

NSW Government Response
to the
Productivity Commission's Draft Research Report
on the
Early Childhood Development Workforce



September 2011

Introduction

Investing in early childhood education and care services, and ensuring access to affordable and quality services, is one of the best ways of improving life outcomes for children. Ensuring that the early childhood workforce has the appropriate mix of knowledge and skills to deliver these services is essential to achieving this.

The NSW Government recognises that to effectively implement the nationally agreed early childhood reforms, significant effort is required to support and build capacity across the Early Childhood Development (ECD) workforce. The NSW Government therefore welcomes the opportunity to respond to the Productivity Commission's draft research report.

In addition to responding to the report's recommendations, the NSW Government also wishes to use this opportunity to provide the Commission with further information that may assist it to have a deeper understanding of the child health workforce, services provided and scope of practice of the multidisciplinary workforce within NSW. This information may assist the Commission to reframe some of its key findings and recommendations in relation to the child health workforce. This information is provided in Appendix 1.

Response to the Draft Recommendations

Chapter 3 – Government involvement in the early childhood development sector

Draft Recommendation 3.1

To assist parents' decision making with respect to their choice of early childhood education and care (ECEC) services for their children, governments should require ECEC regulators to publish all relevant information on service quality. Published information should be comprehensive, comparable across services, clearly explained and easy to access.

Supported

The *Education and Care Services National Law Act 2010* and the draft National Regulations that implement the National Partnership Agreement on the National Quality Agenda for Early Childhood Education and Care contain requirements that the regulatory authorities and the Australian Children's Education and Care Quality Authority must, or may (depending on the subject matter), publish information about: rating levels; conditions to which a service's approval is subject; and specified details of enforcement actions taken against a service.

Draft Recommendation 3.2

To achieve the goals of the Council of Australian Government's ECEC reforms without disadvantaging low-income families through the anticipated increase in fees, government will need to ensure that there is adequate financial support for such families.

Supported

The NSW Government has recently announced a review of early childhood education funding which will specifically consider the provision of assistance to children from low income households and families in disadvantaged circumstances.

However, the provision of additional assistance for low-income families using approved child care services (long day care, family day care and outside school hours care) is a matter for the Commonwealth Government.

Draft Recommendation 3.3

ECEC regulators should publish the number of service waivers granted, to whom they have been granted, and whether they are permanent or temporary.

Supported

Under the National Applied Law for the National Quality Framework, ECEC providers will have an obligation to make information about waivers and other prescribed information, including the quality rating and service approval, clearly visible to anyone who enters the service. Information about waivers will therefore be accessible to parents at the local level.

Noting that there may be funding and other implications arising from the need to change the National Applied Law and supporting IT systems, the proposal that waiver information is published by regulators is broadly supported in the interests of greater information about the regulation of the sector.

Draft Recommendation 3.4

ECEC regulators should provide for ongoing consultation with stakeholders and timely dissemination of best practice. Governments should ensure that all ECEC regulators initiate robust evaluative processes so that regulatory impacts are minimised.

Supported

Consultation with stakeholders about the implementation of the National Quality Framework is already a priority for the NSW Department of Education and Communities.

Draft Recommendation 3.5

Where voluntary committees currently manage ECEC services, governments should ensure that professional management support (such as cluster management or other shared services) is readily available to assist with management and leadership.

Supported

The NSW Government agrees that cluster management or other shared service models have the potential to achieve many benefits for stand-alone ECEC services.

Draft Recommendation 3.6

In implementing the National Quality Standard, governments should ensure adequate resourcing for regulators to enable appropriate training of their staff in the new regulatory arrangements and their effective implementation.

Supported

The NSW Government considers that the quantum of Commonwealth funding to States and Territories should be reviewed as part of the 2014 review of the National Partnership Agreement on the National Quality Agenda for Early Childhood Education and Care, to ensure adequate resourcing is available.

Chapter 5 – The preschool and long day care workforce

Draft Recommendation 5.1

To assist in the transition to the National Partnership Agreement on Early Childhood Education, governments should permit:

- any currently employed 3 year qualified early childhood teacher to deliver the preschool program; and
- any 3 year qualified teachers returning to or entering the workforce to deliver the preschool program, provided that a plan is in place for them to upgrade their qualification to the equivalent of a 4 year degree.

Supported

The lead time to train the required workforce of four year qualified early childhood teachers extends beyond the five year life of the National Partnership on Early Childhood Education, and this recommendation recognises that there are greater benefits to children in retaining three year qualified teachers than in losing them from the early childhood education system.

NSW has in place high regulatory standards relating to the employment of three year qualified early childhood teachers in centre-based and mobile services.

Chapter 7 – The outside school hours care and occasional care workforces

Draft Recommendation 7.1

Given the focus of outside school hours care on non-cognitive development through constructive play and socialisation, governments should not impose additional mandatory qualification requirements on outside school hours care workers.

Supported

NSW currently has no qualification requirements for out of school hours care services. These services will be licensed for the first time under the National Quality Framework. The introduction of a minimum qualification for out of school hours care supervisors under this Framework is supported. However, the introduction of a minimum qualification for all out of school hours care staff members is not supported,

given the expectations of parents of these services, and the wide age range of children using them.

