

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

GOVERNANCE & MANAGEMENT POLICY

Policy Statement:

We are committed to robust governance and management systems, ensuring the effective, transparent and competent operation of service.

Background:

Tenison Woods College Early Learning & Community Centre ensures all aspects of governance and management are clearly articulated and that this complements the service philosophy and statement of purpose. There is an ongoing process of review and evaluation, and all relevant information is readily available to stakeholders.

National Quality Standards (NQS) Links

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP

7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purpose	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinators and staff members' performance is regularly evaluated and individual plans are in place to support learning and development.

Legislative Requirements:

Regulation 29 – Condition on service approval – insurance

- The approved provider must hold a current insurance policy to cover the Centre against public liability with a minimum of \$10,000,000; or
- An insurance policy or an indemnity provided by the South Australian Government.

Regulation 31 – Condition on service approval – quality improvement plan

- The quality improvement plan for the Centre:
 - Is kept at the Centre premises;
 - Is made available for inspection by the Regulatory Authority or an authorised officer;
 - Is made available on request to parents of a child who is enrolled at the service or who are seeking enrolment at the Centre.

Regulation 55 – Quality improvement plan

- The quality improvement plan is prepared for the service that:
 - Includes an assessment by the provider of the quality of the practices of the Centre against the NQS and Regulations;
 - Identifies an area that the Centre may require improvement;
 - Contains a philosophy statement.
- The approved provider must submit the quality improvement plan to the Regulatory Authority on request.

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

Regulation 56 - Review and revision of quality improvement plan

- The approved provider must review and revise the quality improvement plan for the Centre in regards to the NQS annually or at any time when directed by the Regulatory Authority.

Regulation 84 – Awareness of child protection law

- The approved provider must ensure that a nominated supervisor, staff at the Centre, a volunteer at the Centre or a student who participates at the Centre, who works with children is advised of:
 - The existence and application of the current child protection law;
 - Any obligations that the person may have under law.

Regulation 104 – Fencing

- Any outdoor space used by children at the Centre is enclosed by a fence or barrier that is of a height and design that children preschool age or under cannot go through, over or under.

Regulation 106 – Laundry and hygiene facilities

- The Centre has:
 - Has laundry facilities
 - Has arrangements for dealing with soiled clothing, nappies and linen, including hygienic facilities for storage prior to their disposal or laundering.
That are adequate and appropriate for the needs of the service.
- The approved provider must ensure that these facilities are located and maintained in a way that pose no risk to children.

Regulation 107 – Space requirements – indoor space

- Each child at the Centre has at least 3.25 square metres of unencumbered indoor space.
- When calculating the area of the unencumbered indoor space:
 - The following areas are to be excluded: any passageway or thoroughfare, toilet or hygiene facilities, nappy changing area, areas permanently set aside for the storage of beds, any area permanently for storage, staffroom or administration areas, any other area that is not suitable for children;
 - The kitchen is to be excluded unless primarily to be used by children as part of an educational program at the Centre.
- The area of the verandah may be included in calculating the area of indoor space only with written approval of the Regulatory Authority.
- In this regulation a reference of a child does not include a child who is educated or cared for in an emergency circumstance set out in the regulation or an additional child being cared for in an exceptional circumstance (Regulation 124 (5) & (6)).

Regulation 108 – Space requirements – outdoor space

- The Centre will ensure each child has at least 7 square metres of unencumbered outdoor space.
- When calculating the space, any pathways or thoroughfare (except where used by children at the Centre), any care parking area, any storage shed or other storage, any other space that is not suitable for children will be excluded.
- In this regulation a reference of a child does not include a child who is educated or cared for in an emergency circumstance set out in the regulation or an additional child being cared for in an exceptional circumstance (Regulation 124 (5) & (6)).

Regulation 109 – Toilet and hygiene facilities

- The Centre has adequate, developmentally and age-appropriate toilet, washing and drying facilities provided for children.
- The location and design of the toilet, washing and drying facilities enable safe use and convenient access by children.

