Guide to Assessment and Rating for Regulatory Authorities
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About this document

The National Quality Framework

In December 2009, all Australian governments, through the Council of Australian Governments, agreed to a partnership to establish a National Quality Framework for Early Childhood Education and Care (National Quality Framework).

The Australian Government and state and territory governments recognise the importance of increasing their focus on the early years to ensure the wellbeing of children throughout their lives and to lift the productivity of our nation as a whole. The drive for change is based on clear evidence that the early years of children’s lives are very important for their present and future health, development and wellbeing.

The National Quality Framework aims to raise quality and drive continuous improvement in education and care services through:

- the National Quality Standard for Early Childhood Education and Care and School Age Care (National Quality Standard)
- a national quality assessment and rating process
- streamlined regulatory arrangements
- a new national body jointly governed by the Australian Government and state and territory governments—the Australian Children’s Education and Care Quality Authority (ACECQA)—to oversee the new system.

The new system replaces state and territory licensing and quality assurance processes.

Purpose

The purpose of this document is to provide Regulatory Authorities with information and guidance regarding the National Quality Framework assessment and rating process.

The document will assist authorised officers to undertake the assessment and rating of services against the National Quality Framework, including the Education and Care Services National Law Act 2010 (National Law) and the Education and Care Services National Regulations 2011 (National Regulations) which incorporates the National Quality Standard.

Services can obtain information on the assessment and rating process by accessing the Guide to Assessment and Rating for Services.

How this document is organised

The Guide to Assessment and Rating for Regulatory Authorities includes:

- an overview of assessment and rating
- a flow chart of the Regulatory Authorities’ role in the assessment and rating process
- information on the completion of all aspects of the assessment and rating process
- policies that support the assessment and rating process such as the effect of compliance issues on the rating, minor adjustments and assessing inconsistent quality
• advice on how to prepare the assessment and rating report, and
• guidance on the frequency of the assessment and rating cycle and the reassessment and re-rating of services.

**National Quality Standard document suite**

The suite of documents and tools in place to support the *National Quality Standard* is as follows:

<table>
<thead>
<tr>
<th>National legislative framework</th>
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<tbody>
<tr>
<td><em>Education and Care Services National Law Act 2010</em></td>
<td>For authorised officers and services</td>
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<tr>
<td><em>Education and Care Services National Regulations 2011</em></td>
<td>For authorised officers and services</td>
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<tr>
<th>National approved learning frameworks</th>
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<tr>
<td><em>Belonging, Being and Becoming: The Early Years Learning Framework for Australia</em></td>
<td>For educators</td>
</tr>
<tr>
<td><em>My Time, Our Place: Framework for School Age Care in Australia</em></td>
<td>For educators</td>
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<th>Guides</th>
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<tr>
<td><em>Educators Belonging, Being and Becoming: Educators’ Guide to the Early Years Learning Framework for Australia</em></td>
<td>For educators</td>
</tr>
<tr>
<td><em>Educators’ My Time, Our Place: Educators’ Guide to the Framework for School Age Care in Australia</em></td>
<td>For educators</td>
</tr>
<tr>
<td><em>Guide to Assessment and Rating for Regulatory Authorities (this document)</em></td>
<td>For authorised officers</td>
</tr>
<tr>
<td><em>Guide to Assessment and Rating for Services</em></td>
<td>For services</td>
</tr>
<tr>
<td><em>Guide to Developing A Quality Improvement Plan</em></td>
<td>For services</td>
</tr>
<tr>
<td><em>Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011</em></td>
<td>For services</td>
</tr>
<tr>
<td><em>Guide to the National Quality Standard</em></td>
<td>For services and authorised officers</td>
</tr>
<tr>
<td><em>Promoting Collaborative Partnerships Between School Age Care Services and Schools</em></td>
<td>For school age care services and schools</td>
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<tr>
<th>Quality assessment tools</th>
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<tr>
<td><em>National Quality Standard Assessment and Rating Instrument</em></td>
<td>For authorised officers and services</td>
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</tbody>
</table>
Assessment and rating overview

The purpose of the assessment and rating process is to determine whether and at what rating level the service meets the National Quality Standard and the requirements of the National Regulations (section 133(i)).

A key focus of the National Quality Framework is to promote continuous quality improvement. From 2012, approved education and care services (services) covered under the National Law will be assessed and rated by authorised officers from the relevant Regulatory Authority in each state and territory.

The National Law outlines the powers of authorised officers

An authorised officer is defined as a person authorised to be an authorised officer under Part 9 of the National Law. In addition, the National Law defines the responsibilities of Regulatory Authorities and ACECQA for the authorisation of authorised officers (section 195).

Each authorised officer will be issued with an identity card which must be carried whenever the officer is exercising their functions under the National Law and the National Regulations (section 196).

The National Law also prescribes the powers of entry that authorised officers have for assessing and monitoring services (section 197).

Authorised officers have a range of powers, including to:
- enter and inspect education and care service premises
- obtain information, documents and evidence, and
- inspect and copy documents.

An authorised officer may exercise these powers in order to:
- monitor compliance with the National Law
- conduct a rating assessment, or
- obtain information requested by the Regulatory Authority.

The National Quality Standard defines the standards and elements that are assessed and rated

The National Quality Standard (schedule 1 of the National Regulations) sets a new national benchmark for the quality of education and care services. It will also give services and families a better understanding of a quality service. This will enable families to make informed decisions about the services providing education and care to their child. The National Quality Standard is a key aspect of the National Quality Framework.
The development of the *National Quality Standard* was informed by research on best practice and the way in which high-quality education and care contributes to positive outcomes for children. It comprises quality areas, standards and elements. The seven quality areas in the *National Quality Standard* are:

| QA1 | Educational program and practice |
| QA2 | Children’s health and safety |
| QA3 | Physical environment |
| QA4 | Staffing arrangements |
| QA5 | Relationships with children |
| QA6 | Collaborative partnerships with families and communities |
| QA7 | Leadership and service management |

The *National Quality Standard* contains 18 standards with two or three standards in each of the seven quality areas. These standards are high-level outcome statements. Each standard contains a number of elements that describe the outcomes that contribute to the standard being achieved. There are 58 elements in total.

**The National Regulations determine how services are assessed and rated**

The *National Regulations* outline the assessment and rating process for education and care services. They set out the requirements for preparation and review of the Quality Improvement Plan (part 3.1), the different rating levels that may be given to a service (part 3.2), the process for completing assessments and determining a rating (part 3.3) and the process for review of ratings (part 3.4).

