

OSHC Compliance Tool

for governing council operated services

School:	Date completed:	
Principal's Name:	Principal's Signature:	
OSHC Director's Name:	OSHC Director's Signature:	
Nominated Supervisor's Name:	Educational Leader's Name:	

For OSHC services where the governing council is the approved provider, it is the principal's responsibility to:

- Assist the governing council to comply with Australian and state legislation, regulations and standards, including the National Quality Standard, the Education and Care Services National Law and the Education and Care Services National Regulations
- Ensure that the quality of care being offered is in keeping with the values, principles and policies of the school, governing council and Department
- Understand the requirements for quality in an OSHC service and the associated roles and responsibilities of all stakeholders in the service
- Provide line management of the OSHC director
- Seek feedback from children and families who use the service
- Monitor the service during operating hours.

Purpose of this tool

- Assist principals to better understand ALL OSHC requirements
- Enable principals to assess their OSHC Director's level of knowledge and understanding of Department and regulatory responsibilities
- Enable systematic analysis of the OSHC service to determine levels of compliance
- Act as an action plan for the OSHC director to follow up on any identified gaps
- Provide a conversational tool to use at meetings between principal and OSHC director/leadership.

The first two sections identify specific Principal responsibilities (key principal responsibilities and employment). The remaining sections are the responsibility of the OSHC leader, with oversight from the principal.

KEY PRINCIPAL RESPONSIBILITIES		YES/ DATE	ACTION
1.	Has the principal signed the <u>Instrument of Authorisation</u> , along with the governing council chairperson, to outline the extent of the principal's responsibilities with the OSHC service? This process must be done annually, or whenever the members change.		
2.	Is an OSHC advisory committee established which meets twice per term? This committee comprises principal, school finance officer, OSHC director, governing council representative and one or more parent of a child who uses the service.		
3.	Are financial and operational reports from the OSHC Advisory Committee presented at each governing council meeting?		
4.	Are governing council members supported to understand their roles and responsibilities as the OSHC employer and approved provider? Training is available for governing council members on Plink .		
5.	Are site financial management practices implemented as per <u>Department for Education policy and procedures</u> ? See more under finance section in this document.		
6.	Does the principal or delegate provide line management to the OSHC director? Is the OSHC director the <i>Nominated Supervisor</i> ? This position carries responsibilities under the law and must be accepted in writing. The principal <i>may</i> be the <i>Nominated Supervisor</i> or a secondary <i>Nominated Supervisor</i> . This information must be kept up to date via the National Quality Agenda IT System (NQAITS).		
7.	Are <i>Persons with Management and Control</i> (PMC) up to date on the <u>NQAITS</u> portal? PMCs in schools include the principal and executive members of the governing council. PMCs must also be approved in PRODA to receive Australian Government Child Care Subsidy (CCS). This is set up in the service's CCS software. Note that part of the PMC clearance process includes a National Police Check (in addition to a WWCC). Identifying Persons with Management or Control		
8.	The OSHC service must meet the requirements of the National Quality Framework, inclusive of the guiding documents: National Quality Standard Education and Care Services National Law Education and Care Regulations My Time, Our Place (OSHC Learning Framework) Early Years Framework (if service caters for preschool children) Does the OSHC director have a clear understanding of each of these documents and their requirement?		

EMPLOYMENT Management of OSHC employees - Principal responsibilities 9. Recruitment of OSHC director, together with governing council chairperson Dismissal of OSHC staff (including any investigation and/or disciplinary process) together with the governing council chairperson. Is the OSHC director's leave and any variation to their contracted hours formally approved (and can be met within the approved budget)? Is the OSHC director supported to identify training and development needs and opportunities for the OSHC staff? Are there clear procedures established for the OSHC director and/or staff to raise workplace, health and safety issues with the OSHC advisory committee and governing council? Where possible, are OSHC staff included in whole of school professional development and training sessions e.g. WH&S, risk management training, RRAHN-EC and other relevant training – which may involve using relief staff in OSHC to facilitate this? Are copies of Protective practices for staff in their interactions with children and young people guidelines and Managing Allegations of Sexual misconduct in SA Education and care settings guideline provided to relevant OSHC personnel? Management of OSHC employees - OSHC director responsibilities (reporting to the principal) Are educators recruited, using Department for Education recruitment and suitability of applicant processes? Do all OSHC employees have clearances in regard to: A valid Working With Children Check (WWCC) See Screening and background checks to check validity of WWCC o Human Resources online preemployment compliance form completed before an offer of employment is made o Current and appropriate certificate for Responding to Risks of Harm, Abuse and Neglect – Education and Care (RRHAN-EC)? Do OSHC staff undertake and maintain currency in required training (e.g., RRHAN-EC, First Aid and WH&S)? Note that employees are to be paid for any required PD or training undertaken outside their usual working hours. • Are appropriate site inductions undertaken for all OSHC employees? Do all OSHC employees have Job and Person Specifications which outline their roles and responsibilities?

