

# GOVERNANCE AND MANAGEMENT OF THE SERVICE INCLUDING CONFIDENTIALITY PROCEDURE



## Statement of Procedure

Fun 4 U Helensburgh OSHC is committed to maintaining effective, transparent, and accountable governance arrangements that support the delivery of high-quality education and care services and ensure compliance with all legislative, regulatory, and funding obligations under the Education and Care Services National Law and Regulations, the National Quality Framework (NQF), and Family Assistance legislation.

The Approved Provider is responsible for establishing, implementing, and overseeing governance systems that ensure the service operates ethically, sustainably, and in the best interests of children, families, staff, and the wider community. The Nominated Supervisor and management team are responsible for implementing these systems at the service level and for supporting educators and staff to fulfil their roles and responsibilities.

Governance and management procedures will include:

- Maintaining clear leadership roles and lines of responsibility across the service, including the Approved Provider, Nominated Supervisor, Responsible Person, Educational Leader, and Persons with Management or Control (PMC).
- Developing, implementing, and regularly reviewing all required policies, procedures, and operational documents to ensure ongoing compliance with legislative, regulatory, and best-practice requirements.
- Ensuring all educators, staff, volunteers, students, and management personnel receive induction training and ongoing professional development in governance, child safety, WHS, compliance obligations, and service operations relevant to their roles.
- Maintaining accurate records, documentation, and reporting systems in line with regulatory timeframes, privacy requirements, and retention schedules.
- Implementing quality assurance processes, including reflective practice, self-assessment, service reviews, staff meetings, incident analysis, and updates to the Quality Improvement Plan (QIP).

- Monitoring compliance with staffing arrangements, educator qualifications, supervision requirements, and child safety standards.
- Ensuring transparent financial management practices, including budgeting, record-keeping, internal controls, insurance coverage, and reporting obligations.
- Managing complaints, conflicts of interest, and whistleblower disclosures in accordance with service policies and legislative requirements.
- Ensuring effective communication processes with families, educators, staff, regulatory authorities, and other stakeholders to support informed participation and continuous improvement.

The Approved Provider and Nominated Supervisor will review governance systems at least annually or sooner following legislative changes, audits, incidents, complaints, or identified areas of risk, ensuring that governance practices remain fit for purpose and support the safe, effective operation of the OSHC service.

#### Governance and Management of the Service Procedure:

Education and Care Services National Regulations
<p>Quality Area 7: 7.1, 7.1.2, 7.1.3, 7.2, 7.2.1, 7.2.2, 7.2.3</p> <p>Regs: S.3A, S.4, S.13, S.14, S.19, S.21, S.51, S.162, S.172, S.173 S.174, S.174AA S.175,S. 188, 29, 30, 31, 55, 73, 74, 84, 101, 106, 107, 108, 109, 110, 117, 117B, 117C, 157, 158, 160, 161, 162, 165, 167, 168, 170. 171, 172, 173, 174, 174A, 175, 176</p>
Outlines of how Fun 4 U's <u>General governance and management</u>
<p><b><i>How and where to display the prescribed information in section 172 (regulation 173).</i></b></p> <p>Prescribed information will be clearly displayed in front entry area/sign in and sign out section of the hall at the service where it is accessible to families, educators, staff and visitors at all times. This information includes:</p> <ul style="list-style-type: none"> <li>• Provider approval and service approval certificates</li> <li>• Current service rating and quality rating certificate</li> <li>• Name of the approved provider and nominated supervisor</li> <li>• Details of the responsible person in charge</li> <li>• Hours of operation</li> <li>• Contact details for the Regulatory Authority and complaints procedures</li> </ul>

- Any waivers held by the service

Information will also be made available electronically or upon request.

***Processes for providing information to the regulatory authority upon request in relation to being a fit and proper person (sections 13, 14, 21).***

The approved provider will provide requested information to the regulatory authority promptly when assessing or reviewing “fit and proper person” status. This includes police checks, working with children checks, declarations, references, and any other documentation required under legislation. Records will be securely stored and updated as necessary.