Regulation 110 – Ventilation and natural light

- The Centre ensures all indoor spaces used by the children are well ventilated, have adequate natural light and are maintained at a temperature that ensures the safety and wellbeing of children.

Regulation 117 – Glass

- The glass is glazed with safety glass (if the building code of Australia requires this) or is treated with a product that prevents glass from shattering if broken or guarded by barriers that prevent a child from striking or falling against glass.

Regulation 117B – Minimum requirements for a person in day to day charge

- The Director, Fran Scanlon, is over 18 years of age and has adequate knowledge and understanding of the provision of education and care to children and the ability to effectively supervise and manage the Centre.

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- The Director has a personal history of compliance with the law, understanding of Educational and Care services laws, children's services law and an education law within South Australia.

Regulation 157 – Access for parents

- The approved provider and nominated supervisors have ensured that a parent of a child being educated and cared for at the Centre may enter the Centre at any time the child is being educated and cared for by the Centre.
- A parent will be refused entry to the Centre if:
 - They pose a risk to the safety of the children and staff at the Centre;
 - Conflict with any duty of the provider, supervisor or educator under the law;
 - If it is reasonably believed that permitting the parent's entry would contravene a court order.

Regulation 158 – Children's attendance record to be kept by approved provider

- The Centre keeps a record of attendance with:
 - Full name of the child;
 - Date and time each child arrives and departs;
 - Through the app 'Spike' the children are digitally signed in and out using the parent or authorised person's own individual code used as a digital signature when the child arrives or departs or by a nominated supervisor or an educator.

Regulation 161 – Authorisations to be kept in enrolment record

- In the enrolment record at the Centre is:
 - An authorisation signed by parent or authorised person to consent to the medical treatment of the child or an educator to seek –
 - (i) Medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and
 - (ii) Transportation of the child by an ambulance service
 - Authorisation to take child on regular outings to Tenison Woods College site and Marist Park

Regulation 162 – Health information to be kept in enrolment record

- Health information kept in the enrolment at the Centre is:
 - The name, address and telephone number of the child's registered medical practitioner or medical service
 - If available, the child's Medicare number;
 - Details of specific healthcare needs of the child, including any medical condition and allergies, including whether the child has been diagnosed as at risk of anaphylaxis;
 - Any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy;
 - Details of any dietary restrictions for the child;
 - The immunisation certificate of the child which must come from the Australian Immunisation Register or from your Medicare account.

Regulation 165 – Record of visitors

- A record of all visitors to the Centre is kept digitally through 'Passtab' with a signature of the visitor and the time of the visitor's arrival and departure.

Regulation 167 – Record of service's compliance

- The Centre has a record of compliance including the following information:
 - Details of any amendment of the Centre's approval made by the Regulatory Authority under section 55 of the Law (the reason, the date it took effect or ceases);
 - Details of any suspension of the Centre's approval (other than voluntary) (the reason, the date it took effect or ceases);
 - Details of any compliance direction or compliance notice issued to the approved provider in respect of the centre including - the reason the Regulatory Authority issued the direction or notice, steps specified in the direction or notice, the date by which the steps specified must be taken;
 - The information will not include any information that identifies any person other than the approved provider.

Regulation 168 – Education and care services must have policies and procedures

- Our Centre has policies and procedures as set out in sub regulation 2 in Regulation 168.

Regulation 170 – Policies and procedures to be followed

- Nominated supervisors, staff members and volunteers have an understanding of all policies and procedures and ensure they are followed at the service.

Regulation 171 – Policies and procedures to be kept available

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- Digital copies of our policies and procedures are available via a QR code in our foyer, in our digital PowerQIP and in our handbook. A hard copy of our policies and procedures can be found in the ELCC Office.

Regulation 172 – Notification of change of policies and procedures

- All families are notified and sent updated policies and procedures.
- If a change to policy is planned, significantly affecting families, they will be given 14 days' notice.

Principles to inform the policy:

All decision-making should be carried out in accordance with the principles of the Centre's Governance and Management policy.

