GOVERNANCE AND MANAGEMENT OF A SERVICE

QUALITY AREA 7 | ELAA version 1.1



PURPOSE

This policy outlines the duties, roles and responsibilities of the Committee of Management/Approved Provider of Denzil Don Kindergarten.



POLICY STATEMENT

VALUES

Denzil Don Kindergarten is committed to good governance and management to deliver high quality outcomes with:

- robust and effective governance and management policies and procedures
- accountability to all stakeholders
- effective risk management, financial and internal control, and performance reporting
- compliance with all regulatory and legislative requirements the service must meet, including equipment and facilities, confidentiality of records and notifications and reporting
- the organisation to remain solvent and comply with all its financial obligations.
- the ongoing cycle of assessment, planning and review, and a culture of quality improvement.

SCOPE

This policy applies to the approved provider and the Committee of Management of Denzil Don Kindergarten.

| RESPONSIBILITIES | Approved provider and persons with management or control | Nominated supervisor and persons in day-to-day charge | All staff | Parents/carers | Contractors, volunteers and students | | |
|---|--|---|-----------|----------------|--------------------------------------|--|--|
| R indicates legislation requirement, and should not be deleted | | | | | | | |
| Ensuring that obligations under the Education and Care Services National Law and National Regulations are met, as well as other laws relevant to governance and management of the service | R | √ | | | | | |
| Displaying the prescribed information in National Law: Section 172 (Regulation 173) | R | √ | | | | | |

| Providing information to the regulatory authority upon request in relation to being a fit and proper person (National Law: Sections 13, 14, 21) | R | | | |
|---|---|----------|---|---|
| Ensuring the service is insured and keep evidence of this (National Law: Section 51; Regulations 29, 180) | R | | | |
| Ensuring that the number of children at the service does not exceed the maximum in the service approval (National Law: Section 51) | R | V | | |
| Ensuring that the family of a child at the service is allowed to enter the premises (Regulation 157) | R | V | | |
| Adopting quality governance and management processes, procedures and practices, in line with the <i>National Quality Standard</i> , especially Quality Area 7 | R | V | | |
| 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 | R | √ | | |
| Reviewing and understanding the service philosophy and purpose, strategic direction and initiatives | R | V | | |
| Taking reasonable steps to ensure that all staff and volunteers follow the <i>Governance and Management policy</i> and procedures | R | | | |
| Ensuring this policy and service procedures are accessible to all staff, volunteers and families, and available for inspection | R | | | |
| Notifying families at least 14 days before changing the policy or procedures if the changes will significantly impact the service's education and care of children or significantly impact the family's ability to access the service. | R | | | |
| Notifications and reporting | | | | |
| Ensuring all reporting and reporting requirements are met regarding the <i>National Quality Framework</i> , family assistance, taxation, child protection, and other relevant laws | R | V | | |
| Notifying the regulatory authority about the approved provider and operational changes, and changes in relation to the nominated supervisor, as detailed in <i>National Law: Section 173</i> (Regulations 174, 174A) | R | V | | |
| 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 (National Law: section 174; Regulations 175, 176, 176A) | R | V | | |
| Health, safety and wellbeing | | | | |
| Ensuring the health, safety and wellbeing of children in the service and taking every reasonable precaution to protect children from harm and hazard (National Law: Section 51) | R | V | √ | √ |
| Quality Improvement Plan (QIP) | | | | |
| Ensuring there is an effective self-assessment and quality improvement process in place, including a QIP (refer to | R | V | √ | |

| <i>Definitions)</i> that is kept at the premises or and is made available for inspection and to families (<i>Regulations 31, 55</i>) | | | | |
|--|---|----------|----------|---|
| Ensuring that the QIP (refer to Definitions) is reviewed at least annually (Regulation 56) | R | V | V | |
| Space, equipment, facilities | | | | |
| Ensuring requirements relating to the physical environment, space, equipment and facilities are met, including <i>Regulations</i> 104, 106, 107, 108, 109, 110, 116, 117 | R | √ | √ | √ |
| Educational needs and program | | | | |
| Ensuring that children's educational and developmental needs are met (National Law: Section 51) | R | V | √ | |
| Early childhood teachers, educators and staff | | | | |
| Ensuring that requirements relating to staffing are met, including implementing the <i>Staffing policy</i> and procedures (<i>Regulation 84</i>) | R | √ | | |
| Ensuring roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service | R | V | | |
| Ensuring that the performance of all staff is regularly evaluated, and individual plans are in place to support learning and development | R | V | | |
| Ensuring all staff, volunteers and contractors to whom a prohibition notice applies are not engaged by the service (National Law: Section 188) | R | | | |
| Ensuring the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle | R | V | | |
| 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 (National Law: Section 162, 162A; Regulation 117B) | R | | | |
| Records and confidentiality | | | | |
| Keeping a record of the service's compliance with the information listed in <i>Regulation 167</i> | R | √ | | |
| Keeping a record of enrolment and other documents listed in <i>National Law: Section 175</i> at the service and be available for inspection by an authorised officer | R | V | | |
| Ensuring that records are kept confidential and not divulged except as permitted under <i>Regulations 181 and 182</i> | R | V | | |
| Ensuring that records are stored safely and securely for the period set out in <i>Regulation 183</i> | R | V | | |
| 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 (National Law: section 175). If a service | R | V | | |