***How to ensure that the service remains insured and evidence of this is kept (section 51; regulations 29, 180).***

The approved provider will ensure:

- Current public liability insurance is maintained at all times (minimum \$10 million cover).
- Insurance policies and certificates of currency are reviewed annually prior to expiry.
- Records of insurance are kept securely and are available for inspection by the regulatory authority upon request.

***Ways to ensure that the number of children at the service does not exceed the maximum in the service approval (section 51).***

The service will ensure enrolment numbers never exceed the maximum number of children stated in the Service Approval by:

- Maintaining accurate daily attendance records.
- Using enrolment management systems to monitor bookings and capacity.
- Training staff to check ratios and attendance numbers before accepting additional children.
- Appointing the responsible person to confirm compliance daily.

***Processes to ensure that 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).***

Families of enrolled children will be permitted to enter the premises at any time while their child is being educated and cared for, except where a temporary restriction is required for

safety or privacy reasons (e.g., lockdown/emergency situations). Clear sign-in procedures and visitor protocols will ensure safe access.

*What quality governance and management processes, procedures and practices (in line with the National Quality Standard, especially Quality Area 7 – Governance and leadership) should be implemented.*

The service will implement governance and leadership systems aligned with **Quality Area 7 of the National Quality Standard** by:

- Maintaining clear roles and responsibilities for the approved provider, nominated supervisor, educators, and staff.
- Implementing regular policy review cycles and continuous improvement processes.
- Maintaining a current Quality Improvement Plan (QIP).
- Providing induction, ongoing professional development, and performance reviews for staff.
- Ensuring financial and operational oversight through budgets, audits, and reporting processes.
- Maintaining transparent record-keeping systems.
- Engaging families, children, staff, and stakeholders in feedback and reflection processes.
- Conducting regular compliance monitoring and risk assessments.

*What systems of risk management, internal control, and performance reporting are in place to ensure the viability of the service and that all financial and other obligations are able to be met.*

The Service implements structured risk management and internal control systems to ensure financial viability and regulatory compliance. These include annual budgeting and financial forecasting, regular monitoring of income and expenditure, separation of financial duties, internal approval processes, and periodic reviews of insurance, staffing, enrolments, and operational risks. Performance is monitored through financial reports, compliance audits, incident data, attendance records, and Quality Improvement Plan (QIP) outcomes, enabling timely identification and management of risks.

*The management structure of the service with respect to accountability and processes for monitoring risk and viability.*

The Approved Provider holds ultimate accountability for governance, financial viability, and compliance. The Nominated Supervisor is responsible for day-to-day operational management, compliance monitoring, and staff oversight. Clear reporting lines, documented delegations, regular meetings, and scheduled reviews support shared accountability and continuous monitoring of operational, financial, and compliance risks.

*Developing, reviewing and approving the service philosophy and purpose, strategic direction and initiatives.*

The Service philosophy and strategic direction are developed and reviewed collaboratively with educators, families, children, and management. The Approved Provider approves the philosophy and strategic initiatives, ensuring alignment with My Time, Our Place, legislative requirements, and community values. These are reviewed as part of the annual self-assessment and QIP process or when significant changes occur.

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

The Service maintains an effective self-assessment and continuous improvement process in line with QA7. A Quality Improvement Plan is kept at the Service premises, available for inspection and to families, and reviewed at least annually or when required by the regulatory authority. The QIP reflects feedback, assessment outcomes, incident analysis, and changes in legislation or practice.

*What processes are required to ensure the health, safety and wellbeing of children in the Service and that every reasonable precaution is taken to protect children from harm and hazard including harm from the use of digital technologies and online environments (section 51; Element 2.1.2), and that there are relevant policies and procedures for this.*

The Service ensures children's health, safety and wellbeing by implementing comprehensive policies and procedures addressing supervision, child protection, incident and illness management, infection control, safe use of digital technologies, and online environments. Regular risk assessments, staff training, supervision plans, and incident reviews ensure every reasonable precaution is taken to protect children from harm and hazards, including digital risks.

