**Modernising Early Childhood Education in Aotearoa New Zealand**

**Consultation on proposed changes to the Early Childhood Education and Care Services 2008 licensing criteria.**

**Whānau Manaaki Analysis of June 2025 Ministry of Education Discussion Document @ July 2025**

Please note: The new Criterion number and name are yet to be confirmed.

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| **Recommendation from Ministry of Education****Discussion Document****June 2025** | **Applicable Criteria (taken directly from *Ministry of Education Licensing Criteria for Centre-based ECE Services*)****Current Wording** | **New wording recommended by Ministry of Education in Discussion Document June 2025** | **WM Analysis of Min of Education Discussion Document June 2025 with Guidance on response to MoE questions.****(Points to Consider)** |
|  |  |  |  |  |
| HS1 | Amend HS1 by merging it with HS11 | **HS1 Premises and contents are safe and hygienic****Criteria**# Premises, furniture, furnishings, fittings, equipment and materials are kept safe, hygienic and maintained in good condition**.** | **See HS11:**Premises, furniture, furnishings, fittings, equipment, materials, and sleeping items (such as mattresses, and bedding) are kept safe, **clean,** well-maintained, and **hygienically stored** when not in use.  | 1. **Do you think the proposed change reduces duplication?**

**Yes**1. **Does the proposed change meet the intent of the original criteria?**

**It is critical that the Guidance is clear about what defines hygienic**1. **Does this change support health and safety?**

**There needs to be clear expectations around hygiene to reduce cross contamination and expectations of products to meet this** |
| HS2 | Amend | **HS2 Laundering****Criteria**# Linen used by children or adults is hygienically laundered.Documentation requiredA procedure for the hygienic laundering (off-site or on-site) of linen used by the children or adults. | # Linen used by children or adults is hygienically laundered off-site or on-site. | 1. **Do you think the amendment maintains hygienic laundry practices?**

**No.**1. **Is the proposed wording clear and easy to understand?**

**No because it misses critical words – the requirement to include documentation.**1. **Does the change continue to support health and safety.**

**Definitely NOT! This amendment REDUCES SAFETY. We believe the criteria needs to retain the existing wording which stipulates documentation. If people are unclear about what that might look like, clarify in the Guidance.** **Disagree with amendments. Retain existing Criteria.**  |
| HS3 | Retain unchanged | **HS3 Nappy changing procedure****Criteria**# A procedure for the changing (and disposal, if appropriate) of nappies is displayed near the nappy changing facilities and consistently implemented.**Documentation required**A procedure for the changing (and disposal, if appropriate) of nappies that aims to ensure:* safe and hygienic practices; and
* that children are treated with dignity and respect.
 |  | **Agree** |
| HS4 | Retain unchanged | **HS4 Fire evacuation scheme****Criteria**The premises are located in a building that has a current fire evacuation scheme approved by Fire and Emergency New Zealand.Documentation requiredA current fire evacuation scheme approved by Fire and Emergency New Zealand. |  | **Agree** |
| HS5 | Amend HS7 to include HS5 | **HS5 Safe assembly areas****Criteria**Designated assembly areas for evacuation purposes outside the building keep children safe from further risk. |  | 1. **Do you believe the proposed change reduces duplication?**

**Yes**1. **Do you think this change will make it easier for services to comply?**

**That depends on the support given to teaching teams to understand the implications of this criteria** **Please note: There must be guidance attached to this amended Criteria to ensure safety for tamariki.** |
| HS 6 | Merge with HS12 | **HS6 Securing furniture****Criteria**Heavy furniture, fixtures and equipment that could fall or topple and cause serious injury or damage are secured. | **See HS12** | 1. **Do you believe the proposed change reduces duplication?**

**Yes**1. **Do you believe the proposed change improves safety?**

**Speculation, as this is dependent on support systems for teaching teams****3. Does the proposed change increase compliance burden on service providers?** **Again speculation, as this is dependent on the quality of systems and processes to achieve this criteria. There needs to be more clarity around what expectations look like – eg. What constitutes heavy furniture that could topple?** |
| HS 7 | Amend HS7 to include HS5 | **HS7 Emergency plan and supplies****Criteria**There are a written emergency plan and supplies to ensure the care and safety of children and adults at the service. The plan must include evacuation procedures for the service's premises, which apply in a variety of emergency situations, and which are consistent with the fire evacuation scheme for the building.**Documentation required**A written emergency plan that includes at least:1. An evacuation procedure for the premises.
2. A list of safety and emergency supplies and resources sufficient for the age and number of children and adults at the service and details of how these will be maintained and accessed in an emergency.
3. Details of the roles and responsibilities that will apply during an emergency situation.
4. A communication plan for families and support services.
5. Evidence of review of the plan on an, at least, annual basis and implementation of improved practices as required.
 | There is a written emergency plan and supplies to ensure the care and safety of children and adults at the service. The plan must include evacuation procedures that are specific to the service’s premises and the types of emergencies that are relevant to its location and context. These procedures are consistent with the building’s fire evacuation scheme. Documentation required (written or digital) A written emergency plan that includes at least: • an evacuation procedure specific to the premises; • designated assembly areas located outside the building that helps keep children and adults safe from further risk; • a list of safety and emergency supplies and resources sufficient for the age and number of children and adults at the service and details of how these will be maintained and accessed in an emergency; • details of the roles and responsibilities of adults at the service that will apply during an emergency situation; • a communication plan for families and support services; and • evidence of review of the plan on an, at least, annual basis and implementation of improved practices as required. | **See comments in HS5 above** |
| HS 8 | Amend | **HS8 Emergency drills****Criteria**Adults providing education and care are familiar with relevant emergency drills and carry out each type of drill with children (as appropriate) on an, at least, 3-monthly basis.Documentation requiredA record of the emergency drills carried out and evidence of how evaluation of the drills has informed the annual review of the service's emergency plan. | HS8 - Adults providing education and care are familiar with relevant emergency drills and carry out each type of drill with children (as appropriate) on an, at least, 4-monthly basis. Documentation required (written or digital) A record of the emergency drills carried out and evidence of how evaluation of the drills has informed the annual review of the service’s emergency plan. | 1. **Does the proposed change help clarify what needs to be done to be compliant?**

**No, all that has changed is the time frame to carry out drills.**1. **Does the proposed change reduce compliance burden?**

**No because this Criteria is not burdensome.**1. **Will the proposed change give more flexibility to service providers?**

**It should not give flexibility to service providers. Your question is wrong.** **We disagree with the proposed amendment. We recommend that insertion of wording that stipulates Fire and Earthquake drills should be undertaken with children on a monthly basis and that all other relevant emergency drills be carried out on an at least 3 monthly basis. Fire and earthquake drills are critical and if done on a monthly basis, ensure young children maintain their understanding of what is required.** **Three months is a minimum - it ensures 4x a year. Reducing the number runs the risk of young children forgetting what they were taught about emergency drills. It also increases the likelihood of children not taking part if they are away 3 months is not “burdensome”.** |
| HS9 | Amend | **HS9 Sleep monitoring****Criteria**A procedure for monitoring children's sleep is displayed and implemented and a record of children's sleep times is kept.Documentation required1. A procedure for monitoring children's sleep. The procedure ensures that children:
	* do not have access to food or liquids while in bed; and
	* are checked for warmth, breathing, and general wellbeing at least every 5 to 10 minutes, or more frequently according to individual needs.
2. A record of the time each child attending the service sleeps, and checks made by adults during that time.
 | 1) A procedure for monitoring children’s sleep is displayed and implemented and a record of children’s sleep times is kept. Documentation required (written or digital) A procedure for monitoring children’s sleep. The procedure includes steps to ensure that children: › do not have access to food or liquids while in bed; and › are checked for warmth, breathing, and general well-being at least every 10-15 minutes, or more frequently according to individual needs. 2) A record of the time each child attending the service sleeps, and checks made by adults during that time | **1. Does the proposed change reduce burden on providers?** **Again, your question is wrong.** **The proposed change increases the risk to child safety****2. Will this proposed change make it easier for services to comply with the amended criterion?** **No. If they’re not complying with the existing criteria, they won’t be complying with the suggested new criteria.** 1. **Does the amended criterion support health and safety?**

**Not at all, it has the potential to reduce and add risk** **We totally disagree with the proposed changes to this criteria. It will put children’s safety at risk. Moreover, child wellbeing means that babies and young children should not wake up alone, and if they do, it should only be for a matter of 10 minutes max.****If anything, we believe this criteria should be tightened to stipulate that an adult must physically check for warmth, breathing, and general wellbeing. We have heard of situations where adults just look through the window of a sleep room, and some who even just monitor via a TV monitor.**  |
| HS10 | Merge | **HS10 Sleep furniture spacing****Criteria****#** Furniture or items intended for children to sleep on (such as cots, beds, stretchers or mattresses) are arranged and spaced when in use so that:* adults have clear access to at least one side (meaning the length, not the width)
* the area surrounding each child allows sufficient air movement to minimise the risk of spreading illness; and
* children able to sit or stand can do so safely as they wake.
 | See PF29 | **See PF29.** |
| HS 11 | Amend HS1 by merging it with HS11 requirements | **HS11 Storage of sleep furniture and bedding****Criteria**# If not permanently set up, furniture or items intended for children to sleep on (such as cots, beds, stretchers or mattresses) and bedding is hygienically stored when not in use. | # Premises, furniture, furnishings, fittings, equipment, materials, and sleeping items (such as mattresses, and bedding) are kept safe, clean, well-maintained, and hygienically stored when not in use. | **See HS1 above.** |
| HS 12 | Amenda HS12 to include wording from HS6 | **HS12 Hazard and risk management****Criteria**Equipment, premises and facilities are checked on every day of operation for hazards to children. Accident/incident records are analysed to identify hazards and appropriate action is taken. Hazards to the safety of children are eliminated, isolated or minimised.Consideration of hazards must include but is not limited to:* cleaning agents, medicines, poisons and other hazardous materials
* electrical sockets and appliances (particularly heaters)
* hazards present in kitchen or laundry facilities
* vandalism, dangerous objects, and foreign materials (for example broken glass, animal droppings)
* the condition and placement of learning, play and other equipment
* windows and other areas of glass
* poisonous plants; and
* bodies of water.

