Our philosophy is based on our vision and our motto - “Play Learn Grow.”

Play is provided by a play-based curriculum, focused on positive social interactions & well-being.

Learn by being responsive to children’s learning ideas through curriculum & teaching.

Grow via challenging & engaging children into deeper thinking & understanding of their worlds.

The essential ingredients to play, learn and grow is through our involvement of providing a high quality, safe, inclusive play based supportive preschool curriculum in partnership with our communities.

Communities include parents, children, local town communities and our ‘feeder’ schools, Child Care Centre’s, playgroups and the spectrum of Child Youth and Health services servicing the Mount Barker area.

Our philosophy defines our values of trust & respect; nurturing & caring; responsibility & empowerment.

---

Mount Barker Kindergarten operates as a full time ‘stand alone’ site, adjacent to Mount Barker Primary and school Dental Clinic. At the commencement of 2016 we had 66 children enrolled. We are presently the only Mount Barker kindergarten to offer a comprehensively funded pre-entry to kindergarten transition program of 2 hours a week, from the commencement of term 3 (July). Due to strong partnerships between Mount Barker Council and Mount Barker Primary School, the kindergarten owns the land immediately outside our perimeter fence. This area completely re-vegetated, again due to strong partnerships with the Mount Barker Primary School, provides an enriched curriculum and continuous improvement.

---

Our philosophy defines our values of trust & respect; nurturing & caring; responsibility & empowerment.

---

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.
Quality Area 1: Educational Program and Practice

**Quality Area 1 Educational Program and Practice**

- Staff are continually reviewing the use of and facilitating the EYLF to inform practice, formulate Statements of Learning and Learning Stories and ensure outcomes for children.
- Individual child observations are recorded and discussed as a team. Documentation demonstrated in various ways, i.e. anecdotes/daily evaluations. Documented observations expanded to include potential & further learning opportunities for the individual child with reference to the 5 Learning Outcomes, inclusive of Literacy & Numeracy specific indicators.
- Programming continues to be formulated on children’s interests, their dispositions, culture and current knowledge as well as family/parent interests, skills and levels of expertise.
- Plan Do, Review cycle (Program, Facilitate, Evaluate) embedded.

**Standard 1.2** Educators are focused & delivering the program for each child.

- A variety of different tools & processes are utilised to ensure critical reflection on children’s learning—both individually and in groups. Tools utilised include EYLF, Respect, Reflect & Relate; Child Protection Curriculum; Checklists; Sociograms; Anecdotes; Daily Evaluations; Learning Stories; Literacy & Numeracy vignettes; Individual Learning Plans (One Plans) Parental Learning Story Feedback sheets.
- Emergent planning stemming from daily evaluations and child interests with parent skills/ strengths utilised within the curriculum—washing babies/reading stories in home language (German/Swedish). Daily routines are flexible to cater for groups of children’s interests and to minimise ‘breaks’ in the continuum of learning.

**Element 1.2.1** Each child’s learning and development is assessed as part of an ongoing cycle of planning, documenting and evaluation.

**Issue(s):** Documented evidence need to focus on more cyclic, where to from here experiences for individual children. Incorporate the 8 Literacy/Numeracy Indicators within the EYLF outcomes.

**Quality Area 6 Collaborative Partnerships with Families & Communities**

- Families provided with ‘One Pager’ Information sheet: staff are identifiable with badges; web page maintained and regularly updated as is our annual Context Statement. Enrolment forms reflect community context and requirements.
- Flexibility of kindergarten service times as well as the continuation of pre-entry to kindergarten and playgroup have increased opportunities for parents to contribute to service decisions.
- Parent feedback/concerns/compliments are actively sought as well as actioned in a timely fashion. For instance feedback from Parent Opinion survey’s; Governing Council consultation. Family expertise is actively sought in the decision making processes about their child’s wellbeing & learning.

**Standard 6.3** Service collaborates with other organisations. ….. to enhance children’s learning and wellbeing.

- Partnerships exist with Child Youth Health Services (CYH), Adelaide Hills Community Health Centre, Mount Barker Primary School are a few examples of other support agencies/networks this service links with regularly.
- Statements of Learning are provided to parents and school upon the child’s exit from kindergarten. Recording of attendance is completed on a daily basis.
- Mount Barker Office DECD partnership between parents/kindergarten and staff is strong and regular maintained with programs devised for specific children with need i.e speech, psychology, behavioural, child protection.
- Level of Governing Council & Family support is regular with input continually of a high quality and demonstrably collaborative with other agencies/networks in and around the Mount Barker area.

**Quality Area 1 Progress Notes / Evidence:**

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.