Draft Recommendation 7.2

Given that children typically spend limited time in occasional care, occasional care has relatively limited scope to contribute to cognitive development. As a consequence, governments should not impose additional mandatory qualification requirements on occasional care workers.

Supported

As occasional care services are currently out of scope of the National Quality Framework, they will continue to be regulated under the *Children and Young Persons (Care and Protection) Act 1998* and the *Children's Services Regulation 2004*. NSW has no plans to impose additional mandatory qualification requirements on occasional care workers under these arrangements.

Chapter 8 – The early childhood education and care workforce for children with additional needs

Draft Recommendation 8.1

To ensure that children with additional needs benefit fully from the COAG ECEC reforms, governments should modify the structure and operation of inclusion programs and reassess funding levels so that such programs:

- provide sufficient funding to support the inclusion of all children with additional needs;
- cover the full cost of employing inclusion support workers at market wages;
- provide funding for an inclusion support worker to enable children with high support needs to attend preschool for 15 hours per week in the year before school;
- have simple and streamlined application processes, which do not place an undue burden on ECEC services;
- make funding available to ECEC services in a regular and timely manner; and
- provide multiple-year funding, requiring re-application or adjustment only where there is significant change in the level of need of a particular child or cohort of children.

Partly Supported

NSW supports the greater participation of children with additional needs in early childhood education programs. At the same time, the financial implications of the first three parts of this recommendation are potentially significant for government. It will be critical to seek sustainable national resourcing.

The NSW Government has recently announced an independent review of early childhood funding which will specifically consider the provision of assistance to children with special and additional support needs. The review will report to the NSW Government by the end of 2011.

NSW agrees that there is scope to streamline and simplify arrangements to access funding for children with additional needs. A specific objective of the NSW review of early childhood funding is to achieve funding arrangements that are transparent, equitable, financially viable and sustainable, deliver value for money, and are efficient and effective in meeting the NSW Government's objectives.

Draft Recommendation 8.2

To provide inclusion support staff with the necessary skills to ensure children with additional needs benefit fully from the COAG ECEC reforms, governments should provide additional, priority funding to cover both the cost of relevant in-service training in child development, disability and ECEC, and the cost of replacement staff.

Partly Supported

Enhancing learning and development opportunities for inclusion support workers is an effective means of improving the experiences of children in early childhood settings. At the same time, the financial implications of this recommendation are potentially significant for government.

NSW supports the approach suggested in the draft report; that is, that the Commonwealth Government could expand the role of Professional Coordinator agencies in each jurisdiction to enable them to take on this role. This should be recognised as a priority in national resourcing. NSW would seek to ensure that any indexation is consistent with the Government wages policy, which requires wage increases greater than 2.5 per cent to be funded by employee related cost savings.

Draft Recommendation 8.3

Children with additional needs require the services of allied health and early intervention professionals to benefit fully from the COAG ECEC reforms. To enable early childhood development services for children with additional needs to sustain an appropriately skilled workforce of allied health and early intervention professionals, governments should ensure that funding for such services:

- is based on relevant market wages and conditions for equivalent positions;
- takes into account the skill sets required to perform the purchased services;
- is indexed to market wage growth within the relevant industry sector; and
- includes provision for professional development and support.

Partly Supported

As noted at Draft Recommendation 8.1, NSW supports the greater participation of children with additional needs in early childhood education programs. However, the financial implications of this recommendation are potentially significant for governments.

Funding principles should focus as much as possible on resourcing 'the child'. State governments historically have not engaged in direct wage subsidy outside of public employees. This is a matter for the Commonwealth. That said, if national sustainable funding agreements are secured, the resourcing model and indexation could take account of wages 'inputs'.

Chapter 9 – The early childhood education and care workforce in rural and remote areas

Draft Recommendation 9.1

To meet the workforce goals of the COAG ECEC reforms, rural and remote areas will need to attract and retain more workers. Governments should assess the cost effectiveness of existing incentives aimed at increasing recruitment and retention in rural and remote areas. These incentives should be compared against alternative strategies such as:

- targeted recruitment of workers from rural and remote backgrounds;
- the delivery of training in rural and remote locations; and
- support for pre-service teachers to experience working life in rural and remote areas.

Supported

Measures to attract and retain qualified early childhood workers to rural and remote areas play an important part in improving children's outcomes.

The NSW Government is working with the Commonwealth and other States and Territories to develop a national Early Years Workforce Strategy to strengthen the early childhood workforce, including workforce numbers in rural and remote areas.

Draft Recommendation 9.2

To attract and retain sufficient staff to achieve the goals of the COAG ECEC reforms for children in remote areas, governments should provide all ECEC workers in remote communities with timely access to appropriate housing at reasonable cost, including housing for students undertaking placement.

Not Supported

In some cases, rural and remote areas experience difficulties in attracting a qualified workforce across a number of fields and professions. There may be scope to consider broader regional specific initiatives to attract workers across a number of fields, including some specific teaching areas. Such initiatives could incorporate incentives through tax policy or housing subsidies that make working in these areas more attractive. This is a policy issue for the Commonwealth.

NSW relies on a 'mixed model' of subsidised and regulated ECEC services. A very small number are publicly owned. This recommendation would be most relevant to States where most provision is publicly owned and operated.

