

## **ISSUES/CONCERNS ABOUT ASSESSMENT & PLANNING PROCESS IN NEW SOUTH WALES**

1. **ASSESSMENT ON PERFORMANCE VS PAPERWORK:** The small amount of time ACOs are allocated to actually spend in the service observing the actual practice and interacting with educators and management.
2. **SCOPE OF ASSESSMENTS:** The amount of material ACOs are expected to locate and investigate. There have been occasions where the time ACOs spend at the service exceeded the official opening and closing times.
3. **VOLUME OF DOCUMENTATION:** The amount of “paperwork” that ACOs are expected to complete. We believe this has also led ACOs to try and “shortcut” the process, thereby putting at risk the service’s assessment and rating.
4. **LIMITS IMPOSED ON EXAMPLES:** ACOs appear to limit the number of examples provided by services as they have no room to write any more and they do not appear to have the time. So to achieve a higher standard, it comes down to the 2 examples provided when there could legitimately be a long list of examples that would reasonably demonstrate achievement on their merit.
5. **LIMITS IMPOSED ON EXPLAINING KEY QUALITY AREAS:** Since Programming (for example) is an entire quality area, ACOs appear to only give 1 hour on average to show the entire program and how it relates individually to all children including family input. Explaining the program cycle alone took 10 minutes to explain, with the balance of 50 minutes to explain and show evidence on what one of the most important areas relating to the education and development of the children. Yet, when explaining in detail, a number of ACOs tell services that they are literally only writing one sentence.
6. **PROVIDING EVIDENCE:** ACOs appear to be refusing to accept or consider “evidence folders” with examples of their efforts to meet quality standards and elements that occurred prior to their visit. Moreover, the process does not appear to be clear about whether or not any evidence requested must be documented or that it is orally explained to the ACO.
7. **INCONSISTENT/AMBIGUOUS TERMINOLOGIES:** Confusion about terms used in the NQS and its guide. For example, 3.3.1 talks about “sustainable practices”, yet this is only described as recycling and water conservation. What do the ACOs consider to be “sustainable practices” and how does this look in a service that is rated as “Working Towards”, as opposed to a service that is rated as “Exceeding”. The same can also be said for the term “sense of agency”. Another example is element 7.2.2. The performance of Educators, co-ordinators and staff members is sometimes evaluated. What does sometimes mean in this context? Once a year, once every 6 months? Often ACOs want to see 2 years’ worth of performance reviews before they will provide you with meeting the standard. But such a standard is not stated. Another is 7.3 Policy Review Period. Again, would that be 12, 18 or 24 months?
8. **NON-EMPIRICAL/SUBJECTIVE STANDARDS:** The fact that because the process isn’t prescriptive makes it open to subjectiveness. Services are, for example, continually told that there is no one “right way” to program and document children’s learning, that they must find their own method that suits their service. Yet when assessed, it is able to be rated as “Working Towards” because it does not meet the ACOs expectation of what a program or documentation should look like. This is despite it meeting the requirement to demonstrate the planning cycle, the regulations (ie documenting children’s learning and catering for individual differences so that children work towards meeting learning outcomes).

9. **APPROPRIATE RESOURCING OF THE REGULATOR:** Notwithstanding the limited resources available to the NSW Department of Education and the Commonwealth Government's lack of funding to conduct assessments and ratings for at least the 15% of the sector each year, there remains a lack of understanding that services can apply to be assessed sooner by a paid application.
10. **CONDUCT OF ACO:** What is the NSW Department of Education's standard expected of ACOs' performances and professional conduct? And if there were legitimate complaints/concerns about ACOs, how would they be handled independently and impartially, with assurance that there would be no reprisals?
11. **REASONABLE TIMEFRAME TO RESPOND:** After every assessment and rating, services normally receive the draft report in 3-5 weeks' time and have 10 days to respond. Services should have a similar amount of time (eg one month) to respond and have services' staff taken away from actually caring for, developing and educating children.
12. **ACO FATIGUE:** Putting aside the problem that services are often opened well before the start of the assessment and rating process, and close hours after the process is completed (ie the process could be a 12 hour or more process), it is questionable if the ACO her/himself would be suffering from fatigue, and hence may not be properly assessing or rating the service fairly and accurately.

