Governance and Management:

POLICY STATEMENT:

Grays Point Activity Centre aims to provide a quality education and care service and will operate according to all legal requirements and financial requirements recognised best practice in Service management. We will ensure there are appropriate governance arrangements in place at all times. There will be ongoing process of review and evaluation, and all relevant information will be readily available to stakeholders.

The Governing Document of the Organisation will be the Constitution that deals with the key Legal Requirements for running the Organisation. A copy of the Constitution will be readily available to all Committee Members to consult. New members will be given a copy of the Constitution as part of their Orientation.

For the purpose of Regulations, the Management Committee is the Approved Provider. The Management Committee as the Approved Provider will ensure that all aspects of Governance and Management are clearly articulated and complement the Service Philosophy. The Management Committee as Approved Provider will ensure that copies of the current Policies and procedures required under Regulation 168 is available for inspection at the Service at all times.

The Governance Policy provides the overall direction, effectiveness, supervision and accountability of a Service. The Approved Provider and management are responsible for guiding the direction of the Service, ensuring that its goals and objectives are met in line with the Philosophy, and all legal and Regulatory requirements governing the operation of the Service.

PURPOSE

Our Out of School Hours Care (OSHC) Service aims to ensure all legal and financial requirements are implemented and recognised through appropriate governance practices, providing quality education and care, meeting the principles, practices and elements of the Approved National Framework *My Time, Our Place: Framework for School Age Care in Australia* (MTOP V2.0) and the National Quality Framework (NQF). We believe that children's safety, rights, and best interests are the paramount consideration for all Service operations, decisions and functions. Our Service ensures that child safety, wellbeing and best interests take priority over all other considerations, including financial interests or other obligations of management, and are embedded in our daily practices, Policies and procedures.

SCOPE

This Policy applies to children, families, staff, management, Approved Provider, Nominated Supervisor, students, volunteers and visitors of the OSHC Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the Approved Provider must ensure that Policies and procedures are in place in relation to the governance and management of the Service (Regulation 168) and that they take reasonable steps to ensure those Policies and procedures are followed (Regulation 170).

Governance is the process that directs and controls our Service, ensuring accountability and supporting decision making. The Approved Provider and Nominated Supervisor of the Service accept the legal responsibilities associated with establishing, administering, and maintaining the Service and are answerable for decisions made on behalf of the OSHC Service. Information relevant to the operation and compliance of the Service, including compliance history, Policies and relevant notices, is made accessible to families, staff and the Regulatory Authority.

Staff are supported through clear delineation, access to Policies and procedures, appropriate induction and training and avenues for guidance when governance-related concerns arise. Governance is strengthened through open communication and shared responsibility between the Approved Provider, management, Educators, families and the Regulatory Authority.

Management may include Persons with Management or Control of the Service (PMC) as defined by ACECQA. Persons with management or control may participate in executive or financial decision-making or have authority or responsibility for, or significant influence over, the planning, direction or control of the activities or the delivery of the education and care service (ACECQA 2023). Our Service has the following established positions:

Approved Provider	Grays Point Activity Centre Inc.
Nominated Supervisor	Karen Graham Therapy Criticos Taylissa Kuhn
Persons with Management or Control	Valentina Thiering Christina Wagner Jamila Hayes

Educational Leader	Taylissa Kuhn
Responsible Persons	Therapy Criticos, Taylissa Kuhn, Taya Briguglio, Michelle McDonald, Karen Graham, Rianna Lathouras
Other	

THE APPROVED PROVIDER IS LEGALLY RESPONSIBLE FOR:

- ensuring compliance with the Education and Care Services National Law and Education and Care Services National Regulations
- ensuring compliance by all employees and Educators with the Education and Care Services National Law and Education and Care Services National Regulations
- complying with Family Assistance Law
- appointing a suitably qualified Nominated Supervisor, Educational Leader and Director/Coordinator/Centre Manager for the Service
- supporting the Nominated Supervisor and management in their role, providing adequate resources to ensure effective administration of the Service
- notifying the Regulatory Authority of any changes to the Nominated Supervisor at least 7 days prior to the appointment (or as soon as possible, but no more than 14 days after commencement)
- notifying the Regulatory Authority within 14 days of any changes to Persons with management or control
- displaying the prescribed information as listed in Regulation 173 including the current rating levels for each quality area stated in the National Quality Standard
- ensuring background checks, including criminal history and Working With Children Checks/ Clearance, are completed for all staff and Educators
- determining whether or not a person working in the Service is a 'fit and proper person' (as per National Quality Framework and Family Assistance Law requirements)
- provide information to the Regulatory Authority upon request in relation to being a 'fit and proper person'
- implementing a probation and induction orientation program to ensure employees are aware of their roles and responsibilities, understanding of the values and organisational culture of the Service, Policies and procedures, Child Protection Law and other Legislation
- developing a clear and agreed Philosophy, which guides business decisions and the work of management and staff
- acting honestly and with due diligence