Chapter 10 – Training the early childhood education and care workforce

Draft Recommendation 10.1

The Community Services and Health Industry Skills Council should consider specifying the minimum periods of training and practicum associated with children's services qualifications. These minimum periods should be decided in consultation with ECEC providers.

Partly Supported

NSW agrees that a minimum period of training and practicum is a key component of developing qualified workers who are well prepared for employment in the early childhood sector. However, this recommendation has the potential to raise issues for TAFE NSW Institutes should the mandated duration exceed the current levels in place at TAFE Institutes.

TAFE's recommended course nominal hours and hours for work placement/practicum have been endorsed by industry as a result of consultation with a broad ranging industry reference group. This has ensured that course offerings reflect industry requirements and expectations. Universities have also been consulted to maximise credit transfer arrangements.

The availability of work placements is a key consideration in making decisions about the delivery of qualifications in children's services. In NSW, the Professional Experience Council, a consortium of stakeholders in early childhood work placement/practicum, including representatives from industry, peak bodies, registered training organisations and universities, has been established to address these issues.

Draft Recommendation 10.2

Governments should facilitate access to VET by developing ECEC training programs targeted at contact workers from culturally and linguistically diverse backgrounds (including English language programs delivered in conjunction with ECEC training).

Supported

Action is already underway in NSW to facilitate access to vocational education and training for early childhood educators from culturally and linguistically diverse backgrounds.

The Department of Education and Communities provides subsidised access to language, literacy and numeracy units for early childhood workers from culturally and linguistically diverse backgrounds who are seeking to attain vocational ECEC qualifications to meet the requirements of the National Quality Framework.

It is also anticipated that this recommendation will be addressed through the national Early Years Workforce Strategy.

Draft Recommendation 10.3

Where centre-based training is difficult to facilitate, registered training organisations should offer in-home practical training and assessment for family day care workers as an alternative to centre-based training and assessment.

Partly Supported

This recommendation would enable less disruption to a family day care contact worker's business, and support continuity of care for children. However, the following issues need to be considered in the context of this draft recommendation, including:

- legal liability issues when Assessors are assessing at the family day care worker's home;
- suitability of the family day care worker's home environment to meeting the training package requirements for critical aspects of assessment; and
- whether completion of workplace/practicum requirements in a family day care environment only may limit a family day care worker's career options and lead to a subsequent lack of experience in centre-based service.

Draft Recommendation 10.4

The requirement for vocational education and training (VET) assessors to demonstrate knowledge of current ECEC practices should be enforced by VET regulators. The Department of Education, Employment and Workplace Relations should design and implement a program of professional development for VET assessors working in ECEC to identify and address gaps in their knowledge of current practice.

Supported

Maintaining VET assessors' currency in early childhood practices is critical to ensuring that assessors make informed judgments of students they are assessing.

TAFE NSW already supports its trainers and assessors to maintain currency in early childhood education and care practices through a range of state-wide and institute-based professional development, conferences and industry updates.

Draft Recommendation 10.5

Government should provide the Australian Skills Quality Authority (ASQA) with sufficient resources to establish and maintain processes and staff to ensure ECEC training is of a consistently acceptable standard. The AQSA should:

- apply more robust conditions for the initial registration of ECEC training providers;
- establish a rigorous and targeted system of audits and penalties to ensure that any registered training organisation that does not consistently produce graduates of acceptable quality is no longer able to provide ECEC training;
- externally validate the competencies of a targeted sample of VET graduates to ensure graduate quality is maintained; and
- consider relaxing its focus on ongoing registration in the future, as poor quality training providers are both denied entry and progressively removed in the short to medium term.

Partly Supported

In July 2011, ASQA became the regulatory body for the VET sector in NSW. ASQA was established to provide greater national consistency and more attention to the way providers are registered and monitored across the VET system. The new national system has a strong legislative base and will enable more consistent application of sanctions to those providers who do not meet standards and requirements.

NSW supports the intent of this recommendation, but is of the view that ASQA has sufficient powers and resources under the *Standards for NVR Registered Training Organisations* to ensure nationally consistent, high quality training and assessment services for the clients of Australia's VET system.

NSW is also concerned about the potential for 'mission creep' envisaged under the third part of this recommendation, which would enable ASQA to externally validate the competencies of a targeted sample of ECEC graduates once they have completed their VET courses and are in employment. This would appear to involve more rigorous assessment standards being applied to ECEC graduates than graduates of other VET courses. The justification for this is unclear.

Draft Recommendation 10.6

The Australian Skills Quality Authority (ASQA) should be subject to a performance audit within its first two years of operation. This performance audit should:

- focus on the ability of ASQA to ensure that ECEC workers receive quality vocational education and training;
- review the effectiveness of ASQA in enforcing the minimum conditions and standards for initial and ongoing registration; and
- consider the adequacy of the funding allocated to ASQA.

Partly Supported

It is appropriate to evaluate ASQA on a whole-of-business basis, rather than focus on its performance in relation to particular industry sectors.

Draft Recommendation 10.7

ECEC qualifications should be regarded as 'high risk' by ASQA and audited accordingly. Organisations found to consistently provide high quality ECEC training should be subject to progressively less regulatory intervention over time.