**Documentation required**A documented risk management system. | Risk Assessment and Management System (RAMS) is in place that ensures: 1) On every day of operation equipment, premises and facilities are checked for hazards to children; these include but are not limited to: › cleaning agents, medicines, poisons and other hazardous materials › electrical sockets and appliances › hazards present in kitchen or laundry facilities › vandalism, dangerous objects, and foreign materials › the condition and placement of learning, play and other equipment › windows and other areas of glass › poisonous plants › bodies of water; and › heavy furniture, fixtures and equipment that could fall or topple and cause serious injury or damage are secured. 2) Hazards are eliminated, isolated or minimised. 3) Accident/incident records are analysed to identify recurring and emerging hazards and appropriate action is taken Documentation required (written or digital) A documented risk assessment and management system | **See HS6 above** |
| Hs 13 | Retain | **HS13 Hot water taps****Criteria**# The temperature of warm water delivered from any taps that children can access independently is no higher than 40°C, and comfortable for children at the centre to use. |  | **Agree** |
| HS14 | Amend | **HS14 Hot water cylinder temperature****Criteria**# Water stored in any hot water cylinder is kept at a temperature of at least 60°C. | # Water stored in any hot water cylinder is kept at a temperature of at least 60°C. Any malfunctioning hot water cylinder is inspected and repaired as necessary | 1. **Do you think the intent of the original criterion is still met with the amended criterion?**

**Yes**1. **Will this proposed change make it easier for services to comply with the amended criterion?**

**Yes, provides the additional expectation**1. **Will this amended meet the needs of family and whānau?**

**Meets the needs of safety for children**1. **Does the amended criterion support health and safety?**

**Yes, though again it is about supporting practices to ensure this occurs – guidelines are imperative.** |
| HS15 | Retain | **HS15 Noise Levels****Criteria**# All practicable steps are taken to ensure that noise levels do not unduly interfere with normal speech and/or communication or cause any child attending distress or harm. |  | **Agree** |
| HS16 | Amend | **HS16 Animals****Criteria**# Safe and hygienic handling practices are implemented with regard to any animals at the service. All animals are able to be restrained. | # Safe and hygienic practices are implemented with regard to any animals at the service (such as thorough handwashing after handling animals and ensuring animals can be kept separate from food preparation/eating spaces). All animals are able to be restrained if they pose a risk to children | 1. **Is the new wording clear about what services need to do to manage animals safely and hygienically?**

**Yes, the addition of handwashing supports this**1. **Do you think this change makes it easier for services to understand and follow the requirement?**

**Yes, it is clearer**1. **Does the proposed wording reduce unnecessary compliance burden while still protecting children’s health and safety?**

**“Burden” isn’t the right descriptive word for this question. It is about clarity around expectation which highlights clearer expectations, handwashing and animals out of food/eating areas.** |
| HS17 | Amend | **HS17 Excursions****Criteria**Whenever children leave the premises on an excursion:* assessment and management of risk is undertaken, and adult:child ratios are determined accordingly. Ratios are not less than the required adult:child ratio
* the first aid requirements in criterion HS25 are met in relation to those children and any children remaining at the premises
* parents have given prior written approval to their child's participation and of the proposed ratio for:
	+ regular excursions at the time of enrolment and
	+ special excursions prior to the excursion taking place; and
* there are communication systems in place so that people know where the children are, and adults can communicate with others as necessary.

[HS25 First aid qualifications](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/health-and-safety/child-health-and-wellbeing)When children leave the premises on a regular or special excursion, the excursion must be approved by the person responsible.Documentation requiredA record of excursions that includes:* the names of adults and children involved
* the time and date of the excursion
* the location and method of travel
* assessment and management of risk
* adult:child ratios
* evidence of parental permission and approval of adult:child ratios for regular excursions
* evidence of parental permission and approval of adult:child ratios for special excursions; and
* the signature of the person responsible giving approval for the excursion to take place.
 | Whenever children leave the premises on an excursion:• a risk assessment and management process (RAMS) is undertaken, and adult:child ratios are determined accordingly. Ratios are not less than the required adult:child ratio • first aid requirements in criterion HS25 are met in relation to those children and any children remaining at the premises • parents have given prior written approval to their child’s participation and of the proposed ratio, location and method of travel for: › regular excursions at the time of enrolment; and › special excursions prior to the excursion taking place • communication systems are in place so that people know where the children are, and adults can communicate with others as necessary; and • the Person Responsible approves all excursions (regular and special) before they take place. Documentation required (written or digital) A record of excursions that includes: • the names of all adults and children involved • the time and date of the excursion • adult:child ratios • the location and method of travel • completed risk assessment and management process (RAMS) • evidence of parental permission and approval of adult:child ratios, location and method of travel for regular and special excursions; and • the signature of the person responsible giving approval for the excursion to take place. | 1. **Does the proposed change give better clarity on what providers are expected to document when leaving the premises?**

**Not really, wording has just been shifted around**1. **Will this proposed change reduce compliance burden?**

**This a high risk area, “compliance burden” should not be a factor in determining this criteria”.** 1. **Will this amendment give better clarity about what is to be provided to family and whānau?**

**The proposed wording clarifies expectations around what parents are giving approval for their child’s participation and of the proposed ratio, location and method of travel for.** |
| HS18 | Retain | **HS18 Travel by motor vehicle****Criteria**If children travel in a motor vehicle while in the care of the service:* each child is restrained as required by Land Transport legislation
* required adult:child ratios are maintained; and
* the written permission of a parent of the child is obtained before the travel begins (unless the child is travelling with their parent).

**Documentation required**Evidence of parental permission for any travel by motor vehicle. In most cases, this requirement will be met by the excursion records required for criterion HS17 (above). However, services that provide transport for children to and/or from the service must also gain written permission from a parent upon enrolment. |  | **Agree** |
| HS19 | Amend HS19 by including wording from HS21 | **HS19 Food and nutrition****Criteria**# Food is served at appropriate times to meet the nutritional needs of each child while they are attending. Where food is provided by the service, it is of sufficient variety, quantity and quality to meet the nutritional and developmental needs of each child. Where food is provided by parents, the service encourages and promotes healthy eating guidelines.**Documentation required**A record of all food served during the service's hours of operation (other than that provided by parents for their own children). Records show the type of food provided and are available for inspection for 3 months after the food is served. | **See HS21** | **See HS21** |
| HS20 | Amend PF16. Merge HS20 with PF16 | **HS20 Food hygiene****Criteria**# Food is prepared, served and stored hygienically. | See PF16 |  |
| HS21 | Amend HS19 by including wording from HS21 | **HS21 Drinking water****Criteria**# An ample supply of water that is fit to drink is available to children at all times, and older children are able to access this water independently. | An ample supply of water that is fit to drink is available to children at all times, and older children are able to access this water independently. # Food is served at appropriate times to meet the nutritional needs of each child while they are attending. Where food is provided by the service, it is of sufficient variety, quantity and quality to meet the nutritional and developmental needs of each child. Where food is provided by parents, the service encourages and promotes healthy eating guidelinesDocumentation required (written or digital)A record of all food served during the services hours of operation (excluding food provided by parents for their own children)Records show the type of food provided and are available for inspection for 3 months after the food is served. | 1. **Does the proposed change reduce the compliance burden for providers?**

**Only wording merge has changed, it shouldn’t change the intent of this expectation**1. **Does the proposed change make it clear what providers need to do to meet compliance requirements?**

**Yes**1. **Is the proposed wording easy to understand?**

**Yes** |
| HS22 | Amend | **HS22 Supervision while eating****Criteria**Children are supervised and seated while eating.Where food is provided by the service, foods that pose a high choking risk are not to be served unless prepared in accordance with best practice as set out in Ministry of Health's guide: Reducing food-related choking for babies and young children at early learning services.[Reducing food-related choking for babies and young children at early learning services – Ministry of Health](https://www.health.govt.nz/publication/reducing-food-related-choking-babies-and-young-children-early-learning-services)Where food is provided by parents, the service promotes best practices as set out in the Ministry of Health's guide and must provide to all parents at the time of enrolment a copy of the pamphlet: Reducing food-related choking for babies and young children at early learning services.* Reducing food-related choking for babies and young children

[Download](https://web-assets.education.govt.nz/s3fs-public/2024-07/Reducing-food-related-choking-pamphlet-print.pdf?VersionId=kllC9Q_7jMUYvGtg_yShEpMWDLsrnDKr)PDF | 86KB | Children are supervised and are seated while eating. A supervising adult must be in close proximity to children (but is not required to be seated) and know how to respond if a child is choking or has an adverse reaction. Where food is provided by the service, foods that pose a high choking risk are not to be served unless prepared in accordance with best practice as set out in Ministry of Health’s guide: Reducing food-related choking for babies and young children at early learning services. Where food is provided by parents, the service promotes best practices as set out in the Ministry of Health’s guide and must inform all parents at the time of enrolment how to access a copy of the guide: Reducing food-related choking for babies and young children at early learning services. Reducing-food-related-choking-pamphlet-print.pd | 1. **Does the proposed wording clearly explain what supervision is required while children are eating?**

**No because “close proximity” is unclear. We believe wording such as “the adult/s supervising are able to see all of the children as they eat”**1. **Do you think this change gives services more flexibility while still supporting children’s safety?**