- ensuring that families of enrolled children have access to enter the premises (Regulation 157)
- ensuring there is a sound foundation of Policies and procedures that complies with all Legislative and Regulatory requirements, and that enables the daily operation of the Service to be in line with the Service's Philosophy and goals
- maintaining up to date and current Policies and procedures for compliance by all Educators
- ensuring the health, safety and wellbeing of children and taking every reasonable precaution to protect children from harm or hazard
- ensuring Policies and procedures are followed in the event that a child is injured, becomes ill or suffers a trauma (Reg.85)
- confirming incident, injury, illness or trauma records are stored in a kept in a safe and secure place until the child is 25 years of age. In the event of a death of child while being cared for by the Service or may have occurred as a result of an incident, the records must be kept until seven years after the death
- being an employer, including all legal and ethical responsibilities that this entails
- appointing staff and monitoring their performance
- ensuring Educator qualification requirements are current
- ensuring all Educators and staff have a clear understanding of the hierarchy of management
- providing clear and direct written and verbal feedback and instruction that is suitable and appropriate to the task
- ensuring the Service remains financially viable and can meet its debts and other obligations as they fall due
- ensuring the Service holds a current insurance Policy for public liability with adequate minimum $ cover [or public liability provided by the Government of a State or Territory in respect for an education and care service]
- managing control and accountability systems
- reviewing the Service's budget and monitoring financial performance and management to ensure the Service is solvent at all times and has sound financial strength
- approving annual financial statements and providing required reports to Government bodies and maintaining appropriate delegations and internal controls
- complying with funding agreements where appropriate
- reviewing the work process regularly
- completing a Quality Improvement Plan (QIP) /Self Assesment for the Service
- ensuring the QIP is updated upon request by the Regulatory Authority and submitted to the Regulatory Authority upon request (Reg. 31, 56)

- developing coherent aims and goals that reflect the interests, values and beliefs of all stakeholders of the Service
- establishing clearly defined roles and responsibilities for the members of the Management Committee and staff, individually and as a collective, and clearly articulating the relationship between all stakeholders
- evaluating and improving the performance of the Management Committee
- ensuring the educational program is based on an approved learning framework (MTOP) and contributes to each child's sense of identity and wellbeing
- complying with all other NSW and Australian Governments' Legislation that impacts upon the management and operations of a Service
- ensuring all notification and reporting requirements are met regarding the National Quality Framework and other Legislation
- ensuring a copy of the Education and Care Services National Regulations and National Law is available at all times at the Service for use by Educators, staff, families and visitors (Reg. 185)
- ensuring that requirements relating to the physical environment, space, equipment and facilities are met
- notifying the Regulatory Authority if transportation is provided by the Service for the first time or if transportation ceases to be provided by the Service (reg 175)
- notifying families at least 14 days before changes to Policy or procedures that:
    - affect the fees charged or the way they are collected
    - significantly impact the Service's education and care of children, or
    - significantly impact the family's ability to utilise the Service.

THE NOMINATED SUPERVISOR IS RESPONSIBLE FOR:

- adhering to the Education and Care Services National Law and National Regulations
- developing ethical standards and a Code of Conduct which guide actions and decisions in a way that is consistent and reflective of the Service's expectations
- undertaking periodical planning and Risk Assessments and having appropriate risk management strategies in place to manage risks faced by the Service
- ensuring that actions taken, and decisions made are clear and consistent and will help build confidence in all stakeholders
- the day-to-day management of the Service
- ensuring all notification and reporting requirements are met regarding the National Quality Framework and other Legislation

- the effectiveness of the Service's well-defined partnership between the Management Committee and the Nominated Supervisor. The partnership requires clear understanding of roles and responsibilities, and regular and open communication
- producing outcomes together with Educators and staff. Educators must agree on their responsibilities and work according to current Policies and procedures
- providing Educators with training, resources and support
- identifying and reporting if something significant occurs (for example: Work Health and Safety; fraud prevention; complaint handling)
- identifying work required for completion and delegate to the appropriate Educator/staff
- ensuring Educators and staff do not delegate responsibilities for which they are accountable for or have been delegated to them by Management
- delegate all tasks in writing with a clear due date
- ensuring Educators are adhering to Service Policies and procedures.