**Quality Area 6 Progress Notes / Evidence:**

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.
Quality Area 5  Relationships with Children  

**How we do this well**

**Standard 5.1**  
Respectful & equitable relationships are developed & maintained with each child.
- Staff focus on ensuring each child/family is greeted by their name in a welcoming, responsive manner and where appropriate in their home language, when entering the kindergarten. Ongoing reflection, emergent planning is part of the processes entwined in all the strategies/initiatives/tools used by this service-such as EYLF and the 3Rs document. Children’s responses & parental feedback are used to guide future decisions such as the set up of our learning environments plus programming. This is achieved through daily discussions & documented evaluations.
- Continuation of longer, flexible, uninterrupted play periods allowing staff quality time to interact with individual children and gain deeper understandings of their likes, skills & interests.

**Standard 5.2**  
Child Protection Curriculum facilitated and visited on an on-going basis. Community Time discussions about how their behaviour impacts on others. Empower children to discuss/identify their protection networks. Problem solving techniques, driven by staff, facilitated by children to ‘say what you see/feel’ to resolve conflict and work out solutions.
- Children help create their own Kindergarten Limits. Specific Individual Learning Plans (One Plans) in place for identified children with specific needs.
- Dedicated spaces made available for children to maintain their privacy when changing their clothes.
- Individual children’s needs are discussed at weekly staff meetings and documented with follow up action and/or plans.

**Element / Identified Issue**  
**Priority: Low/Medium/High**

| Element 5.1.3 | Each child is supported to feel secure, confident and included. | H |
| Element 5.2.1 | Each child is supported to work with, learn from and enjoy collaborative learning opportunities. | H |

**Issue(s):** Psychological well being has been identified as a site & community need. Some children’s avoidance in certain learning opportunities as well as levels of interactions &/or engagement has been noted. Children maintaining and expanding collaborative learning with their peers.

**Improvement Areas**

<table>
<thead>
<tr>
<th>What outcome do we seek?</th>
<th>Strategy</th>
<th>Responsible Person &amp; When</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Our physical environment is conducive of supporting and maintaining positive inter-relationships in a safe manner – both physically and psychologically.</td>
<td>• Establish a Healthy Minds – Kidsmatter program, with all staff trained.</td>
<td>Director; Governing Council; All staff-terminated program-mid 2016</td>
</tr>
<tr>
<td>• Individual children demonstrating attainment of skills for life and further learning.</td>
<td>• Effectively utilise the Active Learning Environment scale, within the 3Rs.</td>
<td>Healthy Minds</td>
</tr>
<tr>
<td>• Children are confident and secure in communicating to staff their concerns.</td>
<td>• Implement aspects of the Child Protection Curriculum, specifically strategies which identify the child’s protective network.</td>
<td></td>
</tr>
<tr>
<td>• Children supporting their learning opportunities collaboratively.</td>
<td>• Identified children avoiding certain experiences and hence modify learning areas to increase levels of engagement.</td>
<td></td>
</tr>
<tr>
<td>• Children have a demonstrable voice in the learning experiences on offer.</td>
<td>• Continue with facilitation of a ‘children’s voice’ group to incorporate into programming their identified learning and interests.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Continue with our ‘Caring Candle’ at Community Time.</td>
<td></td>
</tr>
</tbody>
</table>

**Progress Notes / Evidence:**

---

Quality Area 2  Children’s Health and Safety  

**How we do this well**

**Standard 2.1**  
Each child’s health is promoted.
- Children’s health & medical needs are documented, inclusive of health plans and consent(s), at point of enrolment. Where identified, specific 1:1 support is actioned to support specific health needs of children, inclusive of extra staff training. Policy and procedures are regular reviewed regarding administering of medication, in line with State & DECD legislative/regulatory requirements. 
- Regular preventative building maintenance is undertaken. Bedding & space is created if child becomes tired/ ill during session – whilst parent is contacted to collect the child. Spare clothing is stored at the site. Service adheres to sun smart policies and supports children to wear hats & apply sun cream in middle of the day. Quiet middle of the day. Quiet times are available, with specific Community Times. Facilities & procedure’s are in place to allow nappy, soiled clothing changing to occur.
- Regular routine is maintained and encouraged in hand washing procedures for children, particularly prior to eating and after toileting.
- Effective use of documentation provided by DECD ‘You’ve got what?’. Documented Health Policy is regularly reviewed & enacted when necessary. Parents consistent in informing service of suspected illnesses – outbreaks i.e headlice; & staff action such notification with written displays describing suspected illness and what action to follow. Universal precautions are followed by staff as are the appropriate OHS&W regulations.
- Safe storage of food: Lunches / water are bought inside and stored in dedicated cupboard; Parents are encouraged to pack all foods with an ‘ice brick’.

**Standard 2.2**  
Healthy eating & physical activity are embedded in the program for children.
- Healthy eating policy is reviewed annually and is placed on our web page.
- Timely and termly information provided to parents re sustainable practises in providing healthy eating & physical activity. 
- Regular cooking experiences planned and facilitated based on health foods and where practicable from foods grown on site.
- Outdoor Learning Areas recently revamped to increase gross/fine motor (physical) experiences.

