

Kentish Lifelong Learning and Care Incorporated

ABN 57 075 339 180



Governance Policies and Procedures



Current as at October 2018

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SECTION 1: POLICIES APPLICABLE TO ALL ASSOCIATION MEMBERS

POLICY: ANTI DISCRIMINATION



Commenced:	11 Aug 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
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PURPOSE: To set out Kentish’s policy against discrimination and the governance structures, responsibilities and processes to give effect to that policy.

SCOPE: Association members

RESPONSIBILITY FOR IMPLEMENTATION: Executive Director

OVERVIEW: Kentish endorses diversity, supports equal rights, and does not advocate, support or practice discrimination based on race, religion, age, national origin, language, sex, sexual orientation, or mental or physical handicap, whether covered by applicable legislation or not, except where affirmative action may be required to redress individual or social handicaps of people from disadvantaged groups.

POLICY: Kentish does not advocate, support or practice discrimination based on race, religion, age, national origin, language, sex, sexual orientation, or mental or physical handicap, except where affirmative action may be required to redress individual or social handicaps. Kentish will make all reasonable accommodations to allow people who experience difficulties in their dealings with the organization to benefit equally from its work.

PROCEDURES:

The Board of Management will:

- Regularly review the leadership and commitment given to eliminating discrimination through active promotion of the organization’s Anti-Discrimination Policy.
- Monitor performance by way of periodic management reports and assurances.

The Director will:

- Ensure that -
 - the organization’s practices and processes incorporate precautions against discrimination in such areas as hiring and program delivery;
 - Reasonable accommodations are made to allow diverse groups to access benefits provided by the organization;
 - Where appropriate, weight is given to the culture and experiences of individuals from disadvantaged groups.
- Review and report to the Board, as appropriate, on the effectiveness of the management systems established to remove discrimination.
- Analyse any breaches and identified compliance system weaknesses and address as required.

All Association members at all levels will:

- Ensure that they are aware of the organization’s policy against discrimination.
- Where appropriate, suggest ways in which practices, systems and procedures could be improved so as to reduce the likelihood of discrimination occurring.

POLICY: BULLYING AND VIOLENCE AT WORK



Commenced	9 Jun 2015	Last reviewed and approved by Board of Management:	26 Sep 2016	Due for next review:	26 Sep 2020
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PURPOSE: To outline Kentish’s position on bullying and to document the process which is to be followed should any instances of bullying be reported.

SCOPE: Association members, contractors and other relevant stakeholders

RESPONSIBILITY FOR IMPLEMENTATION: Executive Director

OVERVIEW: Kentish supports the rights of all persons to work in an environment that is, so far as is reasonably practicable, safe and without risks to health, and free of bullying and violence.

Bullying is: repeated, unreasonable behaviour directed toward a person, or a group of persons, that creates a risk to their health and safety. Unreasonable behaviour is behaviour that is offensive, humiliating, intimidating, degrading or threatening. It includes, but is not limited to:

- Verbal abuse
- Initiation pranks
- Excluding, ignoring or isolating a person.
- Giving a person the majority of an unpleasant or meaningless task unrelated to a person’s usual role.
- Humiliation through sarcasm, or belittling someone’s opinions
- Constant criticism or insults
- Deliberately setting work routines or procedures to inconvenience certain individuals.
- Displaying written or pictorial material which may degrade or offend certain individuals
- Psychological harassment
- Intimidation
- Spreading misinformation or malicious rumours
- Giving a person impossible assignments and deadlines
- Unjustified or constant criticism, insults or complaints
- Deliberately withholding information vital for effective work performance
- Constant taunting teasing or playing practical jokes on a person who is not a willing participant.

Bullying that directly inflicts physical pain, harm or humiliation amounts to assault and should be dealt with as a police matter.

Formerly agreed behaviour may be found to be bullying when it continues after a request from the recipient for the behaviour to stop, or at the point it becomes intimidating, offensive or humiliating.

Differences of opinion, conflicts and problems do not constitute bullying.

Similarly, the exercise of a director’s legitimate authority through the direction and control of responsibilities, adherence to policies and procedures, the monitoring of workflow, and giving feedback on performance, is not bullying insofar as the director’s actions are intended to assist Association members to improve their tasks, their work performance, or the standard of their behaviour. If an Association member has performance problems, however, these should be identified and dealt with in a constructive way that is neither humiliating or threatening.

POLICY: BULLYING AND VIOLENCE AT WORK (continued)



POLICY:	Kentish has a duty of care to provide a safe work environment. Kentish accepts and acts on its duty of care.
	Any allegations of bullying that are reported must be investigated.
	All incidences of bullying will be dealt with promptly, thoroughly and fairly.
	Complaints will be treated in confidence, and where confidentiality cannot be guaranteed this will be clearly indicated to the complainant.
	All parties will be treated with respect.
	The person against whom the allegation is made has the right to natural justice (the right to know what is alleged against them, the right to put their case in reply, and the right for any decision to be made by an impartial decision-maker).
PROCEDURES:	Any Association member who believes they are the subject of bullying should take firm, positive and prompt action.
	If deemed appropriate, the aggrieved person should make the perceived bully (or bullies) aware that they find their behaviour offensive, unwelcome and unacceptable, and that it needs to stop immediately.
	If the behaviour continues, or if the aggrieved person feels unable to speak to the person(s) directly, they should consult a director or manager, or other Association member with whom they feel comfortable and who can provide support. The complainant does not have to request a full formal investigation if they will be satisfied by less formal treatment of the issue.
	Informal Intervention may be done through a process of either mediation or conciliation. The alleged perpetrator will be made aware of the allegations being made against them and given the right to respond. The approach during this process should be confidential, non-confrontational and with a view to resolving the issue. The issue is resolved if the alleged perpetrator respect's the member's request to cease the unwanted and unwelcome behaviour, or when the complainant accepts that the behaviour is not properly described as bullying. If the issue is not resolved then the formal procedure should be followed.
	A formal investigation will proceed only with the consent of the complainant. The investigation will be coordinated by a director/deputy director, manager, or Board of Management member. The investigation will involve (but is not limited to): <ul style="list-style-type: none"> • Interview(s) with the complainant to ascertain the facts and to find out what the complainant expects to happen as a result of making the complaint. • Interview(s) with the alleged perpetrator(s) to ascertain their defence. • Interviews with other Association members who may be able to assist. • Examination of any relevant documents.
	On completion of the investigation, the investigation coordinator will advise all relevant parties of the outcome. Determination of whether bullying has occurred will depend on the evidence obtained during the investigation.
	All relevant evidence should be considered by the investigation coordinator. Evidence may include: <ul style="list-style-type: none"> • Supporting (or contradictory) evidence provided by medical practitioners, counsellors, family members, friends, colleagues or other relevant parties. • Records kept by the person claiming to have been bullied. • Information on whether the evidence was presented by the parties in a credible and consistent manner. • Information on the absence of evidence where it should logically exist.



**PROCEDURES:
(continued)**

The complainant and the investigation coordinator will then determine a course of action to be taken. This may include any combination of the following:

- Counselling
- Disciplinary action against the perpetrator(s) (e.g. suspension, probation, dismissal, cessation of contract)
- Disciplinary action against the complainant if the investigation has found that the complaint was vexatious or malicious
- Formal apologies and undertakings that the behaviour will cease
- Conciliation/mediation conducted by an impartial third party.

The investigation coordinator will document all interviews, investigation actions and outcomes, and will ensure that records are kept and filed confidentially and securely. These records should be kept separate from personnel files and should be kept for seven years.

POLICY: CODE OF ETHICS



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
PURPOSE:	To provide guidelines for procedures that allow Kentish to achieve agreement on the ethical principles that should guide its conduct; and to provide procedures for dealing with any breaches of the Association's agreed Code of Conduct.				
SCOPE:	Association members				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	<p>The ethical climate of an organization is an essential element in establishing its credibility and furthering its mission.</p> <p>A Code of Ethics was formally adopted by Association members at the Annual General Meeting (AGM) held on 10 November 2016.</p>				
POLICY:	<p>Kentish commits to operating in accordance with an ethical code.</p> <p>Such ethical code is drawn up through agreed procedures following consultation with and responsiveness to the Association's members.</p>				
PROCEDURES:	<p>The Board shall, from time to time, consult with members regarding the values that the Association wishes to embody. Discussions around these issues should be used as a means to raise awareness of the significance of ethical attitudes to the effective operation of the organization.</p> <p>The Board shall then review the Code of Ethics to ensure its currency.</p> <p>Should an Association member be considered to be in breach of the adopted Code of Ethics then an investigation should be actioned.</p> <p><u>Informal investigation</u> A director/deputy director, manager or Board of Management member will make the accused member aware of the alleged breach and give the member the right to respond. The approach during this process should be confidential, non-confrontational and with a view to addressing the alleged breach. If the member acknowledges the breach and commits to immediately rectify his/her behaviour accordingly then the formal procedure need not be followed. If the member does not acknowledge the breach then a formal investigation should be actioned.</p> <p><u>A formal investigation</u> will be coordinated by a director/deputy director, manager, or Board of Management member. The investigation will involve (but is not limited to):</p> <ul style="list-style-type: none"> • Interview(s) with the member and any other relevant persons to ascertain the facts and document the breach. • Interview(s) with the member to ascertain their defence. • Interview(s) with other relevant members who may be able to assist. • Examination of any relevant documents. <p>The investigation coordinator will document all interviews, investigation actions and outcomes.</p> <p>All relevant evidence should be considered by the investigation coordinator. Evidence may include supporting (or contradictory) evidence provided by other Association members, medical practitioners, counsellors, family members, friends, colleagues or other relevant parties; records kept by the member; information on whether the evidence was presented in a credible and consistent manner; and information on the absence of evidence where it should logically exist.</p> <p>On completion of the investigation the investigation coordinator will report to the Board of Management.</p>				



PROCEDURES: (continued)	Determination of whether a breach has occurred will depend on the evidence obtained during the investigation.
	The Board of Management will then determine a course of action to be taken. This may include any combination of the following: <ul style="list-style-type: none"> • Counselling • Formal apologies and undertakings that the behaviour will cease. • Conciliation/mediation conducted by an impartial third party. • Disciplinary action – suspension/probation/dismissal/deregistration/expulsion (Under the Constitution a member may be suspended or expelled if the conduct of the member is detrimental to the interests of the Association.)
	The Board must in relation to any proposed suspension or expulsion of the member follow the procedure as set out in the Constitution.
	The member must be afforded the opportunity to be heard and the opportunity to appeal against any suspension or expulsion.
	The investigation coordinator will ensure that records are kept and filed confidentially and securely. These records should be kept for seven years.

Appendix – Code of Ethics

What is the Kentish Code of Ethics?

The *Code of Ethics* of Kentish Lifelong Learning and Care Incorporated ('Kentish') expresses the values and responsibilities which are integral to our profession. It is intended to assist all Kentish members, collectively and individually, to act in ethically accountable ways in the pursuit of Kentish's mission.

Purpose of the Code of Ethics

The *Code of Ethics* is the core document which informs and guides the ethical practice of Kentish Lifelong Learning and Care Incorporated.

The purpose of the Code is to:

- identify the values and ethics which underpin ethical work practice
- provide a guide and standard for ethical work conduct and accountable service delivery
- provide a focus for all Members
- provide all Members with a foundation for ethical reflection and decision making
- provide clarification of Members' actions in the context of disputes
- hold Members accountable for their ethical practice and act as a basis for investigation of formal complaints about unethical conduct.

In this Code of Ethics, the protection and wellbeing of children is paramount and therefore speaking out or taking action in the presence of unethical practice is an essential professional responsibility.

In relation to children, I will:

1. act in the best interest of all children;
2. respect the rights of children as enshrined in the United Nations Convention on the Rights of the Child (1989) and commit to advocating for these rights;
3. recognize children as active citizens participating in different communities such as family children's services and schools;
4. work with children to help them understand that they are global citizens with shared responsibilities to the environment and humanity;
5. respect the special relationship between children and their families and incorporate this perspective in all my interactions with children;
6. acknowledge the uniqueness and potential of all children, in recognition that enjoying their childhood without undue pressure is important;
7. acknowledge the holistic nature of children's learning and the significance of children's cultural and linguistic identities; and
8. work to ensure children are not discriminated against on the basis of gender, age, ability, economic status, family structure, lifestyle, ethnicity, religion, language, culture or national origin.

In relation to families, I will:

1. assist each family to develop a sense of belonging and inclusion;
2. develop positive relationships based on mutual trust and open communication;
3. acknowledge the rights of families to make decisions about their children;
4. respect the uniqueness of each family and strive to learn about their culture, structure, lifestyle, customs, language, beliefs and kinship systems;
5. be sensitive to the vulnerabilities of children and families and respond in ways that empower and maintain the dignity of all children and families; and
6. maintain confidentiality and respect the right of the family to privacy.

In relation to colleagues, I will:

1. build collaborative relationships based on trust, respect and honesty;
2. acknowledge and support the personal strengths, professional experience and diversity which my colleagues bring to their work;
3. share and build knowledge, experiences and resources with my colleagues;
4. collaborate with my colleagues to generate a culture of continual reflection and renewal of high quality practices in early childhood; and
5. at all times respect the rights of all my colleagues.

In relation to communities, I will:

1. learn about the communities that I work within and enact curriculum programs which are responsive to those contexts and community priorities;
2. promote shared aspirations amongst communities in order to enhance children's health and wellbeing;
3. utilize knowledge and research to advocate for universal access to a range of high-quality early childhood programs for all children; and
4. respect the rights of all management and employees working within the NTG Territory Families and all government agencies and departments.