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

The Service ensures compliance with physical environment requirements by conducting regular inspections, maintenance schedules, and risk assessments of buildings, outdoor areas, equipment, and resources. Space, furniture, facilities, and equipment are appropriate for children's needs, inclusive, safe, and well maintained in accordance with Regulations 104–110, 116–117 and Quality Area 3.

*How to ensure that children's educational and developmental needs are met (section 51; Quality Area 1).*

Children's educational and developmental needs are met through an educational program based on My Time, Our Place, responsive to children's interests, strengths, and developmental stages. The Educational Leader is supported to guide planning, documentation, reflection, and evaluation of the program to ensure compliance with Quality Area 1 and continuous improvement in learning outcomes.

**Strategies for Monitoring and Implementing Procedures**

- Make sure your policy and procedures are available for all to access.
- Appoint an appropriately trained and experienced leadership team.
- Develop and adhere to a service budget and other systems of financial control.
- Document the service process for ongoing self-assessment, planning and review against the National Quality Framework.
- Align program delivery with continuous quality improvement planning.
- Provide management, educator and staff training and regular updates and reviews on risk management and accountability.
- Review and discuss guidance and strategies on recruitment, induction and managing staff in the NQF Child Safe Culture Guide and the NQF Online Safety Guide at team meetings.
- Develop systems, templates or documents as needed for the individual policies and procedures.

**Related Policy and/or Procedures**

- Nutrition, food and beverages, dietary requirements

- Sleep and rest
- Dealing with medical conditions in children
- Dealing with infectious diseases
- Incident, injury, trauma and illness
- Emergency and evacuation
- Incursions and Excursions
- Interactions with children

#### Outlines of how Fun 4 U: Maintains Records and Confidentiality

*Where you will keep a record of the service's compliance with the information listed in regulation 167.*

A compliance register is maintained at the OSHC Service premises (and electronically in OWINA a secure service management software). This register records evidence of compliance with all required policies, procedures, approvals, certificates, and legislative obligations and is available for inspection by an authorised officer upon request.

*The process for ensuring that enrolment and other documents listed in section 175 will be kept at the service or FDC residence or venue and be available for inspection by an authorised officer (section 175).*

All enrolment records and prescribed documents listed under section 175 are stored securely at the Service premises in both hard copy (locked filing cabinets) and electronic form (password-protected systems). Records are made available for inspection by an authorised officer at any time and are accessible to families upon request.

*How you will ensure that records are kept confidential and not divulged except as permitted under regulations 181 and 182.*

Access to records is restricted to authorised persons only, including the approved provider, nominated supervisor, and authorised staff. Information is only disclosed where permitted or required by law. Staff receive training on confidentiality obligations during induction and ongoing professional development, and breaches are managed in accordance with the Privacy and Confidentiality Policy.

*How you will ensure that records are stored safely and securely for the period set out in regulation 183, and how they will be disposed of after that time.*

Records are stored securely for the minimum retention periods prescribed under Regulation 183. Physical records are kept in locked cabinets, and electronic records are protected by passwords and access controls. Once retention periods expire, records are disposed of securely through shredding (paper) or permanent deletion (digital), ensuring confidentiality is maintained.

*Where you will keep enrolment and attendance records (regulations 158, 159, 160, 161, 162) and other documents listed in regulations 160, 177 and 178, and how you will ensure they are accurate and available to families on request (section 175). If your service approval is transferred, the process for ensuring the documents will be transferred to the receiving approved provider (regulation 184).*

**Where records are kept and how accuracy is ensured**

Enrolment, attendance, and related records are maintained at the Service premises and within approved digital management systems. Attendance records are completed daily and regularly audited for accuracy. Families may access their child's records upon request in accordance with section 175.

**Transfer of records if service approval changes (Reg. 184)**

If service approval is transferred, all required records will be securely transferred to the receiving approved provider within the required timeframe, ensuring continuity of care and compliance.