**No, because we believe the “flexibility” will be at the expense of child safety.** 1. **Is it clear what services must do when food is provided by parents’ compared to when it’s provided by the service?**

**Yes**1. **Do you think this change reduces compliance burden for services?**

**Wrong question. This is a high risk area, for children’s safety, again it is not burdensome to provide safety for children.** **We believe the links to the Ministry of Health Guidelines need to be included in any new version of HS22. We have severe concerns about the term “in close proximity” and that this should be modified to include “the adult/s supervising are able to see all of the children as they eat.” We remain concerned that questions are being asked in this discussion document that appear to be more about convenience for providers than safety for children.** |
| HS23 | Retain | **HS23 Bottle feeding****Criteria****Applies only to services licensed for under 2-year-olds**Infants under the age of 6 months and other children unable to drink independently are held semi-upright when being fed. Any infant milk food given to a child under the age of 12 months is of a type approved by the child's parent. |  | **Agree** |
| HS24 | Amend | **HS24 Room temperature****Criteria**# Rooms used by children are kept at a comfortable temperature no lower than 18°C (at 500mm above the floor) while children are attending. | # Maintain a comfortable temperature in rooms used by children (no lower than 18°C at 500mm above the floor), allowing for fluctuating temperatures for brief periods. | 1. **Does the new wording make it clear what services need to do to maintain a comfortable temperature when children are attending?**

**Allowing for “fluctuating temperatures for brief periods” leaves this criteria open for exploitation, particularly when most curriculums are indoor outdoor flow.**1. **Do you think allowing brief fluctuations in temperature makes the requirement more practical?**

**No, it just makes it more open to exploitation. You would need to define “brief periods”.** 1. **Does this change reduce unnecessary burden while still supporting children’s health and wellbeing?**

**This proposed criteria change would be difficult to monitor due to the way the curriculum is delivered, with open door, indoor/outdoor flow on most days. The most worrying negative impact would be on the wellbeing of infants who are floor based – particularly if sleeping on mattresses or low beds.** |
| HS25 | Amend | **HS25 First aid qualifications****Criteria**There is an adult present at all times for every 25 children attending (or part thereof) that:* holds a current first aid qualification gained from a New Zealand Qualification Authority accredited first aid training provider or
* is a registered medical practitioner or nurse with a current practising certificate or
* is a qualified ambulance officer or paramedic.

If a child is injured, any required first aid is administered or supervised by an adult meeting these requirements.**Documentation required**Copies of current first aid (or medical practising) certificates for adults counting towards this requirement. | There is an adult present at all times for every 25 children attending (or part thereof) that: • holds a current first aid qualification gained from a New Zealand Qualification Authority accredited first aid training provider; or • is a registered medical practitioner, nurse or midwife with a current practising certificate; or • is a qualified ambulance officer or paramedic. In the case of an emergency, such as those described in HS27, the required ratio of first aid qualified adults may be temporarily reduced to 1 adult for every 50 children for the duration of that situation. If a child is injured, any required first aid is administered or supervised by an adult meeting these requirements. Documentation required: Copies of current first aid (or medical practising) certificates for adults counting towards this requirement | 1. **Do you believe the intent of the original criterion is still met with the amended criterion?**

**No, all adults working with children should hold first aid qualifications for the safety of all adults and children.**1. **Will this proposed change make it easier for services to comply with the amended criterion?**

**Again, wrong question. Its not about being easier, it is about being responsible for children’s safety in an emergency and being quickly responsive**1. **Will this amended meet the needs of family and whānau**?

**No, definitely not. It should be about meeting the needs of chn’s safety (and adults)** 1. **Does the amended criterion support health and safety?**

**No, it does not, it’s a high risk area, where accountability is supported by all adults having first aid qualifications****We believe this criteria should be strengthened by requiring all adults working with children to have a recognised First Aid certification – similar to the requirements around police vetting. The ratio of 1:25 is arbitrary and absurd. Any lessening of the criteria is appalling.**  |
| HS26 | Retain | **HS26 Response to infectious illnesses****Criteria**# All practicable steps are taken to ensure that children do not come into contact with any person (adult or child) on the premises who is suffering from a disease or condition likely to be passed onto children and likely to have a detrimental effect on them.Specifically:* the action specified in Appendix 2 is taken for any person (adult or child) suffering from particular infectious diseases and
* [Appendix 2: Infectious diseases for criterion HS26](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/appendix-2-infectious-diseases-for-criterion-hs26)
* children who become unwell while attending the service are kept at a safe distance from other children (to minimise the spread of infection) and returned to the care of a parent or other person authorised to collect the child without delay.
 |  | **Agree** |
| HS27 | Retain | **HS27 Medical assistance and incident management****Criteria**All practicable steps are taken to get immediate medical assistance for a child who is seriously injured or becomes seriously ill, and to notify a parent of what has happened.Documentation required1. A record of all injuries, illnesses and incidents that occur at the service. Records include:
	* the child's name
	* the date, time and description of the injury, illness or incident
	* actions taken and by whom; and
	* evidence that parents have been informed.
2. A procedure outlining the service's response to injury, illness and incidents, including the review and implementation of practices as required.
 |  | **Agree** |
| HS28 | Amend | **HS28 Medicine administration****Criteria**Medicine (prescription and non-prescription) is not given to a child unless it is given:* by a doctor or ambulance personnel in an emergency or
* by the parent of the child or
* with the written authority (appropriate to the category of medicine) of a parent.

Medicines are stored safely and appropriately, and are disposed of, or sent home with a parent (if supplied in relation to a specific child) after the specified time.Documentation required1. A record of the written authority from parents for the administration of medicine in accordance with the requirement for the category of medicine outlined in Appendix 3.

[Appendix 3: Categories of medicine for criterion HS28](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/appendix-3-categories-of-medicine-for-criterion-hs28)1. A record of all medicine (prescription and non-prescription) given to children attending the service. Records include:
	* name of the child
	* name and amount of medicine given
	* date and time medicine was administered and by whom and
	* evidence of parental acknowledgement. Related to clause 46 (1)(b) of standard.
 | Medicine (prescription and non-prescription) is not given to a child unless it is given: • by a doctor or ambulance personnel in an emergency or • by the parent of the child or • with the written authority (appropriate to the category of medicine) of a parent. Before an adult at the service administers medication, the person must check the medication, dosage and time reflects the parent’s authorisation. Medicines are stored safely and appropriately, and are disposed of, or sent home with a parent (if supplied in relation to a specific child) after the specified time. Documentation required (written or digital) 1) A record of the written authority from parents for the administration of medicine in accordance with the requirement for the category of medicine outlined in Appendix 3. 2) A record of all medicine (prescription and non-prescription) given to children attending the service. Records include: › child’s full name › name and amount of medicine given, › date and time medicine was administered and by whom; and › evidence of parental acknowledgement. **Appendix 3 revised Category (i) medicines (new) Definition**A prescription (such as antibiotics, eye/ear drops and so on) or non-prescription (such as paracetamol liquid, cough syrup and so on) medicine that is: • used for a specific period of time to treat a specific condition or symptom and • provided by a parent for the use of that child only or, in relation to Rongoa Māori (Māori plant medicines), that is prepared by other adults at the service. **Authority and acknowledgment required (written or digital)** A written authority from a parent at the beginning of the period the medicine is intended to be administered, detailing: • what (name of medicine) • how (method and dose) and • when (time or specific symptoms/circumstances) medicine is to be given. • Renew authorisation if period needs to be extended, or if circumstances change. • Each day, parents acknowledge that their child has received their medication, and confirmation should be recorded. **Category (ii) medicines (new) Definition** A prescription (such as asthma inhalers, epilepsy medication and so on) or nonprescription (such as antihistamine syrup, lanolin cream and so on) medicine that is: • used for the ongoing treatment of a pre-diagnosed condition (such as asthma, epilepsy, allergic reaction, diabetes, eczema and so on) and • provided by a parent for the use of that child only. **Authority and acknowledgment required (written or digital)** A written authority from a parent given at enrolment as part of an individual health plan, or whenever there is a change, detailing: • what (name of medicine) • how (method and dose) and • when (time or specific symptoms/circumstances) the medicine should be given.• Frequency of parental acknowledgment can be agreed between service provider and parents.  | 1. **Does the new wording make it easier to understand when and how medicine can be given to children?**

**Yes, the addition of “Before an adult at the service administers medication, the person must check the medication, dosage and time reflects the parent’s authorisation” is clearer**1. **Do you think this change helps reduce unnecessary compliance burden for services?**

**Again we did not consider the original Criteria HS28 burdensome, because it is about children’s safety and wellbeing, so it is about the support to understand this criteria that is important for implementation. We shouldn’t be thinking this area of care is a burden.**1. **Is it clear what documentation is needed for different types of medicine?**

**Yes**1. **Does the updated requirement support children’s health and safety during both emergencies and daily care?**

**Daily care yes, emergencies no.** |
| HS29 | Amend | **HS29 Medicine training****Criteria**Adults who administer medicine to children (other than their own) are provided with information and/or training relevant to the task.Documentation requiredA record of training and/or information provided to adults who administer medicine to children (other than their own) while at the service. | Adults responsible for administering medicine to children (other than their own) are provided with the necessary information, training, or instruction to do so safely and effectively. This may be from the child’s parent or whānau, or a health professional, as appropriate. | 1. **Do you think the intent of the original criterion is still met with the amended criterion?**

**Yes, and clearer about adults who are responsible****However, the documentation required in the original criterion must be retained.**1. **Will this proposed change make it easier for services to comply?**

**No guarantees, because it’s about the support networks to ensure this occurs**1. **Will this amended meet the needs of family and whānau?**