In relation to my employer, I will:

1. support workplace policies, standards and practices that are fair, non-discriminatory and are in the best interests of children and families;
2. promote and support ongoing professional development within my work team;
3. adhere to lawful policies and procedures and when there is conflict, attempt to effect change through constructive action within the organization or seek change through appropriate procedures; and
4. respect the rights of all senior management and staff at all times.

In relation to myself as a professional, I will:

1. base my work on contemporary perspective on research, theory, content knowledge, high-quality early childhood practices and my understanding of the children and families with whom I work;
2. regard myself as a learner who undertakes reflection, critical self-study, continuing professional development and engages with contemporary theory and practice;
3. seek and build collaborative professional relationships;
4. acknowledge the power dimensions within professional relationships;
5. act in ways that advance the interests and standing of my profession;
6. mentor other early childhood professionals and students; and
7. advocate in relation to issues that impact on the profession and on young children and their families.

POLICY: CRISIS RESPONSE



Commenced:	9 Jun 2015	Last reviewed and approved by Board of Management:	25 Sep 2018	Due for next review:	25 Sep 2021
PURPOSE:	To facilitate the management of a crisis within Kentish to minimise risks to people and property, to protect the reputation of Kentish, and to implement urgent recovery procedures.				
SCOPE:	All Association members				
RESPONSIBILITY FOR IMPLEMENTATION:	The Executive Director in consultation with the Association President				
OVERVIEW:	<p>Unforeseen incidents may occur at short notice that must be dealt with urgently outside the standard policy framework. While precise procedures cannot be laid down, there is a need for a general policy to guide the organizational response to crisis.</p> <p>Some examples of incidents that could require the activation of this policy are:</p> <ul style="list-style-type: none"> • Manmade or natural disasters having an impact on Kentish people or facilities. • A serious adverse event effecting children in the custody of Kentish Educators. • A work-related death or injury suffered by a Kentish staff member or Educator. • Serious adverse media coverage. 				
POLICY:	Management of the physical aspects of any crisis (fire, flood, etc.) will be handled according to plans drawn up under Kentish's Work Health and Safety procedures. The Crisis Response Committee shall address managerial, media, and budgeting issues.				
PROCEDURES:	<p>The Board shall establish a standing Crisis Response Committee consisting of the President, the Executive Director, and one other Board member as appointed by the Board. All members of the Committee must be prepared to meet at short notice. In the event that some committee members are unavailable, the remaining members shall appoint additional members as necessary.</p> <p>The Board, by approval of this procedure, delegates to the Crisis Response Committee the authority to take action to facilitate the management of a crisis if required urgently.</p> <p>Members of the Crisis Response Committee shall maintain records of the contact details (phone, mobile phone and email) of all other members. On being informed of any crisis situation, the Crisis Response Committee shall arrange to meet as soon as possible. If a physical meeting is not possible, this may be conducted electronically.</p> <p>The Crisis Response Committee shall:</p> <ul style="list-style-type: none"> • Ascertain the nature and extent of any damage to the organization; • Coordinate the organization's media response; and, • Institute any urgent recovery procedures. <p>The Crisis Response Committee shall return to the standard policy and managerial framework at the first feasible opportunity.</p> <p>The Crisis Response Committee shall call a Board meeting at the first feasible opportunity, and in any case within two weeks, and report on any actions taken. The crisis situation is then to be managed by the Board, unless the Board decides that the committee is to continue to manage the situation.</p>				

POLICY: ENVIRONMENTAL SUSTAINABILITY



Commenced:	11 Aug 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
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PURPOSE:	To provide a framework for accountability and responsibility in line with our commitment to environmental sustainability.
SCOPE:	All Association members
RESPONSIBILITY FOR IMPLEMENTATION:	The Board of Management
OVERVIEW:	We aspire to minimise our impact on the environment and maximise the effective use of resources. We strive to achieve this by fostering responsible environmental behaviour amongst all members at all levels.
POLICY:	<p>We commit to, as part of our core activities, work to preserve the environmental sustainability of our planet at all levels of our operations. We will minimise our impact on our environment through:</p> <ul style="list-style-type: none"> • Providing a safe and healthy workplace • Creating an environmentally aware culture, where responsibility is assigned and understood • Being an environmentally responsible neighbour in our community • Conserving natural resources by reusing and recycling • Using, in our own operations, processes that do not adversely affect the environment. • Ensuring the responsible use of energy throughout the organization • Participating in effort to improve environmental protection and understanding • Using our own professional expertise, where possible, to assist in the development of solutions to environmental problems • Striving to improve our environmental performance continually • Conducting vigorous audits, evaluations and self-assessments of the implementation of this policy • Working with suppliers who promote sound environmental practices • Enhancing awareness among our members and users – educating and motivating them to act in an environmentally responsible manner.
PROCEDURES:	<p>Kentish will develop guidelines for members to adopt sound environmental work practices; and training will be provided to ensure these practices are carried out.</p> <p>Kentish will act promptly and responsibly to correct incidents or conditions that endanger health, safety, or the environment.</p> <p>Kentish will, where feasible, reuse and recycle materials, purchase recycled materials, and use recyclable packaging and other materials.</p> <p>Kentish will ensure that its services and products are safe, efficient in their use of energy, protective of the environment, and able to be reused, recycled or disposed of safely.</p> <p>Kentish will, in its operations, minimise materials and energy use, prevent air, water, and other pollution, and dispose of waste safely and responsibly.</p> <p>Kentish will, in its operations, conserve energy by improving energy efficiency and giving preference to renewable over non-renewable energy sources when feasible.</p> <p>Kentish will, where it can, use its knowledge and experience to contribute to environmentally sustainable techniques, technology, knowledge and methods.</p> <p>The Board of Management will periodically review Kentish’s environmental performance.</p>

POLICY: EXECUTIVE DOCUMENTS



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
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PURPOSE:	<p>To:</p> <ul style="list-style-type: none"> • Allow for a hierarchy of executive documents relating to the management and operation of Kentish Lifelong Learning and Care Incorporated (Kentish). • Detail the framework for executive documents pertaining to Kentish. • Outline the responsibilities for creating, changing and approving executive documents.
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SCOPE:	All Association members
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RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management
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OVERVIEW:	Executive documents are the means by which the Board of Management (the Board) stipulates the rules for the conduct of Kentish activities.
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POLICY:	<p>Kentish is to have a suite of executive documents to assure compliance with applicable legislation and regulations and to provide rules for the conduct of all business.</p> <p>These documents must be kept current and consistent with each other.</p>
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PROCEDURES:	The Board is to create or cause to be created, documentation as required to achieve the aim of this policy.
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These documents are to be regularly checked for currency and updated as required.

The following are the minimum requirements:

Constitution: The requirements for the constitution are stipulated in the *Northern Territory of Australia Associations Act* (the Act). Any amendments to the Constitution must be passed by a special resolution of Association members and filed in accordance with the Act. The Constitution lays out the highest level rules for the conduct of Kentish business and it applies to all Association members.

Kentish Policies and Procedures are created and approved by the Board, or by the Director when delegated by the Board, and provide the framework for the conduct of the business of the organization, as well as information on how the policies are to be implemented. Kentish policies apply to all Association members, as appropriate.

Family Day Care (FDC) and Out of Home Care (OOHC) Policies and Procedures are created and approved by the Director and contain detailed information required for the conduct of the FDC and OOHC programs. All FDC and OOHC Policies and Procedures must be consistent with the Constitution and Kentish Policies and Procedures.

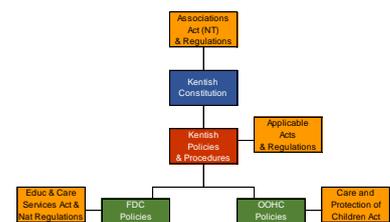
All **FDC Policies** must also comply with the *Northern Territory Education and Care Services (National Uniform Legislation) Act 2011* and the *Education and Care Services National Regulations*. They apply to all members involved in the conduct of FDC.

All **OOHC Policies** must also comply with the *Northern Territory Care and Protection of Children Act 2007*, relevant NT Legislation and Regulations and the rules stipulated by the NT Govt - Territory Families. These apply to all members involved in the conduct of OOHC.

Hierarchy of Documents

This diagram demonstrates the relationship between the Kentish executive documents.

Documents in:	Promulgated by:
Orange	Government authorities
Blue	Kentish membership
Red	Board of Management
Green	Executive Director



POLICY: FRAUD MANAGEMENT



Commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	<ol style="list-style-type: none"> 1. Ensure that all parties are aware of their responsibilities regarding the identification and prevention of fraudulent activity. 2. Ensure that staff/volunteers/Association members understand who to report to in the event that they suspect fraudulent activity. 3. Provide a step-by-step guide to respond to an allegation regarding fraudulent activity. 4. Express a clear statement to staff/volunteers/contractors forbidding fraudulent activity for the benefit of the organization. 				
SCOPE:	All employees, Association members, volunteers				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	Just like commercial organizations, not-for-profit organizations may be subject to fraudulent activity and must therefore implement effective prevention strategies to minimise legal and financial exposure.				
POLICY:	<p>Kentish Lifelong Learning and Care Inc. (Kentish) will not tolerate fraud in any aspect of its operations. Kentish will investigate any suspected acts of fraud, misappropriation or other similar irregularity. An investigation, as deemed necessary, will be conducted regardless of the position, title, length of service or relationship with the organization of any party who might be the subject of such suspected activity. Any fraud shall constitute grounds for dismissal. Any serious case of fraud, whether suspected or proven, shall be reported to the relevant and appropriate authorities such as the police and the ombudsman. Any person who suspects the commission of a fraud, related to the operations of Kentish, is required to immediately report it to the Executive Director. Any person reporting a fraud, or a suspected fraud, shall not be penalised for raising a concern of this nature.</p>				
PROCEDURES:	<p>RESPONSIBILITIES: The Board of Kentish has ultimate responsibility for the prevention and detection of fraud and is responsible for ensuring that appropriate and effective internal control systems are in place. The Executive Director is responsible for dealing with and investigating instances of fraud reported to them. All managers must ensure that they:</p> <ul style="list-style-type: none"> • Assess the risk of fraud within their area of control; • Educate staff/volunteers/contractors about fraud prevention and detection; • Facilitate the reporting of suspected fraudulent activities. <p>Management should be familiar with the types of fraud that might occur within their area of responsibility and be alert to any indications of such conduct. All employees/volunteers/Association members share in the responsibility for the prevention and detection of fraud.</p> <p>REPORTING: All employees/volunteers/Association members have the responsibility to report suspected fraud. Any employee, volunteer or Association members who suspects fraudulent activity must immediately notify the Executive Director about the concern. In situations where the person suspects fraudulent activity by the Executive Director, they must notify the President of the Board.</p>				

POLICY: FRAUD MANAGEMENT (continued)

**PROCEDURES:
(continued)**

Step-by-step guide: Responding to suspected fraud

1. Upon notification of an allegation pertaining to fraud, the Executive Director (or President of the Board) will promptly arrange to carry out an initial review into the allegation.
2. After an initial review and a determination that the suspected fraud warrants additional investigation, the executive Director (or President of the Board) shall coordinate the investigation with the appropriate law enforcement officials or external investigator as deemed appropriate. Internal or external legal representatives will be involved in the process, as deemed appropriate.
3. Once a suspected fraud is reported, immediate action will be taken to prevent the theft, alteration or destruction of relevant records. Such actions include, but are not necessarily limited to, removing relevant records / information and placing them in a secure location, limiting access to the location where the records / information currently exists, and preventing the individual suspected of committing the fraud from having access to the records / information.
4. If an allegation of fraud is substantiated by the investigation, disciplinary action, up to and including dismissal (or termination of an individual's right to work as a contractor or volunteer), shall be taken by the appropriate level of management.
5. The organization will also pursue every reasonable effort, including court ordered compensation, to obtain recovery of any losses from the offender.

Where an apparent case of fraud has been established, the matter shall be referred to the relevant authorities. If an allegation is made in good faith, but it is not substantiated by the investigation, no action will be taken against the staff / volunteer/ Association member.

The organization will make every effort to keep the investigation confidential; however, members of the management team may need to be consulted to assist with a review/investigation.

RELATED DOCUMENTS: Mechanisms pertaining to fraud prevention shall be incorporated into the organization's accounting and human resources policies and procedures including (but not limited to):

- Reimbursement of Expenses Policy
- Debit Card / Credit Card Use Policy
- Petty Cash Policy
- Staff Recruitment Policy

POLICY: LEGISLATIVE COMPLIANCE



Commenced:	29 Sep 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
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PURPOSE: To set out Kentish’s policy for compliance with the law and the governance structures, responsibilities and processes that have been established to give effect to this policy.

SCOPE: All Association members

RESPONSIBILITY FOR IMPLEMENTATION: Board of Management and Executive Director

OVERVIEW: The operations of Kentish are subject to a wide range of legal requirements, embodied in legislation, regulations, licenses, codes, guidelines and similar binding instruments. These include (but are not limited to):

- Health and safety legislation
- Anti-discrimination legislation, including that relating to equal opportunity, racial vilification and disability discrimination
- Taxation legislation
- Privacy legislation.

POLICY: Kentish is committed to the highest standards of integrity, fairness and ethical conduct, including full compliance with all relevant legal requirements, and requires that all its Board of Management members, officers (including its Director), managers, employees and contractors acting on its behalf meet those same standards of integrity, fairness and ethical behaviour, including compliance with any legal requirement.

There is no circumstance under which it is acceptable for Kentish or any of its employees or contractors to knowingly and deliberately not comply with the law or to act unethically in the course of performing or advancing Kentish’s business.