Are all staff employed under the appropriate award classification and have a written contract of

employment that is consistent with the relevant National Employment Standards?

	 Do all OSHC employees have written contracts? New rules were introduced in December 2023 for fixed term contracts, limiting contracts to a maximum of 2 years, including extensions and renewals. Are any variations to OSHC educator contracted hours formally approved (and can be met within the approved budget)? Is Strategies for Managing Abuse Related Trauma (SMART) training undertaken when children and young people in care are enrolled at the service? 	
10.	Has a suitably qualified and experienced 'Educational Leader' (under regulation 118) been designated in writing for the service? This is either the OSHC Director, or another nominated leader. The educational leader is paid an allowance under the Children's Services Award. The role should be clearly outlined in the educational leader's job and person description and contract. Educational Leadership in Out of School Hours Care	
11.	Are annual professional reviews undertaken for all OSHC employees? Has the principal undertaken an annual review of the OSHC director and ensured the OSHC director undertakes reviews of other staff? This review should inform a professional development plan.	
12.	Are staff encouraged to attend professional development and network group meetings for OSHC educators and leaders? Are funds included in the budget for this purpose?	
13.	Are any unqualified OSHC staff encouraged to apply for a traineeship to gain an OSHC qualification?	
STAFFIN	NG REQUIREMENTS – OSHC director responsibility with oversight from principal	
14.	Is the service staffed (<u>as a minimum</u>) according to the ratios contained in <u>Regulation 123 of the National Regulations</u> . Refer to <u>OSHC ratios Education Standards Board (ESB) SA</u> . A higher educator to child ratio may be applied to increase quality of care and to address increased needs of children with additional needs or other identified risks in the environment.	
15.	First Aid - Regulation 136 The service is required to have staff with appropriate First Aid, asthma and anaphylaxis qualifications on duty at all times and immediately available in an emergency. How does the service ensure this requirement is met? Is refresher CPR training undertaken annually as legislated for First aid Qualifications?	

QUALIT	Y IMPROVEMENT PLANS (QIP) - OSHC director responsibility with oversight from principal	
16.	The Quality Improvement Plan is a working document to drive quality education and care. There should be collaboration between principal, OSHC service leaders, educators, children and families (regulation 55-56). To comply with the National Quality Framework, is the service QIP updated at least annually? Are the governing council, staff and families all consulted in the process? Quality Improvement Plan (4b) A Quality Improvement Plan template ACECQA - Self-assessment tool ESB Compliance self-assessment tool	
17.	Is the QIP available to view onsite/online at all times?	
18.	Following an assessment and rating visit by the state's regulator, the Education Standards Board (ESB), information in the report should be considered and areas for continuous improvement should be included in the QIP for ongoing review. Has this occurred?	
19.	Have the director and educators been provided with appropriate hours to implement the actions outlined in the QIP?	
сомм	UNICATION - OSHC director responsibility with oversight from principal	
20.	How is effective and regular communication maintained between the school, OSHC director and the service? It is recommended that the principal and OSHC director meet fortnightly.	
21.	Do the OSHC staff receive regular school information (e.g., through shared staff bulletins, newsletter), and other information relevant to the service? (e.g. <u>ACECQA Newsletter</u> and the <u>ESB Newsletter</u>)	
22.	Do the OSHC staff meet regularly as a team to consider service matters such as programming, procedures, policy review and quality improvements?	
23.	Is <i>up-to-date</i> <u>prescribed information</u> displayed prominently near the entrance of a service as per <u>Reg 173</u> ?	
INCLUS	ION - OSHC director responsibility with oversight from principal	
24.	Are there strategies in place for family participation in such things as programming, governance, inductions, information sharing and service involvement to ensure community participation and inclusion of all children in accordance with NQS Quality Area 6?	
25.	Is there a process for the school to share strategies with OSHC educators regarding the children who require additional support (such as the OSHC director involved in One Plan meetings)?	
26.	Are OSHC educators supported to include children with disabilities or additional needs. Are you aware of the two funding sources available to support the inclusion of children with additional needs?	