**Yes, if the documentation required is retained.**1. **Does the amended criterion support health and safety?**

**No, it needs to have the documentation required section included to enable this to be the case.** **We are opposed to this amended criteria if the documentation required, as outlined in the original criteria is not included.**  |
| HS30 | Retain | **HS30 Children washed when soiled****Criteria**Children are washed when they are soiled or pose a health risk to themselves or others. |  | **Agree** |
| HS31 | Amend | **HS31 Child protection****Criteria**There is a written child protection policy that meets the requirements of the Children’s Act 2014. The policy contains provisions for the identification and reporting of child abuse and neglect, and information about how the service will keep children safe from abuse and neglect, and how it will respond to suspected child abuse and neglect.The policy must be reviewed every 3 years.Documentation required1. A written child protection policy that contains:
	1. provisions for the service’s identification and reporting of child abuse and neglect
	2. information about the practices the service employs to keep children safe from abuse and neglect and
	3. information about how the service will respond to suspected child abuse and neglect.
2. A procedure that sets out how the service will identify and respond to suspected child abuse and/or neglect.
 | A written child protection policy and procedure is implemented that meets the requirements of the Children’s Act 2014. The policy and procedure contain provisions for: • the identification and reporting of child abuse and neglect • information about how the service will keep children safe from abuse and neglect • how the service will respond to suspected child abuse and neglect. The policy and procedure must be reviewed every 3 years to assess how well it has supported or would support the service’s response to child abuse and neglect. Documentation required 1) A written child protection policy that contains: › provisions for the service’s identification and reporting of child abuse and neglect › information about the practices the service employs to keep children safe from abuse and neglect and › information about how the service will respond to suspected child abuse and neglect. 2) A procedure that sets out how the service will identify and respond to suspected child abuse and/or neglect. 3) Evidence the service has reviewed the policy and procedure every three years. As part of the review, the service must evaluate how well the policy and procedure works using at least one example of either: › how well the policy and procedure has supported the service to respond, or › how well the policy and procedure would support the service to respond using a hypothetical scenario. | 1. **Do you think the amended criterion will support services to help protect children from harm?**

**No. This is only quality in practice when support networks are in place to ensure adults are familiar with expectations, including regular professional learning and development and education by knowledgeable professionals about child protection.**1. **Will this proposed change make it easier for services to comply with the criterion?**

**It is set out more clearly, however, the criterion should be extended to include the requirement for all staff/adults to receive professional learning and development and education by knowledgeable professionals.**1. **Will this amended criterion meet the needs of family and whānau?**

**No because this extremely important area of provision is about children’s needs/rights, not family and whānau. The extent to which family and whānau have “needs” is the need to know that their children are safe, hence the importance of this criterion with the addition of the requirement for professional development and learning and education.** 1. **Does the amended criterion support health and safety?**

**To the extent that there is criterion, with regulations that do not require professional learning and development and education in child protection, and do not require 100% of adults in regulated staff positions to be qualified, certificated teachers, and do not require centres to have effective systems and processes to support teaching teams, then no, it doesn’t.** |
| HS32 | Retain | **HS32 Inappropriate material****Criteria**All practicable steps are taken to protect children from exposure to inappropriate material (for example, of an explicitly sexual or violent nature). |  | **Agreed** |
| HS33 | Retain | **HS33 Alcohol and other substances****Criteria**No person on the premises uses, or is under the influence of, alcohol or any other substance that has a detrimental effect on their functioning or behaviour during the service's hours of operation. |  | **Agreed** |
| HS34 | Amend | **HS34 Incident notification to the Ministry of Education****Criteria**Where there is a serious injury or illness or incident involving a child while at the service that is required to be notified to a specified agency, the service provider must also notify the Ministry of Education at the same time.Documentation requiredA copy of the notification sent to the specified agency. | 1) The Ministry of Education must be notified at the same time as any specified agencies when there is a serious injury, illness, or incident involving a child while at the service. 2) The Ministry must also be notified as soon as possible if the service’s child protection policy requires a notification to any agency (such as Oranga Tamariki or Police) relating to a child while attending the service. 3) The Ministry of Education must also be notified as soon as possible of the following incidents: › A child leaves the premises without the knowledge of an adult, regardless of the duration. › A child is locked inside the premises after operating hours. › A child is taken from the service by someone not authorised in writing to do so. › A child is left behind or goes missing during an excursion. Documentation required (written or digital) A copy of the notification sent to any specified agency and summary of any notification or report of concern sent to Oranga Tamariki or NZ Police. Where applicable, a copy of the service’s investigation into the incident, including recorded outcomes and any supporting documentation. | 1. **Do you think the intent of the original criterion is still met with the amended criterion?**

**It is clearer**1. **Will this proposed change make it easier for services to comply with the criterion?**

**Yes**1. **Will this amended criterion meet the needs of family and whānau? Again, this is about children’s safety, family and whānau need to know their children are safe.**
2. **Does the amended criterion support health and safety?**

**It provides better clarification around expectations****We are opposed to a copy of the notification sent to any specified agency and summary of any notification or report of concern sent to Oranga Tamariki or NZ Police. We believe there are serious issues of privacy regarding sharing a document meant for one agency with others.** |
| @ |  |  |  |  |
| PF1 | Amend PF1 and merge with PF2 | **PF1 Design and layout of premises****Criteria**The design and layout of the premises:* support the provision of different types of indoor and outdoor experiences; and
* include quiet spaces, areas for physically active play, and space for a range of individual and group learning experiences appropriate to the number, ages, and abilities of children attending.
 | **See PF2** | **See PF2** |
| PF2 | Amend PF1 and merge with PF2 | **PF2 Premises support effective supervision****Criteria**The design and layout of the premises support effective adult supervision so that children's access to the licensed space (indoor and outdoor) is not unnecessarily limited. | The design and layout of the premises: • support the provision of different types of indoor and outdoor experiences • support effective adult supervision so that children’s access to the licensed space (indoor and outdoor) is not unnecessarily limited; and • include quiet spaces, areas for physically active play, and space for a range of individual and group learning experiences appropriate to the number, ages, and abilities of children attending | 1. **Does the proposed wording make it clear how the design and layout should support** **different types of learning and play?**

 **No, all that has happened is wording has been combined. We believe the following wording would be more appropriate: support the provision of and safe access to different types of indoor and outdoor experiences so that infants, toddlers and young children’s access to all areas of the licensed space (indoors and outdoors) is not unnecessarily limited.**1. **Do you think this change supports services to create learning environments that work for children of different ages and abilities?**

**No, the wording has simply been merged into one criteria, nothing new has been added to specifically to suggest any new information**.1. **Do you think the new wording makes it easier to understand what’s required, without creating unnecessary burden?** Lynette

**This criterion has simply merged two criteria into one, the expectations of this need to be clear in the guidance, it does  make it clearer to read, but effective supervision should be a separate criteria, as it is key to health and safety of children and should be more explicit in the licencing criteria****We are concerned that this criterion is being positioned to address issues that it does not address.****For example:how do you measure if children’s access has been unnecessarily limited by the design and layout: for example if there are steep steps for accessing the outdoor environment, is this considered unnecessarily limiting infants access to the outdoors in an under twos environment?** **This aspect is about the design not the supervision – for example,** **if a child uses a wheel chair how does the design and layout facilitate their independent access to the outdoor environment –** **What needs to be clear is what the expectations look  like in practice, what you would expect to see, consider the ERO Improvement Framework as a guide** |
| PF3 | Retain | **PF3 Building Act compliance****Criteria**The premises conform to any relevant bylaws of the local authority and the Building Act 2004.Documentation required1. Code Compliance Certificate issued under Section 95 of the Building Act 2004 for any building work undertaken, or alternatively, any other documentation that shows evidence of compliance.
2. If the premises fall under section 100 of the Building Act 2004, or section 108 of the Building Act 2004 applies:
	* a copy of the current Annual Building Warrant of Fitness; or
	* a copy of the compliance schedule if 12 months have not elapsed since the compliance schedule was first issued.
 |  | **Agree** |
| PF4 | Amend | **PF4 Variety of equipment****Criteria**A sufficient quantity and variety of (indoor and outdoor) furniture, equipment, and materials is provided that is appropriate for the learning and abilities of the children attending. | A sufficient quantity and range of indoor and outdoor furniture, equipment, and materials is provided to ensure children have timely access to appropriate learning challenges, experiences, and opportunities that support their developmental stages, abilities, and current and emerging interests. | 1. **Does the proposed wording support the need to provide for children’s different ages,abilities, and interests?**

**Yes.  We support the inclusion of “timely access”, although this is still open to interpretation**1. **Do you think this change will improve understanding and compliance without adding extra compliance burden?**

**It is positive to see that access needs to be ensured – so it is not just about having the resources, these need to be accessible.****The added detail could support deeper conversations for teaching teams around what this would look like in their service – this is not a burden but a benefit to engaging in pedagogical discussions about learning, health and safety.**  |
| PF5 | Retain | **PF5 Safe furniture and equipment****Criteria**All indoor and outdoor items and surfaces, furniture, equipment and materials are safe and suitable for their intended use. |  | **Agree** |
| PF6 | Retain | **PF6 Flooring****Criteria**# Floor surfaces are durable, safe, and suitable for the range of activities to be carried out at the service (including wet and messy play), and can easily be kept clean. |  | **Agree** |
| PF7 | Retain | **PF7 Safety glass****Criteria**Any windows or other areas of glass accessible to children are either:* made of safety glass; or
* covered by an adhesive film designed to hold the glass in place in the event of it being broken; or
* effectively guarded by barriers which prevent a child striking or falling against the glass.
 |  | **Agree** |
| PF8 | Retain | **PF8 Storage****Criteria**There are sufficient spaces for equipment and material to be stored safely. Stored equipment and materials can be easily and safely accessed by adults, and where practicable, by children. |  | **Agree** |
| PF9 | Amend | **PF9 Adult workspace****Criteria****☀** There is space for adults working at the service to:* use for planned breaks
* meet privately with parents and colleagues
* store curriculum support materials; and
* assess, plan and evaluate.
 | **☀** There is space (where children are not present) for adults working at the service to: • use for planned breaks • meet privately with parents and colleagues • store curriculum support materials; and • assess, plan and evaluate | 1. **Does the proposed new wording help providers better understand expectations related to adult working spaces?**