FIT AND PROPER PERSON

The Approved Provider must be a fit and proper person to be involved in the provision of education and care services and must ensure that any person with management or control of the Service is also assessed as fit and proper. In determining fitness and propriety, the Regulatory Authority may consider matters including a person's history of compliance with the National Law, any relevant criminal history, any decision to refuse, suspend or cancel a licence or other authority under a Law relating to children, and any other matters prescribed by the Regulations. The Approved Provider will provide any information requested by the Regulatory Authority to support an assessment or reassessment of fitness and propriety and will notify the Regulatory Authority of any change in circumstances that may affect this assessment.

NOTIFICATION AND REPORTING

The Approved Provider is responsible for ensuring all notification and reporting requirements are met regarding the National Quality Framework, Family Assistance Law, Child Protection, Reportable Conduct Scheme, taxation and other Legislation as required, as outlined within the *Notification and Reporting Guide.* Educators and staff will be informed of notification requirements during induction training and provided with ongoing training and guidance, to ensure incidents are reported to the Approved Provider in a timely manner.

All notifications are made to the Regulatory Authority in writing, through the National Quality Agenda IT System (NQA ITS) or in other ways, if specified; within the specific timeframes as outlined in the National Quality Framework. All notifications made to the Department of Education as per Family Assistance Law are made via the Provider Portal or CCS Software (Xplor). Reportable Conduct Schemes may have dedicated online reporting forms or systems for Approved Providers to complete.

Key notification and reporting requirements: Please note this is not an exhaustive list, refer to the *Notification and Reporting Guide* for all notification requirements.		
National Law or Regulation	Notification to the regulatory authority by the approved provider	
S. 37, 38, 39, 40, 59, 59A, 86, 173, 174, 306 R. 36, 174, 175	• of changes regarding the approved provider, Persons with Management or Control or operational changes	
	Timeframe	within 7 - 60 days (check notification guide as timeframes differ, 7 days is the minimum requirement)
174AB [NSW only]	• when they become aware of an event, such as (a) a negative notice in relation to the educator or other staff member or (b) a change in relation to the educator's accreditation or registration as a teacher	
	Timeframe	submit this notification via email to information@earlylearningcommission.nsw.gov.au within 24 hours of becoming aware.
S. 174 R. 12, 175, 176	• of any incident or complaint that seriously compromises the safety, health or wellbeing of a child, including physical or sexual abuse	
	Timeframe	within 24 hours or within 24 hours of the approved provider being aware of the incident, complaint or allegation
S. 56, 56A, 173 R. 35	• of any changes to the nominated supervisor	
	Timeframe	at least 7 days prior to the appointment (or as soon as possible, but no more than 14 days after commencement)

National Law or Regulation	Notification to families	
S. 69	• transfer of Service approval	
	Timeframe	at least 7 days before transfer
S. 37, 38, 84, 85, 86 R. 172	• changes to policy or procedures that: ○ affect the fees charged or the way they are collected ○ significantly impact the service's education and care of children, or ○ significantly impact the family's ability to utilise the service.	
	Timeframe	at least 14 days before *unless* this timeframe would pose a risk to the health, safety or wellbeing of a child - in which case, as soon as practicable after making the change
R. 88, 93, 94	• occurrence of an infectious disease • medication administered during an emergency, including an asthma or anaphylaxis emergency	
	Timeframe	as soon as practicable
R. 86	• any incident, injury, trauma or illness involving their child	
		as soon as practicable, but within 24 hours

CHILD SAFE ENVIRONMENT

Our OSHC Service is committed to ensuring all Educators, staff, students, and volunteers understand and consistently implement our child safe Policies, including *Child Protection, Child Safety and Wellbeing Policies* to maintain a child safe environment in accordance with the National Principles for Child Safe Organisations – (Child Safe Standards).

The Approved Provider will ensure that all prescribed personnel, i.e., all persons with management or control, Nominated Supervisors, persons in day-to-day charge, other staff, volunteers, and students complete national child safety training (before or within 14 days of commencing work at the Service or working directly with children, including the foundation training and advanced training (where applicable).

