

Authors

Nikki Graham

Community Child Care Association

ABN: 90 494 504 678 **Phone:** (03) 9486 3455

Email: reception@cccinc.org.au



Contents

About us	3
Where we sit in the inclusion landscape	3
Victorian children's access to early education and OSHC services The capacity and capability of services to provide inclusion What does inclusive practice look like?	s5
	6
	10
	.15
Contact us	16



About us

Community Child Care Association (CCC) is an incorporated association registered as a charity with the ACNC. CCC supports education and care services to build meaningful partnerships with families, which are vital to the development of children as strong and active members of society.

CCC equips and supports early childhood and outside school hours care services, educators and their communities with the skills and confidence to participate in and influence the growth and sustainable management of quality not-for-profit education and care.

CCC's advocacy has helped to enable and strengthen the development and retention of Victoria's community-owned education and care sector.

Where we sit in the inclusion landscape

Community Child Care Association has an extensive track record of delivering programs and advocating for the inclusion of all children in early education and Outside School Hours Care (OSHC) services. Led by our CCC Theory of Change and Advocacy Roadmap, one of the four pillars of our work is Access to Early Education and OSHC. As an evidence-informed organisation, we collect information and track evidence which tells us about how much Each child and every family have access to quality education and care. This report is an opportunity for us to share the information we ourselves are monitoring, in order to inform the array of reforms and enquiries currently impacting our sector.

Inclusion is an obligation for all services under various anti-discrimination Acts including for example, The Disability Discrimination Act 1992 which protects the rights of children and families with disability. Services are also obligated to provide inclusive services through their adherence to the National Quality Standard (NQS) and inclusive ways of teaching are embedded all through the National Quality Framework¹. A service must be providing inclusive education in order to meet the quality standards.

Inclusive practice is vital for ensuring that all children can equitably access quality education and care programs. The Early Years Learning Framework 2022 (V2.0) and My Time Our Place Framework 2022 (V2.0) both include the principles of equity, inclusion and high expectations. Inclusive practice is a high-level skill requiring critical reflection, careful programming and planning and iterative development of knowledge and skills. Inclusive practice requires careful and ongoing collaboration with children, families and other professionals as well as a team approach to support all children to thrive in their learning environments. Inclusion-primed organisational structure, processes and policies are also necessary for families to feel authentically supported. Processes and policies that

¹ Community Early Learning Australia (CELA) (2023) *Spotlight on inclusion: Understanding the legal obligations and opportunities for your service*, available here.



ensure respectful, supportive and constructive relationships with families are necessary to support cultural safety and family engagement².

In Victoria, services are provided support for inclusive practice through the Kindergarten Inclusion Support (KIS) package, and through the Inclusion Support Program (ISP). The Victorian Inclusion Agency (VIA) is a consortium of CCC, Yooralla and KU, led by CCC. While the National Disability Insurance Scheme (NDIS), other family and allied health services provide direct care support to individual children, the KIS and ISP programs work support care and learning environments, service policies, and educator and teacher practice. The ISP resources foster Inclusive practices by providing; a contribution of funding to support the employment of an additional educator, mentoring and coaching for educators and teams, support to develop inclusion plans and access to a specialist equipment library.

-

² Prichard, P (2024) Engaging families in parent support services: 'Hard to reach' families or difficult to access services?, Murdoch Children's Research Institute, Centre for Community Child Health, available here.

Victorian children's access to early education and OSHC services

Education and care are essential services, supporting over one million households to engage in work or study, as well as the development and wellbeing of their children. Yet, access to services is not equitable, with many households who are, or who are at risk of vulnerability, experience inequitable access to care or not enough hours of care. Systematic issues like staff availability, cost of care³, and the delivery of services in rural areas⁴ are part of the complexity of achieving equitable access. Our monitoring of publicly available data and our own collection of evidence compels our continued advocacy for all children with risk of vulnerability, however, we are particularly concerned by the drop of participation of children from regional areas, children from low-income families and the lack of data about participation of children from out of home care or who are from Refugee or Humanitarian backgrounds.

The Productivity Commission *Report on Government Services*⁵ reports yearly about the number of children who access CCS funded services⁶ and Kindergarten from selected priority groups including children with Aboriginal and/or Torres Strait Islander ancestry, children with disability, children from regional areas and children from non-English speaking backgrounds. Unfortunately, data are not available about the rates of children in Out of Home Care or who are from Refugee or Humanitarian backgrounds who access early education and OSHC.