**Quality Improvement Plans are integral to the process**

An integral part of the assessment and rating process is the Quality Improvement Plan. The Quality Improvement Plan documents the outcome of a service’s self-assessment and quality improvement planning process. Services evaluate their current practice against the *National Quality Standard*, identify their strengths and areas they should improve.

The *National Regulations* require that the approved provider ensures a Quality Improvement Plan is prepared for the service that:

- includes an assessment by the provider of the quality of the practices of the service against the *National Quality Standard* and the *National Regulations*, and
- identifies any areas that the provider considers may require improvement, and
- contains a statement of the philosophy of the service (regulation 55).
The approved provider must also review and revise the Quality Improvement Plan for the service having regard to the *National Quality Standard*:

- at least annually, and
- at any time when directed by the Regulatory Authority (regulation 56).

The approved provider must submit the current Quality Improvement Plan to the Regulatory Authority on request (regulation 56).

In the case of new services, the approved provider must submit the Quality Improvement Plan to the Regulatory Authority within three months of the grant of the service approval (regulation 55).

It is also a condition of a service approval that the Quality Improvement Plan is kept at the service, and is made available on request to parents of a child who is enrolled at the service or who are seeking to enrol a child at the service, and for inspection by the Regulatory Authority (regulation 31).

While it is important for services to reflect on practice, policies and procedures against the seven quality areas of the *National Quality Standard* and related regulatory requirements, there is no expectation that all 18 standards and 58 elements will be addressed in the Quality Improvement Plan. It is intended that services will prioritise areas for improvement against the seven quality areas of the *National Quality Standard* and the related regulatory requirements.

The Quality Improvement Plan must include strategies to address those quality areas noted during the self-assessment or assessment process as not meeting the *National Quality Standard* or any regulatory requirement.

A service meeting or exceeding the *National Quality Standard* in all quality areas should demonstrate its commitment to continuous improvement by documenting how the service will maintain its current quality practices and progress them to the next level.

For more information, see the assessment and rating process flow chart on page 10.

**The rating system**

*The National Quality Standard* is accompanied by a national quality assessment and rating process that reflects a national approach to the assessment and reporting of the quality of services across the variety of service settings.

The *National Regulations* prescribe the five rating levels within the national quality assessment and rating process (regulation 57).

- *Significant Improvement Required* (regulation 59)
- *Working Towards National Quality Standard* (regulation 60)
- *Meeting National Quality Standard* (regulation 61)
- *Exceeding National Quality Standard* (regulation 62)
- *Excellent* (the criteria for this rating level is determined by ACECQA - see section 153 of the *National Law*).
Assessing approved education and care services

The National Regulations also prescribe what the Regulatory Authority must consider for the purposes of assessing a service (regulation 63).

The Regulatory Authority must consider:

- the current Quality Improvement Plan for the service, and
- any rating assessment history of the service, including any records of previous rating assessments made under the National Law, and
- the service’s history of compliance.

The Regulatory Authority must arrange for an assessment and rating visit by an authorised officer:

- in the case of a centre-based service, of the service premises, and
- in the case of a family day care service, of one or more approved family day care venues or family day care residences.

In addition, the National Regulations provide that the Regulatory Authority may consider a range of information when determining a rating, including:

- any relevant information disclosed to the Regulatory Authority by a government department, public or local authority, state or territory Regulatory Authority or the relevant Commonwealth department
- any information available to the Regulatory Authority about any steps taken by the service to rectify any matters identified during the rating assessment
- information relating to any other quality assurance or registration process under an education law applicable to the service
- in the case of a service that provides education and care to children in the year that is 2 years before grade 1 of school, whether the service facilitates access to a preschool program as set out in regulation 62(2).

Review of ratings

Internal review of ratings by Regulatory Authority

The National Law (sections 141-143) and the National Regulations (regulation 68) provide for an approved provider to request a review of a rating determined for a service. The request must be made in writing to the Regulatory Authority within 14 days after the approved provider receives the rating notice. The request must set out the grounds on which a review is sought and be accompanied by the required information set out in the National Regulations.
The review of the rating assessment must be conducted:

- by a person not involved in the original assessment and rating of the service
- within 30 days, unless extended with agreement of the approved provider and the Regulatory Authority.

The person conducting the review may request further information from the approved provider or anyone involved in the original assessment.

Following the review, the Regulatory Authority may confirm or amend the rating levels (by quality area or overall rating, or both) and must give the approved provider notice in writing of the outcome of the review (including any revised rating levels) and the reasons for the decision made, within 30 days.

If no application is made for further review within 14 days of the internal review decision, the rating levels set out in the notice may be published.

**Further review by ratings review panel**

In addition, the *National Law* (section 144-145) and the *National Regulations* (regulation 69) allow for an approved provider to apply to ACECQA for a further review of a rating determined for a service. An application for further review can only be made on the grounds that the Regulatory Authority did not appropriately conduct the assessment processes for determining a rating level, or failed to take into account or give sufficient weight to special circumstances or facts existing at the time of the rating assessment.

An application for further review must be made within 14 days after the decision of the Regulatory Authority’s internal review is received by the approved provider. The ACECQA Board will convene a ratings review panel to conduct the review.

The ratings review panel must make a decision within 60 days to confirm or amend the rating levels (by quality area or overall rating, or both). The panel must give the approved provider notice in writing of its decision and the reasons for the decision within 14 days.
Assessment and rating process

The flow chart below outlines the National Quality Standard assessment and rating process with a focus on activities a Regulatory Authority undertakes and the interaction with services.

1 – start
Regulatory Authority sends notification to approved provider of service selected for assessment and rating that the assessment and rating process has commenced.
At the same time, the authorised officer starts an analysis of the available information about the service including the compliance history and National Childcare Accreditation Council accreditation history where relevant.

2 – week 6
Regulatory Authority sends notification to approved provider confirming receipt of the Quality Improvement Plan and advises the assessment and rating visit date.

3 – week 12
Assessment and rating visit occurs including:
- observations
- discussion
- sighting documentation
Some on the spot feedback provided at this time. Refer to Guide to the National Quality Standard for guidance on how a service may be assessed. Authorised officer analyses information gathered through assessment and rating process and prepares draft report.

4 – week 15
Regulatory Authority sends draft report to approved provider.

5 – week 18/19
Regulatory Authority considers feedback, determines final ratings and finalises report.

6 – week 20
Regulatory Authority sends final report to approved provider.

Approved provider engages families, management, educators, staff members and other relevant stakeholders in self-assessment and develops Quality Improvement Plan.

Consultation & review
Self-assessment
Draft Quality Improvement Plan

Approved provider submits Quality Improvement Plan to Regulatory Authority by beginning of week 6.