- We are accountable and transparent in all that we do. This includes the implementation of robust and effective governance and management policies and procedures.
- We seek to strengthen the service's effective operation. We have effective systems of risk management, financial and internal control, and performance reporting.
- We value the important role played by our service leaders, educators and staff. They are provided with the necessary training and support to ensure they are familiar with our policies and procedures.

Key Terms:

- **ACECQA (Australian Children's Education and Care Quality Authority):** The independent national authority that administers the National Quality Framework.
- **Approved provider:** A person who holds a provider approval (National Law). A provider approval authorises a person to apply for one or more service approvals and is valid in all jurisdictions.
- **Authorised person:** Means:
 - (a) A person who holds a current working with children check (WWCC), or equivalent;
 - (b) A family member of a child who is being educated and cared for by the service;
 - (c) An authorised nominee of a family member of a child who is being educated and cared for by the service;
 - (d) In the case of an emergency, medical personnel or emergency service personnel;
 - (e) A person who is permitted under the jurisdictional working with children law to remain at the service without holding a working with children check (WWCC), or equivalent.
- **Continuous Improvement:** Ongoing improvement in the provision of quality education and care services. The National Quality Framework aims to raise quality and drive continuous improvement through the National Quality Standard and quality rating processes. Quality rating encourages continuous improvement and engages the approved provider and their service teams in self-assessment and documenting their performance against the National Quality Standard. Providers of high quality services regularly monitor and review their performance to guide planning and make improvements.
- **Development of professionals:** A system of regular performance review, individual learning and development plans for educators, staff and co-ordinators. Performance planning and review ensures that the knowledge, skills and practices of educators and other staff members are current, and that areas requiring further development are addressed.
- **Educational leader:** The educational leader is an appropriately qualified and experienced educator, co-ordinator or other individual designated in writing by the approved provider under regulation 118 to lead the development and implementation of educational programs in the service. For more information about the role of the educational leader, see: acecqa.gov.au/media/26531
- **Educational Program:** A program that is:
 - Based on an approved learning framework;
 - Delivered in a manner that accords with the approved learning framework;
 - Based on the developmental needs, interests and experiences of each child; and
 - Designed to take into account the individual differences of each child.
- **Fit and proper person (to be an approved provider):** The regulatory authority assesses whether an approved provider or a person with management or control of a service is a fit and proper person to be involved in the provision of an education and care service. In determining whether they are a fit and proper person, the regulatory authority will consider:

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- The person's history of compliance with any education and care services, children's services or education law, and any decision under one of those laws to refuse, refuse to renew, suspend or cancel a licence, approval, registration or certification issued to the person under that law;
- Their criminal history, to the extent that it may affect their suitability for the role of provider (including working with children clearance, such as a WWCC, or teacher registration details, jurisdiction dependant);
- Whether they are bankrupt or insolvent;
- Whether they have the financial circumstances to enable them to sustain ongoing operation of a service;
- Whether they have a medical condition that may cause them to be incapable of being responsible for the service;
- Whether they have the management capability to operate a service;
- Actions taken under Commonwealth Family Assistance Law, including sanctions and suspensions.
- **Governance:** Refers to the systems in place to support effective management and operation of the service, consistent with the service's statement of philosophy. Good governance requires effective management systems and clearly delineated roles and responsibilities to support the effective operation of a quality service.
- **Inappropriate Person:** Means a person:
 - Who may pose a risk to the safety, health or wellbeing of any child or children being educated and cared for by the education and care service; or
 - Whose behaviour or state of mind or whose pattern of behaviour or common state of mind is such that it would be inappropriate for him or her to be on the education and care service premises while children are being educated and cared for by the education and care service.
- **Management system:** A system to manage organisational risks and enable the effective management and operation of a quality service.
- **Quality Improvement Plan (QIP):** A document created by an approved provider to help self-assess service performance in delivering quality education and care and to plan future improvements.
- Regulatory authorities consider the service's QIP as part of the quality assessment and rating process. The QIP does not have to be provided in any specific format, but must include:
 1. An assessment of the quality of service practices against the National Quality Standard and the National Regulations
 2. Identified areas for improvement
 3. A statement of the service's philosophy
- **Service philosophy:** A statement the approved provider must develop and include in their QIP that:
 - Outlines the purpose and principles under which the service operates;
 - Underpins the decisions, policies and daily practices of the service;
 - Reflects a shared understanding of the role of the service among staff, children, families and the community;
 - Guides educators' pedagogy, planning and practice when delivering the educational program.
- **Working with children check (WWCC):** A notice, certificate or other document granted to, or with respect to, a person under a working with children law to the effect that:
 - The person has been assessed as suitable to work with children; or
 - There has been no information that if the person worked with children the person would pose a risk to the children; or
 - The person is not prohibited from attempting to obtain, undertake or remain in child-related employment.

