



Australian Children's
Education & Care
Quality Authority

These guidelines are part of a series intended to assist in the development of your service's policies and procedures required under regulations 168 and 169. They set out the main components to be included in your policies and procedures, and considerations for each component.

They should guide how you develop your policies and procedures, and are not an exact format to be followed.

ACCEPTANCE AND REFUSAL OF AUTHORISATIONS

POLICY GUIDELINES

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place in relation to the acceptance and refusal of authorisations (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

The approved provider must ensure that authorisations are obtained from families or authorised nominees in relation to:

- administering medication to children (regulation 92)
- children leaving the premises in the care of the parent or the authorised nominee (regulation 99)
- excursions, including transportation (regulation 102)
- transport provided or arranged by the service (regulation 102D)
- seeking medical treatment for children and transportation by an ambulance service (regulation 161).

Other legal requirements or quality practices may also involve authorisations, such as in relation to photos of children and privacy. Your policy and procedures should address these requirements, as well as quality practices relating to the acceptance and refusal of authorisations that align with the National Quality Standard.

Every service is different so it is not sufficient to apply generic policies and procedures to multiple services. You will need to contextualise your policies and procedures to your service's operations and its unique context.

1. Title

Acceptance and refusal of authorisations policy

2. Policy statement

The policy statement will reflect your service's philosophy and approach to the acceptance and refusal of authorisations.

For example:

We have comprehensive processes in place for managing authorisations that are sensitive to the needs of children and their families.

3. Background

Your policy needs to include a statement of why this policy is in place.

For example:

The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place in relation to the acceptance and refusal of authorisations. Written authorisations from parents or authorised nominees help to ensure that the health, safety, wellbeing and best interests of all children are met. Through the authorisation process, parents are informed of risks associated with a matter, and can make an informed choice whether or not to proceed.

4. Legislative requirements

Your policy must be consistent with, and refer to, legislative requirements for the acceptance or refusal of authorisations.

Examples include, but are not limited to:

Section/regulation	Description
Regulation 92	Medication record
Regulation 93	Administration of medication
Regulation 94	Exception to authorisation requirement – anaphylaxis or asthma emergency
Regulation 96	Self-administration of medication
Regulation 99	Children leaving the education and care service premises
Regulation 102	Authorisation for excursions
Regulation 102D	Authorisation for service to transport children
Regulation 160	Child enrolment records to be kept by approved provider and family day care educator
Regulation 161	Authorisations to be kept in enrolment record
Regulation 168	Education and care service must have policies and procedures
Regulation 169	Additional policies and procedures – family day care service
Regulation 170	Policies and procedures to be followed
Regulation 171	Policies and procedures to be kept available
Regulation 172	Notification of change to policies or procedures

When writing your policy, you will need to break down what is required under each regulation and how your service will meet these requirements. How these work in practice will be contained in your procedures.

As you reflect on your **Acceptance and refusal of authorisations policy**, it might highlight the need to split its various areas into different policies and procedures that can be readily accessed by all educators and staff members to follow.

5. Principles to inform your policy

All decision-making should be carried out in accordance with the principles of your service's **Acceptance and refusal of authorisations policy**. Examples of principles could include, but are not limited to:

- The health, safety and wellbeing of children is our number one priority. Our range of safeguards include policies and procedures for the acceptance and refusal of authorisations.

- Our families are part of the service decision-making process. Through authorisations, they are made aware of risks and can make informed decisions.
- We value the important role our educators and staff play. They are provided with the necessary training and support to act in accordance with authorisations provided.
- We prioritise good governance and quality management. We ensure that our acceptance and refusal of authorisations processes are effective and transparent and meet all regulatory requirements.

6. Key terms

To make it easier for your audience, provide definitions of key terms that may not be used every day. For example:

Term	Meaning	Source
ACECQA – Australian Children’s Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.	acecqa.gov.au
Authorised nominee	A person who has been given permission by a parent or family member to collect the child from the service or the family day care (FDC) educator.	National Law (Section 170)
Enrolment record	<p>The approved provider must ensure that an enrolment record is kept for each child enrolled at the service, and the FDC educator must keep an enrolment record for each child they educate and care for. The record must include:</p> <ul style="list-style-type: none"> • Full name, date of birth and address of the child. • The name, address and contact details of: <ul style="list-style-type: none"> • each known parent of the child • any emergency contact • any authorised nominee • any person authorised to consent to medical treatment or administration of medication • any person authorised to give permission to the educator to take the child off the premises • any person who is authorised to authorise the education and care service to transport the child or arrange transportation of the child. • Details of any court orders, parenting orders or parenting plan. • Gender of the child. • Language used in the child’s home. • Cultural background of the child and their parents. • Any special considerations for the child, such as cultural, dietary or religious requirements or additional needs. • Authorisations for: <ul style="list-style-type: none"> • the approved provider, nominated supervisor or an educator to seek medical treatment and/or ambulance transportation for the child • the service to take the child on regular outings • regular transportation of the child. • Name, address and telephone number of the child’s registered medical practitioner or medical service. • Medicare number (if available). • Details of any specific healthcare needs of the child, including any medical conditions, allergies, or diagnosis that the child is at risk of anaphylaxis. • Any medical management plan, anaphylaxis medical management plan or risk minimisation plan. • Dietary restrictions. • Immunisation status. 	<p>National Regulations (Regulations 102, 102D, 160–162)</p> <p>Guide to the NQF (Management of records – Children’s enrolment record)</p>

Term	Meaning	Source
Enrolment record (cont.)	<ul style="list-style-type: none"> If the approved provider or a staff member has sighted a child's health record, a notation to that effect. In NSW, certificates for immunisation or exemption for the child, as required under the <i>Public Health Act 2010 NSW</i>. In Victoria, certificates for immunisation, as required under the <i>Public Health and Wellbeing Act 2008 (Vic)</i> which excludes outside school hours care or school holiday care services. 	
Excursion	<p>An outing organised by an education and care service or FDC educator, but does not include an outing organised by an education and care service provided on a school site if:</p> <p>(a) the child or children leave the education and care service premises in the company of an educator; and</p> <p>(b) the child or children do not leave the school site.</p>	National Regulations (Definitions)
Medication	Medicine within the meaning of the <i>Therapeutic Goods Act 1989</i> (Cth). Medicine includes prescription, over-the-counter and complementary medicines. All therapeutic goods in Australia are listed on the Australian Register of Therapeutic Goods, available on the Therapeutic Goods Administration website (tga.gov.au).	Guide to the NQF (Glossary)
Medical attention	Includes a visit to a registered medical practitioner or attendance at a hospital.	acecqa.gov.au
Medical emergency	An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.	
Medication record	<p>The approved provider and FDC educator must keep a medication record for each child to whom medication is administered by the service. This record must include:</p> <ul style="list-style-type: none"> the child's name signed authorisation to administer medication a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required. <p>A medication record template is available on the ACECQA website: acecqa.gov.au/media/22731</p>	National Regulations (Regulation 92)
Regular outing	<p>In relation to an education and care service, means a walk, drive or trip to and from a destination:</p> <p>(a) that the service visits regularly as part of its educational program; and</p> <p>(b) where the circumstances relevant to the risk assessment are the same on each outing.</p>	National Regulations (Definitions)
Regular transportation	In relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are the same for each occasion on which the child is transported.	Guide to the NQF (Glossary)

Term	Meaning	Source
Transportation	<p>Transportation forms part of an education and care service if the service remains responsible for children during the period of transportation. The responsibility for, and duty of care owed to, children applies in scenarios where services are transporting children, or have arranged for the transportation of children, between an education and care service premises and another location, for example their home, school, or a place of excursion.</p> <p>Examples of transport <u>not</u> forming part of a service include:</p> <ul style="list-style-type: none"> • private transport provided by families and carers (i.e. carers not engaged by/registered with a service) • transport provided and/or arranged by an entity other than the approved provider, e.g. a school bus, and the children are not under the care of the approved provider • transport where the approved provider is providing the transport service in a capacity other than as the approved provider, e.g. a government department that provides an education and care service, provides school education, and provides a school bus to school students, on which the children who attend the service also travel for practical reasons (such as in a remote or rural location) • when a disability service picks up children and transports them to school or an activity. 	Guide to the NQF (Transportation)

7. Links to other policies

Refer to related policies and procedures, for example:

- Excursions
- Emergency and evacuation
- The administration of first aid
- Incident, injury, trauma and illness
- Dealing with medical conditions in children
- Enrolment and orientation
- Providing a child safe environment
- Safe transportation of children
- Delivery of children to, and collection from, education and care service premises
- Governance and management
- Nutrition, food and beverages, dietary requirements

8. Induction and ongoing training

State information about induction training and frequency of ongoing training and information sharing to assist managers, co-ordinators, educators and other staff to fulfil their roles effectively.

9. Policy created/reviewed

Include the date the policy was created, reviewed or changes were made.

10. Monitoring, evaluation and review

State when the policy will be reviewed and who will be responsible for this.