Supported

This recommendation is primarily a matter for ASQA. However, given the number of submissions to the Commission that raised concerns about the quality of some ECEC training, there would seem to be merit in ASQA paying particular attention to ECEC qualifications and providers.

A regulatory approach which provides some 'earned autonomy' for high quality training providers should also be considered further.

Draft Recommendation 10.8

Governments should ensure that all workers in ECEC services have access to professional development and support programs. Priority should be given to enabling workers to participate in professional development that will assist them to:

- implement the National Quality Standard and the Early Years Learning Framework;
- include children with disabilities and children from culturally and linguistically diverse backgrounds in ECEC services;
- enhance the leadership and governance of ECEC services; and
- work effectively in integrated ECEC services.

Partly Supported

Governments have a role to play in assisting ECEC services with accessing training and professional development, but it is suggested that this issue (including associated costs) is not simply a matter for governments. ECEC providers and individuals also have a role to play.

Significant training on the National Quality Standard and the Early Years Learning Framework is already available through the Professional Support Coordinator Agencies in each jurisdiction. Over the past year, the NSW Department of Education and Communities has also contributed additional funding to the NSW Professional Support Coordinator to ensure that it's training and professional development is available to community preschools.

It is anticipated that the national Early Years Workforce Strategy will also recognise the importance of the areas outlined in this recommendation.

Draft Recommendation 10.9

While there is no case for excluding teachers working in ECEC settings from existing teacher registration requirements in all jurisdictions, governments should not endorse or contribute funding to a registration scheme for non-teacher ECEC workers.

Supported

Chapter 11 – Planning the ECEC workforce

Draft Recommendation 11.1

The Early Childhood Development Working Group should ensure that the Early Years Development Working Strategy:

- contains clearly identified objectives;
- uses sound data on the current workforce and clear, robust assumptions about future policies to make projections of expected ECEC workforce demand and supply;
- employs the most cost-effective policy instrument (that also takes into account non financial factors) to address supply limitations; and
- takes into account both direct and community-wide effects in assessing cost effectiveness.

Supported

The NSW Government is working with the Commonwealth and other States and Territories to develop a national Early Years Workforce Strategy to strengthen the early childhood workforce and tackle workforce issues.

Draft Recommendation 11.2

To support the development, monitoring and evaluation of the Early Years Development Workforce Strategy, governments could usefully consider:

- improving access to the National Census of Population and Housing;
- incorporating ECEC service costs in the National Early Childhood Education and Care Workforce Census; and
- expanding the Childhood Education and Care Survey collection.

Supported

Improved collection, sharing and publication of data in relation the early childhood sector will assist in monitoring and evaluating requirements under the national Early Years Workforce Strategy. The same is true in relation to monitoring, evaluation and reporting requirements under the National Partnership Agreement on Early Childhood Education and the National Partnership on the National Quality Agenda.

There should be better sharing of data, especially the national collections, rather than forcing providers to submit data separately to the Commonwealth and to other States and Territories.

Chapter 12 – Child health workforce

Draft Recommendation 12.1

To ensure the cost effectiveness of child health services and better inform consideration of future child health workforce needs, state and territory governments should seek to improve the evidence base for child health services, in particular to determine the optimal number and timing of child health checks.

Supported

Draft Recommendation 12.2

Scholarships for post graduate study in child health nursing may encourage a small number of additional nurses to obtain qualifications in child health or to practice in areas of high demand. The cost effectiveness of scholarships as a method of achieving this goal should be assessed by governments before any expansion of scholarship programs.

Supported

Careful consideration of the benefit of scholarships to recruitment is appropriate.

Draft Recommendation 12.3

In order to reduce unnecessary obstacles to attracting new child health nurses, state and territory governments should not require child health nurses to have qualifications in midwifery in addition to their qualification in nursing and in child health.

Supported

NSW does not require child health nurses to have qualifications in midwifery.

Draft Recommendation 12.4

In areas where children are unlikely to have access to a child health nurse, other health professionals, such as remote area nurses and Aboriginal health workers, should receive training in child health.

Not Supported

Providing existing health workers with short course training in child health is problematic because it would create a service for these children and their families that is not of equal standard to that provided elsewhere in the state.

The recommendation appears to stem from the notion of universal child health services being solely about child health checks, which in NSW is incorrect. This recommendation also seems to indicate a lack of understanding about the skills and capabilities required to undertake, analyse and determine the appropriate course of action arising from the findings of a child health check while continuing to work in partnership with families.

Consideration should be given to developing/using innovative models of clinical education and support of health professionals in remote areas to support retention and recruitment of qualified staff, along with mechanisms to improve professional networks and adequate transport budgets to service clients in remote areas and to attend training.

Chapter 13 – Workforce for family support services

Draft Recommendation 13.1

In order to ensure that family support services can sustain their workforces, and as wages are a major factor in the successful recruitment and retention of staff, government funding for family support programs should:

- be based on relevant market wages and conditions for equivalent positions;
- take into account the skill sets required to perform the purchased services; and
- be indexed appropriately to market wage growth within the relevant industry sector.