Links to other policies:

Refer to related policies and procedures:

- Nutrition, food and beverages, dietary requirements
- Sleep and rest for children
- Dealing with medical conditions in children
- Incident, injury, trauma and illness
- Dealing with infectious diseases
- Emergency and evacuation
- Excursions
- Staffing
- Interactions with children
- Acceptance and refusal of authorisations

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157,
158, 161, 162, 165, 167-185

- Payment of service fees and provision of a statement of fees charged by the service
- Dealing with complaints
- Safe transportation of children
- Water safety
- Sun protection
- Providing a child safe environment
- Enrolment and orientation
- The administration of first aid
- Delivery of children to, and collection from, education and care service premises

Induction and Ongoing Training:

- Induction training and ongoing training will be provided to managers, coordinators, educators, and staff to assist them in fulfilling their roles effectively in implementing this policy.

Policy Created/Reviewed:

- This policy was created in January 2024. It will be reviewed every two years or as necessary, to ensure compliance with regulations and alignment with best practices.

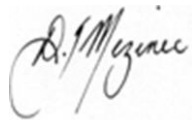
Monitoring, Evaluation, and Review:

- This policy will be regularly monitored for compliance by designated staff members and reviewed as necessary to ensure it aligns with current regulations and guidelines.

References:

- CESA 'Protective Practices (2017) (South Australia)
- Education and Care Services National Regulations
- South Australian Government Health guidelines
- The Australian Children's Education and Care Service Authority (ACECQA)

Reviewed by David Meziniec
Tenison Woods College Principal



Signed:
Dated: 14.7.24

Reviewed by Fran Scanlon
Early Learning & Community Centre Director



Signed:
Dated: 12.7.24

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

GOVERNANCE & MANAGEMENT PROCEDURE

Procedure Statement:

At Tenison Woods College Early Learning & Community Centre, our governance and management procedures are meticulously designed to ensure the effective, transparent, and competent operation of our service. Digital copies of all policies and procedures, including those related to governance and management, are easily accessible through our digital platforms and in our office. Regular reviews of these procedures are conducted to uphold compliance with regulations and to align with best practices. Our staff undergo induction training and receive ongoing professional development to ensure they are well-equipped to implement these procedures effectively. We prioritise communication with families, ensuring they are promptly informed of any changes to policies and procedures, with significant changes communicated with a 14-day notice period. Through continuous monitoring, evaluation, and improvement, we uphold the highest standards of governance and management to provide a safe, nurturing environment for all children and families in our care.

Procedure:

Governance and Management of the Centre

Approved Provider – Catholic Education South Australia.

Nominated Supervisors – David Meziniec (Tenison Woods College Principal) & Michelle Coote (Tenison Woods College Deputy Principal)

Tenison Woods College Board – The board represents the Catholic Church Endowment Society. A monthly report on occurrences happening in the Centre, improvements, and Strategic Plan. The College Board and the Nominated Supervisors have the responsibility to ensure the smooth running of the ELCC and ensures the Centre is meeting all legal requirements.