Approved provider receives advice confirming receipt of Quality Improvement Plan and date/s for assessment and rating visit. Service informed of what will happen at assessment and rating visit.

Approved provider receives draft report with proposed ratings.
Approved provider can comment and seek further clarification if necessary. Service generally has so working days to provide feedback on the draft report.
Approved provider may be given the opportunity to make minor adjustments to the service operation within specified areas and timeframes to address concerns identified at the time of the visit which, if addressed, may improve the rating.

Upon receipt of the report, service may consider seeking a review of the decision. Request for review must be lodged within 14 days.

ACECQA publishes the rating after the completion of the review period or following the outcome of a review or reassessment.

Service reviews Quality Improvement Plan in line with recommendations in report and implements.
These steps align with the flow chart on the previous page, and provide more detailed information regarding the process and communication between the Regulatory Authority and the approved provider. The timeframes reflect the approximate period of time involved in each step.

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Step</th>
<th>Process</th>
</tr>
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</table>
| Start    | 1    | The authorised officer sends a first letter to the approved provider advising that the process has started, which includes:  
• the purpose of the assessment and rating process  
• a request to the service that they send their Quality Improvement Plan to the Regulatory Authority by week 6 of the process  
• how to source information on the assessment and rating process and to assist with developing/updating the Quality Improvement Plan, and  
• the need for the approved provider or their key contact person (usually the nominated supervisor) to be available at the beginning, end and for a significant part of the visit.  

The authorised officer undertakes an analysis of the available information about the service including reviewing the compliance history and the accreditation history where relevant. |
| Week 6   | 2    | On receipt of the Quality Improvement Plan, the Regulatory Authority sends a second letter to the approved provider which includes:  
• acknowledgement of the receipt of the service’s Quality Improvement Plan  
• a reminder that the approved provider or their key contact person (usually the nominated supervisor) is to be available at the beginning and end, and for a significant part of the visit, and  
• details of the visit, including the approximate time and minimum length for the visit.  

**For centre-based services** the letter advises that the assessment covers each room and all common areas (including outdoors), and detailed observations will be made with each age group present.  

**For family day care services** the letter advises that there will be an initial visit to the scheme/co-ordination unit, an assessment of a sample of family day care educators and a final visit to the scheme/co-ordination unit.  

The authorised officer reviews the service’s Quality Improvement Plan and prepares for the assessment and rating visit. |
| Week 10  |      | Approximately two weeks before the assessment and rating visit, the authorised officer confirms:  
• the time of arrival  
• directions regarding the location, parking at the service, and any access/signing-in process  
• protocols that may be specific to the service. |
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<thead>
<tr>
<th>Timeline</th>
<th>Step</th>
<th>Process</th>
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<tbody>
<tr>
<td>Week 12</td>
<td>3</td>
<td>The authorised officer conducts the assessment and rating visit and records observations and evidence in the <em>National Quality Standard Assessment and Rating Instrument</em>. When undertaking the assessment and rating visit, the authorised officer:</td>
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<tr>
<td></td>
<td></td>
<td>• focuses on observations of practice in every room, common areas, and outdoor area/s and includes detailed observations of each age group. For family day care services, a sample of family day care educators’ homes will be visited.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• engages in discussion with the approved provider or their key contact person, educators and staff members</td>
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<tr>
<td></td>
<td></td>
<td>• will sight and consider documentation.</td>
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<td></td>
<td></td>
<td>The authorised officer also:</td>
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<td></td>
<td>• addresses any issues that need to be attended to immediately as a result of a risk to the safety, health or wellbeing of a child or children</td>
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<td></td>
<td></td>
<td>• provides some on-the-spot broad feedback at the end of the visit</td>
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<td></td>
<td>• informs the service that a draft report with ratings for all quality areas and an overall rating will be provided for their comment in week 15 of the process, and that feedback must be provided to the Regulatory Authority by week 18.</td>
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<td></td>
<td></td>
<td>The authorised officer also gives the approved provider, at the time of assessment or as soon as practicable afterwards, an indication of any minor adjustments that may be made at the service before the draft assessment report is issued to the approved provider. The approved provider then has a maximum of three weeks (before week 15) to address the issues identified and to provide satisfactory evidence to the Regulatory Authority.</td>
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<td></td>
<td>Any minor adjustments made by the service are included on the authorised officer’s notes and in the report.</td>
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<td></td>
<td></td>
<td>After the visit, the authorised officer analyses information gathered through the assessment and rating process, including whether there was any evidence of inconsistent practice throughout the service.</td>
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<tr>
<td></td>
<td></td>
<td>The authorised officer prepares the draft report with proposed ratings.</td>
</tr>
<tr>
<td>Week 15</td>
<td>4</td>
<td>The draft report is provided to the approved provider. The covering letter includes the name and contact details of the person who has responsibility for receiving feedback and the date by which this must occur, generally by week 18 of the process.</td>
</tr>
<tr>
<td>Week 18/19</td>
<td>5</td>
<td>The Regulatory Authority considers any feedback received from the service, determines final ratings and finalises the report. If no feedback is received by week 18, the report is finalised unless an arrangement has been agreed between the Regulatory Authority and the service.</td>
</tr>
<tr>
<td>Week 20</td>
<td>6</td>
<td>The Regulatory Authority sends the final report to the approved provider. The 14 day period in which a review request can be lodged begins when the approved provider receives the report. The covering letter includes information about the review process including:</td>
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<tr>
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<td></td>
<td>• that any request for a review must be lodged within 14 days of the approved provider’s receipt of the report</td>
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<tr>
<td></td>
<td></td>
<td>• details of the person to whom a review application is made (name and address)</td>
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<td></td>
<td></td>
<td>• what can/cannot be reviewed, and</td>
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<td></td>
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<td>• the review timeline.</td>
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Before the assessment and rating visit

This section expands on some aspects of step two of the assessment and rating process.

Before visiting the service, the authorised officer takes the time to gain an understanding of the service by reviewing available information and the service’s current Quality Improvement Plan, which includes a statement of philosophy of the service.

Before the visit, the approved provider determines who should be the key contact person. For example, this may be the approved provider themselves, a person with management or control, a nominated supervisor or certified supervisor.

Conducting desktop preparation

The National Regulations outlines a service’s compliance history that must be considered when assessing and rating a service (regulation 63).

Reviewing a service’s planning and history helps to familiarise authorised officers with background information about the service.

The authorised officer may also consider the following information:

- provider approval
- service approval
- notifications
- complaints
- investigations
- conditions on provider approval or service approval
- waivers
- inspections
- compliance action
- other intelligence, and
- previous assessment or accreditation visits (where relevant).

A review of the physical layout and organisation of the service will also assist in planning the visit.