Supported

The wages paid to employees in non-government family support services are determined by their employing bodies under State and Federal awards covering the

social, community, and disability services industry. NSW does not seek to determine or influence the wages paid to family support services staff, but expects staff to be appropriately trained and remunerated for the work that they do.

It is noted, however, that a driver for this recommendation is the discussion of parity between government and not-for-profit sectors, which notes that:

“there is a considerable difference between the wages of family support staff employed by government and the wages of those employed by non government organisations (NGOs). (Draft report, p246).”

The differences between non-government and government employee wages are established solely on the basis of ‘similar’ duties. A sufficiently rigorous analysis to establish that the comparator roles are of equal or comparable work value has not been presented.

While supporting the recommendation that funding should be based on relevant market wages and conditions for equivalent positions; and that it takes into account the skill sets required to perform the purchased services; NSW recognises that such equivalencies should not be based solely on a broad similarity of some aspects of positions.

The NSW Department of Family and Community Services (FACS) also funds a range of NGOs to deliver services on a contribution basis. This means that the costs of the service, including wages costs, are met through a combination of government funding, client contribution, in-kind contributions (for example through the use of volunteer labour), NGO contributions and productivity efficiencies on the part of the NGO and government to ensure that the taxpayer contribution to the service is maximised.

FACS funds disability services on the basis of outputs and results rather than inputs and therefore does not specify the skill sets required to deliver services. This would be a matter for the NGO to determine based on the requirements of the client group.

With regard to the indexation of wages, the NSW Government indexes funding with regard to the movement in wages and the Consumer Price Index (CPI). That indexation is supplemented by escalation provided through the Australian Government's contribution to programs under national funding agreements and the bilateral implementation plans supporting these agreements.

In NSW, indexation is capped at 2.5 per cent per annum on the whole of the funding. The government has indicated its intention to seek efficiencies in NGO service delivery where additional indexation is required. This approach is consistent with the government's wages policy, which requires wage increases greater than 2.5 per cent per annum be funded by employee related cost savings.

Draft Recommendation 13.2

In order to facilitate better workforce planning by services and the attraction and retention of staff, governments should increase the certainty and duration of funding for family support programs wherever possible.

Partly Supported

The NSW Government's 10 year plan for disability services in NSW, *Stronger Together*, has provided greater certainty of funding for family support programs by setting out a long term strategy for program enhancement and delivery.

In addition, the bulk of funding for family support services is administered through three-year service specifications. Unless this funding has been specifically designated as 'fixed-term' funding, FACS (Community Services) operates to the principle that the funding is 'renewable'. This means that service providers will continue to receive this funding provided that the service:

- continues to meet an identified need;
- is delivering the agreed outcomes;
- meets the terms and conditions of the Service Agreement and Service Specification; and
- operates effectively and efficiently.

Draft Recommendation 13.3

In order to obtain the greatest benefit from workers in the family support sector, governments should direct a larger share of funding for family support programs towards obtaining high-quality evidence about the effectiveness of different programs throughout longitudinal studies and robust program evaluations.

And

Draft Recommendation 13.4

In order to obtain better evidence on the effectiveness of family support programs delivered by volunteers and peers, governments should evaluate such programs on a wider scale, with a view to the expansion of such programs if they prove to be effective.

Supported

Relatively little is known about the most appropriate elements of effective programs. This makes them difficult to replicate, and the applicability of different models of family support programs is not well understood. The NSW Department of Family and Community Services is conducting a series of reviews of prevention and early intervention services with a view to strengthening the evidence base.

It should be noted that effectiveness of a program does not necessarily imply a necessity to expand that program if further roll out is ineffective. Funding increases for programs should be informed by evaluations that recommend the benefits of additional funding.

Chapter 14 – Workforce for Indigenous ECEC services

Draft Recommendation 14.1

To achieve the COAG ECEC reform goals, governments should:

- bring Indigenous focused ECEC services into the scope of the National Quality Standard; and
- have a structured plan with agreed targets, and allocate additional funds to ensure all Indigenous focused ECEC services achieve a rating of National Quality Standard or above within an agreed timeframe, without the need for waivers.

Partly Supported

This recommendation focuses on Indigenous children who currently attend Multifunction Aboriginal Children's Services (MACS), and children who will attend Aboriginal Child and Family Centers that are currently being established, which are excluded from the National Quality Standards. In NSW this represents only a small group of services. A significant number of Indigenous children in NSW already attend mainstream services that will be within the scope of the National Quality Framework from 1 January 2012.

This recommendation has potentially significant funding implications for governments. NSW does not agree that it is possible or appropriate for government in its regulatory capacity to 'ensure' that any service achieves a particular rating, as this recommendation proposes. A service's overall quality, and therefore its rating, is affected by many factors, not just the funding allocated by governments.

Draft Recommendation 14.2

ECEC services must meet cultural competency standards to receive National Quality Standard endorsement. The Australian Children's Education and Care Quality Authority (AECQA) should consult with relevant stakeholders to develop clear and effective Indigenous cultural competency guidelines for ECEC services with Indigenous children to receive this endorsement.

Supported

NSW supports the development by AECQA of clear and effective Indigenous cultural competency guidelines for ECEC services, as this would support services to improve this aspect of their service provision.