POLICIE	 The Australian Government Inclusion Support Programme (ISP) is the primary source of funding to assist children with disabilities to access OSHC. Gowrie SA is the <u>Inclusion Support Agency</u>. <u>Intervac funding</u> is provided by the Department. Note, this funding is to provide an extra educator to reduce ratios, not to provide 1:1 support for a child. S - OSHC director responsibility with oversight from principal 	
27.	Are policies regularly reviewed via a schedule, in consultation with educators and advisory committee and approved by the governing council?	
28.	Does the service have a Statement of Philosophy in accordance with <u>Regulations 55–56</u> ?	
29.	Is the service's Nutrition policy and procedure in accordance with <u>Regulations 77, 78, 79, 80 & 168</u> ? Is the service following the Department <u>Right Bite</u> guidelines (Note these are guidelines only)?	
30.	Does the service have an Incident, Injury, Trauma and Illness policy in accordance with Regulations 168; 89 (1) a, b & c; 12; 85; 86; 87; 176 (2) (a) (ii)?	
31.	Does the service have a Sun Protection policy in accordance with Regulations 168, 114, 249 (2)?	
32.	Does the service have a Water Safety policy in accordance with Regulations 101;2 (b), 168?	
33.	Does the service have a policy for the administration of First Aid in accordance with Regulations 168 89 136?	
34.	Does the service have an Infectious Diseases policy in accordance with <u>Regulations 88, 168</u> ?	
35.	Does the service have a Medical Conditions policy in accordance with Regulations 168, 90–96, 162? Does the service have individual communication and risk minimisation plans for each child with a medical condition?	
	Are these reviewed regularly with families as per service policy? How does the service manage it if families do not update medical plans when required?	
36.	Does the service have a Sleep, Rest and Relaxation policy/procedure in accordance with Regulation 84A-C? Does the service undertake an annual risk assessment as required by this regulation?	
37.	Does the service have an Emergency and Evacuation policy/procedure, including lockdown and bushfires in accordance with Regulations 97, 98, 168 and informed by a risk assessment?	
38.	Does the service have a Safe Arrival of Children policy and procedures in accordance with Regulations <u>102AAB/C</u> , <u>99, 158, 168</u> ?	

	Is an annual risk assessment undertaken to inform this as required under <u>Regulation 102AAC</u> ?	
39.	Does the service have an Excursions policy/procedure in accordance with Regulations 100-102,168?	
	Are risk assessments undertaken for excursions as per <u>Regulation 101</u> ?	
40.	Does the service have a Child Safe Environment policy in accordance with Regulations 82, 84, 103-115, 155, 168?	
	Does it include online environments?	
41.	Does the service have a Staffing policy which includes volunteers, students, leave provisions, working alone, performance and development, Code of Conduct, duty of care, professional development and training, induction and nominating a Responsible Person/Nominated Supervisor in accordance with Regulations 46, 54, 118-154, 168, 169?	
42.	Does the service have an Interactions with Children policy, including behaviour guidance, inclusion and managing conflict in accordance with <u>Regulations 155, 156, 168</u> ?	
43.	Does the service have an Enrolment and Orientation policy inclusive of access to the service and orientation in accordance with Regulations 160, 161, 162, 168, 177?	
44.	Does the service have a Governance and Management policy, inclusive of philosophy and policies, facilities and environment, equipment and maintenance, maintenance of records and workplace health and safety in accordance with Regulations 103–115 168, 171, 172, 173, 177, 183–184, 185?	
45.	Does the service have a Confidentiality policy in accordance with Regulations 145-152, 168, 174-178?	
46.	Does the service have an Acceptance and Refusal of Authorisations policy/procedure in accordance with Regulations 92, 99, 102, 168?	
47.	Does the service have a Fees policy including bookings and cancellation, penalty for late collection, budgeting, financial management and debt management in accordance with Regulation 168 ?	
48.	Does the service have a Safe Transportation policy in accordance with Regulation 102 A-F?	
	Has the NQAITS been updated to indicate if the service provides regular transportation of children other than for an excursion? See links on next page for more information.	
	<u>Information sheet – Regular transportation of children, Safe transportation of children safety checklist, Guidance</u>	
	for adequate supervision during transportation.	
49.	Does the service have a Complaints policy/procedure in accordance with Regulations 168, 173, 176?	