As a guide, authorised officers should refer to the previous assessment and rating of the service and the service history since or three years’ service history, whichever is lesser, when determining information to review.
Receiving and reviewing the service's Quality Improvement Plan

The Quality Improvement Plan is a summary of the key areas prioritised for improvement based on reflection and evaluation of service delivery. In addition to reviewing the information above, the Quality Improvement Plan:

- assists authorised officers to understand the service’s engagement with the National Quality Framework
- demonstrates how a service is reflecting on their practice to improve outcomes for children, and
- assists authorised officers to develop an understanding of the areas the service considers to be strengths and those that would benefit from further development. This does not form evidence in the assessment and rating process.

Requesting and receiving the service’s Quality Improvement Plan

A template is available for the development of the Quality Improvement Plan. Should an approved provider choose to use an alternative format, authorised officers should ensure that the approved provider has presented all the required information.

To ensure that the timeframe for the assessment and rating process is not affected by late submissions of Quality Improvement Plans, Regulatory Authorities should use the following points as a guide:

- **Week 1** — Issue a notice to the approved provider that the assessment and rating process has started and that the Quality Improvement Plan must be submitted within six weeks of the notice
- **Week 6** — Issue a letter to the approved provider acknowledging receipt of the Quality Improvement Plan.

If the Quality Improvement Plan is not received within the required timeframe issue a ‘Quality Improvement Plan not received’ letter to the approved provider, request they submit the Quality Improvement Plan, draw their attention to statutory requirements for submission of the Quality Improvement Plan when the Regulatory Authority requests it, and consider whether compliance action needs to be taken.

If the Quality Improvement Plan is still not received by the planned assessment and rating visit date in week 12:

- carry out the visit as scheduled
- ask for a copy of the Quality Improvement Plan upon arrival at the visit.

If the Quality Improvement Plan is still not provided at the visit, the assessment should reflect that there was a failure to submit the Quality Improvement Plan, and therefore a failure to comply with regulations 55 and 56.
Determining the length of the assessment and rating visit

Consistency of assessments across services is an important factor in ensuring that assessments are fair and equitable. The length of the assessment and rating visit is one of the factors that contribute to a consistent approach.

It is expected that assessment and rating visits will meet or exceed the minimum timeframes for each service type. However, there may be exceptional circumstances where these times cannot be, or are not required to be, adhered to. In this case, authorised officers will record the reasons for any departure from the minimum timeframe in their notes.

Recommended times by service type

The recommended minimum length of assessment and rating visits are as follows:

<table>
<thead>
<tr>
<th>Service type</th>
<th>Minimum</th>
<th>Trigger for two day or three session visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long day care</td>
<td>6 hours</td>
<td>4 rooms</td>
</tr>
<tr>
<td>Preschool</td>
<td>6 hours or 2 sessions</td>
<td>4 rooms</td>
</tr>
</tbody>
</table>

For services providing both Before and/or After school care and Vacation care, it is likely that scheduling will not allow both service types (i.e. Before/After and Vacation) to be visited in the assessment and rating process. Regulatory Authorities may consider supplementing the assessment and rating process with a spot check at a later time to view the component of the service that was not assessed in the assessment and rating process.

Where more than one service type is operating at a service, Regulatory Authorities determine the most suitable length for the assessment and rating visit based on the:

- minimum timeframes for the individual service types, and
- general factors relevant to the service.
Family day care

For family day care services, assessment and rating visits involve visits to:

- the service (scheme/coordination unit) at the beginning and end of the assessment and rating visit, and
- a sample of individual educators to observe practice with children. The Regulatory Authority will determine the sample from the information provided by the service with their Quality Improvement Plan (from their register of family day care educators).

<table>
<thead>
<tr>
<th>Family day care assessment and rating visit component</th>
<th>Length of component</th>
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</thead>
<tbody>
<tr>
<td>Initial visit to scheme/coordination unit office</td>
<td>Up to 3 hours at the scheme/coordination unit to speak with the key contact person and co-ordinators and view relevant documentation</td>
</tr>
<tr>
<td>Individual family day care educator visits</td>
<td>Between 2 and 3 hours</td>
</tr>
</tbody>
</table>
| Final visit to scheme/coordination unit office     | Up to 3 hours at the scheme/coordination unit (after assessing individual family day care educators) to:  
  • speak with the key contact person and co-ordinators regarding any issues raised during the assessments, and  
  • view any remaining documentation.  
  If distance is an issue, this final visit could take place by telephone. |

Regulatory Authorities determine the number of family day care educators sampled according to the following table:

<table>
<thead>
<tr>
<th>Number of educators in the service</th>
<th>Number of educators assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–30</td>
<td>3</td>
</tr>
<tr>
<td>31–60</td>
<td>5</td>
</tr>
<tr>
<td>61–90</td>
<td>7</td>
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<td>91–120</td>
<td>9</td>
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<tr>
<td>121 plus</td>
<td>11</td>
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</table>
Completing the assessment and rating visit

This section expands on some aspects of step three of the assessment and rating process.

Collecting evidence to determine ratings using ‘observe’, ‘discuss’ and ‘sight’

Authorised officers follow a uniform process when gathering the evidence required to assess and rate a service. They use ‘observe’, ‘discuss’ and ‘sight’ techniques to assess the service against each element of the National Quality Standard and the National Regulations.

**Observe.** The authorised officer observes what children, families, educators, co-ordinators and staff members are doing (for example, engaging in caring, friendly and respectful interactions). It is recognised that the authorised officer may not be able to obtain evidence through observation of all of the standards and elements at the time of the assessment.

**Discuss.** The authorised officer may engage with the key contact person, educators, co-ordinators, family day care educator assistants or staff members about the practices within the service.

**Sight.** The authorised officer sights documentation required by the National Law and National Regulations and other documentation as evidence to support particular practices at the service.


Communication during the assessment and rating visit

The authorised officer will introduce themselves to the key contact person and provide an overview of the visit, reiterating the three dimensions of observation, discussion and sighting of documentation.

The authorised officer conducts the visit in a manner that ensures their actions minimise disruption as much as possible to practice unless they consider there is an unacceptable risk to the safety, health or wellbeing of any child or children being educated and cared for by the service.

The authorised officer informs the key contact person when they are taking breaks and observes normal arrival and departure courtesies each day, especially if they are visiting for more than one day.

At the end of the visit the authorised officer provides the key contact person with broad verbal feedback about the visit, explaining that no indication of the rating can be given until all components of the process have been drawn together.