National Law or Regulation	Notification to the approved provider	
174AA [NSW only]	• educators and other staff members must notify the approved provider in writing in the event of (a) a negative notice in relation to the educator or other staff member or (b) a change in relation to the educator's accreditation or registration as a teacher	
	Timeframe	within 72 hours of the event or within 24 hours of becoming aware

No staff member, Educator, or volunteer will engage in or overlook any inappropriate conduct towards a child while on the Service premises, during Service activities, excursions or any activity related to the OSHC Service. We ensure that children being educated and cared for are adequately supervised at all times, and including when using digital devices as part of the educational program.

The Approved Provider will ensure that a parent of a child being educated and cared for by the Service is permitted access to the Service premises at any time the child is in attendance. To ensure children's safety, access to the OSHC Service will be refused to any parent, guardian or authorised person where their behaviour, actions or known circumstances pose a risk to the safety or wellbeing of children, staff, volunteers or visitors. The Approved Provider will keep copies of all court orders and other legal documents in the child's enrolment records to ensure that a parent is not permitted access to the Service or their child when a court order or parenting order prohibits such access.

Our OSHC Service ensures that Educators, staff, volunteers, and students are informed about the different ways children may express concerns, distress and disclose harm, as well as the process for responding to disclosures from children - including a complaint that alleges a child is exhibiting sexual behaviours that may be harmful to the child or another child. (ACECQA, 2023).

We believe that children's safety, rights, and best interests should be the top priority in all decisions and actions at our OSHC Service.

SERVICE PHILOSOPHY

- The development and review of the Philosophy and Policies will be a continuous process on an annual basis or when required.
- The Philosophy and associated statement of purpose will reinforce all other documentation and the practices of the Service. The Philosophy will reflect the principles of the Approved National Framework *My Time, Our Place: Framework for School Age Care in Australia*.
- There will be a collaborative and consultative process to support the development and maintenance of the Philosophy that will include children, parents and Educators.
- All documents will be dated and include nominated review dates.

STAFFING

Our OSHC Service will comply with all staffing requirements as provided for under the National Quality Framework, in accordance with the *Staffing and Recruitment Policies* and *Code of Conduct Policy.* The Approved Provider is responsible for implementing effective child safe recruitment, induction, supervision, and performance processes; verifying and maintaining current records of Working with Children Checks (WWCC) appointing and supporting qualified leaders and staff; ensuring compliance with Legislative and Regulatory requirements; maintaining clear roles, responsibilities, and records; and fostering a culture of accountability, professional growth, and child safety within the OSHC Service.

CODE OF CONDUCT

The standards of behaviour outlined in our *Code of Conduct Policy* provide guidance for all staff to make personal and ethical decisions related to confidentiality, recruitment, duty of care, record keeping, professional relationships and appropriate use of resources within the Service.

Employees, Educators, staff and management are informed that inappropriate conduct and behaviour, including bullying, sexual harassment, discrimination and harassment, will not be tolerated. They are also aware of the relevant Reportable Conduct Schemes and mandatory reporting systems.

CONFIDENTIALITY

All members of the Management Committee along with the Nominated Supervisor, Responsible Person, Educators, and staff who gain access to confidential information, whether in the course of their work or otherwise, shall not disclose information to anyone unless the disclosure of such information is required by Law and will respect the confidentiality of all documents and meetings that occur. Child Information Sharing may be mandated to promote children's wellbeing and safety under state/territory Legislation. This also includes:

- using information acquired for their personal or financial benefit, or for the benefit of any other person
- permitting any unauthorised person to inspect or have access to any confidential documents or other information
- any information received or transmitted via mobile telephone (including text/SMS) or any other electronic device (e.g. email) shall be treated with the same confidentiality as any other written form of communication and must be stored confidentially.

This obligation, placed on a member of the Committee of Management, Nominated Supervisor, Responsible Person, Educator, and staff shall continue even after the individual has completed their term and is no longer on the Management Committee or employed by the OSHC Service.

The obligation to maintain confidentiality also applies to any person who is invited to any meetings of the Management Committee.

ETHICAL DECISION-MAKING

Our OSHC Service will make decisions which are consistent with our Policies and procedures and that work in conjunction with the Education and Care Services National Law and National Regulations, our approved learning framework (MTOP), and the ethical standards within the Early Childhood Australia (ECA) Code of Ethics.

