online training.

004 first aid - ██████████ EpiPen training.

Diagrams displayed in the room on how to administer EpiPen.

Developing understandings of other children. Building confidence of children with medical conditions.

SIP - ██████████ at Inclusion support agency.

Attended meetings and created a SIP.

Spoke to families in the ██████████ rooms.

Professional development for educators to build a set of skills and practices to support educators to enhance learning for children.

Sensory toys and fiddle toys for children to engage in learning.

Tactile resources created opportunities for children to engage in group learning.

Speech pathologist training - Speech development that educators and families attended to gain insight into learning and support options.

Visual aids and signs to support speech development of a child on advice from professionals.

Shared goals for children and groups

Setting goals with children and families for the year. Parents to set goals ██████████ through use of books.

██████████ - speech pathologist, and ██████████. Nursery Rhymes and visuals to support language learning.

Policies and procedures and enrolment records can be converted into languages as needed through support from head office.

Draw on educator skills and abilities to speak multiple languages.

Help to fill out enrolment forms

107. In the draft report, the authorised officer set out the following in relation to Standard 6.2, Element 6.2.2:

ACCESS AND PARTICIPATION [6.2.2 – Not met]

Educators worked collaboratively with families to ensure children's access within the service was supported. For example, educators communicated with a family to implement a strategy to assist a child to feel safe and secure while at the service. This was achieved through the use of an item from home which was used by the child while at care each day to provide comfort and reassurance.

Educators and service leaders created a range of visual cues to support children's learning throughout the environments, including safety measures for using the swing and step by step instructions on how to apply sunscreen.

However:

Children with additional developmental needs, including possible language delays were not fully supported to access the program. Some family communication had occurred, however strategies had not been implemented to support the access and inclusion of all children.

While the service has undertaken a self-guided inclusion assessment and planning through the development of a strategic Inclusion Plan, the plan identified [REDACTED] children from a culturally and linguistically diverse background and a number of children as undergoing an assessment for inclusion support needs. Practice at the service did not demonstrate strategies being used or thought about in the planning for and enabling access and inclusion for all children.

Standard 6.2: Provider's feedback on the draft report

108. The provider submitted a response to the draft report in relation to Standard 6.2 in the form of a letter addressing Quality Area 6 in general. The letter stated:

We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report.

We strongly believe that the Service is at least meeting all Quality Standards

109. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence submitted with their feedback. In relation to Standard 6.2, Element 6.2.2, the table set out the following:

We believe we are meeting this standard because effective partnerships support children's access, inclusion and participation in the program.

The Service engage with and support families when inclusion needs are observed. Conversations are conducted to share information and to identify future support. If the professionals involved determine that there is an additional need, the Service works closely with the child's parents and with external agencies.

Strategies are implemented to support children who present with additional needs with the careful allocation of resources eg fiddle toys to aid concentration.

Detailed assessments are made to determine whether inclusion support is required. This information is then shared with families and external agencies.

The Service further demonstrate inclusive practice by encouraging families to contribute and respond to assessments of learning. This practice also strengthens the relationship between the Parent and the Educator.

The service is acutely aware of the cultural and ethnic diversity of the children enrolled at the Service and are highly inclusive in all aspects of their practice.

Many of the staff team are bilingual and share the same mother tongue as the children, so are able to communicate with families at the point of enrolment and beyond to make them feel welcome and supported. Some staff even deliver bilingual lesson to support inclusion and linguistic development.

The Service has invested with many culturally focused and dual language books.

The Service teaches [REDACTED] and Educators plan lessons around their own cultures eg [REDACTED] teaching [REDACTED] culture.

Children are encouraged to bring in show and tell items such as traditional dress to celebrate and raise awareness of their culture.

Multi cultural events are planned to develop the children's knowledge about different cultures."

Standard 6.2: Final report

110.No changes were made to the draft report following the provider's feedback.

111.The rating for Standard 6.2 following the final report remained Working Towards NQS, as Element 6.2.2 was not met.

Standard 6.2: First tier review

112.The provider applied for first tier review, seeking to have the rating for Element 6.2.2 amended to met, and Standard 6.2 amended to Meeting NQS.

113.At first tier review, the panel considered evidence gathered by the authorised officer at the assessment and rating visit (set out above at **paragraph 106**). The panel also considered the provider's submissions in feedback to the draft report (set out at **paragraph 108-109**).