*How you will ensure that record keeping obligations are complied with when using digital technologies and online environments at the service, including the taking, use, storage and destruction of images and videos of children being educated and cared for by the service (regulation 168).*

The Service uses secure, password-protected digital platforms that comply with privacy and data protection requirements. Policies govern the taking, storage, use, and destruction of digital records, including images and videos. Access is limited to authorised users only, and regular system audits are conducted.



*How you will ensure authorisation is obtained from parents to take, use and store images and videos of children being educated and cared for by the service (regulation 168).*

Written authorisation is obtained from parents/guardians at enrolment for the taking, use, and storage of images and videos of their child. Authorisations clearly outline how images may be used (e.g. documentation, displays, marketing). Families may amend or withdraw consent at any time, and this is recorded and respected immediately.

**Strategies for Monitoring and Implementing Procedures**

- Have a dedicated physical space for the secure storage of paper records and an up-to-date, protected computer system and software for the secure storage of electronic records.
- Regularly review the systems used to store, retain and dispose of records.
- Process to regularly update relevant records.

**Related Policy and/or Procedures**

- Enrolment and Orientation
- Safe use of digital technologies and online environments

**Outlines of Fun 4 U's: Notifications and Reporting**

*Systems for ensuring notification and reporting requirements are met for the National Quality Framework, family assistance, taxation, child protection (Element 2.2.3), and other relevant laws.*

The OSHC Service will maintain a centralised compliance and notification system overseen by the approved provider and nominated supervisor. This includes a compliance calendar, incident and notification register, and clear written procedures aligned with the National Quality Framework, Family Assistance Law, child protection legislation, taxation requirements and other relevant laws. Notification responsibilities are embedded in induction training and reinforced through ongoing professional development and staff meetings.

**How to ensure that the regulatory authority is notified about the approved provider and operational changes, and changes in relation to the nominated supervisor, as detailed in section 173 (regulations 174, 174A).**

The approved provider will ensure the regulatory authority is notified via the **NQA IT System (NQA ITS)** within the required timeframes of:

- changes to approved provider details
- changes to service operation, location or contact details
- appointment or change of nominated supervisor or responsible person.

A compliance checklist will be used to verify notifications are completed, documented and retained.

***How to ensure that the regulatory authority is notified 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 National Law has been contravened, or any incidents or allegations of physical or sexual abuse to a child while being educated and cared for at an education and care service (section 174; regulations 175, 176, 176A).***

The approved provider will notify the regulatory authority within legislated timeframes of:

- any change affecting the fit and proper status of the approved provider or persons with management or control
- all serious incidents (including those where emergency services attend)
- complaints alleging a serious incident or a breach of the National Law
- any incident, allegation or suspicion of physical or sexual abuse of a child while being educated and cared for.

Notifications will be submitted through **NQA ITS**, recorded in the Service's Notification Register and securely retained.

***How educators and staff will be supported to understand the different types of incidents and which would require notification to the regulatory authority (Element 2.2.2).***

Educators and staff will be supported to understand notification requirements through:

- induction training covering incident categories and reporting thresholds
- clear flowcharts and quick reference guides displayed in staff areas
- regular scenario-based discussions at staff meetings

- access to the Incident, Injury, Trauma and Illness Procedure and Child Protection Policy.

Staff are required to immediately report all incidents to the nominated supervisor or approved provider to determine notification requirements.

***How you will develop and appropriately store records of notifications.***

All records of notifications will be:

- documented using approved templates and registers
- stored securely in both hard copy (locked cabinet) and/or secure digital systems
- retained in accordance with regulation 183 record retention requirements
- accessible only to authorised persons.

Records include copies of submissions, confirmation receipts from NQA ITS, related incident reports and follow-up actions.

**Strategies for Monitoring and Implementing Procedures**

- Create a timeline of reporting requirement dates.
- Develop reporting templates where relevant.
- Provide educator and staff induction training, standalone training sessions, and regular updates and reviews at team meetings on incidents and notifications.
- Review and discuss guidance and strategies on child safety and managing complaints and disclosures in the NQF Child Safe Culture Guide and the NQF Online Safety Guide at team meetings.