PROCEDURES: **The Board of Management will:**

- Review and monitor the leadership and commitment given to legislative compliance through active promotion of the organization’s Legislative Compliance Policy.
- Review compliance management objectives and plans for legislative compliance.
- Monitor compliance performance by way of periodic management reports and assurances.

The Director will:

- Prepare legislative compliance objectives and plans for review and consideration by the Board.
- Monitor performance against legislative compliance objectives and plans, and report to the Board on progress toward accomplishment of objectives.
- Where appropriate, delegate responsibility for compliance to officers with responsibility for particular sections.
- Oversee the performance of subordinate officers in these matters, including
 - conforming to and applying relevant requirements of the Law within the workplace;
 - ensuring that systems and procedures established to make the policy effective are operational;



**PROCEDURES:
(continued)**

- ensuring that staff are trained and have the necessary knowledge and understanding to perform their duties in compliance with the policy and all relevant requirements of the law;
- ensuring that significant compliance responsibilities and accountabilities are included in position descriptions and performance reviews;
- reporting and investigating any incident or occurrence thought or known to constitute a breach of any legal requirement; and
- designing and implementing system enhancements to correct weaknesses that could result in a breach of such a requirement.
- Review and report annually to the Board on the effectiveness of the management systems established to deliver legislative compliance.
- Analyse material breaches and system weaknesses and address as required.
- Promote a culture of effective legislative compliance across the organization.
- Provide formal assurance to the Board as to the state of compliance of the organization.

All staff, educators, other members and contractors, at all levels, will:

- Ensure that they are aware of any legal requirements that apply to their work activities and that they comply with them.
- Report all incidents of breaches of legal requirements.
- Where appropriate, suggest ways in which practices, systems and procedures could be improved so as to reduce the likelihood of a breach occurring.

POLICY: MISCONDUCT



Commenced:	9 June 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
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PURPOSE: To ensure that employees are aware of behaviour that could amount to misconduct and that all relevant parties are aware of Kentish's policy for dealing with misconduct.

SCOPE: Kentish employees

RESPONSIBILITY FOR IMPLEMENTATION: Executive Director

OVERVIEW: Kentish may discipline an employee who engages in unacceptable behaviour.

- Behaviour amounting to misconduct includes, but is not limited to, the following:
- Failing to obey lawful and reasonable instructions of Kentish
 - Failing to follow defined policies, procedures and rules
 - Failing to share relevant information with Kentish
 - Unacceptable disruptive behaviour
 - Unauthorised absence from the workplace
 - Repeatedly being late for work without lawful excuse.

- Behaviour amounting to serious misconduct includes, but is not limited to:
- willful or deliberate behaviour that is inconsistent with the employee's contract of employment
 - theft
 - fraud
 - assault
 - intoxication at work
 - use of derogatory, violent or abusive language
 - fighting
 - failure to observe safety rules
 - concealment of a material fact on engagement
 - obscenity
 - dishonesty in the course of the employment
 - criminal conduct including conduct that, if proven, renders the employee completely unfit for work.

POLICY: Kentish expects employees to observe acceptable standards of behaviour.

Employees must not engage in behaviour that amounts to misconduct (including serious misconduct) at the workplace. This includes where employees are working on site or off-site, attending a work-related conference or function, or attending a client or other work-related event, including social events.

Where an employee engages in misconduct or alleged misconduct, the processes in this policy will be followed.

Whether misconduct amounts to serious misconduct depends on the particular circumstances of a given case. Supervisors/managers should consider the circumstances fully as they apply to the particular employee when determining whether or not the employee has engaged in conduct that could be considered serious misconduct.

When proven, misconduct, or serious misconduct may provide a valid reason for termination of an employee's employment without notice.



PROCEDURES:

The **Director and Deputy Director(s)** are responsible for ensuring that:

- the processes in this policy are followed in relation to all instances and allegations of misconduct;
- employees that are the subject of any investigation are afforded procedural fairness; and
- confidentiality is maintained to the greatest extent possible.

Supervisors/managers are responsible for ensuring that:

- where appropriate, they try to informally resolve any instances or allegations of employee misconduct with the employee(s) involved in first instance (in consultation with the Director/Deputy Director if appropriate);
- instances or allegations of misconduct are reported to the Director; and
- all necessary assistance is provided to any other person investigating an instance or allegation of misconduct.

Employees are responsible for ensuring that they:

- comply with this policy and related procedures; and
- report any instances or allegations of miscondacts to the relevant manager.

Each instance or allegation of misconduct will be considered by Kentish on its own merits and any mitigating circumstances will be taken into account. Investigations into misconduct will generally be carried out by the Director, but may be delegated when necessary.

Where an employee is accused of engaging in misconduct, it is open to Kentish to stand the employee down on full pay in order to further investigate the matter.

Investigations into instances or allegations of misconduct will be conducted in accordance with the principles of procedural fairness. Employees accused of misconduct will be given an opportunity to respond to the allegations against them and may have a support person present at any disciplinary meetings with Kentish.

Any meetings relating to instances or allegations of misconduct or serious misconduct will be conducted by two senior staff members, one of whom will act as a note taker.

If Kentish decides that the appropriate action is to dismiss an employee, the employee will be provided with the full reasons for the decision. Proposed dismissal action is to be referred to the Board of Management for final decision.

POLICY: PETTY CASH

Commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management:	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	This policy seeks to ensure that petty cash floats are established and managed appropriately and that staff, volunteers and association members are not financially disadvantaged as a result of incurring minor work-related expenses.				
SCOPE:	All employees, Association members and volunteers				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	To deal with minor expenses, Kentish Lifelong Learning and Care Inc. (Kentish) employees, association members and volunteers need a procedure that is flexible yet consistent with the need to protect the organisation's funds.				
POLICY:	Office Managers may seek the approval of the Executive Director to establish petty cash floats to deal with minor expenses. Any floats must observe the nominated procedures.				
PROCEDURES:	It is the responsibility of the Executive Director to nominate a Petty Cash Officer for each office. It shall be the responsibility of the Petty Cash Officer to manage the amount of the float and to ensure that the procedures specified in this policy are implemented appropriately.				
	Petty Cash Limit: The amount of the petty cash float shall be as determined by the Executive Director from time to time, but in general should not exceed \$400 in any regional office and \$1,000 in the Darwin Office.				
	Petty Cash Use: Each Petty Cash Officer shall ensure that petty cash is used to cover only those expenses for which it is not feasible, or for which it is unreasonably inconvenient, to use normal purchasing methods such as by electronic funds transfer or credit/debit cards. Any expense that is predictable, regular and significant should be dealt with through normal accounting procedures. Expenditure of over \$300 must be approved by the Executive Director. The approved limit of \$300 shall not be evaded through splitting of items into smaller amounts. Each Petty Cash Officer shall require all expenses incurred using petty cash funds to be substantiated by acceptable supporting documentation such as receipts, invoices, staff travel forms, etc., and the documentation relating to each item shall be sufficient to establish the nature of the expenditure. Employees, association members and volunteers are responsible to ensure these documents are submitted to the Petty Cash Officer within three days of purchase. Each Petty Cash Officer shall retain acceptable supporting documentation of payments from the Petty Cash float and shall submit these with their Petty Cash Record to the CFO each month. Each Petty Cash Officer shall report the loss of any Petty Cash funds to CFO as soon as the loss is discovered. Petty cash should be kept in a secure (locked) location and the key held securely. The Petty Cash Officer cannot delegate control of the float to other employees, unless the Petty Cash Office is absent from the office for an extended amount of time. If the Petty Cash Officer is unavailable, payment cannot be made by that means. When the Petty Cash Officer takes leave the petty cash will be reconciled and formally signed over to another staff member who has been appointed by the Executive Director to assume the role temporarily during the usual Petty Cash Officer's absence.				
	Petty Cash Replenishment: Petty cash requirements shall be estimated by the Petty Cash Officer and requested to the Executive Director. If there is a need to increase the amount of the float, a special request must be made to the Executive Director. Replenishments should be sought when sufficient funds remain for less than five business days of expected use.				

POLICY: POLICIES AND PROCEDURES



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	28 Aug 2017	Due for next review:	28 Aug 2019
PURPOSE:	Lay out guidelines for developing and approving Kentish Lifelong Learning and Care Incorporated (Kentish) policies and associated procedures. Provide a template for all Kentish policies.				
SCOPE:	All members.				
RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management (The Board).				
OVERVIEW:	Kentish policies are to be put in place to lay down broad policy for the conduct of Kentish business. They may be narrow in scope (e.g. applicable to the Board only) or broader (eg applicable to all members).				
POLICY:	<p>The Kentish Constitution provides the highest level of guidance for the conduct of our business and is approved by the membership at a general meeting.</p> <p>Below this, the Board will promulgate policies as necessary to regulate the conduct of Kentish Business. Policies cannot contradict the Constitution and if they appear to do so, the Constitution will be the effective document.</p> <p>Any member may propose a policy and any associated procedures to the Board for adoption.</p> <p>Policies should be reviewed regularly to ensure that they remain current.</p>				
PROCEDURES:	<p>A need for a new policy, or a revision of an existing policy, can be brought to the attention of the Board by any member.</p> <p>The Board is to decide whether the new policy or revision is necessary and relay this decision to the member proposing it.</p> <p>If the new policy or review is considered necessary, the Board is to identify an author or authors.</p> <p>The author/s are to consult with all relevant parties for comment.</p> <p>All draft policies are to be clearly marked as such.</p> <p>The author/s are then to provide a draft version to the Board with a summary of consultation undertaken and feedback received.</p> <p>The Board may then adopt the policy, reject it or return it to the author/s for further work.</p> <p>Policy and procedure documents are to comply with the basic format of this document.</p> <p>The Secretary is to maintain a register of all policies in force.</p>				

POLICY: PRIVACY



Commenced:	28 May 2018	Last reviewed and approved by Board of Management:	28 May 2018	Due for next review:	28 May 2019
PURPOSE:	To provide a framework for Kentish for dealing with privacy considerations.				
SCOPE:	All Association members				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	The Kentish Board of Management is committed to protecting the privacy of personal information which the organization collects, holds and administers.				
	Personal information is information which directly or indirectly identifies a person.				
	Kentish collects and administers a range of personal information for the purposes of providing Family Day Care, Out of Home Care and In Home Care services.				
POLICY:	Kentish recognises the essential right of individuals to have their information administered in ways which they would reasonably expect – firstly, that it is protected and secondly, that it is made accessible to them. These privacy values are reflected in and supported by our core values and philosophies and also reflected in this Privacy Policy, which is compliant with the <i>Privacy Act 1988 (Cth)</i> .				
	Kentish imposes specific obligations when it comes to handling information. The organization has adopted the following principles as minimum standards in relation to handling personal information.				
	Kentish will: <ul style="list-style-type: none"> • Collect only information which the organization requires for its primary function. • Ensure that stakeholders are informed as to why we collect the information and how we administer the information gathered. • Use and disclose personal information only for our primary functions, or a directly related purpose, or for another purpose with the person’s consent. • Store personal information securely, protecting it from unauthorised access. • Provide stakeholders with access to their own information, and the right to seek its correction. 				
PROCEDURES:	Collection Kentish will: <ul style="list-style-type: none"> • Only collect information that is necessary for the performance and primary function of Kentish Lifelong Learning and Care Incorporated. • Notify stakeholders about why we collect the information and how it is administered. • Notify stakeholders that this information is accessible to them. • Collect personal information from the person themselves wherever possible. • If collecting personal information for a third party, be able to advise the person whom the information concerns, from whom their personal information has been collected. • Collect sensitive information only with the person’s consent. (Sensitive information includes health information and information about religious beliefs, race and gender). Exception: Such consent will not apply in relation to sensitive information provided to Kentish by Territory Families to enable Kentish to provide specialist care to children referred by Territory Families. • Determine, where unsolicited information is received, whether the personal information could have been collected in the usual way, and then if it could have, it will be treated normally. If it could not have been it must be destroyed. 				

POLICY: PRIVACY (continued)

**PROCEDURES
(continued):**

Use and Disclosure

Kentish will:

- Only use or disclose information for the primary purpose for which it was collected, or a directly related secondary purpose.
- For other uses, Kentish will obtain consent from the affected person.
- In relation to a secondary purpose, use or disclose the personal information only where: a secondary purpose is related to the primary purpose and the individual would reasonably have expected Kentish to use it for that purpose; or the person has consented; or certain other legal reasons exist; or disclosure is required to prevent serious and imminent threat to life, health or safety.
- In relation to personal information which has been collected from a person, use the personal information for direct marketing, where that person would reasonably expect it to be used for this purpose, and Kentish has provided an opt out and the opt out has not been taken up, for example newsletters and event invitations.
- In relation to personal information which has been collected other than from the person themselves, only use the personal information for direct marketing if the person whose personal information has been collected has consented (and they have not taken up the opt-out).
- Not send any confidential information overseas and further will ensure that any local services to whom information may be sent are as compliant with privacy as Kentish is required to be.
- Provide all individuals access to their personal information except where it is a threat to life or health, or it is authorized by law to refuse and, if a person can establish that the personal information is not accurate, then Kentish must take steps to correct it. Kentish may allow a person to attach a statement to their information if Kentish disagrees it is inaccurate.
- Where, for a legal or other reason, Kentish is not required to provide a person with access to the information, consider whether a mutually agreed intermediary would allow sufficient access to meet the needs of both parties.
- Make no charge for making a request for personal information, correcting the information, or associating a statement regarding accuracy with the personal information.