11. Checklist

- Have you referenced the relevant regulations and are these reflected in the policy?
- Does the title provide a clear and concise statement identifying the intent of the policy?
- Have you checked the policy requirements and referenced related legislation that applies to your service type?
- Does your policy statement provide a framework for decision-making and ensure consistent practice?
- Does your policy statement reflect your service's philosophy?
- Is it clear why this policy exists?

PROCEDURES GUIDELINES

Under the *Education and Care Services National Regulations*, an approved education and care provider must ensure policies and procedures are in place in relation to the acceptance and refusal of authorisations. These guidelines are part of a series and are intended to assist in the development of your policies and procedures required under regulations 168 and 169. They are to guide you to develop your procedures, and are not an exact format to be followed.

Your procedures should be written in clear and concise language, making them easy to read, understand and implement.

The steps and guidelines you document in your procedures will not only guide your practice, but also inform regulatory authorities of educator and staff expectations and responsibilities at the service.

When thinking about your procedures for acceptance and refusal of authorisations, they will also need to be practical and achievable. For example, if your procedures state that enrolment records for each child will include all authorisations signed by parents or guardians, you will need to make sure that steps are in place for this to occur.

1. Title

Acceptance and refusal of authorisations procedures

2. Reference to policy and philosophy

Here you refer to your ***Acceptance and refusal of authorisations policy*** as seen in your policy documents. You can reference where you will find the policy to help those looking for it.

Your procedures will also reflect your service's overall philosophy and evidence-based quality practice guidelines for the acceptance and refusal of authorisations.

3. Procedures

This is where you detail the way you will implement the ***Acceptance and refusal of authorisations policy***.

It is the 'How to' in your service and includes specific step-by-step procedures for governance and management.

Some areas that will be outlined here will include:

- where the procedures will be kept
- when they were last reviewed
- templates and documents that might be required and/or used as a part of the procedures
- systems to monitor the implementation of the procedures
- communication with families – how they will be made aware of the requirements and the importance of keeping authorisations up-to-date.

You will need to consider how other procedures interact with the ***Acceptance and refusal of authorisations procedures***. These include procedures relating to children's medical conditions, first aid, emergency, transportation and excursions.

As you reflect on your ***Acceptance and refusal of authorisations policy***, it might highlight the need to split its various areas into different procedures, which will be displayed or accessed by all staff to follow in relation to their required actions.

4. Roles and responsibilities

This is where you will designate specific roles and responsibilities for the people who hold different positions within your service. This needs to align with the *Education and Care Services National Regulations* (see pp. 10–12 below).

It is important to note that it is the legal responsibility of approved providers to ensure systems are in place to minimise risk and ensure health and safety procedures are implemented by the responsible people in services including FDC environments (if applicable). Ultimate responsibility lies with the approved provider to ensure their service/s are meeting the requirements under the *Education and Care Services National Law*.

When developing this section consider:

- What are the roles and responsibilities of the approved provider, responsible person, nominated supervisor, educators, other staff, volunteers, students and families in your service in relation to the acceptance and refusal of authorisations?
- How will you clearly define these roles and expectations and where will it be documented?
- Why are clear and robust procedures for the acceptance and refusal of authorisations important for children’s safety and wellbeing?
- How will you learn from the administration of these procedures to improve your practices?
- How will you ensure that the necessary tools are available so the approved provider, nominated supervisor, educators and other staff members can follow the procedures? How will they be made aware of the procedures?
- Do the roles and responsibilities reflect your service type?

An example of roles and responsibilities could include, but is not limited to:

Roles	Responsibilities
Approved provider	<ul style="list-style-type: none"> • ensure that obligations under the <i>Education and Care Services National Law</i> and <i>National Regulations</i> are met • ensure that an enrolment record is kept for each child that includes authorisations signed by a parent or a person authorised to consent to the medical treatment of the child if relevant, in relation to: <ul style="list-style-type: none"> • seeking medical treatment from a registered medical practitioner, hospital or ambulance service • transportation by an ambulance service • regular outings and transportation (regulations 160, 161) • ensure that a medication record is kept that includes the authorisation to administer medication signed by a parent or a person named in the enrolment record (regulation 92) • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> • a parent or a person named in the enrolment record • a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted (regulations 93, 96) • in the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation (regulation 94) • ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person named in the enrolment record to collect the child (regulation 99) • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing (regulation 102) • ensure no child is transported by the service without authorisation from a parent or other person named in the enrolment record (regulation 102D) • ensure systems requiring authorisations are in place for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date