**We believe it would be more accurate to use the wording: “child- free space” to uphold the intent.**1. **To what extent could this change add compliance burden?**

**There would be some services that struggle to meet all of these and definitely not concurrently – eg having a break space that is separate from the space to meet with parents would be challenging. So still open to interpretation as to the expectations, but better than the previous version**1. **How easy would it be to implement the proposed change?**

**Some services might find it impossible within their current physical environment. There will be buildings that are not built for purpose, and the amount of space intentionally allocated for these spaces could be open to interpretation…who’s to say a cupboard size room for planned breaks might be a providers expectation?** |
| PF10 | Retain | **PF10 Art sink****Criteria**# ☀ There are hygienic facilities (other than those required for PF26) or alternative arrangements available for the preparation and cleaning up of paint and other art materials. |  | **Agree** |
| PF11 | Retain | **PF11 Telephone****Criteria****☀** There is a telephone on which calls can be made to and from the service. |  | **Agree** |
| PF12 | Amend | **PF12 Lighting, ventilation, heating and acoustic materials****Criteria****#** Parts of the building or buildings used by children have:* lighting (natural or artificial) that is appropriate to the activities offered or purpose of each room
* ventilation (natural or mechanical) that allows fresh air to circulate (particularly in sanitary and sleep areas)
* a safe and effective means of maintaining a room temperature of no lower than 18°C and
* acoustic absorption materials, if necessary, to reduce noise levels that may negatively affect children's learning or wellbeing.
 | # Parts of the building or buildings used by children have: • lighting (natural or artificial) that is appropriate to the activities offered or purpose of each room • ventilation (natural or mechanical) that allows sufficient fresh air to circulate (particularly in sanitary and sleep areas) Modernising Early Childhood Education in Aotearoa New Zealand Discussion document June 2025 Page 49 SECTION 2: CENTRE-BASED • safe and effective means of maintaining a comfortable room temperature; and • acoustic absorption materials, if necessary, to reduce noise levels that may negatively affect children’s learning or wellbeing | 1. **Does the new wording clearly explain what’s required for lighting, ventilation,** **temperature, and noise control in children’s spaces?**

**No – who’s interpretation of ‘Sufficient fresh air or comfortable room temperature”**1. **Do you think removing the separate temperature requirement helps reduce duplication?**

**No it means that there are two different requirements, and this one is open to interpretation!  We believe there should be the same wording in each of these criteria**1. **Is it clear how services can maintain a comfortable indoor environment for children?**

**No it is less clear.  It becomes too broad as to what comfortable could look like by different providers, and every adult has a different level of comfort.**1. **Do you think this change supports children’s health, comfort, and learning without increasing compliance burden?**

**No, it is too broad in its wording and needs to be quite specific about its expectation. The change makes it more complicated as the interpretation of comfortable could be at odds with the expectation of HS24** |
| PF13 | Amend | **PF13 Outdoor activity space****Criteria**Outdoor activity space is:* connected to the indoor activity space and can be easily and safely accessed by children
* safe, well-drained, and suitably surfaced for a variety of activities
* enclosed by structures and/or fences and gates designed to ensure that children are not able to leave the premises without the knowledge of adults providing education and care
* not unduly restricted by Resource Consent conditions with regards to its use by the service to provide for outdoor experiences; and
* available for the exclusive use of the service during hours of operation.
 | Outdoor activity space is: • connected to the indoor activity space so that children can access it safely and easily (limiting outdoor access may be appropriate at times). • safe, well-drained, and suitably surfaced for a variety of activities • enclosed by structures and/or fences and gates designed to ensure that children are not able to leave the premises without the knowledge of adults providing education and care • not unduly restricted by Resource Consent conditions with regards to its use by the service to provide for outdoor experiences; and • available for the exclusive use of the service during hours of operation. | **Does the new wording make it clearer what this criterion is asking services to do?**  **No the change doesn’t make it clearer – by adding the rider around limiting access at times, it still means that services can choose to have significant restriction on children’s access to the outdoors –interpretation of ‘appropriate at times’ would be challenging****It is only the first bullet point with change of wording, the addition of limiting outdoor access is open to interpretation. This expectation would need to be more clear.****Do you think the new wording would help services follow this requirement more easily?** **No, it only slightly changed and there would need to be discussions around limiting outdoor access for each service, to determine what this expectation would look like for practice.****How easy would it be for services to make this change?** **We don’t think it makes any difference, and in centres where there is very limited non-contact time for staff, this outcome could be difficult to fulfil.****Does the new wording help you feel more confident about what’s expected?** **No** |
| PF14 | Amend | **PF14 Infant toddler safe space****Criteria**Applies only to services licensed for under 2-year-oldsThere are safe and comfortable (indoor and outdoor) spaces for infants, toddlers or children not walking to lie, roll, creep, crawl, pull themselves up, learn to walk and to be protected from more mobile children. | Applies only to services licensed for under 2-year-olds There are safe and comfortable (indoor and outdoor) spaces for infants, toddlers or children not walking to lie, roll, creep, crawl, pull themselves up, learn to walk and to be protected from more mobile children. | 1. **Does the new wording make it clearer what’s expected for keeping non-walking** **children safe?**

**Yes – it clarifies appropriateness of mixed ages**1. **Do you think the new wording helps clear up any confusion about separating younger and older children?**

**It is somewhat clearer that all children can be ‘moving’ Moving though doesn’t equal supporting sustained learning in a space where older children may be.**1. **How easy would it be for your service to follow this new wording in practice?**

**It is consistent with our current practice**1. **Could this change reduce pressure or worry for services about how to meet this**  **requirement?**

**Yes, it supports flexibility to have children in services where there are ‘rooms’ to be more fluid and responsive to mixed age learning, though the word ‘moving’ needs to be reconsidered** |
| PF15 | Retain | **PF15 Dining facilities****Criteria**There is a safe and hygienic place for children attending to sit when eating. |  | **Agree** |
| PF16 | Amend PF16. Merge HS20 with PF16 | **PF16 Kitchen facilities****Criteria**# ☀ There are facilities for the hygienic preparation, storage and/or serving of food and drink that contain:* a means of keeping perishable food at a temperature at or below 4°C and protected from vermin and insects
* a means of cooking and/or heating food
* a means of hygienically washing dishes
* a sink connected to a hot water supply
* storage; and
* food preparation surfaces that are impervious to moisture and can be easily maintained in a hygienic condition.
 | Services not subject to National Programme 2 (NP2) under the Food Act 2014. (Services subject to NP2 are deemed to meet this requirement through their NP2 registration) ☀Services ensure that facilities used to prepare, serve, and store food and drink are hygienic and suitable for purpose. These facilities must include: • a means of keeping perishable food at or below 5°C • a means of keeping all foods protected from pests • a means of cooking and/or heating food to safe temperatures • a means of hygienically washing dishes • a sink connected to a hot water supply • adequate and suitable storage for food, utensils, and equipment; and • food preparation surfaces that are easily maintained in a hygienic condition. | **Does the new wording clarify to which services this criterion applies?** **We think the stem should be more clear by adding: “services who are not subject to NP2”.** **Will this change help services understand what food and drink facilities are required if they’re not part of National Programme 2 (NP2)?** **Yes, although a provider/service would need to know what this meant** **Do you think keeping this criterion helps avoid confusion or unintended problems for services?** **Again, it is about interpretation and having set expectations of what ‘hygienic’ means across services. We think the distinction around storage is useful and removing the impervious to moisture is sensible –We also agree with the change of wording from ‘can be’ to ‘are’.** |
| PF17 | Retain | **PF17 Kitchens inaccessible****Criteria**Kitchen and cooking facilities or appliances are designed, located or fitted with safety devices to ensure that children cannot access them without adult assistance or supervision. |  | **Agree** |
| PF18 | Amend PF18 and merge with PF20 and PF22 | **PF18 Toilets****Criteria**The service has at least 1 toilet for every 1 to 15 persons. Persons are defined as children aged 2 and older and teaching staff that count towards the required adult:child ratio. | The service has at least 1 toilet for every 1 to 15 persons. Persons are defined as children aged 2 and older and adults that count towards the minimum adult:child ratio requirements. # Toilets intended for use by children or adults must be adequately separated from areas used for play or where food is prepared, to help minimise the spread of infection. # Toilets intended for use by children must be easy and safe for them to reach and use on their own, without needing help from an adult. At least one of these toilets must be designed to provide a sense of privacy. | 1. **Does merging the toilet-related criteria make it easier to understand what is required?**

**We think it is better in one criteria although it doesn’t specify adults having their own toilet space.**1. **Could this change make it simpler for services to meet toilet related requirements**

**We’re don’t believe that “making it simpler for services to meet toilet related requirements” should be a key indicator of success for this criterion - one toilet for privacy could indicate this as a shared toilet with children and adults**1. **Do you think combining  these criteria will cause confusion for Health NZ’s role?**