Storage

Kentish will:

- Implement and maintain steps to ensure that personal information is protected from misuse and loss, unauthorized access, interference, unauthorized modification or disclosure.
- Before Kentish discloses any personal information to an overseas recipient, including a provider of IT services such as servers or cloud services, establish that they are privacy compliant. Kentish will have systems which provide sufficient security.
- Ensure that Kentish’s data is up to date, accurate and complete.

Destruction and De-identification

Kentish will:

- Destroy personal information once is not required to be kept for the purpose for which it was collected, including from decommissioned laptops and mobile telephones.

POLICY: PRIVACY (continued)

<p>PROCEDURES (continued):</p>	<ul style="list-style-type: none"> Change information to a pseudonym or treat it anonymously if required by the person whose information Kentish holds and will not use any government related identifiers unless they are reasonably necessary for our functions.
	<p>Data Quality</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Take reasonable steps to ensure the information we collect is accurate, complete, up-to-date, and relevant to the functions Kentish performs.
	<p>Data Security and Retention</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Only destroy records in accordance with the organization’s records management policies.
	<p>Openness</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Ensure stakeholders are aware of this Privacy Policy and its purpose. Make this information freely available in relevant publications and on the organization’s website.
	<p>Access and Correction</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Ensure individuals have a right to seek access to information held about them and to correct it if it is inaccurate, incomplete, misleading or not up-to-date.
	<p>Access and Correction</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Ensure individuals have a right to seek access to information held about them and to correct it if it is inaccurate, incomplete, misleading or not up-to-date.
	<p>Anonymity</p> <p>Kentish will:</p> <ul style="list-style-type: none"> Allow people from whom the personal information is being collected to not identify themselves, or use a pseudonym, unless it is impracticable to deal with them on this basis.
	<p>Making information available to other organizations</p> <p>Kentish can:</p> <ul style="list-style-type: none"> Release information to third parties where it is requested by the person concerned.

POLICY: REIMBURSEMENT

Commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management:	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	The purpose of this policy is to stipulate under what circumstances reimbursement of expenses may occur on behalf of Kentish Lifelong Learning and Care Inc. (Kentish), and the process for doing so.				
SCOPE:	All employees, Association members, and volunteers acting on authorised Kentish business.				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	Staff, Association members, or volunteers may on occasion be required to pay expenses consequent on their employment out of their own pockets. Under certain circumstances, as outlined in this policy, these expenses may be reimbursed by the organization.				
POLICY:	Kentish will reimburse its staff (including volunteers) and association members' expenses incurred by them on behalf of Kentish or in the course of Kentish business, so long as such expenses are both reasonable and authorised. Reimbursement of reasonable but unauthorised expenses may be made at the discretion of the Executive Director in exceptional circumstances only. Staff, association members and volunteers incurring authorised expenditure must, wherever possible, receive, retain and produce receipts, invoices, or other evidence of such expenditure within two weeks of purchase.				
PROCEDURES:	<p>It is the responsibility of Management to ensure that:</p> <ul style="list-style-type: none"> • Staff and volunteers are aware of this policy; • Any breaches of this policy coming to the attention of management are dealt with appropriately. <p>It is the responsibility of all employees, association members and volunteers to ensure that their applications for reimbursement conform to this policy.</p> <p>Prohibited reimbursements Kentish will not reimburse staff, association members or volunteers for unauthorised expenses and expenses that are not incurred for the organization's purposes.</p> <p>Travel expenses Use of an employee's own vehicle for work-related travel will be reimbursed by way of an all-inclusive mileage allowance, as shall be determined by the organization from time to time with reference to relevant Award requirements. This allowance is only valid when Kentish vehicles are unavailable.</p> <p>Staff, association members and volunteers incurring authorised expenditure must submit requests for reimbursement to the Finance Officer.</p> <p>The Finance Officer and Executive Director are responsible for determining if the expenses being claimed are reasonable given the circumstances.</p>				

POLICY: SEXUAL HARASSMENT



Commenced:	11 Aug 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
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PURPOSE: To outline Kentish’s position on sexual harassment and to document the process which is to be followed should any grievances arise.

SCOPE: All Association members

RESPONSIBILITY FOR IMPLEMENTATION: The Director and the Association President

OVERVIEW: Kentish recognises it is the right of every Association member to be able to attend work and to perform their duties without being subjected to any form of sexual harassment.

Equally, it is the obligation and responsibility of every Association member to ensure that the workplace is free from sexual harassment.

Kentish is fully committed to its obligations to eliminate sexual harassment in the workplace and in customer relations.

Sexual harassment means any unwelcome sexual advance, unwelcome request for sexual favours, or other unwelcome conduct of a sexual nature which makes a person feel offended, humiliated or intimidated, and where that reaction is reasonable in the circumstances.

Examples of sexual harassment include, but are not limited to:

- intrusive enquiries into a member's private life
- reference to their sexuality or physical appearance
- unwanted body touching or physically molesting a person
- standing too close
- excessively lengthy handshakes
- unwanted brushing against another’s body
- indecent exposure
- obscene, suggestive or offensive communications, including electronic mail
- pornographic or offensive posters, handouts or screensavers
- sexual jokes or anecdotes
- leering or staring
- unwanted sexual compliments or excessive flirting
- sexual assault.

Behaviour that is based on mutual attraction, friendship and respect is not sexual harassment.

POLICY: Kentish will not tolerate sexual harassment under any circumstances. Responsibility lies with every Association member to ensure that sexual harassment does not occur.

Both federal and state Equal Employment Opportunity legislation provide that sexual harassment is unlawful. Kentish considers that legislative obligations under the Acts establish the absolute minimum standards of behaviour for all Kentish members.

The principles set out in this policy are intended to apply to any work-related context, including conferences, work functions, social events and business trips.

No Association member at any level should subject any other Association member, customer or visitor to any form of sexual harassment.

A breach of this policy will result in disciplinary action. Depending upon the severity of the case, consequences may include apology, counselling, transfer, demotion, dismissal, or other forms of disciplinary action deemed appropriate.



POLICY: (continued)	Kentish strongly encourages any person who feels they have been sexually harassed to take immediate action, preferably by making it clear that such behaviour is unwelcome and offensive; alternatively, or in addition, they may follow the procedures for reporting the behaviour.
	Any reports of sexual harassment will be treated seriously and promptly with sensitivity. Such reports will be treated as completely confidential up to the point where a formal or informal complaint is lodged against a particular person, at which point that person must be notified under the rules of natural justice.
	Complainants have the right to determine how to have a complaint treated, to have support or representation throughout the process, and the option to discontinue a complaint at any stage of the process.
	The alleged harasser also has the right to have support or representation during any investigation, as well as the right to respond fully to any formal allegations made. There will be no presumptions of guilt and no determination made until a full investigation has been completed.
	No member will be treated unfairly as a result of rejecting unwanted advances. Disciplinary action may be taken against anyone who victimises or retaliates against a person who has complained of sexual harassment, or against any Association member who has been alleged to be a harasser.
	All Association members have the right to seek the assistance of the relevant tribunal or legislative body to assist them in the resolution of any concerns.
	Managers or supervisors who fail to take appropriate corrective action when aware of harassment of a person will be subject to disciplinary action.
	<p>Complaint Process</p> <ul style="list-style-type: none"> • Sexual harassment can occur at any level of the organization, can be experienced by both men and women and may involve a Board member, co-worker, educator, supervisor, manager, service provider, client or customer. • Lack of intent is no defence in sexual harassment cases. • Association members who believe they are the subject of sexual harassment should take firm, positive and prompt action. • If such a course is deemed appropriate, the Association member should make the perceived harasser(s) aware that they find their behaviour offensive, unwelcome, unacceptable, and that it needs to stop immediately. • If the behaviour continues, or if the Association member feels unable to speak to the person(s) directly, they should contact the Director or a Deputy Director, or a Board member. • This person will provide support and ascertain the nature of the complaint and the wishes of the complainant. • The complainant does not have to request a full formal investigation if they will be satisfied by less formal treatment of the issue.



**PROCEDURES:
(continued)**

Informal Intervention

- The Director or Deputy Director will explain the Association member’s rights and responsibilities under the organization’s policy, procedures and Equal Employment Opportunity or anti-discrimination legislation.
- Informal intervention may be undertaken through a process of mediation or conciliation. During informal intervention the alleged harasser will be made aware of the allegations being made against them and given the right to respond.
- This procedure will be complete when the complainant and the respondent come to an agreement on the procedure to be followed. If this occurs, no record will be made of the proceedings, and any subsequent proceedings will begin without reference to the informal intervention. If this does not occur, the formal procedure should be followed.

Formal Complaints Procedure

- Proceeding with a formal complaint requires the consent of the person complaining, particularly as witnesses or senior management may become involved.
- The formal procedure will be co-ordinated by the Manager, who will be guided by the Director. The Director does not need to know the specific details of the sexual harassment case to provide this guidance.
- The Manager should clarify the complaint and obtain a step-by-step account of the incident. More than one interview may be necessary.
- The Manager will document all such interviews accurately and avoid irrelevant information. Relevant information will include parties involved, timing, location, and nature of conduct complained against.
- Records are to be kept and filed in a confidential and secure place. These records should be kept for a period of seven years. Under no circumstances will records be placed on the complainant’s personnel file.

Investigation

The Manager will organise an investigation, which in most cases may involve but is not limited to:

- A private interview to ascertain the facts and what the complainant expects to happen as a result of making the complaint.
- An interview with the alleged harasser(s) to ascertain their defense.
- Interviews with other members or individuals who may be able to assist.
- Interviews with supervisor(s) or manager(s).
- Examination of any relevant documents.
- Determination of previous behaviours or issues.



**PROCEDURES:
(continued)**

The Manager should forward all evidence to the person conducting the investigation. Such evidence may include:

- Supporting evidence provided by a medical practitioner, counsellor, family member, friend or co-worker.
- Supervisor’s reports and personnel records (e.g. unexplained request for transfer or shift changes, sudden increase in sick leave).
- Complaints or information provided by other members about the behaviour of the alleged harasser.
- Records kept by the person claiming to have been harassed.
- Information on whether the evidence was presented by the parties in a credible and consistent manner.
- Information on the absence of evidence where it should logically exist.

On completion of the investigation, the complainant and the Manager will determine a course of action to be taken. In most cases this will involve guidance from the Director. Possible course of actions may include, but not be limited to, any combination of the following:

- Counselling
- Action under the misconduct policy.
- Formal apologies and undertaking that the behaviour will cease.
- Conciliation/mediation conducted by an impartial third party where the parties to the complaint agree to a mutually acceptable resolution.
- Reimbursing any costs associated with the harassment.
- Re-crediting any leave taken as a result of the harassment.

Outcomes will depend upon factors such as:

- The severity and frequency of the harassment.
- The weight of the evidence.
- The wishes of the person who was harassed.
- Whether the harasser could have been expected to know that such behaviour was a breach of policy.
- The level of contrition.
- Whether there have been any prior incidents or warnings.

The Manager will advise all relevant parties of the outcome.

If the investigation determines that sexual harassment has occurred, the Manager must forward a summary of the complaint and the action taken to the Director. A copy must be placed in the respondent’s personnel file, in accordance with Performance Counselling procedures.

If there is insufficient proof to decide whether or not the harassment occurred, the Manager will:

- Remind those involved of expected standards of conduct.
- Conduct further training and awareness raising sessions for members.
- Monitor the situation carefully.

The Manager will monitor the outcome to ensure that the offensive behaviour has ceased, and that neither party has been victimised. This may involve follow-up interviews.

If there has been any substantiated victimisation, disciplinary procedures will be followed.



**PROCEDURES:
(continued)**

Procedures for Dealing with Criminal Conduct

- Some forms of severe sexual harassment (e.g. sexual assault, stalking, indecent exposure, physical molestation, obscene phone calls) may constitute criminal conduct.
- While Kentish is committed to treat most sexual harassment complaints at an organization level as far as possible, this type of conduct is not suited to internal resolution. Such complaints should be treated by the criminal justice system.

In relation to alleged criminal offences such as rape or sexual assault, the matter must be immediately referred to the Director. The Association member should be advised of the option of police support or intervention. It is not the obligation or duty of the organization to report such matters to the police on behalf of the complainant.

The Director will ensure that:

- They understand and are committed to the rights and entitlements of all members to attend work and perform their duties, without fear of being sexually harassed in any form.
- They understand what constitutes an act of sexual harassment.
- All reasonable steps are made to eliminate sexual harassment.
- Members are regularly made aware of their obligations in relation to providing a workplace free from sexual harassment.
- They provide an environment which discourages harassment and victimisation and set an example by their own behavior.
- They treat all complaints seriously and confidentially.
- They take immediate and appropriate corrective action if they become aware of any offensive action.
- Guidance and education is provided, where requested and/or appropriate, to cases and subsequent decisions relating to sexual harassment.