114.In relation to Element 6.2.2, the panel's reasons for confirming the rating of not met were as follows:

"Documentary evidence was not submitted for [REDACTED] of the [REDACTED] children that were noted in the SIP as having a disability or undergoing assessment. The documentary evidence that was submitted for [REDACTED] children was incomplete or very limited. Additionally, the documentation did not demonstrate substantial engagement with parents, organisations and/or support agencies.

Documentary evidence was not submitted that outlined the specific steps taken or future planning for children's access and participation in the program.

In relation to the conversation with a parent of a child that the educators have identified as having possible developmental concerns, it was not clear what further attempts were made to facilitate ongoing discussion with the family, or how the child was adequately supported. It was not evidence from the information provided how the service supports effective partnerships that support children's access, inclusion and participation in the program.

115. The regulatory authority then set out a list of what they would expect to see in a service which meets Element 6.2.2

116. Following first tier review, the rating for Standard 6.2 remained Working Towards NQS, as Element 6.2.2 was not met.

Standard 6.2: Second tier review

117. At second tier review, the provider sought to have Element 6.2.2 amended to met, and Standard 6.2 amended to Meeting NQS.

Standard 6.2: Second tier review decision

118. The panel's first observation in relation to Standard 6.2 was that although much of the service's evidence showed positive ideas and plans for future practice under this Standard, there was insufficient evidence of such practices being in place on the day of the assessment and rating visit. There was evidence of the service supporting families in small ways such as assisting with completing forms, however there was little evidence around what conversations and discussions occur which drive this engagement.

119. The panel acknowledged some good examples of evidence in relation to how the service supports families and children with additional needs, but noted, for example, that some evidence such as a positive comment left by a parent on [REDACTED] were not evidence of a true partnership and inclusion in action, though they showed a positive connection being made. Although the Quality Improvement Plan showed intention to develop meaningful inclusion programs, progress notes did not sufficiently show the occurrence of quality practice, but rather examples of ad hoc changes. The panel also observed evidence of what appeared to be a potentially superficial approach to engaging with multiculturalism, and encouraged the service to reflect on these approaches, particularly the way this might inadvertently segregate rather than include children, by pointing out and highlighting difference instead of taking a holistic approach to embedded inclusion.

120. The panel then discussed that it was clear from the evidence that the service community includes a large number of culturally and linguistically diverse families, and many children undergoing assessment for inclusion support. However, the panel was concerned by the disclaimer that due to the time of assessment being [REDACTED], not all aspects of the program were in place. The panel questioned what sort of connection with families occurs at enrolment, and how it would be possible for children to have already

commenced without the service having a very detailed picture of them and their family. The panel felt that this limited process of gaining information at the initial stage may have increased the level of anxiety felt by staff working with a range of new children. The panel agreed that stepping in to conduct inclusion support assessments should not be cited as quality practice alone, but the link between what happens before and during enrolment should be what drives inclusion and Meeting NQS practice for Element 6.2.2.

121. The panel further noted that there was little evidence provided of how any information that was collected at enrolment was shared with educators in a way that showed how that information then influenced programming and planning. The panel acknowledged that this could well be occurring, but there was no evidence showing the link between information gathered and what was done with that information. Similarly, the panel discussed how one of the observation points collected by the authorised officer about translation of materials into diverse languages with support of the service's [REDACTED], but noted that there was nothing to show the connection at the service level and the process by which this occurs.

122. The panel could find no evidence to support changing the decision of the first tier review panel. By consensus, the panel decided to confirm the rating for Element 6.2.2 as not met, thus confirming Standard 6.2 and Quality Area 6 as Working Towards NQS.

Standard 7.2

123. Standard 7.2 is:

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

Standard 7.2: Assessment and rating

124. The regulatory authority assessed the service as Working Towards NQS for standard 7.2. Element 7.2.1 was not met.

125. In the notes and evidence collected by the authorised officer during the visit, the following is set out in relation to Standard 7.2, Element 7.2.2:

Educational Leader

In what ways are you supported to carry out your role? (Time, Resources, Professional Development)

Children and educators feel safe and supported, facilitating knowledge, leading critical reflection and leaving know one behind. Fissions are made as a whole and discussions are

Come on with re branding

Leading change through building trust and knowledge.

In what ways do you provide program support to educators?

Covers programming when float staff are not available. Ideas based on observations bring in resources and research.

To co leads in [redacted] room - strengths of each educators is used to strengthen [planning and implementation. Stepping stone for project based learning around recycling and green practices. Know have a vegetable garden for the whole service. Plans for the new group of children to develop their knowledge and contribute on project based learning.