Current data on Victorian children aged from birth to five, indicate that:

- Children with Aboriginal and/or Torres Strait Islander ancestry make up 1.8 per cent of CCS enrolments in 2023, this is lower than the rate of children in Victoria who are Aboriginal and/or Torres Strait Islander (2.1 per cent).
- Children with disability make up 4.4 per cent of CCS enrolments, slightly above the
 rate of children with disability in the general Victorian population (4 per cent). This
 has grown since 2017 where only 3 per cent of enrolments were for children with
 disability.
- The participation rates for children from regional areas dropped in 2023, to 19.7 per cent (from 21.1 per cent in 2022). Regional children make up 20.9 per cent of the birth to five-year-old population in Victoria.
- The participation rates for children from non-English speaking backgrounds dropped to 25.9 per cent in 2021, compared to 28.6 per cent in 2017. Children from non-English speaking backgrounds make up 30 per cent on the birth to five population in

³ Australian Competition & Consumer Commission (2023) *Childcare inquiry 2023: December 2023 final report,* available <u>here</u>.

⁴ Hurley, P, Tham, M, Nguyen, H (2024) *Mapping the deserts: Childcare accessibility in Australia,* Victoria University & Mitchell Institute, available here.

⁵ Productivity Commission (2024) *Report on Government Services 2024: 3 Early childhood education and care,* updated 28 May 2024), available <u>here</u>.

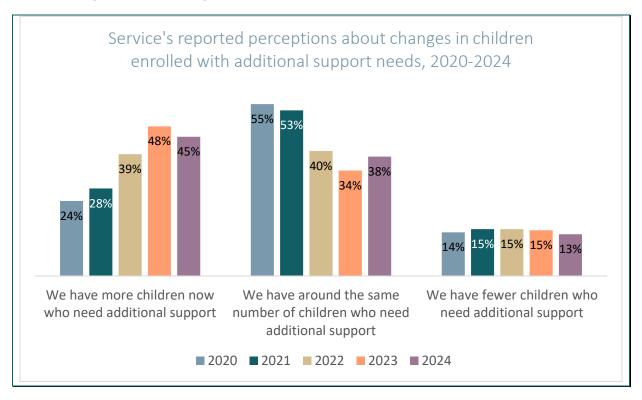
⁶ Child Care Subsidy (CCS) funded services are those funded by the Australian Government and include Centrebased day care, Family Day Care and Outside School Hours Care. The Child Care Subsidy (CCS) is the main way the Australian Government helps families with child care fees. CCS is generally paid to providers who pass it on to families as a fee reduction. Providers must be approved by the department to receive CCS on behalf of families.



Victoria. The Covid pandemic and shutdown of immigration would have affected the non-English speaking population considerably during the collection of these data⁷.

• In 2023, 1 in 5 (20 per cent) of children in CCS funded services are from low-income families. From the most recent data available (which is from 2019-20) we know that 23 per cent of children in Victoria are from low-income families.

Further to this publicly available data, CCC collect information from services and staff directly through our surveys. Education and care services across Victoria were invited to share their perspectives on inclusion needs since 2017 through an annual survey. This has provided important insights into state of need of the education and care sector in Victoria. Recent responses from services on changes in their enrolments of children with additional support needs, indicate that almost half of services (45 per cent) had more children enrolled with additional support needs compared to the previous year. Since 2020, services have increasingly reported they had more children enrolled with additional support needs compared to previous years, with a slight decrease in 2024 compared to 2023 (48 per cent).



Source: CCC Survey Collection, 2020 to 2024.

Source. ede survey concentry, 2020 t

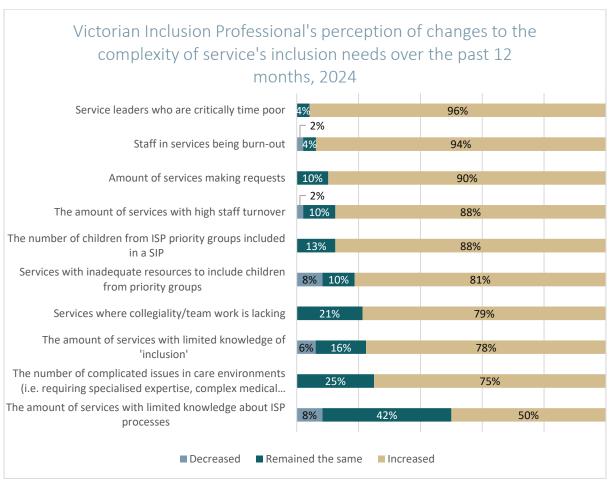
The capacity and capability of services to provide inclusion

Community Child Care Association's administrative data includes information from our staff about their observations about things that make supporting inclusion more complex. We have also been collecting information from services about their own perceptions of needs for inclusion since 2017.

⁷ Parliament of Victoria, Legislative Assembly Legal and Social Issues Committee (2020) *Inquiry into early childhood engagement of culturally and linguistically diverse communities*, available here.