## **RECOMMENDATIONS & SUGGESTED IMPROVEMENTS**

- (a) Instead of Working Towards, Meeting and Exceeding etc., the ratings should be Unsatisfactory, Operating Level, National Quality Standard, High Quality and Excellent, as follows:
  - a. Unsatisfactory: indicates that a service is not meeting the NQS and the regulator is working closely with the service to immediately improve its quality, otherwise the centre will need to be closed.
  - b. Operating Level: indicates that a service is working towards meeting the NQS. New services will commence operation with an Operating Level rating.
  - c. National Quality Standard: indicates that a service is meeting the NQS.
  - d. High Quality: indicates that a service is exceeding the NQS.
  - e. Excellent: indicates that a service demonstrates excellence and is recognised as a sector leader
- (b) Perhaps changing the ACO role to or introducing a new role called Assessment & Rating Advisor in order to encourage a solutions-focused working relationship with the sector.
- (c) Leveraging local councils' Children Services Managers/Officers (where available) so that at their local Network Meetings with service providers, the NSW Department of Education could interact with service providers to assist them with understanding the Assessment and Rating process as well as how to meet if not exceed the standards.
- (d) It would be good to have some time during/following the A&R visit to address any areas that have been identified as "not meeting" immediately. Similar to what we used to have with NCAC. This could easily fix many small areas that have been overlooked or not identified.
- (e) If we could have their data on most common issues/standards, then we can inform our members and give examples of how other services have addressed this and organise training or workshops on those areas.

Some examples of standards that could be combined

- (f) 3.2 The environment is inclusive, promotes competence, independent exploration and learning through play and 3.3 The service takes an active role in caring for its environment and contributes to a sustainable future could be combined by just adding sustainability to 3.2.
- (g) 1.1.2 Each child's current knowledge, ideas, culture, abilities and interests are the foundation of the program and 1.1.5 Every child is supported to participate in the program both highlight the need for services to be inclusive and to involve the children in the program.
- (h) 1.1.6 Each child's agency is promoted, enabling them to make choices and decisions and influence events and their world. This is already covered in the other elements in QA1.
- (i) 2.1.1 Each child's health needs are supported. To do this involves the consideration of 2.1.2 Each child's comfort is provided for and there are appropriate opportunities to meet each child's need for sleep, rest and relaxation. Children require rest, so this does not need to be a separate element. As far as providing for each child's comfort and sleep requirements, this is linked to Quality Area 3, specifically 3.1.1 and 3.1.2.
- (j) 2.1.3 Effective hygiene practices are promoted and implemented and 2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines. These elements could easily be combined because they both describe the requirement to involve all stakeholders in the maintenance of a hygienic environment, teaching the children effective hygiene practices and controlling the spread of diseases.
- (k) 3.1.1 Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose and 3.1.2 Premises, furniture and equipment are safe, clean and well maintained. The physical environment is only suitable for its purpose if it safe, clean and well maintained. It's a bit of a tautology.
- (l) 4.2.3 Interactions convey mutual respect, equity and recognition of each other's strengths and skills. This is also discussed with other elements in QA4, ie 4.2.2
- (m) 5.1.1 Interactions with each child are warm, responsive and build trusting relationships, 5.1.2 Every child is able to engage with educators in meaningful, open interactions that support the acquisition of skills for life and learning and 5.1.3 Each child is supported to feel secure, confident and included are so intertwined that they could be combined, especially 5.1.1 and 5.3.3.
- (n) Why not have 6.1.1 There is an effective enrolment and orientation process for families involve 6.1.2 Families have opportunities to be involved in the service and contribute to service decisions and 6.1.3 Current information about the service is available to families.
- (o) After every Rating and Assessment visit, services should be given the opportunity to address or fix any areas rated as not met, for example a Policy that was considered too old has now been updated. The Service should then be able to re-submit further evidence to support a rating being upgraded from Not Met to Met within a reasonable timeframe, rather than years before another rating and assessment visit or via a paid application to be assessed sooner.