REVIEW AND EVALUATION OF THE SERVICE

- Ongoing review and evaluation will support the continuing development of the Service. We will ensure that the evaluation involves all stakeholders.
- The development of a QIP will form part of the reflection procedure. Reflection on what works within the Service and what needs additional development will be included in the QIP.

MAINTENANCE OF RECORDS

Our OSHC Service is committed to meeting all record-keeping requirements under the National Quality Framework, National Model Code, and relevant legislation, with the Approved Provider responsible for ensuring records are accurately maintained, securely stored, regularly reviewed, and managed in line with

authorisation, privacy, confidentiality, and retention requirements. Refer to *the Record Keeping and Retention Policy,* along with the *Quick Reference Guide and Checklist*, for notification requirements and timeframes to the Regulatory Authority, Department of Education or other authority.

The Approved Provider will ensure key Service information is clearly displayed and accessible to families, staff, and visitors. This includes provider and service approval details, Nominated Supervisors, quality ratings, any waivers, operating hours, contact details for complaints and the Regulatory Authority, and the names of the Responsible Person and Educational Leader. In relation to Service ratings, the approved provider must display the current and previous rating levels for each quality area under the NQS, the overall service rating, and any suspended or revoked ratings, as well as the quality rating certificate. The Service's quality and compliance history must be displayed, covering the past 2 years of compliance history, any prosecution information and compliance actions that are under review. Our Service will update the quality and compliance history statement following a change to NQS ratings issued or compliance notices issued, within 7 days.

Notices must also be displayed if a child at risk of Anaphylaxis is enrolled or if an infectious disease has occurred. Where required, our Service will display information in languages commonly spoken by families enrolled at the Service to support understanding and inclusion.

The Approved Provider will collect and maintain digital staff records within the National Early Childhood Worker Register and ensure the register is updated within 14 days following any changes about a staff member, Educator, student or volunteer engaged in the OSHC Service.

MANAGING CONFLICTS OF INTEREST

- Conflict of interest, whether actual, potential or perceived, must be declared by all members of the Management Committee, Persons with Management or Control, Nominated Supervisor, Senior Staff and managed effectively to ensure integrity.
- Every stakeholder that is in a position of management has a responsibility to ensure their transactions, external business interests and relationships will not cause potential conflicts and to make such disclosures in a timely manner as they arise.
- The following process will be followed to manage any conflicts of interest:
    1. Whenever there is a conflict of interest, the member concerned must notify the Approved Provider about the conflict.

2. The member with a conflict of interest must not be present during the meeting of the Management Committee or Management meeting where the matter is being discussed or participate in any decisions made on that matter. The member concerned must provide the committee / Licensee with any and all relevant information they possess on the particular matter.
3. The minutes of the meeting must reflect that the conflict of interest was disclosed, and appropriate processes followed to manage the conflict.
4. A conflict of interest disclosure statement must be completed by each member of the Management Committee / staff member upon his or her appointment and annually thereafter. If the information in this statement changes during the year, the member shall disclose the change to the Approved Provider/ and revise the disclosure statement accordingly.

RESPONSIBILITIES:

The responsibilities of the Approved Provider that cannot be delegated to any other person or body include:

- ✓ Compliance Monitoring – ensuring compliance with the objects, purposes and values of the Service, and with its Constitution.
- ✓ Organisational Governance – setting or approving Policies, Plans and budgets to achieve those objectives, and monitoring performance against them.
- ✓ Strategic Planning – reviewing and approving Strategic direction and initiatives.
- ✓ Regulatory Monitoring – ensuring that the Service complies with all relevant Laws, Regulations and Regulatory Requirements.
- ✓ Financial Monitoring – establishing and maintaining Systems of financial control, internal control, and performance reporting; reviewing the Service's budget; monitoring Management and financial performance to ensure the solvency, financial strength and good performance of the Service.
- ✓ Financial Reporting – considering and approving annual financial statements and required reports to Government.
- ✓ Organisational Structure – setting and maintaining a Framework of delegation and internal control.
- ✓ Staff Selection and Monitoring – selecting, evaluating the performance of, rewarding and, if necessary, dismissing the Staff. Delegate the functions of Sub-Committees, the Nominated Supervisor, and other Staff.
- ✓ Risk Management – reviewing and monitoring the effectiveness of Risk Management and compliance in the Service; agreeing or ratifying all Policies and decisions on matters which might create significant risk to the Service, financial or otherwise.
- ✓ Dispute Management – dealing with and managing conflicts that may arise within the Organisation, including conflicts arising between Committee Members, Nominated Supervisor, staff members, Volunteers, or between GPAC and families enrolled at the Service.