Roles	Responsibilities
Approved provider (cont.)	<ul style="list-style-type: none"> • put in place processes for circumstances where authorisations are refused/not applicable. For example: <ul style="list-style-type: none"> • where the service is asked to administer medication that is not in its original container (see regulation 95) • when leaving the service, the parent, authorised nominee or person as listed in regulation 99 does not appear to be fit to take the child • the child has been given authorisation to leave the service alone, however the environment they would be in is unsafe • take reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the Acceptance and refusal of authorisations policy and procedures • ensure that copies of the policy and procedures are readily accessible to nominated supervisors, co-ordinators, educators and staff, and available for inspection • notify families at least 14 days before changing the policy or procedures if the changes will: <ul style="list-style-type: none"> • affect the fees charged or the way they are collected or • significantly impact the service's education and care of children or • significantly impact the family's ability to utilise the service.
Nominated supervisor	<ul style="list-style-type: none"> • implement the Acceptance and refusal of authorisations policy and procedures • ensure that the child's family completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service • ensure no child is transported by the service without an authorisation from their parent or other person named in the enrolment record • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> • a parent or a person named in the enrolment record • a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted • in the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation • ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person named in the enrolment record to collect the child • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing • ensure no child is transported by the service without authorisation from a parent or other person named in the enrolment record • implement and oversee authorisation systems for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date • implement processes for circumstances where authorisations may be refused/not applicable.
Educators	<ul style="list-style-type: none"> • ensure all action plans are carried out in line with the Acceptance and refusal of authorisations policy and procedures • ensure that the child's family completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service • ensure no child is transported by the service without an authorisation from their parent or other person named in the enrolment record • ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by: <ul style="list-style-type: none"> • a parent or a person named in the enrolment record • a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted • in the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation • ensure that children only leave the service premises or FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person named in the enrolment record to collect the child

Roles	Responsibilities
Educators (cont.)	<ul style="list-style-type: none"> • ensure all children have appropriate authorisation to leave the service on an excursion or regular outing • ensure no child is transported by the service without authorisation from a parent or other person named in the enrolment record • implement authorisation systems for other legal requirements or quality practices, e.g. photos of children and privacy • ensure authorisations are kept up-to-date • implement processes for circumstances where authorisations may be refused/not applicable.
Families	<ul style="list-style-type: none"> • complete and sign authorisations in the enrolment record and medication record (if relevant) before their child commences at the service • complete and sign the authorisation for their child to attend excursions and/or to be transported by the service • ensure any changes to authorisations or contact details are kept up-to-date • be familiar with circumstances where authorisations may be refused/not applicable.

The following table will assist you in developing procedures specific to your service’s needs and context. Referring to the *Education and Care Services National Regulations* when you are writing your procedures will assist you to ensure that you are meeting your obligations.

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Obtaining and keeping authorisations</p> <p>Regs: 92, 93, 96, 99, 102, 102D, 160, 161, 168, 170–172</p> <p>QA2: 2.2</p> <p>QA6: 6.1</p> <p>QA7: 7.1.2</p>	<ul style="list-style-type: none"> • What processes are needed to ensure that the child’s family completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service. • How to ensure that enrolment records and medication records are kept for each child and that these include authorisations from parents or other nominated persons. • The processes needed to ensure that families complete and sign authorisations relating to excursions by the service and that they include: <ul style="list-style-type: none"> • the child’s name • the reason the child is to be taken outside the premises • when the regular outings or excursions are to occur • the destination • if transportation is involved: <ul style="list-style-type: none"> • the means of transport • any jurisdictional requirements for seatbelts or safety restraints • proposed activities during the excursion • the period the child will be away from the premises • the number of children on the excursion, the educator-to-child ratio, the number of staff and any other adults who will supervise the children • that a risk assessment has been prepared and is available at the service. • The processes needed to ensure that parents complete and sign authorisations relating to transportation by the service and that they include: <ul style="list-style-type: none"> • the child’s name • the reason the child is to be transported • when the transportation is to occur • the pick-up location and destination • the means of transport • the period of time for the transport • the number of children to be transported, the number of staff members and any other adults who will supervise the children • any jurisdictional requirements for seatbelts or safety restraints • that a risk assessment has been prepared and is available at the service • that written policies and procedures for transporting children are available at the service. 	<ul style="list-style-type: none"> • Make sure your policy and procedures are available for all to access. • Consider creating a checklist of all tasks/items needed at enrolment, including authorisations. • Consider creating a list of situations for each authorisation type that would result in the authorisation being refused. • Develop a plan to communicate with families in the event of the refusal of an authorisation. This could include speaking points for educators to use depending on the situation. • Develop physical and electronic systems for record keeping. 	<p>Excursions</p> <p>Emergency and evacuation</p> <p>The administration of first aid</p> <p>Incident, injury, trauma and illness</p> <p>Dealing with medical conditions in children</p> <p>Enrolment and orientation</p> <p>Providing a child safe environment</p> <p>Safe transportation of children</p> <p>Delivery of children to, and collection from, education and care service premises</p> <p>Governance and management</p>