Networking with [redacted] [redacted] through [redacted] - Phonimect awareness lack of in children. Reflected on this with teachers from local state schools and speech pathologist to develop strategies to implement with children. Through Kindy funding sourced phonemic awareness resources.

Finding gaps and filling gaps through strategies. Sharing the understanding of the knowledge with all educators and how this could be implanted to prepare children to progress in their development.

Team of educators are on the same page and want to be a team.

How do you support educators to extend. On their knowledge of the Early years learning framework and [redacted]?

Director and EL brainstormed and reflected on program and implementation [redacted]

2nd layer - Principles - reflection on the order of these in the terms and change to meet the needs and communicate events such as NADIOC

Leaders have looked at what it means for educators to implant the principles into their daily practice (building relationships with children)

Educators aim to get on the same page for each individual child's needs

5 layers

Critical Reflection is being looked at and is still being developed, (Policy review)

Cycle of planning - ensuring this is evident

[redacted] - a concept to drive the intentions for the year and build the mentality of the team to be open, honest and strong within a large team of educators.

How do you support educators to develop documentation that is relevant and meaningful?

[redacted] Booklets help to drive intentions, pedagogical approaches and to inform daily practice and implementation.

How do you support educators to reflect on their practice?

Building a culture of ongoing learning and reflection.

How are indigenous perspectives embedded into the program?

How are various cultures considered in the programs for children?

NAIDOC week

Educators knowledge of various cultures through personal experience. (Cultural weeks)

Events calendar

Links to week [redacted] - Identity and Connectedness, Learning about children's experiences and what they know about the world and the cultures of the world. (Using a world map to pin point where children have been and are from)

Resources - books, puppets, puzzles.

Acknowledgement of country in rooms in foyer - Didgeridoo in a room

Theme of NADIOC - asked the team to think about what it meant and how it could be explored in age appropriate ways to engage children. Bringing in the knowledge of educators to increase the authenticity of the activities. Why are we doing this activity and what is the intention?

'Strong sisters, Yarn sisters' resource online to implement the program.

Have educators undertaken any professional development as a result of identified areas of support? How has this been used to inform practice?

Personal development

[redacted] - Educational Leader

BeYou webinars

Go one training

Stop and Act - Providing a child safe environment

Sun safety - focus each month

Philosophy-

Quality - Educators are committed to continual improvement

Personal - Children have a natural sense of curiosity

Nature - Providing a stimulating, healthy and caring environment

Fun - Benefits of our play based educational program

[redacted] enables Eds to identify which outcomes they might not be embracing - How does this inform curriculum decision making?

Leadership team look at graphs and individual child information to determine where children are strong and where children may need some support and or additional documentation from educators to determine what children know and can do.

Project knowledge - the 'why' behind the events we celebrate and why celebrate or remember certain events in history (ANZAC). Build up of the knowledge.

What does intentional teaching look like across the service?

Looking at the intentions of planned activities and being able to explain why the activity was planned and what skill or knowledge the children will develop through participating in the activities.

Pedagogical practices are used to gain insight into children's learning and development needs - how is this used to inform the programs?

Thinking about how a learning experience is accessible to all children, such as visual, auditory and social leaning.

██████████ is useful for weekly planning and planning with intentions to expose children to the skills and knowledge they need to work towards the knowledge they need.

██████████ room - Room Projects for intentional teaching - taking photos of children in their new school uniform to create connection opportunities for children and families as they transition into school.

██████████ - what can you see from your house? Photos of what you can see from your house.

What does scaffolding children's ideas and interests look like in daily practice?

Talking Stick in ██████████ room - Class discussions to scaffold children's turn taking and participate in a group learning experience where children are given the opportunity to share opinions and ideas.

██████████ that went home on a journey and families used ██████████ to share stories about the weekend. Fishing story.

Bucket Filling Program - Skills were developed and scaffolded through educator assistance.

██████ - Where are you from? Tell us about your family? Celebrate cultural experiences. What animal came from that country?

Projects bounce off each other and the ideas come from the children. Language - Teaching children the lineage of ██████████

Things to take home to enable children to share with peers and educators.

Daily routines are viewed as valuable learning experiences - how does this belief inform or influence curriculum decision making?

Children have a sense of security when there is a routine in place. Creates familiarity for children in relation to the structure of the day.

Group times are viewed as a valuable tool for creating a sense of group culture and purpose in the day.

Rules for the room and socially acceptable behaviours are taught and enforced through routines.