Responsible Person – Fran Scanlon (ELCC Director) has been selected by the Approved Provider and Nominated Supervisors to ensure the day-to-day operations of the Centre, reporting any issues in weekly meetings with Nominated Supervisor – Principal David Meziniec and delivering monthly reports to the Tenison Woods College Board and the Advisory Committee twice a term.

ELCC & OSHC Advisory Committee – The committee with a mix of College representation, including the Principal and Nominated Supervisor, David Meziniec, Financial Manager, Neal Turley, and Head of Junior School, Francesca Dickson, and parents from the Centre. The committee listens to a report prepared by the Director, Fran Scanlon and offers critical feedback, reflection to ensure accountability. They advise on the strategic direction of the Centre, policies and procedures and bring up issues arising from the ELCC community.

Deputy Director – Angela Cutting, supports the Director to ensure the smooth running of the Centre and becomes the responsible person in the Directors absence.

Educational Leaders – Alarni Holmes is the Educational Leaders in the Centre. She ensures, in consultation with the ELCC Director, that all teachers and educators are supported to implement the Early Years Learning Framework 2.0 and the National Quality Standards.

Management and decision-making structure

All major decisions must be approved by the school board, up to and including, Centre fees, changes in policy and procedure, structural changes and building extensions.

Financial Management of the Centre is overseen by Business Manager, Neal Turley.

- He ensures the Centre upholds the principles of financial accountability, ensuring operations are both financially viable and sustainable.
- Budgets are developed annually to allow the upkeep of the Centre, the replacement of broken or damaged equipment and making sure the pedagogical stretch and challenge is present for children with new resources.
- These budgets consider anticipated income and expenditures, while also allocating provisions for future planned expenses.
- Each specific provision undergoes formal approval and is duly documented in our meeting minutes.
- For detailed guidelines on budgeting and fee setting, please refer to our Fee Policy.

In alignment with Tenison Woods College's standards, we maintain reserves for employee entitlements as outlined in the Enterprise Agreement. These funds are readily available as required, and employees are informed of their entitled benefits with each pay cycle.

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

Staffing is decided between the Nominated Supervisors (David Meziniec and Michelle Coote), the Business Manager (Neal Turley), the Responsible Person (Fran Scanlon) and the Deputy Director (Ange Cutting).

Strategic Plan of the Centre is in consultation with all key members involved in the Centre (Staff, Advisory Board, ELCC Leadership and Nominated Supervisors) and presented to the Tenison Woods College Board.

Work, Health and Safety Coordinator, Trudi Dempsey oversees Tenison Woods College site practices, encompassing the ELCC, to ensure compliance and promote a culture of safety across all areas of operation. The Director has a close working relationship with Trudi and ensures all WH&S safety concerns are reported to Trudi, including:

- Structural or faulty equipment or environments;
- Safety audits for playgrounds and physical environment;
- Staff injuries and incident forms/claims;
- Collection of volunteer information;
- Workplace safety and 'SALT' compliance courses for all staff in line with legislation and mandates from CESA;
- Protocols for addressing grievances and complaints;
- Conducts a WH&S induction for all staff.

Service record keeping

The ELCC will keep the following records in their locked record room, in line with regulations outlined in National Regulations and Laws. The following information will be kept ensuring our legal responsibility and to protect the interests of the children, staff and families, and maintaining confidentiality.

The following records will be kept as outlined below:

- Evidence of current public liability insurance (Regulations 29, 30, 180) Ongoing. Available for inspection at service premises;
- Child assessments or evaluations for delivery of the educational program (Regulations 74, 183, 177(1)(a) & Regulation 178(1)(a)) Until the end of 3 years after the child's last attendance;
- Incident, injury, trauma and illness record (Regulations 87, 183, 177(1)(b) & Regulation 178(1)(b)) Until the child is 25 years old;
- We will retain records relating to child sexual abuse that has, or is alleged to have occurred, for at least 45 years. In addition to this, it is recommended that records identified as relevant to child safety and wellbeing, including child sexual abuse, be clear, objective and thorough, be maintained in an indexed, logical and secure manner, and be retained and disposed of in a consistent manner;
- Medication record (Regulations 92, 183, 177(1)(c) & Regulation 178(1)(c)) until the end of 3 years after the child's last attendance;
- Child attendance record (Regulations 158, 183, 177(1)(k) & Regulation 159, Regulation 178(1)(d)) until the end of 3 years after the last date on which the child was educated and cared for by the service;
- Child enrolment record (Regulations 160, 183, 177(1)(l) & Regulation 178(1)(e)) until the end of 3 years after the child's last attendance;
- Death of a child while being educated and cared for by the service (Regulations 12, 183(2)(c)) until the end of 7 years after the death;
- Record of service's compliance history (Regulations 167, 183(2)(e)) until the end of 3 years after the approved provider operated the service;
- Staff records (Regulations 145, 183(2)(g)) will be kept until the end of 3 years after the staff member worked for the service;
- Record of replacement of educator (Regulations 152A, 183(2)(f)) or access to (Regulations 152, 183(2)(f)), will be kept until the end of 3 years after the staff member worked for the service;
- Record of educators working directly with children (Regulations 151, 183(2)(f)) until the end of 3 years after the staff member works for the service;
- Record of replacement of early childhood teacher or suitably qualified person (Regulations 152B, 183(2)(f)) will be kept until the end of 3 years after the staff member worked for the service;

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- Record of volunteers and students, full name, address and date of birth details, days and hours in attendance, and working with children/vulnerable people check or teacher registration details (Regulations 149, 183(2)(f)) until the end of 3 years after the staff member works for the service;
- Record of responsible person in day-to-day charge including nominated supervisors placed in day-to-day charge (Section 162, Regulations 145, 150, 177) until the end of 3 years after the staff member works for the service;
- Regular transportation of children records (Regulations 117(1)(o), 117(1)(p), 183(2)(d)) until the end of 3 years after the last date on which the child was educated and cared for by the service.

Confidentiality and storage

Policy and Procedures

This will be kept in hard and soft copy forms. The hard copy in the Director's office and the soft copy as a QR code in the foyer where families can gain access.

Records

- All records as stated previously will be kept in the locked records rooms for the timeframes outlined.
- Any documentation that has been mandatory reported in the Centre is kept in hard copy in a locked cupboard, with a copy also being held securely by the Head of Wellbeing for Tenison Woods College, Tania Sigley.
- Soft copies of staff personnel and management are kept online in secure HR files.
- Soft and hard copies of all volunteers and students are kept on the Tenison Woods College database until the control of Trudi Dempsey, the Work, Health and Safety Coordinator (WH&S) for the College, inclusive of the ELCC.

Service self-assessment and continuous improvement

- We prioritise continuous improvement through ongoing review, professional learning, and self-assessment using ACECQA tools.
- We are committed to the professional development of our staff, ensuring they are equipped with the latest knowledge and skills in early childhood education. Matching the PD days with Tenison closure days to ensure our staff has a chance to be apart of the community and continue their commitment to being lifelong learners.
- Reflection and feedback is gained from the Advisory Board, Nominated Supervisors and the ELCC Leadership team to ensure we are meeting our strategic plan and the professional plan for the Centre.
- Reflection meetings are held with all staff at the start and end of the year to ensure they have a voice in naming the direction they are interested in and how the Centre can support them.
- Staff meetings at least once a term focused on the Centre improvements, staff reflection and QIP.
- Critical reflection page set up on facebook for staff to reflect on practices in the Centre and in the wider Early Years community.
- [ESB self-assessment tool](#) is used annually by all Leadership and a meeting is held to reflect and pinpoint improvements, helping to guide the QIP.
- ACECQA self-improvement tools, we regularly assess our practices to identify areas for enhancement and maintain compliance with regulatory standards.
- Our annual review of the Quality Improvement Plan further guides our efforts in delivering high-quality early learning experiences that meet the needs and expectations of our community.