Our staff were recently asked about whether they had noticed changes to the level of complexity across selected areas. The most prominent issue that Inclusion Professionals felt was adding complexity to inclusion needs was that service leaders were critically time poor, staff were experiencing burn-out and that there were more services making requests than usual. This is similar to the previous three years, however the proportion of services with high staff turnover was more prominent in 2022 (100 per cent) and 2023 (98 per cent). This is in line with data from the Australian Skills Authority which shows that the number of vacancies for educators and early childhood teachers have been dropping over the course of 2024⁸.



Source: CCC Survey Collection, 2020 to 2024.

In our recent survey of Victorian services, there were a high proportion of responses to the question "What might make it difficult for services like yours to develop a SIP?". These responses give us insights into the barriers services face from their own perspective. Many service leaders talked about the pressure of time.

⁸ Productivity Commission (2024) *A path to universal early childhood education and care Inquiry report,* available here.



"The capacity of our educators, along with my role as the centre director without administrative support, makes it quite challenging to find the time needed to develop a SIP."

"Time to have all educators on the same page and understand the SIP in the same way the person who worked on it can understand it."

"Time restraints and interruptions can make it difficult to really give the time it requires."

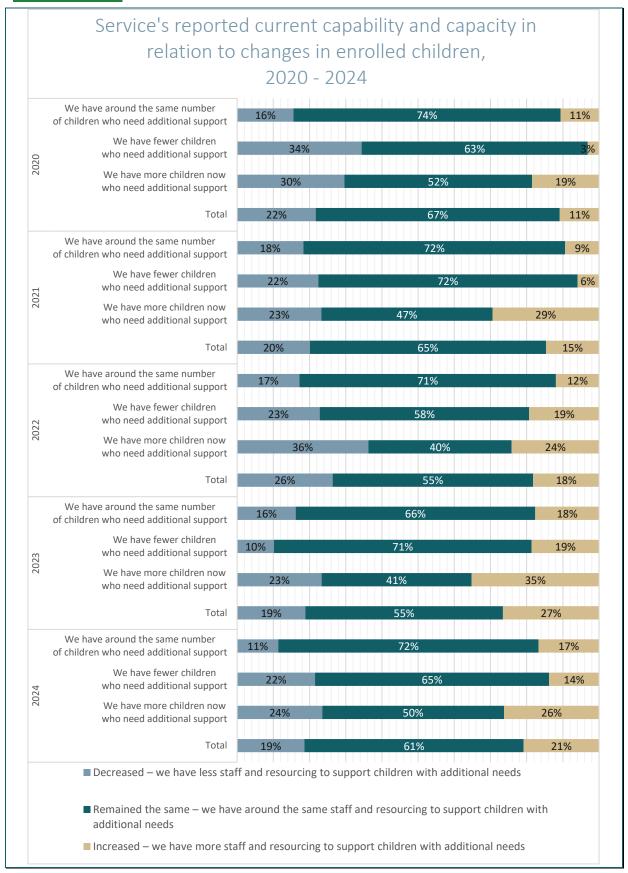
There were also several service leaders who talked about the difficulties they are experiencing with staff turnover and retraining new staff about the inclusion needs in the service.

"We have had a lot of new staff members who lack understanding of inclusion and how SIP works, we are working with our IP to support the new team to develop an understanding of the Barriers, Strategies and Actions within our SIP. Staff having lack of understanding of inclusion, inclusion practices and SIP."

"High staff turn-over makes so difficult on children's observation and information."

"Changing staff means level of understanding is also changed, cohort changes due to parents needs changing, inconsistent work force due to ongoing external pressures."

Since 2020, most services have reported that their capability and capacity to support children with additional needs have remained the same (67 per cent in 2020, 65 per cent in 2021, 55 per cent in 2022 and 2023, and 60 per cent in 2024). In 2024, almost a quarter (24 per cent) of services who reported they had more children with additional support needs also reported their staff and resourcing supports had decreased compared to previous years. With half of services (50 per cent) who reported they had more children with additional support in 2024 also reporting their staff and resourcing supports had remained the same. This suggests that the higher level of inclusion support needs some services are experiencing is not being matched with an increased level of staff and resourcing to support children with additional needs.



Source: CCC Survey Collection, 2020 to 2024.



What does inclusive practice look like?

In our recent survey to services, we asked service leaders, educational leaders and educators questions to find out what inclusion support looked like for them. As well as demonstrating the support and skill that Inclusion Professionals have been providing, the anecdotes we received revealed an array of skills and knowledge that are involved in inclusive practice.