PROCEDURES:

a) Facilities and environment:

The Management Committee will ensure Regulations 103–115 relating to the physical environment required for an OSHC Service are maintained at all times.

In the event of the relocation of the site the Management Committee will ensure that the requirements of the Regulations are considered if and when site re-arrangements are proposed.

Work, Health and Safety implications will be considered by the Management Committee in relation to Educators locking up and leaving the Service at the end of the day and Risk Assessments of the Practices will be undertaken.

b) Equipment and maintenance:

Appropriate equipment and furniture, to meet the needs of the children and Educators, will be well maintained and safe. Processes will be in place for routine cleaning of toys and equipment.

c) Review and evaluation of the Service:

Ongoing review and evaluation will underpin the continuing development of the Service. The Management Committee will ensure that the evaluation involves all Stakeholders, especially families, children and Educators.

The development of a QIP will form part of the review process. Reflection on what works well and what aspects of the Service need further development will be included in the QIP and discussed at meetings of the Management Committee.

d) Work, Health and Safety:

Policies and procedures will be in place to address the legal requirements relating to safety in the workplace and this information should underpin any Service specific requirements, including grievance/complaints procedures.

The Nominated Supervisor will report back to the Management Committee on any Work, Health and Safety issues as they arise.

All Committee Members will be provided with information to assist them in meeting their obligations under the Legislation

SOURCE

Australian Children's Education & Care Quality Authority. *Approved learning frameworks*

Australian Children's Education & Care Quality Authority. (2026). *Guide to the National Quality Framework*

Australian Children's Education & Care Quality Authority. (2026). Policy and procedure guidelines. *Governance and Management Policy Guidelines*.

Australian Government. Department of Education. (2026) Child Care Provider Handbook.

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2011

NSW Government. (2026). Education and Care Services (Supply, Authorisation and Use of Devices) Order 2026.

NSW Government. (2026). Ownership transparency guidance

NSW Government. (2026). Child safe recruitment and employment practices

Work Health and Safety Act 2011 (Cth). https://www.legislation.gov.au/Details/C2017C00305

CONSIDERATIONS:

Education and Care Services National Law and National Regulations	National Quality Standard	Other Service Policies/documentation	Other
S 2A, S3A, S4, S13, S14, S19, S21, S51, S162, S162A, S162B, S166A, S172, S173, S174, S174AA, S174AB, S175, Part ^A, S188, S269B, S269E. 29, 31, 55, 56, 73, 74, 84, 85, 104, 106, 107, 108, 109, 110, 117A, 117B, 117C, 128B, 128D,	7.1,7.1.2, 7.1.3, 7.2, 7.2.1, 7.2.2, 7.2.3	- Family Handbook - Staff Handbook - Fees Policy - Confidentiality Policy - Acceptance and Refusal Authorisation Policy - Administration of First Aid Policy - Code of Conduct Policy - Child Protection Policy - Child Safety and Wellbeing Policy - Infectious Diseases Policy - Emergency and Evacuation Policy - Interactions with Children, Staff and Families Policy - Record Keeping and Retention Policy - Safe Transportation Policy - Sleep and Rest Policy	- Service Constitution - Service Philosophy - Quality Improvement Plan/Self Assessment - Family Assistance Law – Incorporating all related legislation as identified within the Child Care Provider Handbook - https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook

128E, 154A, 154B, 157, 158, 160, 161, 162, 167, 168, 170, 171, 172, 173, 174, 175, 176, 176B, 176C, 177, 180, 181, 182, 183, 184, 185 All Regulations are applicable to this Policy		- Staffing & Staffing Arrangements Policy - Student and Volunteer Policy - Sun Safety Policy - Water Safety Policy All Service Policies	

ENDORSEMENT BY THE SERVICE:

Approval date: _____November 2026_____

Date for review: _____December 2027_____

MANDATORY

Revised 29/5/19 KK and KG
Amended GQ NoCA April 2020
Approved Committee 11/5/2020
Amended 16/8/23 to aligh with persons in management control
Revised 7/4/2025 KG
Revised 2/11/2026 KG