Quality Improvement Plan (QIP)

- This is developed annually and focuses on the Centre's strengths, exceeding themes and areas of development across the 7 areas of the NQS
- The QIP is developed with feedback from staff and community and collated by Leadership by Term 2 each year.
- Once a term, a staff meeting will have a QIP focus
- The ACECQA and ESB self-assessment tools help to strengthen the Centre's QIP
- This is an ongoing document and is consistently changing and evolving as the Centre does.

Management systems

Day to Day Running of the Centre is by the Responsible Person, Director, Fran Scanlon.

In the absence of the Director, the most qualified person will be the Responsible Person in descending order:

- Angela Cutting – Deputy Director
- Alarni Holmes – Educational Leader

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- Alana Fensom – Wellbeing Leader
- Teaching or diploma staff in order of years of experience and that have signed an additional supervisor document.
- These staff are – Karissa Chapman, Amy Stephenson, Alana Butler, Ella Jones, Karen Castle, Lisa Gurney, Jodie Reed, Edel Dunne.

All these staff have completed the CESA Additional Supervisor form, as well as the Director as the Supervisor form, acknowledging responsibility and all these staff's experience and backgrounds, making them fit for the positions of responsibility.

Service administration and registers

The ELCC Administration Officers, Audine Bryant and Tanya Thomson work together to ensure all service administration and registers are complete and up to date. They work closely with the Director and complete the following protocols:

- **ELCC HR** – collection of all staff documentation and ensure all courses and registrations are up to date or organisation of courses.
- **ELCC Finance** – Complete payroll for all staff, ensure families pay their accounts and invoices and payments are completed for the Centre.
- **Spike** – Completion of bookings and ensuring all numbers are correct across the Centre, signing in and out occurs.
- **Administration** – Placement of children, days and numbers, numbers for processes as Universal Assess Funding, CESA or ACCC numbers, Centrelink payments, collection of documentation from families for enrolment, immunisation, assist with Room placements, medical information collated and shared with Sugarloaf and Rooms.

Roles and responsibilities:

The approved provider will be responsible for:

- Ensuring that obligations under the Education and Care Services National Law and National Regulations are met, as well as all other laws relevant to governance and management of the service;
- Displaying the prescribed information in section 172 (regulation 173);
- Providing information to the regulatory authority upon request in relation to being a fit and proper person (sections 13, 14, 21);
- Ensuring the service is insured and keep evidence of this (section 51; regulations 29, 180);
- Ensuring the number of children at the service does not exceed the maximum in the service approval (section 51);
- Ensuring the family of a child at the service is allowed to enter the premises (regulation 157);
- Adopting quality governance and management processes, procedures and practices, in line with the National Quality Standard, especially Quality Area 7 – Governance and leadership;
- Establishing systems of risk management, financial and internal control, and performance reporting. Monitoring management and financial performance to ensure the solvency, financial strength and good performance of the service;
- Developing, reviewing and approving the service philosophy and purpose, strategic direction and initiatives (Element 7.1.1);
- Taking reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the Governance and management policy and procedures;
- Ensuring that copies of the policy and procedures are readily accessible to nominated supervisors, co-ordinators, educators, staff, volunteers and families, and available for inspection;
- Notifying families at least 14 days before changing the policy or procedures if the changes will:
 - 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.

Notifications and reporting

- Ensuring that all reporting and reporting requirements are met regarding the National Quality Framework, family assistance, taxation, child protection, and other relevant laws;

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- Notifying the regulatory authority about the approved provider and operational changes, and changes in relation to the nominated supervisor, as detailed in section 173 (regulations 174, 174A);
- Notifying the regulatory authority about changes to the 'fit and proper' status of the approved provider, any serious incidents, and complaints relating to a serious incident or that the Law has been contravened (section 174; regulations 175, 176, 176A).

Health, safety and wellbeing

- Ensuring the health, safety and wellbeing of children in the service and take every reasonable precaution to protect children from harm and hazard (section 51; Quality Area 2).

Quality Improvement Plan (QIP)

- Ensuring there is an effective self-assessment and quality improvement process in place, including a QIP that is kept at the premises and is made available for inspection and to families (regulations 31, 55; Element 7.2.1);
- Ensuring the QIP is reviewed at least annually (regulation 56).