**Possibly, it would need to be made clear where the responsibility lies – using the # symbol is useful.****We believe that it should be made explicit that one toilet should be allocated an adults toilet – to ensure adult safety, hygiene, and wellbeing.**  |
| PF19 | Merge and amend PF19 to include PF20 and PF21 | **PF19 Handwashing facilities ratio****Criteria**There is at least 1 tap delivering warm water (over an individual or shared handbasin) for every 15 persons (or part thereof) at the service (that is to say, children attending and adults counting towards the required adult:child ratio). | There is at least 1 tap delivering warm water (over an individual or shared handbasin) for every 15 persons. Persons are defined as children attending and adults counting towards minimum adult:child ratio requirements. # Appropriate handwashing/drying facilities are provided (for both adults and children) that minimises the spread of infection. • These facilities are safe and easy to access after using the toilet and are kept separate from play areas and places where food is prepared or served. • Children capable of using the toilet independently have handwashing/drying facilities that can be used safely without adult help | **Does combining the handwashing and drying criteria make it easier to understand what’s required?** **Possibly****Does this change help reduce the number of rules services have to check, without adding extra work?** **Not necessarily, but the change to ‘minimise’ rather than ‘prevent’ spread of infection is sensible.****Do you think merging these criteria might create confusion about Health New Zealand’s role?** **Possibly. It would need to be made clear where the responsibility lies.****How clear is it who is responsible for checking the new, combined requirement?** **Clear. The # is used consistently throughout the document to signify where MoH responsibility is.** |
| PF20 | Merge and amend PF19 to include PF20 and PF21 | **PF20 Toilet and handwashing facilities****Criteria****#** Toilet and associated handwashing/drying facilities intended for use by children are:* designed and located to allow children capable of independent toileting to access them safely without adult help and
* adequately separated from areas of the service used for play or food preparation to prevent the spread of infection.
 | See proposed wording for PF18 and for PF19 |  |
| PF21 | Merge and amend PF19 to include PF20 and PF21 | **PF21 Hand drying facilities****Criteria**# There is means of drying hands for children and adults that prevents the spread of infection. | See proposed wording for PF19 |  |
| PF22 | Merge and amaend PF18 to include PF20 and PF21 | **PF22 Toilet privacy****Criteria**# At least 1 of the toilets for use by children is designed to provide them with some sense of privacy. | See proposed wording for PF22 | **Agree** |
| PF23 | Amend PF23 | **PF23 Adult toilet****Criteria**☀ There is a toilet suitable for adults to use. | ☀There is a toilet and handwashing/ drying facilities suitable for adults to use that minimises the spread of infection. | **Do you feel the amended text helps clarify the purpose of the criterion?** **Yes. However, it is not clear that the intention is that a separate toilet for adults is maintained.** **2. Do you feel this criterion (PF23) should be retained?** \_  **Yes good to retain it** |
| PF24 | Remove | **PF24 Tempering valve****Criteria**# A tempering valve or other accurate means of limiting hot water temperature is installed for the requirements of criterion HS13 to be met.[HS13 Temperature of hot water from taps children can access](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/health-and-safety/hazards-and-outings) |  | 1. **Could removing this criterion (PF24) help reduce compliance workload without** **compromising safety?**

**Definitely not. It would compromise safety as it removes the requirement to say how to keep the water at a safe temperature (not currently in HS13)**1. **Do you agree that HS13 already covers what’s needed to keep water at a safe** **temperature?**

**No**1. **How confident are you that your service can meet this requirement using just HS13?**

**Not confident at all. This  criterion requires centres to say how they are limiting the hot water temperature – it still allows them to have an alternative, but they need to state how.****We urge the Ministry of Education to retain the existing criterion with the link to HS13.** |
| PF25 | Retain | **PF25 Nappy change facilities****Criteria**# There are safe and stable nappy changing facilities that can be kept hygienically clean. These facilities are located in a designated area near to handwashing facilities and are adequately separated from areas of the service used for play or food preparation to prevent the spread of infection. The design, construction and location of the facilities ensure that:* they are safe and appropriate for the age/weight and number of children needing to use them
* children's independence can be fostered as appropriate
* children's dignity and right to privacy is respected; and
* some visibility from another area of the service is possible.
 |  | **Agree** |
| PF26 | Retain | **PF26 Body wash facilities****Criteria**# ☀ There are suitable facilities provided for washing sick or soiled children and a procedure outlining how hygiene and infection control outcomes will be met when washing sick and soiled children.**Documentation required**A procedure outlining how the service will ensure hygiene and infection control outcomes are met when washing sick and soiled children. |  | **Agree** |
| PF27 | Retain | **PF27 Isolation area****Criteria**# ☀ There is space (away from where food is stored, prepared or eaten) where a sick child can:* be temporarily kept at a safe distance from other children (to prevent cross-infection)
* lie down comfortably; and
* be supervised.
 |  | **Agree** |
| PF 28 | Amend | **PF28 First aid kit****Criteria**There is a first aid kit that:* complies with the requirements of Appendix 1
* is easily recognisable and readily accessible to adults, and
* is inaccessible to children.

[Appendix 1: First aid kit requirements for criterion PF28](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/appendix-1-first-aid-kit-requirements-for-criterion-pf28) | 1) There is a first aid kit that is: • sufficient for the number of children at the service • is easily recognisable and readily accessible to adults; and • is inaccessible to children. 2) There is a system for reviewing the first aid kit so that it stays well-stocked, with any used or expired items promptly replenished or replaced. | 1. **Does the wording make it clearer what’s expected for keeping a first aid kit at the service?**

**The rationale states the first aid kit should support everyone including adults. We therefore believe the wording should include “and adults” thereby reading “… sufficient for the number of children and adults at the service**”  1. **Does adding a requirement to regularly check and restock the first aid kit help support health and safety?**

**Yes**1. **How easy would it be for your service to follow this new requirement?**

**Matches our current practice.**1. **Do you think this change will help make sure first aid kits are always ready to use** **when needed?**

**Yes****We believe the link to *Appendix 1. First aid kit requirements for criterion PF28* needs to be retained in the new criterion.** |
| PF29 | Amend PF29 and merge with HS10 | **PF29 Design of sleep provisions****Criteria**# Furniture and items intended for children to sleep on (such as cots, beds, stretchers or mattresses) are of a size that allows children using them to lie flat and are of a design to ensure their safety. | # Furniture and items intended for children to sleep on (such as cots, beds, stretchers or mattresses): • are of a size that allows children using them to lie flat • are designed to support their safety and are arranged and spaced to enable: › adults to have clear access to at least one side (the length, not the width) › sufficient air movement to minimise the risk of spreading illness in the area surrounding each child.› children to sit or stand safely as they wake. | 1. **Does the proposed wording make it clearer what kind of sleep furniture is expected for children?**

**Yes**1. **Do you think this change helps reduce compliance pressure for your service?**

**We are not sure that it will make that much difference!**1. **Is it clear how sleep furniture should be arranged to keep children safe and healthy?**

**We are concerned about the change from “ensure safety” to “support safety”. We are concerned that this will reduce the responsibility of the provider to ensure the safety of children.** 1. **How helpful is this change for understanding what’s suitable, without banning specific types of sleep furniture?**

**Helpful.**  |
| PF30 | Amend PF30 and merge with PF31 | **PF30 Mattress coverings****Criteria**# Furniture and items intended for children to sleep on (such as cots, beds, stretchers or mattresses) that will be used by more than one child over time are securely covered with or made of a non-porous material (that is, a material that does not allow liquid to pass through it) that:* protects them from becoming soiled
* allows for easy cleaning (or is disposable); and
* does not present a suffocation hazard to children.
 | Clean individual bedding (such as blankets, sheets, sleeping bags, and pillowcases) is provided to ensure that children have adequate warmth while sleeping or resting. # Furniture and sleeping items (such as cots, beds, stretchers or mattresses) that will be used by more than one child over time are securely covered with or made of a non-porous material (that is, a material that does not allow liquid to pass through it) that: • Protects the item from becoming soiled • Allows for easy cleaning (or is disposable); and • Does not present a suffocation hazard to children | 1. **Does the new wording make it clearer what bedding and sleep furniture services must provide?**

**Yes. We believe strengthening of the wording around warmth is appropriate.** 1. **Do you think combining these requirements helps reduce the number of rules your service has to follow?**

**No, it’s the same number of rules – but we are not phased by that.**1. **Is it clear which sleep furniture needs to be covered in non-porous or easy-to-clean material?**

**Yes. We believe there should also be guidance around the cleaning requirements.**1. **Could the merged wording cause confusion about Health New Zealand’s role in checking these requirements?**

**No** |
| PF31 | Amend PF30 and merge with PF31 | **PF31 Bedding****Criteria**Clean individual bedding (such as blankets, sheets, sleeping bags and pillowslips) is provided for sleeping or resting children that is sufficient to keep them warm. | See PF30 |  |
| PF32 | Amend | **PF32 Sessional services only: over 2 sleep space****Criteria****Sessional services only**A safe and comfortable place to sleep (such as a bed, stretcher, mattress or couch) is available for children aged 2 and older that require sleep or rest during a session. | Sessional services only Children aged 2 and older have a safe and comfortable place to sleep or rest, if necessary, like a bed, stretcher, or mattress. | **NA** |
| PF33 | Amend PF33 and merge with PF 34 | **PF33 All-day services only: over 2 sleep space****Criteria****All-day services only**Space is available for children aged 2 and older to sleep or rest for a reasonable period each day. If the space used for sleeping or resting is part of the activity space, there are alternative activity spaces for other children not sleeping or resting as necessary. | See PF 34 |  |
| PF34 | Amend PF 33 and merge with PF34 | **PF34 All-day services only: over 2 sleep provisions****Criteria****All-day services only**Furniture or items intended for children to sleep on (such as cots, beds, stretchers or mattresses) are available for the sleep or rest of children aged 2 and older. | All-day services only Furniture or items intended for children to sleep on (such as beds, stretchers, or mattresses) are available for children aged 2 and older to sleep or rest. Space is provided for children aged 2 and older to sleep or rest for a reasonable period each day. If the sleep or rest area is part of the activity space, alternative activity spaces are available for other children who are not sleeping or resting. | 1. **Does the new wording clearly explain what all day services must provide for children aged 2 and over to sleep or rest?**

**Yes**1. **Do you think combining these requirements into one criterion makes things simpler for your service?**

**Yes**1. **Is it clear that space must be available for both sleeping and active children during the day?**

**No. For example does this mean that in services where children don’t sleep, that the space needs to be set up each day regardless?**1. **Do you agree that removing cots for children aged 2 and over better reflects their independence and sleep needs?**

**No. It must be made clear that a child aged 2 or more was still able to access a cot for whatever reason, should that child (or their parent/caregiver) request that this occurs.**  |
| PF35 | Merge PF 36 with PF 35 | **PF35 Sessional services only: under 2 sleep space****Criteria****Sessional services only**A designated space is available to support the provision of restful sleep for children under the age of 2 at any time they are attending. This space is located and designed to:* minimise fluctuations in temperature, noise and lighting levels
* allow adequate supervision; and
* accommodate at least the requirements of criterion PF36, when arranged in accordance with criterion HS10.

