

GOVERNANCE AND MANAGEMENT OF THE SERVICE

Mandatory – Quality Area 7

Sandhurst Catholic Early Childhood Education and Care Ltd. (SCECE&C) is an incorporated company constituted by the Bishop of Sandhurst and is a subsidiary company of Catholic Education Sandhurst (CES) Limited, who is its Member, and it is governed by an independent Board of Directors.

SCECE&C Ltd.'s Vision is to create high quality environments which are authentically Catholic, where each child and family is accompanied on their journey of development, supported by the pastoral ministry of our Church as embodied in our Sandhurst communities.

SCECE&C Ltd is responsible for leading and guiding Sandhurst Catholic Early Childhood Education and Care services within the Diocese of Sandhurst as the Approved Provider.

PURPOSE

This policy outlines the duties, roles and responsibilities of the Sandhurst Catholic Early Childhood Education and Care Limited (SCECE&C) Board, as the Approved Provider of the service in their role of governance, bound by the SCECEC company constitution.

POLICY STATEMENT

The safety, health, wellbeing, rights and best interests of every child are the paramount consideration and must guide all decisions, actions and practices of educators within the education and care service.

VALUES

The service is committed to good governance and management to deliver high quality outcomes:

- robust and effective governance and management policies and procedures
- accountability to its stakeholders
- effective systems of risk management, financial and internal control, and performance reporting

- compliance with all regulatory and legislative requirements placed on the organisation, including space, 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 self-assessment, planning and review, embedding a culture of quality improvement

SCOPE

This policy applies to the Approved Provider, the Board and all subcommittees of the Board of all SCECE&C services.

RESPONSIBILITIES

	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	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 all other laws relevant to governance and management of the service	R	√			
Embedding a culture of continuous improvement, including everyone at the service (involving staff, children, families and communities) in continuous improvement practices.	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 that 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	√			
Ensuring that the family of a child at the service is allowed to enter the premises (Regulation 157)	R	√			
Adopting quality governance and management processes, procedures and practices, in line with the National Quality Standard , especially Quality Area 7 – Governance and leadership	R	√			
Establishing 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	R	√			

Developing, review and approve the service philosophy and purpose, strategic direction and initiatives	R	√			
Taking reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the <i>Governance and Management policy</i> and procedures	R				
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	R				
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.	R				
Notifications and reporting					
Ensuring that all reporting and reporting requirements are met regarding the <i>National Quality Framework</i> , family assistance, taxation, Occupational Health and Safety, child protection, and other relevant laws	R	√			
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 (Regulations 174, 174A)</i>	R	√			
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 (<i>National Law: section 174; Regulations 175, 176, 176A</i>)	R	√			
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 (<i>National Law: Section 51</i>)	R	√	√		√
Quality Improvement Plan (QIP)					
Ensuring there is an effective self-assessment and quality improvement process in place, including a QIP (<i>refer to Definitions</i>) that is kept at the premises or and is made available for inspection and to families (<i>Regulations 31, 55</i>)	R	√	√		
Ensuring that the QIP (<i>refer to Definitions</i>) is reviewed at least annually (<i>Regulation 56</i>)	R	√	√		
Space, equipment, facilities					
Ensuring that requirements relating to the physical environment, space, equipment and facilities are met, including <i>Regulations 104, 106, 107, 108, 109, 110, 116, 117</i>	R	√	√		√
Educational needs and program					
Ensuring that children's educational and developmental needs are met (<i>National Law: Section 51</i>)	R	√	√		
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 that roles and responsibilities are clearly defined, understood, and support effective decision making and operation of the service	R	√			
Ensuring that the performance of educators, staff and co-ordinators is regularly evaluated, and individual plans are in place to support learning and development	R	√			
Ensuring that a nominated supervisor, educators, staff, volunteers and contractors to whom a prohibition notice applies are not engaged by the service (<i>National Law: Section 188</i>)	R				
Ensuring the educational leader is supported to lead the development and implementation of the educational program and assessment and planning cycle	R	√			
Nominated supervisors and responsible person					
Ensuring that requirements relating to the nominated supervisor and responsible person are met, including implementing the <i>Staffing policy</i> and procedures (<i>National Law: Section 162, 162A; Regulation 117B</i>)	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	√			
Ensuring that records are kept confidential and not divulged except as permitted under <i>Regulations 181 and 182</i>	R	√			
Ensuring that records are stored safely and securely for the period set out in <i>Regulation 183</i>	R	√			
Keeping enrolment and attendance records (<i>Regulations 158, 159, 160, 161, 162</i>) and other documents listed in <i>Regulations 160, 177 and 178</i> , ensure they are accurate and available to families on request (<i>National Law: section 175</i>). If a service approval is transferred, the documents must be transferred to the receiving approved provider (<i>Regulation 184</i>).	R	√			
Child Safe Standards					
Creating an environment where all staff feel supported and encouraged to raise concerns. Establishing practices that normalise and support the reporting of issues and allegations	√	√			
Promoting the importance of child safety at the service and demonstrating what it looks like, including through discussing and promoting child safe pedagogical practice.	R	√	√		√
Facilitating the implementation of the Child Safe Environment and Wellbeing Policy at all levels	R	√			
Communicating the Child Safety Code of Conduct Policy to all staff, volunteers and leaders and hold them to account to comply with it	R	√			
Leading by example and implementing risk management strategies that focus on preventing, identifying and mitigating risks to children	R	√			
Taking child safety issues seriously, responding quickly, and ensuring all staff and volunteers have the resources they need	R	√			
Ensuring that staff and volunteers understand their obligations on information sharing and record keeping.	R	√			