The authorised officer informs the service that a draft report with ratings for all quality areas and an overall rating will be provided for their comment in week 15 of the process (step 4), and that feedback must be provided to the Regulatory Authority by week 18.
After the assessment and rating visit

After an assessment and rating visit occurs, activities are undertaken by the Regulatory Authority to finalise the assessment report and the ratings. These include:

- considering evidence provided by the approved provider where there has been an opportunity to make minor adjustments
- determining the ratings, including assessing inconsistent practice where applicable.

Determining the ratings

Services need to meet the *National Quality Standard* for:

- all elements within a standard to meet that standard
- all standards within a quality area to meet the *National Quality Standard* for that quality area.

Five rating levels

There are five rating levels within the national quality assessment and rating process.

The following table demonstrates how authorised officers determine ratings by assessing each element against the *National Quality Standard* to determine if it is met or not met. They use this information to rate each standard and quality area to determine the overall rating.
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### Rating levels

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<tbody>
<tr>
<td>1. Assess each element as ‘met’ or ‘not met’ and the relevant regulations</td>
<td>A <strong>Significant Improvement Required</strong> rating may be given for a quality area. See below.</td>
<td>Assess each element as ‘met’ or ‘not met’ and determine compliance with the relevant regulations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Rate each standard</td>
<td>A <strong>Significant Improvement Required</strong> rating may be given for a quality area. See below.</td>
<td>Apply <strong>Working Towards National Quality Standard</strong> if the education and care service does not meet one or more elements or relevant regulations. The service does not meet the standard.</td>
<td>Apply <strong>Meeting National Quality Standard</strong> when all elements and relevant regulations are met. The service meets the standard.</td>
<td>Apply <strong>Exceeding National Quality Standard</strong> when all elements and relevant regulations are met or exceeded. The service exceeds the standard.</td>
</tr>
</tbody>
</table>
| 3. Rate each quality area | A **Significant Improvement Required** rating may be given for a quality area stated in the National Quality Standard if the education and care service does not meet that quality area or a relevant regulation for that quality area in a way that the Regulatory Authority is satisfied constitutes an unacceptable risk to the safety, health or wellbeing of any child or children being educated and cared for by the service (regulation 59(i)). | A **Working Towards National Quality Standard** rating may be given for a quality area stated in the National Quality Standard if the education and care service does not meet a standard in that quality area or a relevant regulation for that quality area but is not rated as **Significant Improvement Required** (regulation 60(i)). | A **Meeting National Quality Standard** rating may be given for a quality area stated in the National Quality Standard if the education and care service meets the standards and relevant regulations for that quality area (regulation 61(i)). | Subject to the criteria below, an **Exceeding National Quality Standard** rating may be given for a quality area stated in the National Quality Standard if the education and care service exceeds the standards for that quality area and complies with the relevant regulations for that quality area (regulation 62(i)).<br><br>**Criterion 1:**<br>An **Exceeding National Quality Standard** rating may only be given for the educational program and practice quality area of the National Quality Standard for an education and care service that educates and cares for children who are in the year that is 2 years before grade 1 of school if the service either:
### Rating levels

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<td></td>
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<td></td>
<td>• provides a preschool program, or</td>
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<td></td>
<td></td>
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<td></td>
<td>• has a documented arrangement with an approved provider</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>of another education and care service to provide a preschool</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>program and informs parents of this arrangement (regulation 62(2)).</td>
</tr>
</tbody>
</table>

**Criterion 2:**
An Exceeding National Quality Standard rating may be given for a quality area stated in the National Quality Standard if all standards in the quality area are at least National Quality Standard and at least two of the standards in the quality area are rated Exceeding National Quality Standard.

4. **Determine overall rating**

If an education and care service has a Significant Improvement Required rating for any quality area stated in the National Quality Standard, the overall rating is Significant Improvement Required (regulation 59(2)).

If an education and care service has a Working Towards National Quality Standard rating for any quality area stated in the National Quality Standard but does not have a Significant Improvement Required rating for any quality area, the overall rating of the service is to be Working Towards National Quality Standard (regulation 60(2)).

If an education and care service has a rating for each quality area stated in the National Quality Standard that is Meeting National Quality Standard or Exceeding National Quality Standard but does not satisfy the requirements of regulation 62 for an overall Exceeding National Quality Standard rating, the overall rating of the service is to be Meeting National Quality Standard (regulation 61(2)).

The overall rating of an education care service is to be Exceeding National Quality Standard if:

• The education and care service has an Exceeding National Quality Standard rating for all quality areas stated in the National Quality Standard; or
• The education and care service has:
  - An Exceeding National Quality Standard rating for 4 or more quality areas stated in the National Quality Standard at least 2 of which are among the following quality areas:
    a) educational program and practice  
    b) relationships with children  
    c) collaborative partnerships with families and communities  
    d) leadership and service management, and
  - a Meeting National Quality Standard rating for each other quality area stated in the National Quality Standard (regulation 62(3)).

* Services with an overall rating of Meeting National Quality Standard may have a rating of Exceeding National Quality Standard in a number of quality areas.
Effect of compliance issues on rating

Through the assessment and rating process services will be assessed and rated in accordance with the *National Law* and the *National Regulations* to determine whether and at what rating level the service meets the *National Quality Standard* and the requirements of the *National Regulations* (section 133). This holistic approach ensures services are consistently assessed against all aspects of the *National Law*, the *National Regulations* and the *National Quality Standard*.

As part of the assessment and rating process authorised officers are required to determine whether the service meets, or does not meet each element of the *National Quality Standard* and provide a rating for each standard, quality area and an overall rating for the service. In some cases where an element is not met this will relate to a non-compliance with the *National Law* or the *National Regulations*.

The assessment and rating report provided by the Regulatory Authority should clearly indicate how the service has met each element and any non-compliance identified.

**Significant Improvement Required**

Should a service receive a rating of *Significant Improvement Required* in one or more of the seven quality areas, it is expected that the Regulatory Authority would be taking compliance action and working with the service to immediately address the issues which are posing an unacceptable risk to the safety, health or wellbeing of a child or children being educated and cared for by the service. Compliance action may include suspension or cancellation of the service approval.
Making minor adjustments

A service rating should be an accurate reflection of service quality. It should not be affected by minor matters that can be rectified quickly and easily, and that do not seriously impact on a service’s quality. There may be circumstances in which the Regulatory Authority gives an approved provider the opportunity to make minor adjustments prior to finalising a service’s assessment report and overall rating.

This policy clarifies the requirement of the National Regulations that the Regulatory Authority may consider any information available about steps taken by the service to rectify any matters identified during the rating assessment (regulation 63(2)(b)).