POLICY: WORK HEALTH AND SAFETY



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	23 Oct 2017	Due for next review:	23 Oct 2020
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PURPOSE:	To ensure, as far as is reasonably practicable, the health, safety and welfare of the working environment for Kentish employees, contractors, members, children, and visitors to Kentish premises.
SCOPE:	All employees, contractors, Association members, children and visitors to Kentish premises, to the extent it is relevant to them.
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director
OVERVIEW:	<p>Kentish supports the rights of all persons covered by this policy to work in an environment that is, so far as is reasonably practicable, safe and without risks to health.</p> <p>In this policy, 'workplace' includes when working at Kentish premises or elsewhere, attendance at a work-related conference or function, and attendance at a client or other work-related event, including social events.</p>
POLICY:	<p>Management systems and procedures designed to, so far as is reasonably practicable will be in place to:</p> <ul style="list-style-type: none"> • identify, assess and control workplace hazards; • reduce the incidence and cost of occupational injury and illness; and • provide a rehabilitation system for those affected by occupational injury or illness.
PROCEDURES:	<p>The Director and other executive officers will:</p> <ul style="list-style-type: none"> • be committed to the provision and maintenance of a healthy and safe workplace; • consult and participate in the health and safety program; • use risk identification, assessment and control principles to reach the Kentish health and safety objectives; • inform and train all persons to whom this procedure applies in relevant policies, procedures and health and safety obligations; and • participate in Kentish's inductions and implement all safety procedures. <p>The Work Health and Safety Coordinator will:</p> <ul style="list-style-type: none"> • coordinate the identification, development, implementation and review of Work Health and Safety policies and procedures; • assist in the identification, assessment and selection of measures to control hazards and risks to health and safety; • assist in monitoring and evaluating hazards and risk control measures; • assist in the identification, development and provision of appropriate Work Health and Safety-related information, instruction and training; • monitor and advise on legislative and technical changes relating to health and safety; • monitor and report to the Director on Kentish's Work Health and Safety performance; • support employees to follow policies and safe work procedures developed • ensure that regular staff meetings include as an agenda item work health and safety issues; and that at these meetings all staff are provided with the opportunity to raise concerns and provide input and feedback regarding health and safety in the workplace.



**PROCEDURES:
(continued)**

Employees will:

- participate in health and safety training, actions and activities and support Kentish in its efforts to reach its health and safety and, where relevant, rehabilitation objectives;
- follow reasonable health and safety instructions from managers or supervisors;
- report any serious incidents, accidents, injuries or hazards in the workplace to supervisors or designated representatives;
- aim to work in a way that does not endanger the health or safety of themselves or others;
- properly use and maintain safety equipment;
- make sure visitors follow safety rules in the workplace; and
- participate in Kentish induction programs and implement all detailed safety procedures.

Educators will:

- participate in health and safety training, actions and activities and support Kentish in its efforts to reach its health and safety and, where relevant, rehabilitation objectives;
- follow Kentish OOH and FDC policies and procedures as applicable and any health and safety instructions from team coordinators and Kentish management;
- report any incidents, accidents, injuries or hazards in the home to Kentish;
- maintain a safe home environment for the children and themselves;
- participate in Kentish induction programs and training sessions and implement all detailed safety procedures.

Contractors and visitors to Kentish will:

- assess risks to their health and safety arising from the provision of their services;
- have control measures in place to address those risks, including complying with any relevant Kentish policies and practices.

Any **breach** of this policy may result in counselling and/or disciplinary action, which, in the case of employees, may lead to dismissal, or, in the case of educators, may lead to the cessation of their contract.

Any breach of this policy by a contractor may result in cancellation by Kentish of the services provided by that contractor.

SECTION 2: POLICIES APPLICABLE TO BOARD MEMBERS ONLY

POLICY: BOARD CONFIDENTIALITY



Commenced:	29 Sep 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
PURPOSE:	To facilitate effective governance of Kentish by ensuring Board confidentiality.				
SCOPE:	Board of Management members				
RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management President				
OVERVIEW:	Confidentiality is important. It encourages open and frank discussion at meetings, helps facilitate the development of vision, and the implementation of an effective strategy to achieve that vision, and protects information that is confidential, personal, or relates to employment, commercial or legal matters.				
POLICY:	Board members must keep confidential all information pertaining to matters dealt with by the Board. This includes board meeting minutes, agendas, reports to the Board and associated documents, and information contained in those documents.				
	The obligation to maintain confidentiality continues to apply even after a person has left the Board.				
	Board members have a legal duty to maintain confidentiality. A person who obtains information because they are, or have been, a member of the Board must not improperly use that information to gain an advantage for themselves or someone else, or cause detriment to the organization.				
	If a request is made for access to one or more board papers*, the board may, on a case by case basis resolve to provide access to the document(s). In considering this request, the Board will have regard to: <ul style="list-style-type: none"> • The importance of maintaining confidentiality to facilitate effective board meetings. • The importance of complying with the law – including privacy law – and recognising that the law sometimes creates duties to disclose or protect information. • Whether the person requesting the document is a member, and the important role of members in holding the Board accountable. • The need to be consistent in the way that documents are treated, and the consequence of establishing any precedents or expectations. 				
	* Board papers means all written communications to Board member/s including, without limitation, monthly/quarterly board papers, submissions, minutes, letters, memoranda, board committee and sub-committee papers and copies of other documents referred to in any of the above-mentioned documents made available to the Board member as a Board member during his or her time in office.				
	Nothing in this policy is intended to prevent the Board from seeking confidential legal, accounting, financial or other expert advice from independent professionals to assist the Board in carrying out its functions.				
	Any person who is not a member of the Board but is present at a board meeting (or part of a meeting) must maintain in confidence all information obtained as a result of their participation in the meeting.				
At the first Board meeting held after the AGM all Board members will be required to sign a board confidentiality agreement.					



PROCEDURES:

The President is responsible for bringing this policy to the attention of prospective Board members.

The Secretary must:

- Ensure that this policy is provided to new Board members.
- Ensure that Board papers are created, maintained and distributed in a manner which is consistent with their confidential status.
- Keep Board papers separately from other (non-confidential) documents and store them in a manner which restricts access to them by unauthorised persons (including employees).

Requests for access to Board papers should be made to the Secretary who should include consideration of the request as an item on the Board agenda.

Where a request for Board papers is made and there is reason to believe that there are laws governing the disclosure or non-disclosure of the document, the Director will obtain legal advice on the matter to assist the Board in its consideration of the request.

Appendix – Board Confidentiality Agreement



BOARD CONFIDENTIALITY AGREEMENT

Kentish Lifelong Learning and Care Incorporated has a Board Confidentiality Policy in place to facilitate effective governance of Kentish by ensuring Board confidentiality.

All members of the Board of Management of Kentish Lifelong Learning and Care Incorporated must sign this Confidentiality Agreement before commencing in their respective roles on the Board of Management.

Confidentiality is important. It encourages open and frank discussion at meetings, helps facilitate the development of vision, and the implementation of an effective strategy to achieve that vision, and protects information that is confidential, personal, or relates to employment, commercial or legal matters.

Board members must keep confidential all information pertaining to matters dealt with by the Board. This includes board meeting minutes, agendas, reports to the Board and associated documents, and information contained in those documents.

The obligation to maintain confidentiality continues to apply even after a person has left the Board.

Board members have a legal duty to maintain confidentiality. A person who obtains information because they are, or have been, a member of the Board must not improperly use that information to gain an advantage for themselves or someone else, or cause detriment to the organization.

I have read and understood the Board Confidentiality Policy of Kentish Lifelong Learning and Care Incorporated and the statements presented above. I agree to abide by the requirements of this Policy.

.....

Signature

.....

Name

Date: / /

POLICY: BOARD GRIEVANCES AND DISPUTE RESOLUTION



Commenced:	29 Sep 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
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PURPOSE:	To set out the process for resolution of grievances or disputes involving Board members that are unable to be resolved through respectful debate in Board meetings.
SCOPE:	Board of Management members
RESPONSIBILITY FOR IMPLEMENTATION:	Association President
OVERVIEW:	The Board of Management is committed to reaching a speedy and just resolution of any grievances or disputes that may arise and that may threaten the harmonious functioning of the Board.
POLICY:	<p>Where possible grievances or disputes involving Board members will be resolved by mediation.</p> <p>Grievances and disputes will be handled respectfully, confidentially and in accordance with natural justice.</p>
PROCEDURES:	<p>Subject to anything to the contrary contained within Kentish’s Constitution:</p> <ol style="list-style-type: none"> 1. The parties to the dispute must meet and discuss the matter in dispute, and, if possible, resolve the dispute within 14 days after the dispute comes to the attention of all of the parties. 2. If the parties are unable to resolve the dispute at such a meeting, or if a party fails to attend that meeting, then the parties must, within 10 days, hold a meeting in the presence of a mediator. 3. The mediator must be – <ol style="list-style-type: none"> (a) a person chosen by agreement between the parties; or (b) in the absence of agreement, a person appointed by the Board. <p>A member of Kentish can be a mediator, but may not be a member who is a party to the dispute.</p> 4. The parties to the dispute must, in good faith, attempt to settle the dispute by mediation. 5. The mediator, in conducting the mediation, must – <ol style="list-style-type: none"> (a) give the parties to the mediation process every opportunity to be heard; and (b) allow due consideration by all parties of any written statement submitted by any party; and (c) ensure that natural justice is accorded to the parties to the dispute throughout the mediation process. 6. The mediator must not determine the dispute. 7. The mediation must be confidential and without prejudice. <p>If the mediation process does not result in the dispute being resolved, the parties may seek to resolve the dispute otherwise at law.</p>

POLICY: BOARD MEMBER STAND DOWN



Commenced:	23 Oct 2017	Last reviewed and approved by Board of Management:	25 Sep 2018	Due for next review:	25 Sep 2020
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PURPOSE:	To provide policy requiring a Board Member under investigation to temporarily stand down from the Board while the investigation is underway.
SCOPE:	Board Members
RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management (The Board).
OVERVIEW:	If a Board Member is under investigation for a significant issue, it is good practice for them to temporarily stand aside from the Board while the matter is investigated. It is preferable that this occurs at the instigation of the Board Member under investigation.
POLICY:	A Board Member who finds themselves under investigation for a significant issue is to stand aside from their Board duties until the investigation into the matter and any subsequent action is completed.
	For the purposes of this policy, a significant issue is considered to be a Territory Families 84A investigation, an investigation into a criminal offence by any state or territory police force or a similar investigation by another body.
	Standing aside is not to be seen as an admission of guilt; rather it is a precautionary measure to protect the good standing of Kentish and to avoid any perception of bias.
PROCEDURES:	A Board Member who is to stand aside should do so in writing to the President and Secretary of the Board of Management, giving an estimate of the duration of their stand down period. They need not disclose the reason(s) for standing aside but must continue to fulfil any other disclosure requirements imposed by, for example, an educator contract.
	If the President stands down from Board duties, the Vice President is to temporarily assume the role. If the Treasurer or Secretary stand down, another Board Member is to temporarily take on that role.
	If a Board Member subject to an 84A investigation believes that they should not be required to stand down due to the nature of the allegations made against them, they should initially step aside, but then put their case to the Board outlining why they should not be required to stand down. The Board may accept their proposal and agree that the stand down is not required, but impose conditions (e.g. not to be involved in any Board discussion / decision relating to the investigation) or reject their proposal and require them to stand down.
	If it comes to the attention of any Board Member that another Board Member is under investigation for a significant issue and that they have not / are not taking action to stand down, the situation is to be discussed as soon as practicable between the person aware of this issue and the specific Board Member who is under investigation. If the board member refuses to meet with the person, the matter should be referred to the Board for further action.
	If, following this, they still do not stand down, the matter is to be raised as soon as possible at a Board Meeting. In this situation, the Board are to make a determination as to whether the stand down is required.
	If the Board determine that a stand down is required and the member refuses to stand down, the matter is to be dealt with through the Board Grievance Policy and/or by application of clause 19 or clause 30 of the Constitution.
	As soon as the investigation is complete and the Board Member is cleared of any further actions, they are to resume their place on the Board.

POLICY: BUDGETING



Commenced:	9 Jun 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
PURPOSE:	To set out the process for compiling, monitoring and reviewing the organization's annual operating budget.				
SCOPE:	The Board of Management				
RESPONSIBILITY FOR IMPLEMENTATION:	The Board of Management				
OVERVIEW:	The Board of Management is responsible for overseeing the budget of the organization and for ensuring the organization operates within a responsible, sustainable financial framework.				
POLICY:	The Board of Management is to conduct a budget planning process annually as part of its financial management responsibilities.				
	The organization operates under a budget that is flexible in responding to unforeseen or unplanned events and activities, changed circumstances and new opportunities.				
	The annual operating budget must be regularly monitored and reviewed.				
PROCEDURES:	Board to appoint a Finance Committee including the Treasurer, Executive Director and Finance Manager.				
	In April each year the Finance Committee is to prepare a draft budget for consideration by the Board of Management at the scheduled May Board meeting.				
	Income forecasts in the draft budget are to be made with reference to actual year-to-date income for the current year, current and forecast numbers of children in care and any other relevant factors.				
	Expenditure forecasts in the draft budget are to be made with reference to actual year-to-date figures, expected CPI increments for payroll costs, power, rates etc., as well as planned events and activities.				
	As part of the draft budget process, the Finance Committee may propose, for Board consideration, an increase to service charges (i.e. fee charged to NTG for OOHC services, hourly rate paid to educators for OOHC services, levies charged to educators and parents). The Finance Committee will provide information regarding the impact of any suggested increases.				
	The draft budget will be considered by the Board at the May board meeting and accepted with or without amendment at either the May or June meeting.				
	Once adopted this becomes the operating budget for the organization for the ensuing financial year. The Executive Director is expected to operate within the boundaries of the approved budget.				
	The Executive Director, assisted by the Treasurer and the Finance Manager is responsible for monitoring income and expenditure, reviewing actual income and expenditure against budget and reporting to the Board.				
	Throughout the year the Executive Director and Treasurer will keep the Finance Manager informed regarding any amendments to the budget that have been approved at periodical Board meetings.				
	A finance report is to be prepared monthly for presentation to the Board. At least quarterly, these reports will include, for each income line and each expenditure line, year-to-date income and expenditure and variations from the approved budget. Explanations will be given for any variations exceeding 5%.				