**Related Policy and/or Procedures**

- Dealing with medical conditions in children
- Incident, injury, trauma and illness
- Dealing with complaints
- Safe use of digital technologies and online environments

**Outlines of Fun 4 U's: Notifications and Reporting**

***How you will ensure that any requirements relating to the nominated supervisor, responsible person and staffing are met, including implementing the Staffing policy and procedures (section 162; regulations 84, 117B; Quality Area 4; Element 7.1.3).***

The approved provider will ensure that a suitably qualified nominated supervisor is appointed and approved, and that a responsible person is present at all times the service is operating. Staffing arrangements will comply with the National Law and Regulations, including educator-to-child ratios, qualification requirements and supervision obligations. Staffing is managed through rosters, qualification records, Working With Children Checks, and regular compliance checks in line with the Staffing Policy and procedures.

*How you will ensure that roles and responsibilities are clearly defined, understood, and support effective decision-making and operation of the service (Element 7.1.3).*

Roles and responsibilities for the approved provider, nominated supervisor, responsible person, educational leader, educators and staff are clearly documented in position descriptions, policies and procedures. These responsibilities are communicated during induction and reinforced through ongoing training, supervision, staff meetings and performance discussions to support effective decision-making and service operation.

*The most effective approach for regularly evaluating the performance of educators, staff and coordinators and to develop individual plans to support learning and development (Element 7.2.3).*

The service implements regular performance appraisal and supervision processes for educators, staff and coordinators. These include observations, reflective discussions, feedback, goal setting and professional development plans. Individual learning and development plans are developed to support continuous improvement, professional growth and alignment with the National Quality Standard.

*What recruitment processes will be needed so that a nominated supervisor, educators, staff, volunteers and contractors to whom a prohibition notice applies are not engaged by the service (section 188).*

Recruitment processes include identity verification, Working With Children Check verification, reference checks, qualification verification, and screening against prohibition notices where applicable. No nominated supervisor, educator, staff member, volunteer or contractor is engaged unless all legislative and regulatory requirements are met, including compliance with section 188 of the National Law.

*How best to support the educational leader to lead the development and implementation of the educational program and assessment and planning cycle (Element 7.2.2), e.g. opportunities for discussions with educators, mentoring, leading reflective practice.*

The approved provider and nominated supervisor support the educational leader by providing time, resources and authority to lead the development, implementation and review of the educational program and assessment and planning cycle. Support includes regular professional discussions, mentoring opportunities, collaborative planning time, access to professional learning, and leadership of reflective practice aligned with My Time, Our Place and Quality Area 1.

#### **Strategies for Monitoring and Implementing Procedures**

- Develop systems, templates or documents as needed for the individual policies and procedures.
- Develop clearly defined position descriptions, responsibility statements and accountability systems to be included in the induction process.
- Develop clear procedures for recruitment and selection.
- Create a checklist for the engagement or recruitment process to ensure all aspects are addressed and that the nominated supervisor, educational leader, educators, staff, volunteers and contractors meet requirements.

#### **Related Policy and/or Procedures**

- Staffing
- Interactions with children

## Sources

- Australian Children's Education & Care Quality Authority. (2025). [Guide to the National Quality Framework](#)
- Australian Children's Education & Care Quality Authority. (2025). Policy and procedure guidelines. [Governance and Management Guidelines](#).
- Australian Government. Department of Education. [Child Care Provider Handbook](#). (2025)
- Early Childhood Australia Code of Ethics. (2016).
- [Education and Care Services National Law Act 2010](#). (Amended 2025)
- [Education and Care Services National Regulations](#). (Amended 2025)
- NSW Government. (2025). [Education and Care Services \(Supply, Authorisation and Use of Devices\) Order 2025](#).
- *Work Health and Safety Act 2011* (Cth).

Record of services' compliance (Reg 167)

**Date Created:** August 2015

**Date Reviewed by Fun 4 U:** 07/12/2025

**Childcare Centre Desktop Policy Update:** November 2025

**This Procedure Follows ACEQA:** [PolicyGuidelines GovernanceManagement v2.pdf](#)