The Regulatory Authority may give an approved provider a short time to make adjustments where the Regulatory Authority identifies an issue that:

• does not pose an unacceptable risk to the safety, health or wellbeing of children, and
• has minimal impact on the quality of the service provided, and
• can be quickly and easily rectified, and
• is not one of numerous other minor matters, and
• may, if rectified, result in the service receiving a higher rating against a standard.

Responsibilities of the approved provider

The approved provider must ensure that if given the opportunity to make minor adjustments they are made within the requirements outlined by the Regulatory Authority and that they provide evidence of those adjustments being completed prior to the draft assessment and rating report being finalised.

Guidance for authorised officers

At the time of the assessment or as soon as practicable afterwards (week 12 or shortly afterwards), the Regulatory Authority informs the approved provider of the opportunity to make minor adjustments and provide evidence of those adjustments before the draft assessment report and rating is provided. The Regulatory Authority assesses whether the evidence provided demonstrates that an element assessed as ‘not met’ during the assessment and rating visit is now considered to be ‘met’.

Criteria for minor adjustments

The Regulatory Authority may give an approved provider the opportunity to make minor adjustments when:

• the elements that have been assessed as not met are elements where a minor adjustment could result in the element being met, and
• the changes required involve simple, concrete solutions that can be implemented within the specified timeframe (within three weeks from date of the assessment and rating visit, preferably immediately, unless otherwise specified by the Regulatory Authority).
The approved provider must provide the Regulatory Authority with evidence that satisfies them that appropriate corrective action has been taken without the need for the Regulatory Authority to make a subsequent assessment and rating visit to the service. Evidence may include, for example:

- photographs (e.g. to demonstrate that a physical hazard has been removed or fixed, or to demonstrate that an item of documentation is now being displayed at the service)
- copies of revised written policies or procedures
- records indicating that information has been provided to families attending the service (such as an email).

The evidence provided must satisfy the Regulatory Authority that the issue has been fully rectified. Evidence provided after the Regulatory Authority has finalised the draft report will not be considered.

An approved provider may choose not to make minor adjustments, or not to provide evidence of minor adjustments, in which case the Regulatory Authority will finalise the service’s assessment report and rating based on the circumstances of the service at the time of the assessment and rating visit.

The provision of evidence to demonstrate that an issue has been rectified does not guarantee that the service will be assessed as having met the relevant element or standard.

**The right to review**

An approved provider cannot request a review of a decision made by the Regulatory Authority under this minor adjustments policy.
Elements applicable for the minor adjustments policy

This table is a guide only. The elements in the white rows include issues that might be addressed under the minor adjustments policy. Elements appearing in shaded rows are unlikely to include issues that could be addressed under the minor adjustments policy.

<table>
<thead>
<tr>
<th>1</th>
<th>EDUCATIONAL PROGRAM AND PRACTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>An Approved Learning Framework informs the development of a curriculum that enhances each child’s learning and development.</td>
</tr>
<tr>
<td>1.1.1</td>
<td>Curriculum decision making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.</td>
</tr>
<tr>
<td>1.1.2</td>
<td>Each child’s current knowledge, ideas, culture, abilities and interests are the foundation of the program.</td>
</tr>
<tr>
<td>1.1.3</td>
<td>The program, including routines, is organised in ways that maximise opportunities for each child’s learning.</td>
</tr>
<tr>
<td>1.1.4</td>
<td>The documentation about each child’s program and progress is available to families.</td>
</tr>
<tr>
<td>1.1.5</td>
<td>Every child is supported to participate in the program.</td>
</tr>
<tr>
<td>1.1.6</td>
<td>Each child’s agency is promoted, enabling them to make choices and decisions and influence events and their world.</td>
</tr>
<tr>
<td>1.2</td>
<td>Educators and co-ordinators are focused, active and reflective in designing and delivering the program for each child.</td>
</tr>
<tr>
<td>1.2.1</td>
<td>Each child’s learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluation.</td>
</tr>
<tr>
<td>1.2.2</td>
<td>Educators respond to children’s ideas and play and use intentional teaching to scaffold and extend each child’s learning.</td>
</tr>
<tr>
<td>1.2.3</td>
<td>Critical reflection on children’s learning and development, both as individuals and in groups, is regularly used to implement the program.</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>2</th>
<th>CHILDREN’S HEALTH AND SAFETY</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>Each child’s health is promoted.</td>
</tr>
<tr>
<td>2.1.1</td>
<td>Each child’s health needs are supported.</td>
</tr>
<tr>
<td>2.1.2</td>
<td>Each child’s comfort is provided for and there are appropriate opportunities to meet each child’s need for sleep, rest and relaxation.</td>
</tr>
<tr>
<td>2.1.3</td>
<td>Effective hygiene practices are promoted and implemented.</td>
</tr>
<tr>
<td>2.1.4</td>
<td>Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.</td>
</tr>
<tr>
<td>2.2</td>
<td>Healthy eating and physical activity are embedded in the program for children.</td>
</tr>
<tr>
<td>2.2.1</td>
<td>Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.</td>
</tr>
<tr>
<td>2.2.2</td>
<td>Physical activity is promoted through planned and spontaneous experiences and is appropriate for each child.</td>
</tr>
<tr>
<td>2.3</td>
<td>Each child is protected.</td>
</tr>
<tr>
<td>2.3.1</td>
<td>Children are adequately supervised at all times.</td>
</tr>
<tr>
<td>2.3.2</td>
<td>Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.</td>
</tr>
<tr>
<td>2.3.3</td>
<td>Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.</td>
</tr>
<tr>
<td>2.3.4</td>
<td>Educators, co-ordinators and staff members are aware of their roles and responsibilities to respond to every child at risk of abuse or neglect.</td>
</tr>
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<table>
<thead>
<tr>
<th>3</th>
<th>PHYSICAL ENVIRONMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>The design and location of the premises is appropriate for the operation of a service.</td>
</tr>
<tr>
<td>3.1.1</td>
<td>Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose.</td>
</tr>
<tr>
<td>3.1.2</td>
<td>Premises, furniture and equipment are safe, clean and well maintained.</td>
</tr>
<tr>
<td>3.1.3</td>
<td>Facilities are designed or adapted to ensure access and participation by every child in the service and to allow flexible use, and interaction between indoor and outdoor space.</td>
</tr>
<tr>
<td>3.2</td>
<td>The environment is inclusive, promotes competence, independent exploration and learning through play.</td>
</tr>
<tr>
<td>3.2.1</td>
<td>Outdoor and indoor spaces are designed and organised to engage every child in quality experiences in both built and natural environments.</td>
</tr>
<tr>
<td>3.2.2</td>
<td>Resources, materials and equipment are sufficient in number, organised in ways that ensure appropriate and effective implementation of the program and allow for multiple uses.</td>
</tr>
<tr>
<td>3.3</td>
<td>The service takes an active role in caring for its environment and contributes to a sustainable future.</td>
</tr>
<tr>
<td>3.3.1</td>
<td>Sustainable practices are embedded in service operations.</td>
</tr>
<tr>
<td>3.3.2</td>
<td>Children are supported to become environmentally responsible and show respect for the environment.</td>
</tr>
</tbody>
</table>
4 STAFFING ARRANGEMENTS
4.1 Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing.
4.1.1 Educator-to-child ratios and qualification requirements are maintained at all times.