POLICY: COMMITTEES



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
PURPOSE:	To give direction on the policy and procedures relating to the formation of Board standing sub-committees and ad hoc committees.				
SCOPE:	Board of Management members				
RESPONSIBILITY FOR IMPLEMENTATION:	Association President				
OVERVIEW:	<p>The Board of Management recognises that there are times when a sub-committee can act more effectively than the full Board.</p> <p>The Board may put in place standing sub-committees and ad hoc committees to engage in business that can be more efficiently transacted by such means.</p>				
POLICY:	<p>The Board has the authority to establish standing sub-committees and ad hoc committees to assist it in its work.</p> <p>The number of committees will be kept to a minimum.</p> <p>The Board shall clearly define the terms of reference of each committee, including their membership, roles, procedures and functions, and the boundaries of their authority.</p> <p>The Board may, from time to time, co-opt non-Board members to serve on a committee in order to bring additional skills, experience or networks.</p> <p>Unless explicitly empowered by the Board, committees cannot make binding Board decisions. For the most part, the function of committees is to solve problems for and/or make recommendations to the Board, after which the Board will make decisions or policy.</p> <p>The Director shall normally sit ex-officio on all Board committees, but may delegate their attendance to any other person. There may be circumstances where the attendance of the Director, or delegate, is not appropriate (e.g. employment of a Director). This will be clearly stipulated in the terms of reference for that committee.</p>				
PROCEDURES:	<p>Committees, whether ad hoc or standing sub-committees, cannot exercise authority over staff, nor shall they delegate tasks to any staff unless the Director has specifically agreed to such delegations.</p> <p>Committees are to provide updates on their progress to the Board as specified in their Terms of Reference, normally at each Board meeting.</p> <p>All committees of the Board shall review their terms of reference periodically, including their membership and the results of their work and so report to the Board.</p> <p>All ad hoc committees shall be dissolved by Board resolution once they have completed their work and, if requested, have provided a written report to the Board.</p>				

POLICY: CONFLICT OF INTEREST



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
PURPOSE:	To provide a framework for all Board Members in declaring conflicts of interest.				
SCOPE:	Kentish Board of Management				
RESPONSIBILITY FOR IMPLEMENTATION:	Association President				
OVERVIEW:	<p>Kentish is committed to high standards of ethical conduct and accordingly places great importance on making clear any existing or potential conflict of interest.</p> <p>'Conflict of interest' is defined as applying:</p> <ol style="list-style-type: none"> 1. In accordance with the statute, where a Board member stands to gain financially from any business dealings, programs or services of the organization, other than where <ol style="list-style-type: none"> a. the Board member falls into the class of people benefited by the organization and the financial gain is of a nature common to other beneficiaries, or b. the person is an employee of the organization, and the financial gain is of a nature common to other employees. 2. Under any bylaws of the organization in accordance with those bylaws. 3. Under any other rules established by the Board in accordance with those rules. 				
POLICY:	<p>The Board places great importance on making clear any existing or potential conflicts of interest. All such conflicts of interest shall be declared by the member concerned and recorded in Board meeting minutes.</p> <p>A Board member, member or other party who believes that a Board member has an undeclared conflict of interest should specify in writing the basis of this potential conflict.</p> <p>Where a Board member has a conflict of interest, as defined by statute, that Board member shall not initiate or take part in any Board discussion on that topic (either in the meeting or with other Board members before or after the Board meetings), unless expressly invited to do so by unanimous agreement by all other Board members present.</p> <p>Where a Board member has a conflict of interest, as defined by statute, that Board member shall not vote on that matter.</p> <p>The Board may supplement the statutory definition of conflict of interest if it so wishes, in standing orders or otherwise, in which case the same procedures shall apply.</p> <p>Board members are not barred from engaging in business dealings with the organization, provided that these are negotiated at arm's length without the participation of the Board member concerned.</p>				
PROCEDURES:	<p>Members shall declare any conflicts of interest either at the start of the Board meeting concerned or when a relevant issue arises. The nature of this conflict of interest should be entered into the Board meeting minutes.</p> <p>Where a conflict of interest or potential conflict of interest, as defined below, is identified the Board member concerned shall leave the room as soon as that item comes up for discussion. The concerned Board member shall not vote on that issue, nor initiate or take part in any Board discussion on that topic (either in the meeting or with other Board members before or after the Board meetings), unless expressly invited to do so by unanimous agreement by all other members present.</p> <p>If a person declares them self to have an existing or potential conflict of interest, confidentiality will be respected. If a person alleges that another person has a conflict of interest, whether existing or potential, and that person does not agree, the matter is to be decided by the Board, including by use of the grievance process if necessary.</p>				

POLICY: DELEGATION OF BOARD POWERS



Commenced:	27 Aug 2018	Last reviewed and approved by Board of Management	27 Aug 2018	Due for next review:	27 Aug 2019
PURPOSE:	To provide necessary delegation of Board of Management powers to the Executive Director.				
SCOPE:	Board Members, Executive Director				
RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management (The Board).				
OVERVIEW:	<p>The constitution (Article 21) provides authority to the Board to exercise all powers of the association other than those requiring a general meeting. It further (Article 23) provides that the Board may delegate to a subcommittee or employee any of its powers other than:</p> <ul style="list-style-type: none"> - The power of delegation; or - A duty imposed on the Board by the Act or any law. 				
POLICY:	<p>Delegations to subcommittees should be provided in the subcommittee terms of reference. The Board should delegate as much of its power as is necessary for the day to day management of Kentish to the Executive Director and, where applicable, other staff. The Executive Director is authorised to carry out these management responsibilities in accordance with the policies established by the Board and in accordance with the objectives, values and philosophy of the Association.</p> <p>Delegations to any staff member, including the Executive Director, automatically devolve to any person formally acting in their position unless this is specifically excluded.</p> <p>Notwithstanding these delegations, the Board remains fully responsible under the Constitution and the Associations Act for ensuring that the financial affairs of Kentish are managed responsibly and for ensuring that the activities of the Association are conducted with reasonable care, skill and diligence.</p> <p>These delegations should be reviewed frequently to ensure that as Kentish changes, the delegations remain appropriate to both support ease of day to day management and provide for the Board to exercise due diligence, especially in financial matters.</p>				
PROCEDURES:	<p>The Executive Director is delegated the authority to:</p> <ol style="list-style-type: none"> A. Answer media enquiries and to proactively publicise Kentish as appropriate. If an issue is likely to cause reputational damage to Kentish, it is to be brought to the attention of the Board. B. Terminate Educator and Co-Educator Service Agreements in the following circumstances: <ul style="list-style-type: none"> - The termination is considered urgent and necessary, and - Approval is gained from the President and one other Board Member. C. Approve the expenditure of funds against approved budget items up to the limit approved by the Board for that budget item. Expenditure of funds over the Board-approved amount for that budgeted item, or for items that have not been included in the budget, or that will result in an item being over budget by 5% requires prior approval by the Board. D. Authorise staff to expend approved funds, either on a case by case or enduring basis. E. Authorise the transfer of funds between established Kentish bank accounts and to establish and revoke term deposits to put the funds to best use. F. Employ and / or promote staff as required to fill vacancies in the Board approved Kentish staff structure. G. Expend unbudgeted funds to meet urgent welfare needs of members. This expenditure is to be limited to \$5000 on a single member / member's family in a financial year. Expenditure and reasons for it are to be reported to the next Board Meeting. 				

POLICY: GOVERNANCE



Commenced:	22 Apr 2015	Last reviewed and approved by Board of Management:	23 Oct 2017	Due for next review:	23 Oct 2019
PURPOSE:	To clarify the content of the Association's constitution by making explicit the underlying principles of governance approved by the Association's members.				
SCOPE:	Board of Management				
RESPONSIBILITY FOR IMPLEMENTATION:	Board of Management				
OVERVIEW:	Governance in the social and community services sector is concerned with the systems and processes that ensure the overall direction, effectiveness, supervision and accountability of an organization.				
	Governance is concerned with ensuring that the organization is effectively and properly run and that it meets the needs for which the organization was set up.				
POLICY:	The Board of Management of Kentish is an elective, representative and collective body: <ul style="list-style-type: none"> • Elective – Board members are appointed by Association members through an election process. • Representative – Each Board member acts selflessly, making decisions and voting on governance decisions solely in the best interests of the organization. • Collective – Each Board members is entitled to an opinion and to vote but decisions are made collectively and once taken Board members are required to support that decision. 				
	The function of the Board is to collectively ensure the delivery of the Association's objects, to set its strategic direction, and to uphold its values.				
	The Board is collectively responsible and accountable for ensuring and monitoring that the organization is performing well, is solvent, and is complying with all of its legal, financial and ethical obligations.				
	The Board should focus on strategic direction and the core policies of the organization, and avoid becoming involved in day-to-day operational decisions. Where individual Board members do need to become involved in operational matters, they should separate their strategic role from their operational role.				
	The responsibilities of the Board which cannot be delegated to any other person or body include: <ul style="list-style-type: none"> • Compliance – ensuring compliance with the objects, purposes and values of the Association and with its Constitution. • Organizational governance – setting and/or approving policies, plans and budgets to achieve those objectives and monitoring performance against them. • Strategic planning – reviewing and approving strategic direction and initiatives. • Regulatory monitoring – ensuring that the organization complies with all relevant laws, regulations and regulatory requirements. • Financial monitoring – reviewing the organization's budget, monitoring management and financial performance to ensure the solvency, financial strength and good performance of the organization. • Financial reporting – considering and approving annual financial statements and any required reports to government. • Organizational structure – setting and maintaining a framework of delegation and internal control. 				



<p>POLICIES: (continued)</p>	<ul style="list-style-type: none"> • Leadership selection – selecting, appointing, evaluating the performance of, rewarding and, if necessary, dismissing the organization’s Director and Deputy Director. • Succession and remuneration planning – planning for Board, Director and executive succession and determining senior management remuneration. • Risk management – reviewing and monitoring the effectiveness of risk management and compliance in the organization; agreeing or ratifying all policies and decisions on matters which create significant risk to the organization, financial or otherwise. • Dispute management – dealing with and managing conflicts that may arise within the organization, which are of a nature that cannot or should not be delegated to the Director. • Social responsibility – considering the social, ethical and environmental impact of all activities and operations and ensuring that these are acceptable. • Board performance - evaluating and improving the performance of the Board.
<p>PROCEDURES:</p>	<p>Internal controls – The Board should set and maintain policies and procedures, and systems of financial control, internal control, and performance reporting and ensure that there is a system for the regular review of the effectiveness of these.</p> <p>Managing risk – The Board should undertake a full risk assessment (either periodically or on a rolling basis) and take appropriate steps to manage the organization’s exposure to significant risks. The Board must regularly review the risks to which the organization is subject, and take action to mitigate risks identified.</p> <p>Board review – The Board should ensure that there is a system for the regular review of its own effectiveness in meeting its responsibilities.</p> <p>Delegation – The Board should demarcate and delegate the functions of sub-committees, officers, the Director and other staff and agents.</p> <p>The Director’s Responsibilities – The Director is responsible for addressing key management and operational issues within the direction and the policies laid down by the Board including:</p> <ul style="list-style-type: none"> • Developing and implementing organizational strategies and making recommendations to the Board on significant strategic initiatives. • Making recommendations for the appointment of staff, determining terms of appointment, evaluating staff performance and developing and maintaining succession plans for staff. • Acquiring and managing sufficient resources for the effective operation of the organization. • Developing the annual budget in concert with the Finance Committee and managing day-to-day operations within the budget. • Maintaining an effective risk management framework. • Keeping the Board informed about any developments with a material impact on the organization’s performance. • Managing day-to-day operations in accordance with agreed standards for social, ethical and environmental practices.

POLICY: TIME CRITICAL DECISION MAKING



Commenced:	19 Apr 2016	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
PURPOSE:	To lay a framework to ensure that decisions can be made at short notice when required, without comprising appropriate checks and balances necessary to ensure that the matter at hand is given full and proper consideration by the Board.				
SCOPE:	Board of Management members				
RESPONSIBILITY FOR IMPLEMENTATION:	Proposer (Board of Management member)				
OVERVIEW:	It is important that the Board has a means of dealing efficiently with urgent issues which cannot wait until the next scheduled board meeting.				
POLICY:	<p>Decisions are, wherever practical, to be made during scheduled board meetings, however if a particular matter must be considered by the Board prior to the next scheduled meeting, this is to be done by email, ensuring that all available Board members have the ability to comment on the proposal and make a clear statement of their support or otherwise.</p> <p>This policy does not prevent the calling of a special board meeting if considered necessary.</p>				
PROCEDURES:	<p>The Proposer is the Board member who is proposing that a Time Critical Decision be made. The Proposer is responsible for:</p> <ul style="list-style-type: none"> • Acquiring the agreement, by email, of at least two other Board members (the Seconders) to proceed with a Time Critical Decision. • Providing a clear brief to the Board on the decision to be made in the prescribed format – refer Appendix. • Providing any further details as required by Board members to allow them to cast their vote. • Providing sufficient information for Board members to make an informed decision and for anticipating questions the Board may have. • Making their case sufficiently clear to allow a decision to be made quickly. • Deciding to allow the decision to be presented at the next scheduled board meeting if the proposal is not carried, or whether to withdraw it. <p>The Seconders are approached to second a proposal for a Time Critical Decision. The Seconders are to:</p> <ul style="list-style-type: none"> • Consider whether, in their opinion, a decision must be made on the proposal prior to the next scheduled board meeting. • Ask questions or seek clarification required to make this decision. • Clearly state their decision in an email to the Proposer with a copy to the Secretary. <p>Board Members are to:</p> <ul style="list-style-type: none"> • Consider the proposal that has been made. • Ask questions or seek further detail as required. • Cast a clear vote, by email, on the proposal, as soon as possible, as to their support or not of the proposal. 				



