

## Capacity and Participation

### 1. Statement

NBCA supports the rights of all children to participate fully in early childhood education and care by creating inclusive environments and practices. This policy outlines how we work in partnership with families and support teams to identify barriers to participation and implement individualised Capacity and Participation Plans that foster each child's knowledge, strengths, ideas, culture, and abilities.

### 2. Definitions

"Nominated Supervisor" means the person(s) responsible for the day-to-day management of an approved service.

"Responsible Person" means a person who has been placed in day-to-day charge of the service in accordance with the Education and Care Services National Regulations.

"Support team" means the people contributing to a child's wellbeing and development. This may include family members, NBCA staff, allied health professionals, case workers, or external agencies and other relevant parties.

"The service" means the NBCA centre the child is enrolled/enrolling in.

"Unjustifiable hardship" means a situation where, after considering all relevant circumstances, it would be unreasonable to require the service to make a particular adjustment or accommodation. Factors considered include the benefit to the child, the service's financial and staffing capacity, the availability of external support, and the potential impact on others within the service environment.

### 3. Capacity and Participation Plans

- i. A Capacity and Participation Plan (CAPP) is an individualised plan developed by the Nominated Supervisor or Responsible Person in collaboration with the child's family and, where appropriate, the child and/or members of their support team. The plan is informed by family and educator/teacher observations, strategies previously trialled (if applicable), and any relevant assessments or reports. Where possible, the child will be meaningfully involved in the planning process in age-appropriate ways.
- ii. The following is a non-exhaustive list of situations where the development of a CAPP is recommended:
  - a. The child consistently displays behavioural, emotional, sensory, communication, or social patterns that impact their full participation in the service and they would benefit from tailored participation strategies;
  - b. The child has a formal diagnosis, is undergoing assessment, or there is a reasonable belief that a disability, developmental delay, or neurodivergence may be present, and this is likely to affect their capacity to participate fully in the service without intervention;



- c. The child is receiving or being considered for external support or funding, including but not limited to the Inclusion Support Program, Children's Services Program, or the 3-Year-Old Initiative;
    - d. The family, educators/teachers working directly with the child, Nominated Supervisor or Responsible Person has requested a CAPP or shared ongoing concerns or observations suggesting that a coordinated and consistent approach would benefit the child.
  - iii. A CAPP supports the child's full participation in the service through:
    - a. Developing a shared understanding between the family and service about the child's preferences, communication styles, and support needs;
    - b. Identifying and implementing consistent strategies and individualised adjustments;
    - c. Creating a supportive environment for learning and engagement;
    - d. Supporting access to external services or funding where appropriate.
  - iv. A CAPP includes:
    - a. Contact details for the support team;
    - b. Summary of the child's strengths, interests, and family context;
    - c. Identified behaviours or barriers, triggers, and support strategies;
    - d. Preferred activities, environmental adjustments and supports;
    - e. Participation goals and a response plan for escalated scenarios;
    - f. Observations from staff working directly with the child;
    - g. Authorisations from the parent/guardian(s) for the service to share information with the support team, to enable consistent and coordinated implementation across the support team.
  - v. Educators/teachers will:
    - a. Raise concerns with the Nominated Supervisor or Responsible Person where additional support may be needed for a child;
    - b. Observe and document behaviours and engagement patterns that may contribute to the development of a CAPP;
    - c. Be briefed on the contents of CAPPs and supported to implement them effectively;
    - d. Use agreed strategies consistently.
    - e. Participate in the review and ongoing refinement of CAPPs through regular reflection and collaboration.
  - vi. The development of a CAPP is contingent on meaningful collaboration with the child's family. Where the family does not wish to participate in this process, the service will continue to provide inclusive education and care in line with best practice. However, the absence of a CAPP may limit the service's capacity to implement specific adjustments, access external supports or funding, and maintain consistency across environments.



- vii. Where a child's behaviour presents a demonstrated risk to themselves, others, or the service environment, and the service does not have access to the information, collaboration, or resources needed to implement appropriate adjustments, it may be at risk of experiencing unjustifiable hardship. In these circumstances, the service will seek to work constructively with the family and, where needed, consult external professionals or regulatory authorities. Risk mitigation strategies may be implemented to uphold the service's duty of care, while continuing to support the child's participation wherever reasonably possible.
- viii. Where a child has coexisting medical conditions or complex health needs that may impact their participation in the service, a Medical Management Plan may also be required alongside the CAPP to ensure appropriate support and risk management – see [Medical Conditions](#) policy.
- ix. CAPPs will be reviewed at least annually, or more frequently if the child's needs or circumstances change, and/or in response to feedback.

<b>EFFECTIVE DATE</b>	16 June 2025	<b>LAST REVIEWED</b>	May 2025
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## NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
3.2.1	Inclusive environment	Outdoor and indoor spaces are organised and adapted to support every child's participation and to engage every child in quality experiences in both built and natural environments.
3.2.2	Resources support play-based learning	Resources, materials and equipment allow for multiple uses, are sufficient in number, and enable every child to engage in play-based learning.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.



# Policies

5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program.

## EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups
157	Access for parents