**Standard 2.3**  
Each child is protected.
- Staff child ratios are maintained at a minimum of 1:11. Staff are at all times present both indoor/ outdoor when children are attending.
- Risk & safety audits are conducted & discussed at staff meeting’s. Identified hazards / risks are addressed and/or managed. Via budget processes monies are set aside to support service in addressing identified hazards. Risk & Benefit assessments are discussed prior to all ‘extra-curricular’ experiences i.e camp fires.
- Emergency plans are regularly reviewed & on display at service. The use of the web based Injury Response Management System (IRMS) is used to manage incidents. Both Invacuation & evacuation procedures are regularly conducted & documented.
- All staff have been trained in Mandatory Reporting. Hotline number for Child Abuse is on display. Staff document all incidents of reporting & report to the Director of the site. Specific support is identified and sought to support children (and/or parent(s)) experiencing trauma.

**Element 2.3.1**  
Children are adequately supervised at all times

**Element 2.3.2**  
Every reasonable precaution is taken to protect children from harm & any hazards likely to cause injury

**Issue(s):** Concern over ensuring adequate supervision in ‘unseen’ areas—toilets & utilities area of kindergarten: As well as accessibility into kitchen area. Concern regarding height of perimeter fence in some areas, as well as close proximity of

**Improvement Areas**

<table>
<thead>
<tr>
<th>What outcome do we seek?</th>
<th>Strategy</th>
<th>Responsible Person &amp; When</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Utilities area of building secured from children entering unaccompanied.</td>
<td>• Undertake immediate risk benefit assessments to address concerns/issues.</td>
<td>Director, staff</td>
</tr>
<tr>
<td>• Children’s toilet area is effectively &amp; adequately monitored.</td>
<td>• Investigate avenues of obtaining funds to install extra fencing, finger guards, gates in kitchen.</td>
<td>Governing Council</td>
</tr>
<tr>
<td>• Children actively aware of safe ‘traffic’ areas within kindergarten, inclusive of ‘no go, without an adult’ areas.</td>
<td>• Regularly re-visit child protection practices.</td>
<td>Children</td>
</tr>
<tr>
<td>• New fence line along perimeter of kindergarten.</td>
<td>• Re-visit kindergarten limits of unsafe areas to play &amp; socialise once a term and/or when needed.</td>
<td></td>
</tr>
<tr>
<td>• Self closing doors along with finger guards on all doors.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Installation of kitchen gates.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Quality Area 2: Progress Notes / Evidence:**
Quality Area 3  Physical Environment
How we do this well

<table>
<thead>
<tr>
<th>Standard/Element</th>
<th>Quality Area 3: Progress Notes / Evidence:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard 3.2</strong></td>
<td>The environment is inclusive, promotes competence, independent exploration &amp; learning through play.</td>
</tr>
<tr>
<td><strong>Standard 3.3</strong></td>
<td>The service takes an active role in caring for it's environment &amp; contributes to a sustainable future.</td>
</tr>
</tbody>
</table>

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.

<table>
<thead>
<tr>
<th>Element / Identified Issue Priority: Low/Medium/High</th>
<th>Improvement Areas</th>
<th>Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard 3.1</strong></td>
<td>Site meets above and/or has attained minimum OHSW safety practices: Issues undergo Risk Assessment and Benefits analysis</td>
<td></td>
</tr>
<tr>
<td><strong>Element 3.3.1</strong></td>
<td>Furniture / equipment are replaced in a timely manner.</td>
<td></td>
</tr>
<tr>
<td><strong>Issue(s):</strong></td>
<td>New perimeter fencing, trees/shrubs along fence line.</td>
<td></td>
</tr>
</tbody>
</table>

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.

<table>
<thead>
<tr>
<th>Element / Identified Issue Priority: Low/Medium/High</th>
<th>Improvement Areas</th>
<th>Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Element 4.1.1</strong></td>
<td>All state government operated kindergartens to have staffing based on enrolments as of 2016. At Mount Barker kindergarten staffing will be maintained at a minimum of 1 staff member to 11 children. Maximum number presently 66.</td>
<td></td>
</tr>
</tbody>
</table>

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.

<table>
<thead>
<tr>
<th>Quality Area 4: Progress Notes / Evidence:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Element 4.2</strong></td>
</tr>
<tr>
<td><strong>Element 4.1</strong></td>
</tr>
<tr>
<td><strong>Issue(s):</strong></td>
</tr>
<tr>
<td><strong>Benefit analysis</strong></td>
</tr>
<tr>
<td><strong>Focus on</strong></td>
</tr>
</tbody>
</table>

Families attending the kindergarten and wishing copies inclusive of photographs please contact a member of the staff team.