**PROCEDURES:
(continued)**

The Secretary must:

- Provide a copy of all emails concerning the proposal with the files for the subsequent Board meeting.
- Collate the votes by Board members.
- Provide a tally, by email, to the President to allow a decision to be announced. (If the secretary is not available, the President is to produce the tally)
- Ensure that, if the proposal is carried, copies of all relevant emails are attached to the minutes of the next board meeting.
- If the proposal is not carried and is not withdrawn by the Proposer, ensure that it is on the agenda for the next board meeting.

The President must:

- Consider the tally of votes by Board members.
- Announce whether the proposal is carried or not. (If the President is not available the Vice President is to carry out this function.)

All discussion regarding a Time Critical Decision is to be carried out **by email** to allow a record to be kept. (This serves the same function as minutes of a formal meeting.)

All emails which are critical to the decision-making process, proposals, decisions etc. pertaining to a Time Critical Decision **should be sent “read receipt”** enabled to allow tracking of which Board members have received the email.

Emails concerning a Time Critical Decision are to be treated with the same Board **confidentiality** as matters dealt with at board meetings.

Emails between the Proposer and the Seconders discussing the matter prior to the proposal being put the Board may be kept private if considered appropriate by the Proposer. Once the proposal has been put to the Board, all emails regarding the proposal are to be copied to all Board members.

A **quorum** for decisions under this policy is for at least six Board members to cast votes.

For a proposal to be carried, at least two thirds of the votes cast must be in support of the proposal.

If a quorum is not achieved, or the proposal is not supported, the proposal is to be put to the next board meeting, unless withdrawn by the Proposer.

If the matter is put to the next board meeting, but not carried, then it is dismissed.

POLICY: TRANSPARENCY AND ACCOUNTABILITY



Commenced:	19 Apr 2016	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2020
PURPOSE:	To recognise the importance of transparency and accountability and to facilitate the development and implementation of measures by which the Kentish Board of Management and staff are to provide appropriate transparency and accountability.				
SCOPE:	Board of Management members and staff				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	Kentish values its relationship with its members and other stakeholders who partner with it to enable it to achieve its purpose. It recognises that transparency and accountability build trust and help those relationships to flourish.				
	In order for the Board to facilitate accountability and transparency with stakeholders, there must be good internal documentation and reporting.				
POLICY:	Board Reporting The Board must ensure that it complies with its legal and constitutional reporting obligations. They include: Reporting annually to the Members, in accordance with the requirements of its Constitution, on the organization's activities in the preceding year, and providing an opportunity for questions; Preparing financial reports as required by law; and Reporting to government agencies as required by law. In addition to its specific legal and contractual obligations, the Board will consider each year whether there are any other stakeholder relationships which could benefit from receiving a report from the Board on the organization's activities and performance. In undertaking its function of reporting to stakeholders, the Board is to be as transparent as possible but must be mindful of the organization's confidentiality policies, underpinned by its privacy law obligations, and it must take care to act in the interests of Kentish. Deliberations of the Board and its sub-committees shall be dealt with in accordance with the Board confidentiality policy and procedure.				
	Children's Records - Kentish will deal with records concerning children strictly in accordance with its privacy law obligations.				
	Staff Records - Kentish will deal with staff records in accordance with the <i>Fair Work Act 2009</i> (Cth), and its privacy policy and privacy law obligations.				
	Member Records - Kentish will deal with member records in accordance with its confidentiality policies and privacy law obligations.				
	Access to Minutes of General Meetings and the Members Register - Access to minutes of general meetings of Association members and the Association's Members Register will be provided in accordance with the terms of the Constitution.				
	The Director will ensure that there are systems and processes in place to capture, record and analyse information necessary to enable the Board to perform its reporting functions. This includes reporting regularly to the Board on the operations of Kentish.				
	The Director will also ensure that privacy and other policies are in place to govern the access and use of documents, including children's records, staff records, member records, and minutes of general meetings in accordance with this policy.				
	Staff are responsible for implementing and adhering to Kentish policies and procedures.				

SECTION 3 – POLICIES APPLICABLE TO EMPLOYEES ONLY

POLICY: ACCEPTABLE USE OF VEHICLES AND EQUIPMENT



Commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management:	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	<p>1. To ensure that all employees are aware of their responsibilities while using Kentish Lifelong Learning and Care Incorporated (Kentish) vehicles.</p> <p>2. To govern the use of Kentish equipment.</p> <p>A separate policy has been formulated to deal with acceptable use of computers, mobile phones, iPads, internet and email.</p>				
SCOPE:	All employees				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	Confusion as to whether employees are entitled to make use of the organization's vehicles and equipment, and how they are to be used is undesirable, and any misunderstandings and any ambiguity should be, if at all possible, avoided. The purpose of this policy is to ensure such confusion does not occur.				
POLICY:	<p>Kentish vehicles and equipment are to be used to support its mission. Kentish employees may not use the organization's resources (including any person, vehicle, money, or property) for personal benefit or gain, or for the benefit or gain of other individuals or organizations, except as specified below.</p> <p>Employees are permitted limited use of equipment for personal needs where such use does not interfere with Kentish business, involves no additional expense to Kentish, involves no additional risk to Kentish, and conforms with applicable organizational procedures. Such permission must be approved by the Executive Director on each occasion. This does not apply to Kentish vehicles.</p> <p>Kentish believes that employees should be given the tools needed to effectively carry out their assigned responsibilities.</p> <p>This policy does not apply to those situations where personal use of Kentish equipment constitutes agreed remuneration under a contract of employment.</p>				
PROCEDURES:	<p>RESPONSIBILITIES:</p> <p>It is the responsibility of management to ensure that:</p> <ul style="list-style-type: none"> • employees are aware of this policy; • any breaches of this policy coming to the attention of management are dealt with appropriately. <p>It is the responsibility of all employees to ensure that their usage of Kentish vehicles and equipment conforms to this policy.</p> <p>Use of Vehicles: Kentish vehicles must not be used other than for Kentish business.</p> <p>Use of an employee's own vehicle for work-related travel will be reimbursed by way of an all-inclusive mileage allowance. This allowance is only valid when Kentish vehicles are unavailable.</p>				

POLICY: ACCEPTABLE USE OF VEHICLES AND EQUIPMENT (continued)

**PROCEDURES
(continued):**

Employees must:

- Correctly complete the log book during each vehicle use.
- Re-fuel the vehicle when the fuel indicator reaches one quarter full.
- Keep the vehicle clean and tidy, removing all personal effects.
- Report all incidents/accidents/damage to the Executive Director immediately.
- Maintain a valid driver’s licence for the class of vehicle being operated and carry the licence with them while operating the vehicle.
- Exercise caution at all times while operating the vehicle.
- Strictly comply with all road and traffic laws and regulations.
- Not drive while under the influence of any illicit drugs or alcohol.
- Strictly comply with the Kentish policy regarding use of mobile phones while operating a vehicle.
- Strictly comply with the ‘smoke-free environment policy’ in correlation with smoking and Kentish vehicles.

Any fines and penalties incurred for road and traffic infringements while a Kentish vehicle is being driven will be the responsibility of the driver only if it is determined that the infringement is the fault of the driver; such as exceeding the speed limit. If it is determined that the infringement is the result of Kentish neglect or breach, such as a vehicle defect, then the infringement will not be the responsibility of the driver.

Kentish vehicles must not be garaged at the home of an employee unless the provision of a vehicle is a condition of the employee’s contract of employment, or permission has been granted by the Executive Director on a temporary basis due to specific circumstances.

Use of Equipment: All equipment over the value of \$300, whether for personal use (once approval has been granted by the Executive Director), or for Kentish operational use, must be signed out on the Equipment Data Sheet by the borrowing employee.

On return, all equipment must be signed in on the Equipment Data Sheet by the returning employee.

POLICY: CREDIT AND DEBIT CARD USE

Commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management:	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	To ensure, organizational transactions are carried out as efficiently as possible through the use of credit/debit cards as appropriate, and to guard against any possible abuse of organizational credit/debit cards.				
SCOPE:	All employees				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	The use of organizational credit/debit cards is a major convenience for Kentish Lifelong Learning and Care Inc. (Kentish) and for its employees, and can, if properly managed, contribute to easier and more secure accounting of expenses. To achieve these benefits a number of precautionary procedures should be put in place.				
POLICY:	Debit/credit cards issued to Kentish, including those held in the name of any staff members on behalf of the organization, will only be used for those activities that are a direct consequence of the function of the organization. Their use will be monitored according to the procedures listed below. Any use of the card inconsistent with this policy and these procedures will be grounds for dismissal.				
PROCEDURES:	<p>It is the responsibility of the Executive Director to ensure that:</p> <ul style="list-style-type: none"> • all staff are aware of this policy; • any breaches of this policy coming to the attention of management are dealt with appropriately. <p>It is the responsibility of all employees to ensure that their usage of credit/debit cards conforms to this policy.</p> <p>Card Issue: Any organizational credit/debit cards may only be issued to a staff member where their functions and duties would be enhanced by credit/debit card use. Cards will be issued with Board of Management approval. Cards may be issued on a temporary basis and recovered afterwards. Each organizational credit/debit card will be issued to a specific person, who will remain personally accountable for the use of the card. Only the authorised signatory may use the card. No more than one card shall be issued per cardholder. Credit limits as appropriate shall be set for each card by the issuing authority.</p> <p>Cardholder's Responsibilities:</p> <p>The Cardholder shall:</p> <ul style="list-style-type: none"> • In all cases obtain and retain sufficient supporting documentation to validate the expense (e.g. tax invoice) or shall in lieu provide a statutory declaration. • Verify that that goods and services listed were received. • Seek prior authorization from the Executive Director for any purchases exceeding \$300. • Forward quotes to the Executive Director for approval, where relevant. • Notify the bank and the Executive Director immediately if the card is lost or stolen; and/or any unauthorised transaction is detected or suspected. • Notify the Executive Director and the bank of any change in name or contact details. • Take adequate measures to ensure the security of the card. 				

POLICY: CREDIT AND DEBIT CARD USE (continued)

PROCEDURES (continued):

- Return the card to the Executive Director if:
 - the cardholder resigns;
 - the Executive Director determines that there is no longer a need for the cardholder to retain his or her card; or
 - the card has been cancelled by the bank.
- Be personally liable for any unauthorised transactions unless the card is lost, stolen or subject to fraud on some part of a third party.

The Cardholder shall not:

- Exceed any maximum limits set for the card from time to time.
- Use the card for any proscribed purchases.
- Authorise their own expenditure.

Card Expenditure: The card will only be used for those activities that are a direct consequence of the functions of the organization. Where coincident and/or private expenditure occurs on the same transaction (where, for example, a person incurs a debt for personal telephone calls during a hotel stay) the cardholder must settle the private expense prior to charging the balance on the organizational card. Where doubt exists as to whether or not an item is function-related, prior authorisation should be obtained from the Executive Director. The use of the credit/debit card for “services of a dubious nature” is expressly prohibited. “Services of a dubious nature” are defined as any goods or services that might bring the name of the organization into disrepute.

Card Misconduct: Whenever a breach in this policy occurs, the Executive Director must assess the nature of the breach and institute an appropriate disciplinary process, including (without limitation of Kentish’s right to dismiss an employee for serious misconduct):

- counselling (and diary or file note created and retained on employee’s personnel file); and
- a written warning.

The Executive Director may determine whether to report a breach of the policy to the police for criminal investigation.

At the next Board of Management meeting, the Executive Director shall report:

- the investigation of the circumstances of the breach;
- police reports and action (if any); and
- disciplinary action taken (if any).

POLICY: MATERNITY LEAVE



Commenced:	12 Sep 2016	Last reviewed and approved by Board of Management:	25 Sep 2018	Due for next review:	25 Sep 2021
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PURPOSE: To set parameters and a clear policy regarding entitlements in relation to paid maternity leave. Entitlements in relation to unpaid parental leave are as set out in the National Employment Standards (NES).

SCOPE: Full-time and part-time employees

RESPONSIBILITY FOR IMPLEMENTATION: Executive Director

OVERVIEW: We value our staff and are committed to their long-term sustainability.

POLICY:

Employees are entitled to take 18 weeks paid maternity leave and further non-paid maternity leave in accordance with the NES.

Only employees who have completed 12-months service with the organization prior to taking maternity leave are eligible for paid maternity leave.

Eligible employees are entitled to 18 weeks paid maternity leave at the prescribed Kentish base rate of pay for the employee's Award level and pay point minus any amount that is paid under the government-funded paid parental leave scheme. For employees who are salaried, or otherwise paid outside the Award, their entitlement to 18 weeks' paid maternity leave will be at the agreed rate of pay for the employee's current position minus any amount that is payable under the government-funded paid parental leave scheme.

The 18-week paid parental leave period will coincide with the government paid parental leave scheme period.

Superannuation guarantee contributions will be paid on the top -up employer-funded amount only during the period of paid maternity leave.

During the period of paid maternity leave other forms of leave, including annual leave and personal leave will accrue on the portion of the payment that is employer-funded.

PROCEDURES:

By the 15th week of gestation eligible employees must notify the Executive Director in writing confirming the pregnancy, the expected due date and the intended start date and end date of the maternity leave period.

It will be assumed that the employee will return to work on the agreed maternity leave period end date. Should the employee wish to extend or reduce the maternity leave period, at least two weeks' notice in writing must be provided to the Executive Director.