The NSW Department of Education and Communities already has an Aboriginal Education and Training Policy in place, and all early childhood teachers in the Department's preschools must comply with its requirements.

Draft Recommendation 14.3

To meet the goals of the Closing the Gap National Partnership Agreement on Indigenous Early Childhood Development and the COAG ECEC reforms, more workers, and more highly skilled workers, will be required to work in Indigenous focused services. To support service-level workforce planning and to provide for greater certainty to facilitate more effective attraction, retention and training of staff in Indigenous focused services, governments should:

- give priority to the provision of quality ECEC services for Indigenous children, without passing on extra costs to parents; and
- provide multiple year funding for Indigenous focused ECEC services.

Supported

Improving Indigenous children's access to quality early childhood programs is a priority for the NSW Government. This is reflected in the existing NSW funding arrangements for community preschools, where the highest 'per child' rates are payable for Indigenous children. This has significantly reduced daily fees for Indigenous children, which are well below the average fee. Participation rates have improved markedly since 'per child' funding was introduced.

Indigenous children also have priority access to the Department of Education and Communities' preschools. Eleven of these preschools are designated specifically for Indigenous children, and a further thirteen are located in schools that predominately serve an Indigenous community.

As part of the NSW Government's current review of early childhood funding, the provision of assistance to children of Aboriginal or Torres Strait Islander background will be specifically considered.

Draft Recommendation 14.4

As part of the broader Early Years Development Workforce Strategy agreed by COAG, governments should work together to develop a coordinated workforce strategy that builds on workforce plans in each jurisdiction, so that priority is given to placing suitably qualified staff in Indigenous focused services. This should include a specific plan to build the Indigenous ECEC workforce.

Supported

The development of a workforce that is skilled and qualified to work with diverse groups, including Indigenous children and their families, will be a priority for the national Early Years Workforce Strategy.

However, it should be recognised that there are limits on governments' capacity to 'place suitably qualified staff in Indigenous focused services'. Governments can provide financial incentives to encourage qualified staff to work in Indigenous focused services, but are not always the direct provider of ECEC services in Indigenous communities and therefore are not in direct control of staffing decisions.

Draft Recommendation 14.5

ECEC services should consider offering more flexible employment arrangements, such as access to additional leave and adjusted pay arrangements for legitimate absences, to attract and retain Indigenous staff.

Partly Supported

This recommendation is a matter for individual employers in the early childhood sector.

Draft Recommendation 14.6

VET and higher education institutions should apply student-centered design principles to the design and delivery of courses for Indigenous students. Sufficient resources must be provided to ensure Indigenous students are suitably supported throughout their training.

Supported

The intent of this recommendation is supported. TAFE NSW already has measures in place to support Indigenous students during their training. Most TAFE campuses have an Aboriginal Coordinator and many also have Aboriginal Support Officers that provide specialist advice on courses, enrolment, advice on financial assistance and information about literacy and numeracy programs. TAFE NSW offers courses that are culturally and educationally appropriate for Indigenous students. Where possible, Indigenous teachers present some of these courses, and in particular, the cultural content.

The Workforce Census provides some evidence that NSW's VET and higher education institutions are having some success in contributing to the overall numbers of Indigenous staff working in ECEC services. According to the Census, NSW has a total of 593 Indigenous staff working in long day care and preschools. The NSW preschool sector is achieving particularly good results, with 58.6% of Aboriginal staff holding a relevant ECEC qualification (Bachelor Degree, Diploma, or Certificate III and IV). This is well above the national average of 50.7% for this measure.

Draft Recommendation 14.7

To assist Indigenous students to prepare for study to qualify to work in ECEC settings, priority funding from governments for Certificate I and II training will be required, particularly for students in remote areas.

Not Supported

Given that the minimum qualification required under the National Quality Framework is a Certificate III, funding should be directed to this level of attainment. Low-level qualifications alone will neither assist the student in a long-term career nor meet rising ECEC quality standards.

In circumstances where individual students have particular additional learning needs, it is the role of the relevant training organisation to find a solution that meets the needs of that student.

The development of the national Early Years Workforce Strategy is an opportunity to consider the particular training needs of Indigenous students. As noted for Recommendation 14.6, TAFE NSW already has a number of support mechanisms in place to assist this group.

Draft Recommendation 14.8

To achieve the COAG ECEC reform goals, the Australian Government should make available additional funding for Indigenous Professional Support Units so that:

- general Indigenous cultural competency training can be provided to all staff without such competency working in mainstream ECEC services with Indigenous children;
- tailored professional development on Indigenous cultural competency can be provided to staff working in Indigenous focused ECEC services where there is demonstrated need; and
- the Units can provide sufficient personal development and support to Indigenous staff.

Supported

Chapter 15 – The integrated ECD services workforce

Draft Recommendation 15.1

Future ECD workforce censuses and surveys should identify integrated ECD services separately to facilitate analysis of the workforce and subsequent policy development.

Supported

Integrated early childhood development services are still at a relatively early stage of development in Australia, and there is a need to establish a stronger evidence base to better understand their impact on children's outcomes. The collection of data about these services and the people who work in them would assist future policy development and workforce development.

Draft Recommendation 15.2

The Community Services and Health Industry Skills Council should consider introducing VET qualifications:

- that focus on leading and managing integrated ECD services; and
- for contact workers at the Certificate IV or diploma level.