Transparency of knowledge for what needs to be done and how to achieve it.

Provides flexibility for families in organising appointments.

Assists children in toilet training, creates a familiarity in what will come next in the routine.

Creates a sense of purpose for children to use their own agency and make decisions about events that influence their lives.

Age appropriate activities to enable the skills needed for self help and agency - Drinking from a cup.

In what ways do flexible routines support children to direct the program?

How do educators document and analyse the feedback on interests from children to inform the program?

Mapping of the room - Non verbal communication

Physical movement of children throughout the room - Tracking children to see what they are interested in and use the knowledge of children's interests to inform the planning.

██████████ - short words to communicate. Equators make observations of interests and educators seek in put from children.

Newly enrolled children - Family pack to gather child interests, how to comfort them, what they like and dislike.

Creating areas for individual children to gain confidence in new environments.

Learning stories - children's voices are captured and families have input into the stories and observations.

126. In the draft report, the authorised officer set out the following in relation to Standard 7.2, Element 7.2.2:

EDUCATIONAL LEADERSHIP [7.2.2 – Not met]

An educational leader is employed for the solitary role of developing and leading the educational program.

The educational leader and the nominated supervisor developed a ██████████ planner book to guide educators with a vision for the year of 2020. The information provided to educators was divided between five layers and included aspects of pedagogy, practices, principles, learning outcomes and educational theorists.

However:

Discussions with the educational leader revealed that the responsibility of ensuring each child's learning was recorded and carried out through the cycle of planning was in the development stages throughout the service.

Conversations regarding the cycle of planning revealed that the educational leader was developing their own understanding of the process and purpose of critical reflection and therefore was not able to support educators to implement this. For example, when the authorised officer discussed examples of critical reflection, the educational leader stated that they were beginning to understand the ideas of why critical reflection is used in the cycle of planning.

Standard 7.2: Provider's feedback on the draft report

127. The provider submitted a response to the draft report in relation to Standard 7.2 in the form of a letter addressing Quality Area 7 in general. The letter stated:

We would like to challenge the outcome of the assessment and rating as we disagree with the current rating based on the evidence described in the report. We ask that you take the time to carefully consider our feedback when determining the outcome on the final assessment report.

We strongly believe that the Service is at least meeting all Quality Standards

128. The provider also submitted a table addressing particular sections of the draft report, and linking to evidence submitted with their feedback. In relation to Standard 7.2, Element 7.2.2, the table set out the following:

“We believe we are meeting this standard because the educational leader is well supported and effectively leads the development and implementation of the educational program and assessment and planning cycle.

We feel that the discussion with the Educational Leader was taken out of context and misinterpreted by the Assessor. The Educational Leader recalls the conversation well and intended to communicate that she felt that the Service staff are at a variety of levels and experience, not that the actual planning cycle is in the developmental stages at the Service.

Our records of conversations with the Educational Leader have always evidenced her depth of knowledge and understanding of critical reflection.

The Educational Leader regularly practises critical reflection and enters this information into a diary. We do not agree that her understanding of the process and purpose of critical reflection is developing and we fully believe she is competent to support Educators to implement this.”

Standard 7.2: Final report

129. No changes were made to the draft report following the provider’s feedback.

130. The rating for standard 7.2 following the final report remained Working Towards NQS.

Standard 7.2: First tier review

131. The provider applied for first tier review, seeking to have Element 7.2.2 amended to met, and Standard 7.2 amended to Meeting NQS.

132. At first tier review, the panel considered evidence gathered by the authorised officer at the assessment and rating visit (set out above at **paragraph 125**). The panel also considered the Provider’s submissions in feedback to the draft report (set out at **paragraph 127-128**).

133. In relation to Element 7.2.2, the panel’s reasons for confirming the rating of not met were as follows:

“The evidence demonstrates that the Educational Leader is supported by management.

To support the application for review, a series of diary entries dated [REDACTED] 2019 were submitted, however these pieces of evidence did not demonstrate how the educational leader leads the development and implementation of an effective educational program in the service. It was not evidence how the educational leader supports educators to effectively implement the cycle of planning to enhance programs and practices.

Although the Approved Provider’s submission outlines that the educational leader’s statement about her own developing understanding of critical reflection were taken out of context or misinterpreted’ the evidence collected under Quality Area 1 and the educational

leader's diary both support a finding that an understanding of critical reflection and how it is used in the cycle of planning is in its beginning stages.