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementing procedures	Related policy and/or procedures
Obtaining and keeping authorisations (cont.)	<ul style="list-style-type: none"> • What authorisations may be required for other legal requirements or quality practices, e.g. photos of children and privacy, dietary requirements. • As there is no regulatory minimum age for an authorised nominee, this may need to be discussed with families should the issue arise. • Ascertain the circumstances in which authorisations will be refused/not applicable. For example: <ul style="list-style-type: none"> • where the service is asked to administer medication that is not in its original container (see regulation 95) • when leaving the service, the parent, authorised nominee or person as listed in regulation 99 does not appear to be fit to take the child • the child has been given authorisation to leave the service alone, however the environment they would be in is unsafe. • How to communicate with families about refusals. • How to ensure that any refusals of authorisations are documented, including: <ul style="list-style-type: none"> • the details of the authorisation • why it was refused in those circumstances • actions taken by the service to address the situation. 		

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Implementing authorisations</p> <p>Regs: 92, 93, 94, 96, 99, 102, 102D, 168, 170–172</p> <p>QA2: 2.2</p> <p>QA6: 6.1</p> <p>QA7: 7.1.2</p>	<ul style="list-style-type: none"> Processes for ensuring that medication is only administered or self-administered if authorised. Processes for ensuring that medication is only administered in an emergency if authorisation is provided verbally (except in the case of anaphylaxis or asthma) by: <ul style="list-style-type: none"> a parent or a person named in the enrolment record a registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted. How to ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee, or a person named in the enrolment record to collect the child. How to ensure that all children have appropriate authorisation to leave the service on an excursion or regular outing. How to ensure that no child is transported by the service without authorisation from a parent or other person named in the enrolment record. What processes are required in cases where authorisations have been refused, e.g. alternate arrangements for children who will not be attending an excursion. 	<ul style="list-style-type: none"> Provide educator and staff induction training on authorisations, standalone training, and regular updates and reviews at meetings. Ensure educators and staff are familiar with relevant policies and procedures, particularly for children’s medical conditions, first aid, transportation, and excursions. Display authorisation reminders where relevant, e.g. near exit to premises. Ensure authorisations are part of checklists for excursions, transportation, etc. 	<p>Excursions</p> <p>Emergency and evacuation</p> <p>The administration of first aid</p> <p>Incident, injury, trauma and illness</p> <p>Dealing with medical conditions in children</p> <p>Enrolment and orientation</p> <p>Providing a child safe environment</p> <p>Safe transportation of children</p> <p>Delivery of children to, and collection from, education and care service premises</p> <p>Governance and management</p>

5. Procedures created/reviewed

Include the date the procedures were created or reviewed.

6. Monitoring, evaluation and review

Your service, in consultation with educators and other key staff, families and other stakeholders, should review the effectiveness of these procedures within a set timeframe or earlier if there is a change in relevant legislation.

State when the procedures will be reviewed and who will be responsible for this.

7. Checklist

- Do the **Acceptance and refusal of authorisations procedures** align with your **Acceptance and refusal of authorisations policy**?
- Have your procedures been written in plain English and can they be easily implemented by an educator or staff new to your service?
- Is it clear who is responsible for the implementation of the procedures?
- Are all educators and staff aware of the procedures and can implement them if required?
- Do you need to develop any resources to monitor and record the procedures?

USEFUL RESOURCES

Include links to useful resources that have helped inform the development of your policy. Be mindful of any state or territory specific content.

Some examples include, but are not limited to:

- ACECQA – Guide to the National Quality Framework [acecqa.gov.au/nqf/about/guide](https://www.acecqa.gov.au/nqf/about/guide)
- ACECQA – Opening a new service [acecqa.gov.au/resources/opening-a-new-service](https://www.acecqa.gov.au/resources/opening-a-new-service)
- Victorian Government – Acceptance and refusal of authorisations policy [education.vic.gov.au/childhood/providers/regulation/Pages/authorisationspolicy.aspx](https://www.education.vic.gov.au/childhood/providers/regulation/Pages/authorisationspolicy.aspx)