Not Supported

NSW considers that, in the current environment, the recruitment and retention of qualified staff to meet the requirements of the National Partnership Agreement on Early Childhood Education and the National Partnership Agreement on the National

Quality Agenda are a higher priority for workforce development than integrated service delivery.

Further, as integrated services are at a relatively early stage of development in Australia, it is considered that a stronger evidence base is required to better understand their effectiveness before specific VET qualifications are developed.

Draft Recommendation 15.3

The Professional Support Program should provide introductory professional development in integrated ECD services to ECEC staff working in such services. Consideration should be given to the provision of similar courses for managers of such services.

Supported

The NSW Department of Education and Communities is working with other jurisdictions on the development of a national Early Years Workforce Strategy. Measures to enhance training for staff working in integrated services, as proposed here, will be considered as part of the Strategy.

NSW agrees that early childhood staff who are already working in integrated services, who have no training or professional development to prepare them for such work, should be the priority for training and professional development in this area.

Draft Recommendation 15.4

The Australian Government should consider if workers in non ECEC components of integrated ECD services should have access to professional development under the Professional Support Program. Further, the Early Years Workforce Strategy should focus on the professional development requirements of the integrated ECD services workforce, and how to meet them.

Not Supported

This Recommendation is a matter for the Australian Government.

However, NSW considers that the recruitment and retention of qualified staff to meet the requirements of the National Partnership Agreement on Early Childhood Education and the National Partnership Agreement on the National Quality Agenda are currently a higher priority for workforce development and integrated service delivery. Accordingly, it is considered that available resources would be more effectively directed at meeting the requirements of these National Partnerships at the present time, and the Professional Support Program should focus its attention on these areas until need is fully met.

Appendix 1

Further information on the Child Health Workforce

The Productivity Commission's draft research report presents a somewhat limited view of the child development services provided by the child health workforce within Community Child Health. Child Health staff in NSW are experienced and skilled clinicians from varied health disciplines who provide universal primary health services that promote and address health and psychosocial issues impacting on the wellbeing of the child, parents and family as a whole. They also support parenting capacity to provide a warm and stimulating environment that supports optimal child development and wellbeing. In effect, many of the services discussed within Chapter 13 are frequently provided from universal child and family health services e.g. sustained health home visiting, allied health services, social work, parenting groups (e.g. Triple P, new parents groups) as well as some programs not mentioned such as supporting refugee children and families' health, and culturally appropriate models for Aboriginal maternal, child and family health (e.g. *Building Strong Foundations for Aboriginal Children, Families and Communities* program (BSF) and Aboriginal Maternal and Infant Health Services (AMIHS).

In NSW, child and family health services provided by nurses are much more than "child health checks". The expertise, qualifications and skill set required to provide effective and safe services to families is not readily transferable to other generically trained staff.

Child (and Family Health) Nurses

While the Commission's report has noted that child health nursing roles are changing (page 216) this is not well reflected in the key points. Recently NSW Health released the 'Child and Family Health Nursing Professional Practice Framework 2011 – 2016'¹ Attention is drawn to Page 8 (Section 4) which provides a description of the 'Scope of Practice in Child and Family Health Nursing Practice' and pp. 9-11 (Section 5) which is an outline of the 'Core Knowledge and Skills' required by nurses working in this specialty area which may assist in broadening the Commission's understanding of the role and scope of practice for child and family health nurses within NSW.

Personal Qualities of Child Health Nurses

NSW Health supports and agrees that the qualities, training and support of staff are important factors determining the effectiveness of any workforce. This is particularly so when working with families during the important early years of life. NSW Health

¹ http://www.health.nsw.gov.au/pubs/2011/cfhn_report_web.html).

communicates the importance of this to its workforce through policy², and through the mandating of child and family health nursing staff participation in Family Partnership Training. These policies and guidelines reinforce the principles of child and family centred practice and seek to ensure that staff working with families utilise a model that builds upon the family's strengths and capacities to address the health and development needs of their children. This is critical to the successful engagement with families who may have had previous adverse experiences with health or other agencies. This does not of course reduce the expectation that child and family health staff, including nurses, are required to remain mindful of the importance of advocating for the needs of the child when families are faced with multiple adversity that may undermine their capacity to provide a safe and nurturing environment for their child. Child and family health nurses, and other staff, can and do, work with families with the gamut of risk factors potentially affecting their parenting. These range from low or no risks to multiple and complex factors contrary to the portrayal of child health nurses within universal services as providers of child health checks to "healthy, well-cared for children" (Chapter 13, page 246).

NSW Health, contrary to p. 221 of the draft report which discusses universal services as primarily centre-based services, offers every family resident in NSW who has a newborn a universal health home visit by a child and family health nurse. This visit includes a number of comprehensive assessments. These identify factors that may impact on the physical, social and emotional health and development of children and seek to work with the family to address these factors or refer to either child and family health secondary staff, General Practitioners, or a range of social and welfare agencies dependent on the issues identified. The provision of a number of intervention services to these families may continue as a home based or centre based service in negotiation with the family.