Providing professional development opportunities for all staff at the service to understand and implement child safe practices	√	√			
Using SCECEC'S <i>Risk Assessment, Management and Action Plan – Child safe organisation</i> which is based on the child safe self-assessment and risk assessment tool (<i>refer to Sources</i>) to review the service's child safe culture and identify areas where are doing well, potential risks and areas for improvement	R	√			
Regularly reviewing the organisation's performance in delivering child safety and wellbeing	R	√			
Ensuring risk assessment and management within the service is properly focused on identifying, preventing and reducing risks of child abuse and harm	R	√			
Understanding that staff may have trauma related to child safety and abuse. Ensuring they are supported, in line with employer obligations under the <i>OHS Act 2004</i> to protect psychological health	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. 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*: Regulation 168(2)(l)
- *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 e.g. Approved Provider, Nominated Supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the SCECEC&C Definitions file.

Actual conflict of interest: One where there is a real conflict between a Board member's responsibilities and their private interests.

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 Board or subcommittee 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 Board or subcommittee, but also their relatives, friends or business associates.

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 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.

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.

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).

Interest: Anything that can have an impact on an individual or a group.

Management system: A system to manage organisational risks and enable the effective management and operation of a quality service.

Perceived conflict of interest: Arises where a third party could form the view that a Board member's private interests could improperly influence the performance of their duties on the Board, now or in the future.

Potential conflict of interest: Arises where a Board member has private interests that could conflict with their responsibilities.

Private interests: Includes not only a Board member'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. 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. 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 - NQF Child Safe Culture Guide self-assessment and risk assessment: www.acecqa.gov.au
- 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 asbfeo.gov.au/my-business-health/home
- ELAA Early Childhood Management Manual: <https://elaa.org.au/resources/free-resources/eym-governance-support-manual/>
- 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: www.ourcommunity.com.au

RELATED POLICIES

- *Child Safe Environment and Wellbeing Policy*
- *Child Safety Code of Conduct Policy*
- *Compliments and Complaints Policy*
- *Enrolment and Orientation Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*
- *Delegations Framework*
- *Company Constitution*
- *Professional Boundaries Policy*

EVALUATION

In order to assess whether 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
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk ([Regulation 172 \(2\)](#)).

ATTACHMENTS - NIL

AUTHORISATION

This policy was adopted by the Approved Provider of the service on 25 May 2021 and reviewed on 23 October 2023, and September 2025

REVIEW DATE: **SEPTEMBER 2028**