[HS10 Sleep furniture spacing](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/health-and-safety/sleep) | See PF36 | **NA** |
| PF36 | Merge PF36 with PF35. | **PF36 Sessional services only: under 2 cot:child ratio****Criteria****Sessional services only**Furniture or items intended for children to sleep on (such as cots, beds, stretchers or mattresses) are provided at a ratio of at least 1 to every 5 children under the age of 2. | Sessional services only 1) A designated area is available to enable restful sleep for children under the age of 2 at any time they are attending. This space is designed and located to: › minimise fluctuations in temperature, noise and lighting levels; and › allow adequate supervision 2) Provide furniture or items for sleeping (such as cots, beds, stretchers or mattresses) at a ratio of at least 1 to every 5 children under the age of 2. | **NA** |
| PF37 | Amend PF37 to merge with PF38 | **PF37 All-day services: under 2 sleep space****Criteria****All-day services only**A designated space is available to support the provision of restful sleep for children under the age of 2 at any time they are attending.This space is located and designed to:* minimise fluctuations in temperature, noise and lighting levels
* allow adequate supervision; and
* accommodate at least the requirements of criterion PF38, when arranged in accordance with criterion HS10.

[HS10 Sleep furniture spacing](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/health-and-safety/sleep) | See PF38 |  |
| PF38 | Amend PF37 to merge with PF38 | **PF38 All-day services: under 2 child:cot ratio****Criteria****All-day services only**Furniture or items intended for children to sleep on (such as cots, beds, stretchers or mattresses) are provided at a ratio of at least 1 to every 2 children under the age of 2. | All-day services only 1) A designated area is available to enable restful sleep for children under the age of 2 at any time they are attending. This space is designed and located to: › minimise fluctuations in temperature, noise and lighting levels; and › allow adequate supervision 2) Provide furniture or items for sleeping (such as cots, beds, stretchers, or mattresses) at a ratio of at least 1 for every 2 children under the age of 2 | 1. **Does the new wording clearly explain what all-day services must provide for children under 2 to sleep or rest?**

**Yes** 1. **Do you think combining sleep space and furniture rules into one makes the requirement simpler to follow?**

**Yes**1. **Is the ratio of 1 sleep item for every 2 children under 2 clear and practical for your service?**

**Yes**1. **Do you agree that this change still supports safe and healthy sleep for children under 2?**

**Yes**  |
|  |  |  |  |  |
| GMA1 | Amend | **GMA1 Display of information****Criteria**The following are prominently displayed at the service for parents and visitors:* the Education (Early Childhood Services) Regulations 2008, and the Licensing Criteria for Early Childhood Education and Care Centres 2008
* the full names and qualifications of each person counting towards regulated qualification requirements
* the service's current licence certificate and
* a procedure people should follow if they wish to complain about non-compliance with the Regulations or criteria.

Documentation requiredA procedure people should follow if they wish to complain about non-compliance with the Regulations or criteria. The procedure includes the option to contact the local Ministry of Education office and provides contact details. | The following are prominently displayed at the service: • the service’s current licence certificate • the name and contact details of a person who parents, whānau and visitors can contact for questions about the service and/or to make a complaint about the service’s operation. | 1. **Does the new wording clearly explain what must be displayed at the service?**

**We vehemently disagree with the change in what must be displayed at the service.**1. **Do you agree that this change keeps parents and whānau informed without adding extra work for services?**

**No, not at all.**1. **Does this change make it clear who parents and visitors can contact with questions or concerns about the service?**

**This question is as irrelevant as the first question – parents and visitors should be given the opportunity to contact someone outside of the service if they have complaints or concerns. The contact details of the local Ministry of Education office must remain one of the pieces of information to be prominently displayed.** 1. **Do you think this merged requirement makes it easier to understand and meet the display rules?**

**Another irrelevant question because the display rules should not be changed.****We DONOT agree that the removal of the previous GMA1 requirement is appropriate or necessary.  The original criterion was not overly burdensome and didn't create an unreasonable workload or confusion.****Parents and Whānau should see the  key regulatory documents, Early Childhood Services Regulations and Licensing Criteria, displayed in the service - as an indication of a professional, regulated sector and as being transparent and accountable to whānau.****We urge the Ministry of Education to retain the current GMA1 wording as is.** |
| GMA2 | Amend GMA2 and merge with GMA3 | **GMA2 Parent access to information****Criteria**Parents are advised how to access:* information concerning their child
* the service's operational documents (such as its philosophy, policies, and procedures and any other documents that set out how day to day operations will be conducted) and
* the most recent Education Review Office report regarding the service.

Documentation requiredWritten information letting parents know how to access:* information concerning their child
* the service's operational documents and
* the most recent Education Review Office report regarding the service.
 | See GMA3 |  |
| GMA3 | Amend GMA2 and merge with GMA3 | **GMA3 Information provided to parents****Criteria**Information is provided to parents about:* how they can be involved in the service
* any fees charged by the service
* the amount and details of the expenditure of any Ministry of Education funding received by the service and
* any planned reviews and consultation.

Documentation requiredWritten information letting parents know:* how they can be involved in the service
* any fees charged by the service
* the amount and details of the expenditure of any Ministry of Education funding received by the service and
* about any planned reviews and consultation.
 | Parents and whānau are provided with information on how to access the following, in either written or digital format: • the Education (Early Childhood Services) Regulations 2008, • the Licensing Criteria for Education and Care Centres 2008 • information about any changes to the service’s licence status • the most recent Education Review Office report regarding the service • the full names and qualifications of each person counting towards regulated qualification requirements • the service’s procedure for parents and whānau to follow if they wish to make a complaint about the service. The procedure should include details on who to contact and the contact information for the local Ministry of Education office. • information concerning their child • any fees charged by the service • how they can be involved in the service • the service’s operational documents • any planned reviews and consultation and • the amount and details of the expenditure of any Ministry of Education funding received by the service. | **Do you agree that combining GMA2 and GMA3 helps reduce duplication in the licensing criteria?****No. We believe it chould be separated along operational information and then their engagement around their  child and being involved; for example:****GMA2 Parents and whanau are advised how*** **to access information concerning their child**
* **they can be involved in the service**
* **they can take part in any planned reviews and consultation.**

**GMA 3 Information is provided to parents about:*** **any fees charged by the service**
* **the amount and details of the expenditure of any Ministry of**

 **Education funding received by the service and*** **the service's operational documents (such as its philosophy, policies, and procedures and any other documents that set out how day to day operations will be conducted) and**
* **the most recent Education Review Office report regarding the**

 **service****We are concerned that combining the criteria will “bury” important information such as access to the team philosophy, or reviews. GMA2 and GMA3 are quite different and serve different purposes. If they are combined, there is the risk that some of the detail that important to share with parents and whānau will be lost.**  |
| GMA4 | Amend GMA4 | **GMA4 Parent involvement****Criteria**Parents of children attending the service and adults providing education and care are provided with opportunities to contribute to the development and review of the service's operational documents (such as philosophy, policies and procedures and any other documents that set out how day to day operations will be conducted).Documentation requiredEvidence of opportunities provided for parents and adults providing education and care to contribute to the development and review of the service's operational documents. | There is evidence in either written or digital format that parents and whānau of children attending the service and adults providing education and care have been provided with opportunities to contribute to the development and review of the service’s operational documents. | 1. **Does the proposed wording clearly explain who should be given a chance to review the service’s operational documents?**

**The original wording in existing criterion is more clear, with the addition of “whānau”.**1. **Do you agree this change makes the requirement easier to understand and comply with?**

**No. It actually weakens it.**1. **Is it clear that services can provide evidence in either written or digital form?**

**Yes**1. **Does this change help reduce confusion while still supporting parents and whānau to take part in service planning and review?**

**No – by removing the examples it makes it ambiguous and more confusing.****We believe the existing Criterion wording needs to be retained as it makes it clear for parents and whānau and the provider. In the new proposed wording, the original purpose, which was whanau involvement has been replaced with what needs to be given to whanau.** |
| GMA5 | Remove | **GMA5 Philosophy statement****Criteria**A philosophy statement guides the service's operation.**Documentation required**A written statement expressing the service's beliefs, values and attitudes about the provision of early childhood education and care. |  | 1. **Is it clear that the intent of regulation 47 is still met without GMA5?**

**No, absolutely not. GMA5 must be retained.** 1. **Do you think anything important would be lost by removing GMA5?**

**If GMA5 was removed, there would be no explicit and clear information about the service’s values, beliefs, and so that parents and whānau are able to make choices about where they send their children, and for prospective staff about where they choose to work (with a philosophy that is consistent with their own). GMA5 also , enables parents, whānau, and prospective staff to hold the service accountable if they don’t think the values and beliefs etc are being upheld.****GMA5 explicitly requires a service to have a philosophy statement that reflects the beliefs, values, and practices of each teaching team, community and just as importantly, it helps whānau understand what those values look like in everyday practice. GMA5 is simple and effective but exacting in its requirement of a service. We urge the Ministry of Education NOT to remove this criterion.** |
| GMA6 | Amend | **GMA6 Self-review and internal evaluation****Criteria**An ongoing process of self-review and internal evaluation helps the service maintain and improve the quality of its education and care.**Documentation required**1. A process for reviewing and evaluating the service's operation (for example, learning and teaching practices, philosophy, policies and procedures) by the people involved in the service.