| approval is transferred, the documents must be transferred to the receiving approved provider (Regulation 184). | | | | | | |
|--|---|---|--|--|--|--|
| Child Safe Standards | | | | | | |
| Supporting the implementation of the Child Safe Environment and Wellbeing Policy at all levels | R | √ | | | | |
| Ensuring the communications of the Code of Conduct Policy to staff and volunteers and ensuring they comply with it | R | √ | | | | |
| Supporting the implementation of risk management strategies that focus on identifying and mitigating risks to children | R | √ | | | | |
| Ensuring that staff and volunteers understand their obligations on information sharing and record keeping. | R | √ | | | | |
| Supporting the review of the service's performance in delivering child safety and wellbeing | R | √ | | | | |



BACKGROUND AND LEGISLATION

BACKGROUND

The governance of an organisation is concerned with the systems and processes that ensure the overall direction, effectiveness, supervision and accountability of a service. The Approved Provider must ensure that there are effective systems, procedures and processes in place to support the service to operate effectively and ethically, and all legal and regulatory requirements governing the operation of the business are met.

Under the *Education and Care Services National Law Act 2010 and Education and Care Services National Regulations 2011*, early childhood services are required to have policies and procedures in place relating to the governance and management of the service, including confidentiality of records *(refer to Privacy and Confidentiality Policy)*.

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Associations Incorporation Reform Act 2012 (Vic), as applicable to the service
- Corporations Act 2001, as applicable to the service
- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- National Quality Standard, Quality Area 7: Governance and Leadership



DEFINITIONS

The terms defined in this section relate specifically to this policy. For regularly used terms such as Approved provider, nominated supervisor etc refer to the Definitions file on the kindergarten website.

Conflict of interest: an interest that may affect, or may appear reasonably likely to affect, the judgement or conduct of a member (or members) of the Committee of Management or may impair their independence or loyalty to the service. A conflict of interest can arise from avoiding personal losses as well as gaining personal advantage, whether financial or otherwise, and may not only involve the member of the Committee of Management, but also their relatives, friends or business associates.

Continuous improvement: ongoing improvement in the quality education and care service provided. 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

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improvement and engages the approved provider and their services 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.

Ethical practice: a standard of behaviour that the service deems acceptable in providing their services.

Fit and proper person: 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:

- 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: the process by which organisations are directed, controlled and held to account. It encompasses authority, accountability, stewardship, leadership, directions and control exercised in the organisation (Australian National Audit Office, 1999).

Private interests: Includes not only a Committee of Management's own personal, professional or business interests, but also those of their relatives, friends or business associates

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.

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. It:

- 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.



SOURCES AND RELATED POLICIES

SOURCES

- ACECQA Occasional Paper 5: Quality Area 7: Leadership and management in education and care services acecqa.gov.au/media/25871
- ACECQA Quality Area 7 resources https://www.acecqa.gov.au/nqf/national-quality-standard/quality-area-7-governance-and-leadership
- Australian Government My business health <u>asbfeo.gov.au/my-business-health/home</u>
- ELAA EYM Governance Support Manual: https://elaa.org.au/resources/free-resources/eym-governance-support-manual/

- Justice Connect: http://www.justiceconnect.org.au/
- Our Community: <u>www.ourcommunity.com.au</u>

RELATED POLICIES

- Child Safe Environment and Wellbeing
- Code of Conduct
- Compliments and Complaints
- Enrolment and Orientation
- Privacy and Confidentiality
- Staffing

EVALUATION



To assess that the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify stakeholders affected by this policy at least 14 days before making any significant changes to it or its procedures, unless a lesser period is needed due to risk (Regulation 172 (2)).



ATTACHMENTS

• Attachment 1: Core elements of the governance model



AUTHORISATION

This policy was adopted by the approved provider of Denzil Don Kindergarten on 03/06/2025.

REVIEW DATE: 03 / JUNE / 2027

ATTACHMENT 1. CORE ELEMENTS OF THE GOVERNANCE MODEL

The following are the core elements of the governance systems at Denzil Don Kindergarten for which a Committee of Management (Committee) is responsible:

Stewardship/custodianship

Ensure:

- the service pursues its stated purpose and remains viable
- budget and financial accountability to enable ongoing viability and making best use of the service's resources
- the service manages risks appropriately.

Leadership, forward planning and guidance

Provide planning and support to the service, particularly in relation to developing a strategic culture.

Authority, accountability, and control

- Be accountable to members of the service.
- Oversee legal functions and responsibilities.
- Declare any actual, potential or perceived conflicts of interest (refer to Definitions and Attachment 2).