Prior to commencement of the maternity leave period the Executive Director will meet with the employee to discuss their rights and entitlements regarding maternity leave, the possibility of flexible working arrangements on return to work and address any questions or concerns.

The employer and employee will keep in touch during the period of leave.

In accordance with the NES the employee is guaranteed to return to work in the same position they held before they commenced their period of parental leave.

Flexible working arrangements before, during and after the period of maternity leave will be offered.

On the employee's return to work from maternity leave the Executive Director will arrange a meeting to discuss any changes that have taken place during the maternity leave period.

Should the employee decide not to return to work after the maternity leave period this should be confirmed in writing and notice formally given in accordance with the NES.

POLICY: MATERNITY LEAVE (continued)

PROCEDURES (continued):

Eligibility periods and entitlements for part time workers will be assessed as follows:

Eligibility - Employee must have worked hours equivalent to at least one-year full time work over the preceding three years.

Entitlement - Entitlement will be pro-rated according to the proportion of a full-time workload the employee has worked over the past year. For example: In the preceding 52 weeks the employee has worked the equivalent hours of 26 weeks' full-time work. The employee is entitled to 18 weeks maternity leave paid at a rate of 26/52 (1/2) of their base wage, minus any amount that is payable under the government funded paid parental leave scheme.

Casual employees have no entitlement to Kentish paid maternity leave.

POLICY: SMOKE-FREE ENVIRONMENT

Date commenced:	22 Oct 2018 Interim Only	Last reviewed and approved by Board of Management:	22 Oct 2018 Interim Only	Due for next review:	
PURPOSE:	To respect everyone's rights to a smoke-free environment and to ensure the health, safety and welfare of all employees, contractors, Association members, children, and visitors to Kentish premises and/or events, trainings, seminars, meetings and activities executed by, or in representation by, Kentish.				
SCOPE:	All employees				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	Kentish recognises the harmful effects of tobacco smoke. Environmental Tobacco Smoke (passive and residual smoke) can cause or contribute to many diseases, illnesses and cancers. This policy has been designed in accordance with research from the Work Health and Safety Act 2011, Work Health and Safety Regulations 2011, state/territory legislation and the leading cancer/smoking regulatory bodies. Kentish strives to support all endeavours of staff wishing to quit smoking through support from the Work Health and Safety Officer.				
POLICY:	All employees, Association members and volunteers are not permitted to smoke: tobacco, cigarettes, cigars or electronic cigarettes whilst on duty or during paid/unpaid breaks whilst on Kentish premises in all regions and whilst at activities organized or supported by Kentish. This includes events, play sessions, trainings, excursions, indoor and outdoor areas, in or around Kentish motor vehicles or in any area where Environmental Tobacco Smoke will contaminate an area or expose any staff, Association members, children and visitors. Designated Outdoor Smoking Area(s) will be allocated in consultation with the Body Corporate for each office and in accordance with any relevant smoking laws and regulations.				
PROCEDURES:	<p>The Director(s) and Managers will:</p> <ul style="list-style-type: none"> • disseminate and clarify this policy to all staff; • ensure this policy's compliance is adhered to by all employees, at all times; and • inform contractors, visitors and members of this policy. <p>The Work Health and Safety Officer will: (if voluntarily requested by an individual)</p> <ul style="list-style-type: none"> • provide smoking cessation support to any employee or Association member; • identify any internal or external smoking cessation therapies or resources; and • ensure the individual has access to and knowledge of Quitline, smoking cessation websites and their contact details. <p>Employees will:</p> <ul style="list-style-type: none"> • comply with this policy during working hours, before and after work when immediately commencing and finishing shifts, and during paid and unpaid breaks; • only smoke during authorised paid/unpaid meal breaks as entitled and outlined in the relevant Awards for each employee; • upkeep a professional standard and not engage in smoking with Association members outside of the designated smoking area whilst on duty; • ensure that the exposure of Environmental Tobacco Smoke (passive and residual smoke) to all staff, visitors and children is minimized and must: <ul style="list-style-type: none"> ○ wash their hands immediately after smoking; ○ organise authorized smoking breaks to be in advance of meetings, trainings and consultations to allow for provisions outlined in this policy; 				

POLICY: SMOKE-FREE ENVIRONMENT (continued)

PROCEDURES (Continued):

- not smoke in any form or variation of the Kentish uniform - branded with the logo or not unless covered with a form of overshirt;
- not smoke within a Kentish vehicle and be a reasonable distance away from the vehicle; 30-50 metres;
- smoke only within Designated Outdoor Smoking Areas; and
- dispose of all smoking related waste in the appropriate manner;
- declare on the organization's staff location board that they are on a designated and authorised tea/meal/lunch break.
- if sharing accommodation ensure the direct exposure to Environmental Tobacco Smoke is minimised to all other occupants.

Any **breach** of this policy may result in counselling and/or disciplinary action, which, in the case of employees, may lead to dismissal.

Any breach of this policy by a contractor may result in cancellation by Kentish of the services provided by that contractor.

POLICY: STAFF PERFORMANCE REVIEW



Commenced:	11 Aug 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
PURPOSE:	To set a process for reviewing staff performance to ensure that job-related skills and knowledge, and employee competencies and behaviours are evaluated and compared against set standards and business objectives.				
SCOPE:	Employees				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	This process seeks to ensure that the vision and objectives of the organization link to the personal objectives of individual staff members. It provides a means of: communicating with employees regarding their performance; identifying strengths and weaknesses; encouraging cooperative planning; and facilitating the identification of professional development needs.				
POLICY:	For each part-time and full-time employee, a performance plan is prepared outlining the employee's goals and objectives for a 12-month period.				
	Annual performance appraisals are conducted to review individual performance and discuss goals achieved and areas to work on.				
	The performance management system will be reviewed periodically to ensure that it supports the achievement of the organization's objectives, and fairly and consistently evaluates each individual's performance against these objectives.				
PROCEDURES:	Within three months of an employee's commencement in a part-time or full-time position a performance plan will be prepared outlining the employee's goals and objectives for a 12-month period in line with the organization's objectives.				
	Annually, a performance appraisal document will be completed by each employee.				
	Upon completion of the performance appraisal the employee will meet with the Executive Director to discuss the employee's performance. At this time: goals set previously will be considered to see how well they have been met; areas requiring professional development opportunities or increased effort will be identified; concerns or issues will be discussed; and new goals set for the ensuing 12 months.				
	The Executive Director will ensure that employees are provided with ongoing support and guidance with performance management issues.				
	Employees are expected to participate openly and honestly in planning and assessing their own performance and receiving feedback.				

POLICY: STAFF RECRUITMENT



Commenced:	29 Sep 2015	Last reviewed and approved by Board of Management:	26 Sep 2017	Due for next review:	26 Sep 2019
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PURPOSE:	To specify the requirements for staff recruitment, selection and appointment.
SCOPE:	All staff, excluding the Executive Director.
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director
OVERVIEW:	We seek to attract appropriately skilled and qualified staff who are can perform the job requirements to the highest standard and in accordance with our mission, values and philosophy. Recruitment, selection and appointment processes will be professional, transparent and timely.
POLICY:	We recognise the importance of employing the most suitable applicant for all vacant positions.
	We will provide opportunities for suitably skilled and qualified current staff to apply for vacant positions before advertising more broadly.
	As an equal opportunity employer, we will assess all potential candidates according to their skills, experience, knowledge, qualifications and capabilities. No regard will be given to factors such as age, gender, marital status, race, religion, physical impairment or political opinions.
PROCEDURES:	Prepare/revise position description.
	Identify key selection criteria.
	Determine timeline for advertising, closing date for applications and interviews.
	If appropriate, advertise vacancy to current staff. This will not be appropriate if the position is of a specialised nature and the required skills are not currently available internally.
	Consider any applications from existing staff.
	If there are no internal applicants, or all internal applicants are unsuccessful, advertise externally through relevant websites, newspapers and local employment services.
	Screen applications against position description. Select suitable applicants for interview.
	Notify applicants who have been short-listed for interview.
	Notify applicants who have not been short-listed for interview.
	Contact referees. Check authenticity of qualifications.
	Executive Director to conduct interviews, assisted by at least one senior staff member or Board member.
	Contact successful applicant and provide written offer of employment.
	Once successful candidate has accepted and signed offer of employment, notify all unsuccessful applicants.
	Maintain records of the recruitment process for five years, including position description, applications received, short-list of applicants interviewed, interview notes, and notifications to unsuccessful applicants.

POLICY: STUDY LEAVE



Commenced:	19 Apr 2016	Last reviewed and approved by Board of Management:	25 Sep 2018	Due for next review:	25 Sep 2021
PURPOSE:	To set boundaries within which leave for study purposes and reimbursement of course costs may be approved for Kentish employees.				
SCOPE:	Kentish employees				
RESPONSIBILITY FOR IMPLEMENTATION:	Executive Director				
OVERVIEW:	<p>Kentish values its staff and is committed to their development. Kentish prefers to promote within its existing staff rather than recruit externally.</p> <p>This policy applies to courses that involve a significant time commitment and lead to the award of a qualification under the Australian Qualification Framework (AQF).</p> <p>The Director may determine that this policy applies to courses outside the AQF in special circumstances.</p> <p>This policy does not apply to seminars, conferences, or short courses such as first aid refreshers, fire safety courses and computer application courses.</p>				
POLICY:	<p>Study leave may be approved for Kentish Staff Members in accordance with the following principles:</p> <ul style="list-style-type: none"> • Minimum Service - The provisions of this policy are only available to permanent staff members with at least one year of employment with Kentish. Part-time staff members may access these provisions on a pro-rata basis. Casual staff have no entitlement. • Mutual Obligation - Both Kentish and the Staff Member concerned must contribute to the selected course of study both financially and in time. • Relevance - The course of study must be relevant to the member's employment with Kentish. The degree of relevance will dictate the amount of leave granted and any reimbursement given for course costs. For courses that are considered essential for the member's current position, or for the next higher position in Kentish, leave and reimbursement for course costs may be given to the maximum limit below. For courses which are considered desirable to improve performance in the member's current position, leave and reimbursement may be given up to 50% of the maximum below. • Leave - Study leave may be granted for up to 50% of the contact hours (or recommended hours for courses that are not conducted face-to-face) for an approved course up to a maximum of four hours per fortnight or 100 hours per calendar year, whichever is more appropriate for the form of study. This leave does not accrue from year to year if not used. Additional study leave may be granted to attend examinations. Other forms of leave (annual leave, leave without pay etc.) may be utilised to attend the portion of courses not covered by study leave. As much flexibility as possible will be applied when considering applications for leave for this purpose. • Reimbursement - Reimbursement of direct course costs (not HECS debts) may be given up to a maximum of 50% of the course cost up to \$4000 per year on successful completion of the course. • Longer Courses - For courses that extend over a period greater than one year, each year of the course is subject to the leave and reimbursement limits above. Reimbursement may be made on successful completion of each year or semester of study as appropriate. 				



POLICY: (continued)	<ul style="list-style-type: none"> • Failure to Complete Study - No reimbursement of costs will be made for any course which is not successfully completed, but may be granted for subsequent successful completion of the same course. Study leave will not be granted for further attempts at a course previously not successfully completed unless compelling circumstances (e.g. serious illness, family tragedy) exist. • Multiple Courses - A Staff Member may use the study leave provisions to complete more than one course during a year, up to the annual limits above. • Must be able to be Spared - Study leave must be able to be taken without requiring the employment of additional staff. If multiple staff apply for study leave for the same period such that approving all applications would cause significant disruption to the functioning of Kentish, the Executive Director should only approve the higher priority applications. In doing so, the Executive Director should consider the relevance of the courses proposed, the length of service of the applicants, previous study leave taken by applicants and other similar factors. • Approval - Study Leave and reimbursement of costs may only be approved by the Executive Director for all Staff Members other than the Executive Director. Applications by the Executive Director may only be approved by the Board of Management (the Board).
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PROCEDURES:	<p>The Applicant must complete a Study Leave Application form highlighting:</p> <ul style="list-style-type: none"> • The course they are intending to complete • Its relevance to assisting them to perform their current or future role within Kentish • The total cost of the course, length of time required to complete the course, proposed start and finish dates and proposed payment plan. <p>The Executive Director must assess the study leave application prior to interviewing the staff member about the course and preparing any relevant questions about the staff member’s time commitment and how they will juggle their Kentish role and study. The Executive Director must also consider any requirements for additional staff to cover their role during the study period.</p> <p>In the case of the Executive Director applying for study leave, the Board will need to review the Executive Director’s Study Leave Application at the next scheduled board meeting.</p>
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Appendix – Staff Application for Study Leave Form

Kentish Lifelong Learning and Care Incorporated



Employee Name:	
Length of Employment with Kentish:	
Proposed Course:	
Course Provider:	
Length of Course:	
Start and Finish Date:	
Benefits to Kentish of Course Attendance:	
Length of Time Required Away from Kentish Duties:	
Cost of Course:	
Kentish's Contribution	

Study Leave Checklist

Eligibility	<input type="checkbox"/>	Kentish \$\$ Contribution	<input type="checkbox"/>
Staff Coverage Advised	<input type="checkbox"/>	Invoice Sighted and Approved	<input type="checkbox"/>
Certificate of completion sighted and copied for file	<input type="checkbox"/>	Final payment made to staff member	<input type="checkbox"/>

	SIGNATURE	DATE
APPLICANT		___ / ___ / 20__
DIRECTOR'S APPROVAL		___ / ___ / 20__
Course Completed		___ / ___ / 20__
Certificate of Completion Sighted		___ / ___ / 20__
Course Fee Reimbursed to Staff Member		___ / ___ / 20__