The process is consistent with criterion GMA4/GMA3 and includes a schedule showing timelines for planned review of different areas of operation.[GMA4 Parent involvement](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/governance-management-and-administration/parent-involvement-and-information)[GMA3 Information provided to parents](https://www.education.govt.nz/education-professionals/early-learning/running-ece-centre/licensing-criteria-for-centre-based-ece-services/governance-management-and-administration/parent-involvement-and-information)1. Recorded outcomes from the review and evaluation process. Outcomes show how the service has regard for the Statement of National Education and Learning Priorities (NELP) in its operation.
 | There is an ongoing review process that supports the service to maintain and implement operational policies and practices. Proposed documentation required (written or digital): There is an ongoing process for reviewing the service’s delivery of operational policies and practices. Documentation required • A process for reviewing the service’s delivery of operational policies and practices. • The process is consistent with criterion GMA4 • Recorded outcomes from review process | **Does the new wording clarify the kind of review process services need to have in place?****Not at all. It is more confusing because it is obscure.** **Do you agree that removing the term ‘self-review’ helps reduce confusion about documentation and expectations?****No, not at all. Although the term “self review” should be replaced with “internal evaluation”, The wording as it is proposed does nothing to focus a service on ensuring a focus on ongoing improvement – see ERO commentary around the difference between review and Evaluation.****Does this change make it easier to understand how to meet the requirement without increasing workload for services?****No because GMA6 is about ongoing improvement of outcomes for tamariki, not about making it easier to understand.**  |
| GMA7 | Remove | **GMA7 Human resource management****Criteria**Suitable human resource management practices are implemented.**Documentation required**Processes for human resource management, including:* selection and appointment procedures
* job/role descriptions
* induction procedures into the service
* a system of regular appraisal
* provision for professional development
* a definition of serious misconduct and
* discipline/dismissal procedures.
 |  | 1. **Do you agree that removing this criterion retains important staff-related responsibilities clear for service providers?**

**No not at all. We strongly disagree.**1. **Is it clear that services must still meet the requirements of regulation 47(1)(e) and regulation 56, even without this criterion?**

**No, definitely not. There needs to be much more direction around what constitutes acceptable practice in this area than what is offered by regulation 47(1)(e) and regulation 56.**1. **Do you think this removal helps reduce duplication or confusion in the licensing criteria?**

**No, not at all.**1. **Do you have any concerns about removing this criterion that you think we should consider?**

**GMA 7 is essential in ensuring that staff (both teaching and non-teaching) are treated fairly and well supported in their roles – this has a direct impact on the quality of the learning program for children.****We believe GMA7 MUST be retained to ensure minimum standards of Human Resource Management practice.** |
| GMA7A | Retain | **GMA7A Safety checking****Criteria**Before a person is employed or engaged as a children's worker, as defined in the Children's Act 2014, a safety check as required by that Act must be completed.A detailed record of each component of the safety check must be kept, and the date on which each step was taken must be recorded, including the date of the risk assessment required to be completed after all relevant information is obtained.These records must be kept by, or available to, the service provider as long as the person is employed or engaged.Every children’s worker must be safety checked every 3 years. Safety checks may be carried out by the employer or another person or organisation acting on their behalf.Documentation required1. A written procedure for safety checking all children’s workers before employment or engagement of the worker commences that meets the safety checking requirements of the Children's Act 2014.
2. A record of all safety checks and the results.
 |  | **Agree** |
| GMA8 | Amend GMA8 | **GMA8 Annual plan****Criteria**An annual plan guides the service's operation.**Documentation required**An annual plan identifying 'who', 'what', and 'when' in relation to key tasks the service intends to undertake each year, and how key tasks will have regard to the Statement of National Education and Learning Priorities (NELP). | An annual plan guides the service’s operation. Note: this criterion only applies in respect of the Secretary’s assessment of probationary applications where the applicant does not hold a current licence and applications to amend a licence where the different legal entity does not hold a current licence. Proposed documentation required: An annual plan identifying ‘who’, ‘what’, and ‘when’ in relation to key tasks the service intends to undertake each year. | 1. **Does the new wording make it clear that the annual plan requirement only applies to new or probationary applicants?**

**We strongly disagree that this criterion should apply only to new or probationary applicants. It should apply to all services as it supports sharing of information and plans with staff – sharing the direction and what might be required of them too.**1. **Do you agree this change reduces unnecessary compliance for established services that already hold a licence?**

**No not at all. All services should be required to have an annual plan – schools are required to have a strategic plan, so why shouldn’t ECE services?!**1. **Is it clear what kind of information should be included in the annual plan (i.e. who, what, when)?**

**No.**1. **Do you think this change still helps manage risks related to new providers entering the sector?**

**No. All it does is further lower the standards of existing services and further reduce transparency around their operations. Risks related to new providers are substantial a require a systems change to mitigate them, not simply the requirement to have an annual plan.** |
| GMA9 | AmendNote: the Discussion doc ref GMA10 but we think that perhaps it’s a typo | **GMA9 Annual budget****Criteria**An annual budget guides financial expenditure.**Documentation required**An annual budget setting out the service’s estimated revenue and expenses for the year. The budget includes at least:* staffing costs, including leave entitlements
* professional development costs
* equipment and material costs for the ongoing purchase of new equipment and consumable materials and
* provision for operational costs (such as electricity, telephone, food purchases and other day-to-day items) and maintenance of the premises as appropriate.
 | An annual budget guides financial expenditure. Note: this criterion only applies in respect of the Secretary’s assessment of probationary applications where the applicant does not hold a current licence and applications to amend a licence where the different legal entity does not hold a current licence. Proposed documentation required: An annual budget setting out the service’s estimated revenue and expenses for the year. The budget includes at least: • staffing costs, including leave entitlements • professional development costs • equipment and material costs for the ongoing purchase of new equipment and consumable materials and • provision for operational costs (such as electricity, telephone, food purchases and other day-to-day items) and maintenance of the premises as appropriate. | 1. **Does the new wording make it clear that the annual budget requirement only applies to new or probationary licence applicants?**

**We strongly disagree that this criterion should apply only to new or probationary applicants. It should apply to all services as it supports effective financial management of services that receive a significant amount of public funding to support their operation.**1. **Do you agree this change reduces unnecessary paperwork for services that already hold a licence?**

**Definitely not. All services should be accountable for the funding they receive, including public funding and funds received through fees and fundraising, and be clear about how they intend to spend those funds.**1. **Is it clear what should be included in the annual budget (e.g. staffing, equipment, operating costs)?**

**Yes, that is why all services should be required to have an annual budget.**1. **Do you think requiring a budget helps show that new services are likely to be well-managed?**

**It is an ongoing requirement to demonstrate how services continue to well-managed – there is a risk of public money being misspent without a budget being developed. It also raises the question about how services will meet the requirement of GMA3:****• the amount and details of the expenditure of any**  **Ministry of Education funding received by the**  **service** |
| GMA10 | Merge GMA11 with GMA10 | **GMA10 Enrolment records****Criteria**Enrolment records are maintained for each child attending. Records are kept for at least 7 years.**Documentation required**Enrolment records for each child currently attending and for those who have attended in the previous 7 years.Records meet the requirements of the ECE funding handbook and include at least:* the child's full name, date of birth, and address
* the name and address of at least 1 parent
* details of how at least 1 parent (or someone nominated by them) can be contacted while the child attends the service
* the name of the medical practitioner (or medical centre) who should, if practicable, be consulted if the child is ill or injured
* details of any chronic illness/condition that the child has, and of any implications or actions to be followed in relation to that illness/condition
* the names of the people authorised by the parent to collect the child and
* any court orders affecting day-to-day care of, or contact with, the child.
 | See GMA11 |  |
| GMA11 | Merge GMA11 with GMA10 | **GMA11 Attendance records****Criteria**An attendance record is maintained that shows the times and dates of every child’s attendance at the service. Records are kept for at least 7 years.**Documentation required**An attendance record that meets the requirements outlined in the ECE funding handbook for children currently attending, and children who have attended in the previous 7 years. | Enrolment and attendance records are maintained for each child attending. Records are kept for at least 7 years. Proposed documentation required: Enrolment and attendance records for each child currently attending and for those who have attended in the previous 7 years. Records meet all the requirements of the ECE Funding Handbook. | 1. **Do you agree that merging GMA10 and GMA11 helps reduce duplication in the licensing criteria?**

**Possibly**1. **Is it clear that enrolment and attendance records must be kept for at least 7 years?**

**Yes**1. **Does this change make it easier to understand what records are required and for how long?**

**No**1. **Do you think this change makes compliance simpler without removing important expectations?**

**We are not sure that it will. Enrolment and attendance are different, and so merging them might make things less clear about what’s required, which could lead to confusion or gaps in practice** |
| GMA12 | Retain | **GMA12 Availability of documentation****Criteria**Required documentation is made available as appropriate to parents and Government officials having right of entry to the service under Section 626 of the Education and Training Act 2020.[Education and Training Act 2020, Section 626 – New Zealand Legislation](https://legislation.govt.nz/act/public/2020/0038/latest/LMS239284.html) |  | **Agree** |