FINANC	ES - OSHC director and finance/business manager responsibility with oversight from principal	
50.	Does the school comply with the Department's site Financial Management policies for schools and preschools, including: • Financial operation of OSHC instruction (staff login required)	
	• <u>Financial management of governing council employees instruction</u> (staff login required).	
51.	Are the budget and fees reviewed annually and formally approved by the governing council in term 4?	
	Is the budget reviewed each term against actual figures and attendance figures?	
52.	Does the OSHC budget cover staffing, consumables, food, drink, arts, craft and play equipment, toys, electronic equipment, office and administration expenses, staff training and development and excursions?	
53.	Is the outstanding debtors report reviewed regularly?	
	OSHC fees are legally recoverable and debt collection should be undertaken in line with service policy. Does the service have a debt collection policy/procedure? Are they reviewed and followed?	
54.	Is an <u>annual audit</u> undertaken by <u>31 May</u> to ensure all OSHC expenditure is accounted for, including accruals and staff entitlements? Are audit reports and statements provided to the governing council?	
	Is the audit provided to the Department (Audit and Risk) within 14 days of completion?	
55.	Is <u>all</u> revenue generated by the OSHC service invested back into the OSHC service per <u>OSHC policy</u> ?	
	ATION OF SERIOUS INCIDENTS, COMPLAINTS, INCIDENTS AND ADDITIONAL CHILDREN IN A ENCY - OSHC director responsibility with oversight from principal	
56.	A Nominated Supervisor or Responsible Person is required to notify the ESB via NOAITS within 24 hours of becoming aware of a serious incident (Section 174(2) (a) and Regulation 176(2) (a).	
	A serious incident (Regulation 12) is defined as any of the following:	
	a) The death of a child	
	 b) Any incident involving serious illness of a child while being cared for c) Any incident involving a serious injury or trauma occurring to a child where urgent medical attention was 	
	sought from a registered medical practitioner; or ought reasonably to have attended a hospital	
	d) Any emergency for which emergency services attended	
	e) A child appears to be missing or cannot be accounted for at the service, appears to have been taken or removed from the service or is mistakenly locked in or locked out of the service premises.	
F-7	A Nominated Supervisor or Responsible Person is required to notify the ESB via NQAITS of:	
57.	The state of the s	

	 a. A complaint regarding a safety, health or wellbeing issue or breach of the law b. An incident that requires/required the Approved Provider to close or reduce the number of children attending the service for a period. c. A circumstance that poses a significant risk to the health, safety or wellbeing of a child attending the service d. The attendance of any additional child above approved places cared for in an emergency (e.g., under a child 	
	protection order, the parent of a child needs urgent health care that prevents them caring for a child, etc.).	
58.	The OSHC director or Responsible Person must notify the school principal of any incident within 12 hours and attach evidence of the NQAITS notification record where possible.	
	The principal(or delegate) reports the incident on the Incident Response Management System (IRMS), attaching the ACECQA incident record.	
	<u>VACATION CARE process:</u> If the principal or their nominee will not be available during vacation care, they must authorise a delegate with access to IRMS to enable timely reporting in their absence.	
PRESCH	OOL CHILDREN IN OSHC - OSHC director responsibility with oversight from principal	
59.	Do preschool children attend the OSHC service?	
60.	Do you use the <u>preschool ratio of 1:11</u> for the preschool children?	
61.	Have you notified the ESB via NQAITS portal that your service includes preschool children? This requirement arose due to a change to the regulations in 2023: Changes to age of children being cared for.	
62.	Have you undertaken a risk assessment to determine the facilities, equipment, outdoor environment, fencing and educator knowledge is adequate to cater for preschool children?	
63.	Does the service use the early years learning framework <u>Belonging</u> , <u>Being & Becoming</u> to program for preschool children?	
FACILIT	IES & APPROVED SPACES - OSHC director responsibility with oversight from principal	
64.	Are you aware of the pre-determined OSHC spaces within the school, which have been approved by the ESB? OSHC services operate in 'approved spaces'	
	These might be dedicated OSHC spaces or shared with the school. The number of children allowed to attend the OSHC are determined by the total square metres of these spaces. These approved spaces must be available at all times the OSHC is in operation.	
	If the school wishes to change the location of the OSHC service or use the space during OSHC operating hours, the provider must notify the ESB of the alternative space. This is the case whether it's needed temporarily or permanently according to the ESB .	

	What process occurs if the school needs to use one of the spaces (such as the gym for end of year graduation) to ensure the service is meeting ESB requirements?	
65.	Have you recently undertaken a review of the current approved OSHC spaces to determine they are suitable for the delivery of an OSHC service? Quiet spaces may need to be accessed to meet the needs of some children, including those with additional needs. If your service operates exclusively from a gym, how is the space arranged to support the need of all children?	
66.	In 2012, when the National Law and Regulations came into effect in schools, the Australian Government granted blanket approval to all existing OSHC services regardless of whether the spaces and facilities met the new regulations or not. Many of the physical spaces where OSHC is located in our schools and their associated facilities (toilets, hand basins kitchens, play areas, verandahs), did not meet the new standard. The blanket approval remains in place until schools make a variation of service including: • Varying the physical space and facilities (indoors or outdoors) • Changing location (temporary or permanent) • Building new spaces and facilities • Increasing student capacity. If any of the above are relevant, the approved provider should contact the ESB and discuss their options before applying for an amendment to service approval via the NQAITS.	
67.	 What are the cleaning arrangements for the OSHC service? This differs from site to site. When is the service cleaned? Is this arrangement reviewed from time to time? Who does the cleaning? What budget does it come from? 	