Where home visiting has been mentioned within the report it is in the context of targeted services such as sustained health home visiting. The statement in Box 12.2 on p. 224 stating that there is no evidence of the efficacy of such home visiting within an Australian context is incorrect. NSW Health and other agencies funded the first Randomised Controlled Trial of sustained health home visiting conducted in a socially deprived area of South Western Sydney. The Centre for Health Equity Training Research and Education (CHETRE) conducted the RCT known as the Maternal and Early Childhood Sustained Home Visiting (MECSH trial), which has been widely published. NSW Health has funded and implemented five sustained health home visiting programs in NSW, known as *Sustaining NSW Families*, based on the MECSH model and the findings of the RCT. These programs will be independently evaluated over time.

The NSW Health *Families NSW* 'Supporting Families Early Package', mentioned previously with particular reference to the 'Maternal and Child Health Primary Health

² For example, the 'Supporting Families Early Package – Maternal and Child Health Primary Health Care Policy'

www.health.nsw.gov.au/policies/pd/2010/PD2010_017.html

Care Policy' may also be of assistance to the Commission as it describes the service delivery models in NSW to provide comprehensive care to the infant and mother.

Role of Community Child Health

Child and family health services are preventative, health promoting, assessment and early intervention based services that address the health, development and well being of children, their families and carers. Community Child Health covers a range of disciplines such as medical, nursing and allied health, and using this multidisciplinary approach, has the ability to identify and address the needs of vulnerable families early. This enables staff to actively plan and facilitate early intervention strategies and make appropriate referrals for improved health outcomes for the children and families of our communities. They also liaise frequently with professionals from other organisations/agencies such as education, disability services, housing and those involved with particular vulnerable groups including Non Government Organisations. Community Child Health services enable families to develop their protective factors and build resilience, promoting parenting confidence, self-efficacy, social networks and supports. By using evidence-based developmental strategies and tools, they are able to identify and address the health needs of the child and their families through comprehensive assessment and provision of appropriate interventions.

Community Child Health Knowledge, Skills and Qualifications

The speciality of Community Child Health has specific knowledge, skills and training in caring for children and families, and staff are well placed to identify and consider their health needs. It is recognised as a field of speciality paediatric practice by the Medical Board of Australia and Child and Family Health Nursing is a post graduate degree available to Registered Nurses in Australia.

Community child health specialists work with a family centred focus to enhance parents, families and carers confidence to build on their capacity to develop skills in the parenting role. They promote wellbeing, preventing illness and disease by identifying early those children and families that need extra supports, enabling timely access to appropriate services. They also work in partnership with families to build on strengths in the family.

What services are provided?

Community Child Health provides population and community based non-acute services for children and adolescents and their families. Health professionals work collaboratively with colleagues, multidisciplinary health care teams and other service providers to provide comprehensive health care to children. Strategies targeting child, youth and family health focus on health promotion and illness prevention from a community health perspective.

Services are also closely linked with multiple policy directives and programs which provide guidance to child and family health services amongst others to promote healthy lifestyles, secure parent infant attachments, safe physical and emotional environments, and community development leading to improved outcomes for children. These services, policies, interagency approaches contribute to children commencing school 'ready for life and learning'. They include:

- NSW Keep Them Safe : A shared Approach to Child Protection;
- Comprehensive Health Assessments for Children in Out of Home Care;
- Supporting Families Early;
- Disability Action Plans;
- Families NSW; and
- NSW Health Breastfeeding in NSW: Promotion, Protection and Support.

Child and family health services encompass a range of service modalities including:

- Aboriginal Maternal and Child Health;
- Child and Family Health Nursing;
- Specialist Paediatrics;
- Speech Pathology;
- Occupational Therapy;
- Physiotherapy;
- Orthoptics;
- Dietetics;
- Audiometry;
- School Health;
- Counselling;
- Psychosocial Therapy Services;
- Mental Health;
- Sexual Assault Services;
- Drug and Alcohol counselling,;
- Genetic Counselling; and
- Domestic Violence Programs.

Complexity of work and skills required

Safe and effective practice in Community Child Health requires clinicians to have specialised knowledge of infant, child and adolescent physical, social, cognitive and emotional development (both normative and pathological); childhood illnesses and conditions and their effects on growth and development; specialised knowledge of the impact of family, school, culture and community and environment on child development, health and well being.

Evidence of the Benefit of Child Health services

While it is agreed that there is yet to be sufficient research conducted to determine if there is a dose relationship (i.e. number of contacts with children and families) to benefit relationship, Child and Family Health Services as stated previously are population based prevention and early intervention services for which the evidence is well known and accepted. The evidence demonstrates improved health outcomes for children and families through the provision of population and public health programs e.g. reduced mortality from vaccine preventable diseases, reduced number of deaths from Sudden Infant Death Syndrome.

Conclusion

The population based prevention and early intervention services provided by Community Child Health seek to support parents and communities to provide physical and emotional environments that optimise health, development and wellbeing outcomes for children. These services and the multidisciplinary staff within them are an important resource for addressing public health priorities such as the decreasing rates of obesity, increasing vaccine preventable diseases, Closing the Gap, improving readiness for school, early detection and intervention for autism, decrease in SIDS, importance of the early years and infant mental health, environmental tobacco exposure, child safety and injury prevention.