# Staff acknowledgement of consent

## Family Day Care

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| Please complete this consent form if you are employed in the management/coordination unit of a Family Day Care service. The form **does not** need to be completed by home-based Family Day Care educators.  |

Through the 2024 Early Childhood Education and Care Services Census (the Census) the Department of Education (the department) asks your service to provide information on your employment status, qualifications and experience as well as some of your *personal information* such as name, Indigenous status and age. The provision of your *personal information* is voluntary.

This service is seeking your consent to provide your ***personal information in Section one of the Staff Details Census form*** to the department through the Census.

Information collected in the Census will be used for planning and program development, research and monitoring outcomes of early childhood initiatives such as the Preschool Reform Agreement and the implementation of the Education and Care Services National Law.

Data collected will be managed in accordance with the requirements imposed on the department under legislation, including the *Information Privacy Act 2009*. The information will be stored securely, only accessed by authorised staff and will only be used and disclosed where authorised or required by law. Identifying information about you will not be publicly accessible.

Only de-identified information obtained from the survey may be published publicly by the department, or shared with other government agencies such as the Australian Bureau of Statistics.

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| By signing below, you indicate that you agree to the terms of use of your personal information as set out above.I AGREE/ DO NOT AGREE TO PROVIDE PERSONAL INFORMATION AS INDICATED ABOVE |

*NAME………………………….…..........*

*SIGNATURE…………………………..*

*DATE …….….……..*

**Note:** This form is for use by the service. Completion of these forms assists accurate data entry into the Census by your service.

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| Please complete this acknowledgement of consent form and return it to the Director of the service to assist in completion of the Census. You may also wish to fill out your personal and other details in the attached form to assist your service with accurate data entry into the Census collection. |

Staff details Census form

***Section 1 of this form collects defined as “Personal Information”. It is extremely important to the department for planning purposes. However, if you do not wish for this information to be sent to the department then a response of “Not stated” will be recorded. Also, your initials will be recorded instead of your name.***

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| ***SECTION 1 - PERSONAL INFORMATION***  |
| **1.1** Please enter the staff member’s name. *(For quality assurance purposes only).* | First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **1.2** Please indicate the gender of the staff member. | * Male
* Female
* I use a different term
* Not stated
 |
| **1.3** Is this staff member of **Aboriginal and/or Torres Strait Islander** origin?  | * No
* Aboriginal
* Torres Strait Islander
* Aboriginal and Torres Strait Islander
* Not stated
 |
| **1.4** Is this staff member from a **non-English speaking** background? *If a staff member speaks a language other than English at home on a regular basis select yes.* | * Yes
* No
* Not stated
 |
| **1.5** What is the staff member’s age group?  | * 15-24
* 25-34
* 35-44
* 45-54
* 55+
* Not stated
 |
| **1.6** During the week beginning **Monday 29 July 2024**, what was the main role performed by this staff member?*If this person worked in more than one position, please record the position in which they worked the most hours* | * Administration assistant
* Co-ordinator
* Manager / Senior co-ordinator
* Other worker
* Not stated
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| ***SECTION 2: WORKFORCE DETAILS*** |
| **2.1** What is this staff member's employment status? | * Paid full-time
* Paid part-time
* Paid casual
* Volunteer / unpaid worker
 |
| **2.2** How many hours did this staff member work during the week beginning **Monday 29 July 2024**? | \_\_\_\_\_\_ Hours |
| **2.3** What type of work did the staff member perform during the week beginning **Monday 29 July 2024**? | * Primary contact with children
* Other child contact
* Management / admin work with no child contact
* Other work with no child contact
 |
| **2.4 How** many years has this staff member worked in the Early Childhood Education and Care sector?  | \_\_\_\_\_\_Years  |
| **2.5** How many years has this staff member worked at this service? | \_\_\_\_\_\_ Years  |
| **Qualifications** |
| **3.1** Does this staff member hold an **Early Childhood Education and Care (ECEC)** related qualification? | * Yes
* No **(go to 3.6)**
 |
| **3.2** What is the field of **highest ECEC related qualification** **held** by this staff member? | * Teaching (early childhood related)
* Teaching (primary)
* Teaching (secondary)
* Teaching (other)
* Other early childhood related, inc. child care and children’s services
 |
| **3.3** What is this staff member’s **highest level of completed ECEC** related qualification? | * Postgraduate degree
* Graduate diploma or graduate certificate level
* Bachelor degree (Honours)
* Bachelor degree pass (4 years or equivalent)
* Bachelor degree pass (3 years or equivalent)
* Diploma (3 year equivalent obtained prior to 1995)
* Advanced diploma
* Diploma
* Certificate level 3 or 4
* Certificate level 1 or 2
* Other certificate
 |
| **3.4** Is this staff member currently registered with the Queensland College of Teachers (QCT)? | * Yes – full QCT registration
* Yes - provisional QCT registration
* No
 |
| If the field of highest ECEC related qualification held by this staff member is “Teaching (Primary)”, “Teaching (secondary)” or “Teaching (other)” 🡪 **GO TO 3.5****Otherwise GO TO 3.6** |
| **3.5** Does this staff member also hold an ECEC related  Certificate III or higher? | * Yes
* No
* Not applicable
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| **3.6** Is this staff member currently studying an **Early Childhood Education and Care (ECEC)** related qualification? | * Yes
* No **(go to 3.10)**
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| **3.7** What **field of ECEC** is this staff member currently studying? *If more than one, please select the field of study closest to the top of the list.* | * Teaching (early childhood related)
* Other early childhood related, inc. child care and children’s services
 |
| **3.8** What level of **ECEC qualification** is this staff member currently studying to attain? | * Postgraduate degree
* Graduate diploma or graduate certificate level
* Bachelor degree (Honours)
* Bachelor degree pass (4 years or equivalent)
* Bachelor degree pass (3 years or equivalent)
* Advanced diploma
* Diploma
* Certificate level 3 or 4
* Certificate level 1 or 2
* Other certificate
 |
| **3.9** For the qualification this staff member is currently studying, what is the expected **year** of completion for their final unit of study? |  \_\_\_\_\_\_\_\_\_\_\_\_ |
| **3.10** Has this staff member undertaken any **in-service training or professional development** within the previous 12 months? *Other than any qualifications they may currently be studying.* | * Yes
* No
 |
| **3.11 What** was the focus of any **in-service training or professional development** completedwithin the previous 12 months? ( select multiple focus areas if applicable) **Do not include First Aid as part of the in-service training** | * National Quality Framework/National Quality Standards
* Educational program and practice
* Children's physical health and safety
* Children’s social, emotional development and well-being
* Family and community partnerships
* Leadership/management
* Pedagogical leadership
* Supporting children with disability
* Cultural capability - Aboriginal and Torres Strait Islander families
* Other, please specify
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