In assessing this element, consideration was given to the compliance actions that were taken against Quality Area 1 in relation to Regulation [REDACTED] and Regulation [REDACTED]. These breaches demonstrated that the service was not implementing a program linked to the Early Years Learning Framework and that the assessments of children's learning did not meet requirements. The breach in relation to Regulation [REDACTED] is still outstanding. Therefore, it is not evident that the educational leader is fulfilling the role to ensure that children's learning and development are guided by the learning outcomes of the Early Years Learning Framework.

It was not evident how the educational leader plays a significant role in guiding and developing educators' and families' understandings about play and leisure-based learning, and the significance of the early years in the education continuum for children.

To demonstrate Met for this element, the evidence would need to show how the educational leader collaborates with educators and provides curriculum direction and guidance. Additionally, the educational leader must be able to evidence that the role supports educators to effectively implement the cycle of planning to enhance programs and practices."

134. Following first tier review, the rating for Standard 7.2 remained Working Towards NQS, as Element 7.2.2 was not met.

Standard 7.2: Second tier review

135. At second tier review, the provider sought to have the rating for Element 7.2.2 amended to met, and Standard 7.2 amended to Meeting NQS.

Standard 7.2: Second tier review decision

136. The panel began discussing Standard 7.2 and Element 7.2.2 by articulating that it is useful to set out two questions which must be answered: Is the educational leader supported in their role, and do they undertake their role? The panel's opinion was that the evidence did not clearly show how the educational leader was supported, and noted that the educational leader herself was unable to articulate clearly how support is provided to her. The panel acknowledged that the educational leader was able to explain what she does in her role, but noted there was no linking back to how the service supports this role.

137. The panel noted that the authorised officer spoke with the educational leader and the educational leader spoke about how she was developing an understanding of critical reflection. The panel acknowledged that the educational leader should be commended for working on this understanding but noted that it was not possible to change a rating for this Element where it was clear that further development was needed. The panel also noted that some evidence of measures taken by the Nominated Supervisor was dated [REDACTED] 2020, after the assessment and rating visit. Another piece of evidence consisted of visit notes

made by the [REDACTED] from the service's [REDACTED], however the panel felt that this document did not offer sufficient information beyond a dot point simply explaining what the educational leader does. There was no information in this document about how the [REDACTED] supports the educational leader in their role.

138. Another piece of evidence consisted of a record of a conversation with the educational leader. The panel agreed that this could not be considered as it was dated after the assessment and rating visit, and noted that the educational leader's responses suggested that perhaps more professional support was needed. Although they could not consider the evidence, the panel would have liked to have seen some evidence of management asking the educational leader how they could best support her in her role.
139. The panel wished to refer the service to some online resources from ACECQA which can assist in gaining a deeper understanding of critical reflection. The panel agreed that with increased skills in critical reflection, the service would be able to address many of the issues raised in this review. Resources will be set out below in the final comments section (please see **paragraph 142**)
140. The panel finally discussed the small number of compliance issues in areas with direct links to the areas under review. The panel acknowledged that the service has responded to these matters, and that it is not the panel's role to address these matters. However, the panel felt that there was evidence in the service's acknowledgement and addressing of these issues that negates the possibility of changing a rating, as it has been established by the compliance process that certain practices were not in place on the day of the assessment and rating visit.
141. The panel agreed by consensus to confirm the rating for Element 7.2.2 as not met, thus confirming the rating for Standard 7.2 and Quality Area 7 as Working Towards NQS.

Final comments from the panel at second tier review

142. The panel concluded by noting that the first tier review panel demonstrated clear and well-reasoned decision making, and clear, relevant evidence was not supplied by the provider which to persuade the second tier review panel to justify changing the ratings agreed by the first tier review panel.
143. Additionally, the panel encourages the service to make use of the resources outlined in the first tier review decision notice, and additional resources included below. The panel felt confident that with investment of time and effort, and supported by the resources, remarks and guidance of the panels at both first and second tier review, the service can improve in their approach to critical reflection which would in turn support higher quality practice across all areas.
144. The panel encourages the service to make use of the following resources on the planning cycle and critical reflection:



- (a) <https://www.acecqa.gov.au/sites/default/files/2019-08/Planning%20cycle%20infographic%20-%20new%20version%20as%20at%20150819.pdf>
- (b) https://www.acecqa.gov.au/sites/default/files/2020-03/What_is_critical_reflection.pdf

145. Additional general resources on a range of topics are available here:

- (a) <https://www.acecqa.gov.au/resources/research/meeting-nqs>