Space, equipment, facilities

- Ensuring that requirements relating to the physical environment, space, equipment and facilities are met, including regulations 104, 106, 107, 108, 109, 110, 116, 117 (Quality Area 3).

Educational needs and program

- Ensuring that children's educational and developmental needs are met (section 51; Quality Area 1).

Educators and staff

- Ensuring that requirements relating to staffing are met, including implementing the Staffing policy and procedures (including regulation 84).
- Ensuring that roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service (Element 7.1.3).
- Ensuring the performance of educators, staff and co-ordinators is regularly evaluated, and individual plans are in place to support learning and development (Element 7.2.3).
- Ensuring that a nominated supervisor, educators, staff, volunteers, and contractors to whom a prohibition notice applies are not engaged by the service (section 188).
- Ensuring the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle (Element 7.2.2).

Nominated supervisors and responsible person

- Ensuring that requirements relating to the nominated supervisor and responsible person are met, including implementing the staffing policy and procedures (including section 162, section 162A; regulation 117B).

Records and confidentiality

- Keeping a record of the service's compliance with the information listed in regulation 167.
- Keeping a record of enrolment and other documents listed in section 175 at the service and be available for inspection by an authorised officer.
- Ensuring that records are kept confidential and not divulged except as permitted under regulations 181 and 182.
- Ensuring that records are stored safely and securely for the period set out in regulation 183.
- Keeping enrolment and attendance records (regulations 158, 159, 160, 161, 162) and other documents listed in regulations 160, 177 and 178, ensure they are accurate and available to families on request (section 175). If a service approval is transferred, the documents must be transferred to the receiving approved provider (regulation 184).

The nominated supervisor/responsible person will be responsible for:

- Ensuring that regulatory obligations are met in relation to governance and management;
- Adopting quality governance and management processes, procedures and practices, in line with the National Quality Standard, especially Quality Area 7 – Governance and leadership;

GOVERNANCE & MANAGEMENT POLICY & PROCEDURE

Section 13, 14, 21, 51, 162, 172-175, 188, 269, Regulations 29, 31, 55,56, 84, 104, 106-110, 117, 117B, 157, 158, 161, 162, 165, 167-185

- Implementing systems of risk management, financial and internal control, and performance reporting. Monitor management and financial performance to ensure the solvency, financial strength and good performance of the service;
- Developing and reviewing the service philosophy and purpose, strategic direction and initiatives (Element 7.1.1);
- Ensuring the family of a child at the service is allowed to enter the premises when the child is being educated and cared for (regulation 157).

Notifications and reporting

- Ensuring that all notification and reporting requirements are met regarding the National Quality Framework and other relevant laws.

Health, safety and wellbeing

- Ensuring the health, safety and wellbeing of children in the service and take every reasonable precaution to protect children from harm and hazard (Quality Area 2).

Quality Improvement Plan (QIP)

- Ensuring there is an effective self-assessment and quality improvement process in place (Element 7.2.1).

Educational needs and program

- Ensuring that children's educational and developmental needs are met (Quality Area 1).

Educators and staff

- Ensuring that roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service (Element 7.1.2).
- Ensuring that the performance of educators, staff and co-ordinators is regularly evaluated and individual plans are in place to support learning and development (Element 7.2.3).
- Ensuring that requirements relating to staffing are met, including implementing the Staffing policy and procedures (Quality Area 4).
- Ensuring the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle (Element 7.2.2.).

Records and confidentiality

- Ensuring that requirements relating to records and confidentiality are met.

Educators will be responsible for:

- Being aware of, and following, the Governance and management policy and procedures;
- Being familiar with, and implementing, the service's policies and procedures, philosophy, QIP and code of conduct;
- Ensuring that requirements relating to records and confidentiality are met.

Families will be responsible for:

- Being aware of the Governance and Management policy and procedures and address any questions to the approved provider or nominated supervisor/responsible person.