4.2 Educators, co-ordinators and staff members are respectful and ethical.
4.2.1 Professional standards guide practice, interactions and relationships.
4.2.2 Educators, co-ordinators and staff members work collaboratively and affirm, challenge, support and learn from each other to further develop their skills, to improve practice and relationships.
4.2.3 Interactions convey mutual respect, equity and recognition of each other’s strengths and skills.

5 RELATIONSHIPS WITH CHILDREN
5.1 Respectful and equitable relationships are developed and maintained with each child.
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.
5.1.3 Each child is supported to feel secure, confident and included.

5.2 Each child is supported to build and maintain sensitive and responsive relationships with other children and adults.
5.2.1 Each child is supported to work with, learn from and help others through collaborative learning opportunities.
5.2.2 Each child is supported to manage their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
5.2.3 The dignity and rights of every child are maintained at all times.

6 COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES
6.1 Respectful supportive relationships with families are developed and maintained.
6.1.1 There is an effective enrolment and orientation process for families.
6.1.2 Families have opportunities to be involved in the service and contribute to service decisions.
6.1.3 Current information about the service is available to families.

6.2 Families are supported in their parenting role and their values and beliefs about child rearing are respected.
6.2.1 The expertise of families is recognised and they share in decision making about their child’s learning and wellbeing.
6.2.2 Current information is available to families about community services and resources to support parenting and family wellbeing.

6.3 The service collaborates with other organisations and service providers to enhance children’s learning and wellbeing.
6.3.1 Links with relevant community and support agencies are established and maintained.
6.3.2 Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities.
6.3.3 Access to inclusion and support assistance is facilitated.
6.3.4 The service builds relationships and engages with their local community.

7 LEADERSHIP AND SERVICE MANAGEMENT
7.1 Effective leadership promotes a positive organisational culture and builds a professional learning community.
7.1.1 Appropriate governance arrangements are in place to manage the service.
7.1.2 The induction of educators, co-ordinators and staff members is comprehensive.
7.1.3 Every effort is made to promote continuity of educators and co-ordinators at the service.
7.1.4 Provision is made to ensure a suitably qualified and experienced educator or co-ordinator leads the development of the curriculum and ensures the establishment of clear goals and expectations for teaching and learning.
7.1.5 Adults working with children and those engaged in management of the service or residing on the premises are fit and proper.

7.2 There is a commitment to continuous improvement.
7.2.1 A statement of philosophy is developed and guides all aspects of the service’s operations.
7.2.2 The performance of educators, co-ordinators and staff members is evaluated and individual development plans are in place to support performance improvement.
7.2.3 An effective self-assessment and quality improvement process is in place.

7.3 Administrative systems enable the effective management of a quality service.
7.3.1 Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements.
7.3.2 Administrative systems are established and maintained to ensure the effective operation of the service.
7.3.3 The Regulatory Authority is notified of any relevant changes to the operation of the service, of serious incidents and any complaints which allege a breach of legislation.
7.3.4 Processes are in place to ensure that all grievances and complaints are addressed, investigated fairly and documented in a timely manner.
7.3.5 Service practices are based on effectively documented policies and procedures that are available at the service and reviewed regularly.
Assessing inconsistent quality

The term ‘inconsistent quality’ refers to situations where different levels of service delivery are identified at an assessment and rating visit across a service, including in different rooms, sessions, residences or venues.

It is important for authorised officers to develop a common understanding of how to determine a rating that reflects the experience of each child in the context of inconsistencies in the quality of the service.

After all relevant evidence is collected and reviewed authorised officers may determine a range of quality across the service. The impact this has on the experiences of each child in the service informs the final rating.

The experiences of children within particular age groups or specific rooms within a service may be significantly different from what has been identified across the service. If it is determined that experiences of some children across the service are consistently below the National Quality Standard the final rating should reflect this. The practices of one educator or team within the service may affect the final rating; however, it is the service that receives the final rating. Responsibility for the overall rating is shared across the service.

Where the evidence from an assessment and rating visit clearly indicates that the service does not consistently meet or exceed an element or a standard then the service needs to be rated as not meeting the National Quality Standard. This reflects the experience of children receiving that quality of education and care. If a service that is not consistently achieving the National Quality Standard is given a rating of Meeting National Quality Standard or above, this fails to reflect the experience of each child and reduces the likelihood that the service will work to improve the standard of education and care they provide.
**Inconsistent quality flowchart**

The flow chart below describes the process of determining a rating for a standard or quality area in the context of inconsistencies in the quality of the service.

<table>
<thead>
<tr>
<th>1. Assessment and rating visit</th>
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<tbody>
<tr>
<td>Conduct assessment and rating visit and consider each part of service</td>
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</table>

<table>
<thead>
<tr>
<th>2. Identify inconsistent practice</th>
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<tbody>
<tr>
<td>Find inconsistent quality in parts of service</td>
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</table>

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<tr>
<th>3. Collect additional information</th>
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<tbody>
<tr>
<td>Gather more information by observation, discussion, sighting documentation</td>
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</tbody>
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<tr>
<th>4. Influence on child</th>
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<tr>
<td>Isolated incident—less influence on outcomes for children involved</td>
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</tbody>
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<tr>
<th>5. Impact on rating</th>
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</thead>
<tbody>
<tr>
<td>Limited impact on overall rating</td>
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</tbody>
</table>
These steps align with the flow chart on the previous page, and provide more detailed information.