LEGAL LIABILITIES OF MEMBERS OF THE COMMITTEE OF MANAGEMENT

The Committee is responsible under the constitution to take all reasonable steps to ensure that the laws and regulations relating to the operation of the service are met. Members of the Committee are responsible for ensuring that:

- policies and procedures are in place to comply with the legislative and regulatory requirements of the service
- appropriate systems are in place to monitor compliance
- reasonable care and skill are exercised in fulfilling their roles as part of the governing body of the service
- they act honestly, and with due care and diligence
- they do not use information they have access to, by virtue of being on the Committee improperly
- they do not use their position on the Committee for personal gain or put individual interests ahead of responsibilities.

RESPONSIBILITIES OF THE COMMITTEE OF MANAGEMENT

The Committee of Denzil Don Kindergarten is responsible for:

- supporting to service staff to ensure the goals, interests, values and beliefs, and the stated aims of the service, are met and there is a clear and embedded philosophy guiding kinder decisions
- ensuring there is a sound framework of policies and procedures that comply with all legislative and regulatory requirements, and that operation of the service is focussed on achieving the service's vision
- establishing clearly defined roles and responsibilities for the members of the Committee, individually and as a collective. Clearly articulating the relationship between the Committee, staff and members of the service
- developing ethical standards and a Code of Conduct (refer to Code of Conduct Policy) which guide actions and decisions in a way that is transparent and consistent with the goals, values and beliefs of the service
- undertaking strategic planning and risk assessment on a regular basis and having appropriate risk management strategies in place
- ensuring that the actions of and decisions made by the Committee are transparent and will help build confidence among members and stakeholders
- reviewing the service's budget and monitoring financial performance and management to ensure the service is always solvent, and has good financial strength
- approving annual financial statements and providing required reports to government
- evaluating and improving the performance of the Committee
- focusing on the bigger, strategic decisions and goals of the service and avoiding involvement in day-to-day operational decisions. This authority is delegated to the managers of the service.

CONFIDENTIALITY

Members of the Committee of Management with access to confidential and sensitive information, whether in the course of their role or otherwise, shall not disclose that information to anyone unless the disclosure of such information is required by

law (refer to Privacy and Confidentiality Policy).

Members of the Committee shall respect the confidentiality of those documents and deliberations at meetings, and shall not:

- disclose the confidential information acquired by virtue of their position on the Committee
- use information acquired for their personal or financial benefit, or for the benefit of any other person
- permit an unauthorised person to see or have access to, any confidential documents or other information.

This obligation, placed on a member of the Committee, shall continue even after the individual has completed their term and is no longer a Committee member.

The obligation to maintain confidentiality also applies to any person who is invited to a committee meeting as an observer, or in any other capacity.

ETHICAL PRACTICE

The following principles will provide the ethical framework to guide the delivery of services at Denzil Don Kindergarten:

- always treating fellow Committee members, parents/carers, children, public and other stakeholders respectfully and professionally
- dealing courteously with those who hold differing opinions
- respecting cultural differences and diversity within the service, and making every effort to encourage and include all children and families in the community
- having an open and transparent relationship with government, supporters and other funders
- operating with honesty and integrity
- being open and transparent when making decisions and undertaking activities and, when not possible, explaining why
- working to the standards set under the *National Quality Framework* and all applicable legislation as a minimum, and striving to continually improve the quality of the services delivered to the community
- disclosing conflicts of interest as soon as they arise and effectively managing them (refer to Attachment 2)
- recognising the support and operational contributions of others in an appropriate manner
- assessing and minimising the adverse impacts of decisions and activities on the natural environment.

MANAGING CONFLICTS OF INTEREST

Conflicts of interest, whether actual, potential or perceived (refer to Definitions), must be declared by Committee members, and managed effectively to ensure integrity and transparency (refer to Attachment 2).

Every Committee member has a continuing responsibility to scrutinise their transactions, external business interests and relationships for potential conflicts and to disclose them in a timely manner should they arise.

The following process will be followed to manage any conflicts of interest:

- at every committee meeting, prior to commencing business, the President will ask the Committee whether anyone has a conflict of interest regarding that night's agenda. Member(s) must disclose any conflict immediately
- the member who is conflicted must leave (or not be present if they have made a disclosure prior to the meeting) the meeting where the matter is being discussed and cannot participate in any decisions made on that matter. The member concerned must provide the committee with all relevant information they possess on the matter
- the minutes of the meeting must reflect the conflict of interest disclosed, and appropriate processes must be followed to manage the conflict.

A conflict-of-interest disclosure statement (*refer to Attachment 2*) must be completed by each member of the Committee upon their appointment and annually thereafter. If the information in this statement changes during the year, the member shall disclose the change to the President and revise the disclosure statement accordingly.

All violations of the requirement to disclose and manage conflicts shall be dealt with in accordance with the constitution of Denzil Don Kindergarten.