<table>
<thead>
<tr>
<th>Step</th>
<th>Process</th>
</tr>
</thead>
</table>
| 1    | **Conduct the assessment and rating visit**  
Assessment and rating visits are conducted to determine whether and at what rating level the service meets the *National Quality Standard* and the requirements of the *National Regulations*. To determine the rating level of each standard and quality area, all relevant evidence must be considered. Authorised officers will make observations, have discussions with staff and educators, and sight documentation. |
| 2    | **Identify inconsistent practice**  
Where the evidence from an assessment and rating visit indicates that the service does not consistently meet or exceed an element or a standard, the authorised officer must determine how the inconsistency will affect the service’s rating. |
| 3    | **Collect additional information**  
The authorised officer may need to undertake further observations, have discussions with educators or sight documentation to determine whether this inconsistency in the quality of the service has a significant impact on any children within the service or if there are circumstances that have impacted on the quality. |
| 4    | **Consider the influence on the child**  
The experiences of children in a particular age group, room or family day care residence or venue of a service may be significantly different from those of children in other parts of the service. When determining whether findings of inconsistent quality should affect the final rating, authorised officers should consider if every child’s experience in the service would be considered to meet the *National Quality Standard*. |
| 5    | **Decide the impact on the final rating**  
Where the experiences of a child or group of children indicate that a part of the service is not meeting the *National Quality Standard* for one or more standards then it cannot be said that the service is operating at the *National Quality Standard*. |
The assessment and rating report

After the assessment and rating visit, the Regulatory Authority will prepare the assessment and rating report. Services will have the opportunity to comment on the draft report before it is finalised by the Regulatory Authority.

Preparing the assessment and rating report

The final assessment and rating report to services will:

- identify the service, and the date of the assessment and rating visit
- summarise the service’s ratings
- communicate the reasons why a service was assessed at a particular rating level against each standard
- highlight the service’s strengths and articulate the areas where a service may wish to focus improvement, and
- note any agreed minor adjustments.

Approach

The report is prepared by the Regulatory Authority and provides information to a service on how they performed against the National Quality Standard at a particular point in time (i.e. this assessment and rating process cycle). The purpose of the report is also to support the service in identifying areas for continuous improvement.

The report draws on evidence obtained from observations, discussion and sighting documentation at the assessment and rating visit as well as information from the desktop review of the service’s history and Quality Improvement Plan.

The report needs to be completed as soon as possible after the assessment and rating visit to ensure that:

- information from observations, notes and discussions remain relevant to the authorised officer(s), and
- the report can be provided to services as soon as possible – whilst allowing time for approval and sign-off.

The aim of the report is to evaluate rather than describe the provision of education and care at a particular service. Evaluation, in this context, is against the National Quality Standard and the National Regulations.
<table>
<thead>
<tr>
<th>DO</th>
<th>DON’T</th>
</tr>
</thead>
<tbody>
<tr>
<td>• provide a rationale for each rating</td>
<td>• use jargon or colloquialisms</td>
</tr>
<tr>
<td>• use the language in the National Quality Standard and the rating level descriptors to shape the rationale</td>
<td>• use acronyms or abbreviations</td>
</tr>
<tr>
<td>• make clear why the standard was rated as Working Towards, Meeting or Exceeding the National Quality Standard (clear distinction between each level)</td>
<td>• make spelling or grammatical mistakes</td>
</tr>
<tr>
<td>• note strengths and areas for improvement</td>
<td>• speculate</td>
</tr>
<tr>
<td>• be accurate and fair</td>
<td>• write in the first person ('I'). Instead sentences can be framed ‘the authorised officer noted’ where required</td>
</tr>
<tr>
<td>• be succinct and specific</td>
<td>• misquote when describing interactions</td>
</tr>
<tr>
<td>• use short sentences</td>
<td>• overdo the examples/observations</td>
</tr>
<tr>
<td>• use clear everyday language</td>
<td>• use value judgements</td>
</tr>
<tr>
<td>• use professional language only when it is absolutely necessary (e.g. if it relates to an approved learning framework).</td>
<td>• be prescriptive with recommendations.</td>
</tr>
</tbody>
</table>
Frequency of the assessment and rating cycle

The assessment and rating process and the schedule for individual services is an earned autonomy system where the period between the assessment and rating process is determined by the service’s current rating. That is, the higher the rating, the longer the timeframe between the assessment and rating process for that service.

The prioritisation and frequency of the assessment and rating cycle for individual services will be based on the spread of ratings against the seven quality areas.

In considering the spread of ratings against the seven quality areas, Regulatory Authorities may determine, for example, that:

- a service with six or seven quality areas rated at *Working Towards National Quality Standard* would more likely be reassessed in a year
- a service with three to five quality areas rated at the *Working Towards National Quality Standard* would more likely be reassessed in 18 months, and
- a service with one or two quality areas rated at *Working Towards National Quality Standard* would more likely be reassessed in two years.

The expected frequency of assessment provided in the table below is a guide only.

<table>
<thead>
<tr>
<th>Service rating</th>
<th>Frequency of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>On application to ACECQA and through award for a period of three years.</td>
</tr>
<tr>
<td><em>Exceeding National Quality Standard</em></td>
<td>Generally, every three years for a full assessment.</td>
</tr>
<tr>
<td><em>Meeting National Quality Standard</em></td>
<td>Generally, every two years for a full assessment.</td>
</tr>
<tr>
<td><em>Working Towards National Quality Standard</em></td>
<td>Generally, every year for a full assessment.</td>
</tr>
<tr>
<td><em>Significant Improvement Required</em></td>
<td>The Regulatory Authority would be taking compliance action and working with the service to immediately address the issues which are posing an unacceptable risk to the safety, health or wellbeing of a child or children being educated and cared for by the service. Compliance action may include suspension or cancellation of the service approval.</td>
</tr>
</tbody>
</table>
Reassessing and re-rating services outside the assessment and rating cycle

Under the *National Law* and the *National Regulations*, Regulatory Authorities may at any time reassess a service or any aspect or element of a service (section 138 and regulation 67). An approved provider may apply to the Regulatory Authority for a reassessment and re-rating of a service (section 139 and regulation 66).

**Factors that influence reassessment and re-rating outside the assessment and rating cycle**

The assessment and rating system is designed to provide clear and accurate advice for families about the quality of services.

Reassessment of a service may occur where the quality of a service declines over time or other risk factors are present. In most cases as part of the continuous quality improvement process that is an integral part of the National Quality Framework, the quality of services would be expected to improve. In some cases changes at the service may result in the decline of a service’s quality. In this case it would be desirable to reassess and re-rate the service to ensure the rating level of the service accurately reflects the service quality. To amend the rating level, an assessment and rating of the service must be completed.

The decision by a Regulatory Authority to reassess and re-rate a service outside the normal schedule of assessment and rating visits should be informed through the assessment of the service’s compliance after an investigation and/or visits of a service and subsequent compliance action.

Investigations are conducted when the Regulatory Authority receives notifications of serious systemic non-compliance patterns emerging, complaints forwarded by the approved provider or direct complaints, and through cumulative notifications of smaller incidents. Compliance visits will be conducted by the Regulatory Authorities according to the monitoring and compliance policy and may also be prompted by notified changes to services including where there is a change of approved provider, person with management or control or change of nominated supervisor.