Respondents demonstrated that inclusive practice comprises:

- relationship building with diverse and unique children, who sometimes have specialised needs, who sometimes may have experienced trauma and who sometimes need to take many months to feel safe enough to build relationships at all,
- incorporating learning about their peers needs into children's learning program so they can develop understanding relationships with each other as group,
- relationship building with families who sometimes may be beginning the journey of seeking support for their children's needs, some who may not be ready yet and some who are well educated and have much to share,
- collaboration with families, consideration of family's wellbeing, schedules, needs, preferences and the goals they have for their child/children,
- collaboration with allied health professionals, other family services, community services and the council as needed,
- training staff, sometimes about specialised skills they need (i.e. peg feeding, disability support needs, Auslan or Key Word Sign, de-escalation skills) or onboarding staff to a customised children's learning program that considers the needs of all the children in the care environment on any one day,
- finding resources that are necessary and appropriate, carefully selecting learning experiences that meet the needs of all the children, moving or removing resources that might be an obstacle to inclusion in the environment,
- administrative skills associated with applying for support from the ISP, understanding strategic inclusion plans and incorporating them into the learning program,
- planning and conducting an inclusive program considering all of the above, then reflecting on this and updating it regularly.
- Managing the emotional stresses and challenges, working as a team to overcome hurdles and reflect on set-backs.

Included here are some short anecdotes from the 2024 survey. All responses have been deidentified to ensure confidentiality.

Service co-ordinator/ Director in Centre-based day care

Can you tell us about a time when your Inclusion Professional assisted your service to include a child/children with high support needs?

Our Inclusion Professional is consistently supportive of our needs and the changes we go through. She is knowledgeable and open to having discussions about challenges we are facing and supporting



us to critically reflect to find solutions. She supports as we need, offering calls, emails feedback, and meetings as the fit around our mutual schedules and open to how things just pop up and set us back.

How has your Inclusion Professional helped your service to address barriers that may have prevented children and their families accessing your service and program?

Our IP doesn't make assumptions, when she identifies something that concerns her, she asks questions. Recently during our re-application process for support, she identified us including a child with medical needs and questioned why they were on the application if we felt the child themselves was safe at the service, through her questioning we were able to re-word the requested support to showcase the actual barrier which was not the child but the other children's understanding of the child's needs and supporting the cohort to maintain safety of the child at risk.

What are some examples of resources and strategies that your Inclusion Professional provided to improve inclusion at your service?

Our IP supported our application for IDF support, has offered further information around solutions support and the hiring resources to further support the service in another group that we spoke on for a brief moment that was also having some difficulties. She also shares resources and information with us regularly by email as she becomes aware, including PD's flyers and information sessions.

Alongside the support from the VIA, what resources has your service/ organisation contributed towards strengthening inclusion in your care environments?

Purchasing resources books and training professional development (PD) for the team to upskill, attending external PD's, full time non-contact EL to support mentoring and development of staff.

Service co-ordinator/Director in an Outside school hours care service

Can you tell us about a time when your Inclusion Professional assisted your service to include a child/children with high support needs?

Our Inclusion Professional has been very helpful to support our team to develop and build their understanding of trauma and how this can impact a child's behaviour, she has helped us understand barriers, implement strategies and actions into our service.

How has your Inclusion Professional helped your service to address barriers that may have prevented children and their families accessing your service and program?

Our IP has provided many opportunities to attend network meetings, linked us with other professional development in our local area and provided support personally by holding meetings with our team online and in person to further develop our understanding of the barriers that can affect families and children.

What are some examples of resources and strategies that your Inclusion Professional provided to improve inclusion at your service?

Our IP has provided us with many visual resources, fact sheets to support staff and families understand the IDFM and how it is used, provided mentoring and support on how to understand



what barriers our service has and how to develop strategies and actions. She has spent time with staff to support them to further develop their knowledge and understanding of inclusion and inclusive practices.

Alongside the support from the VIA, what resources has your service/ organisation contributed towards strengthening inclusion in your care environments?

We have ensured staff have access to training and support, provided funding to buy resources to children's sensory needs and resources that support our program to be flexible and adapt to the children's needs as needed. The biggest thing we have done is changed the environment to incorporate multiple quiet and calming spaces including a calm down corner, we have purchased multiple sensory items and ensure our program is flexible and able to be adapted to the children's needs each day.

Educational leader in a Centre-based day care

Can you tell us about a time when your Inclusion Professional assisted your service to include a child/children with high support needs?

I have been working closely with our Inclusion Professional over the past 12 months as we have had a few children in our Kinder room with both additional needs and trauma response.

How has your Inclusion Professional helped your service to address barriers that may have prevented children and their families accessing your service and program?

Yes, our IP has been great and we have seen a transformation with our team and children.

What are some examples of resources and strategies that your Inclusion Professional provided to improve inclusion at your service?

Utilising our spaces to create transitions and routines that allow smaller groupings with our children.

Alongside the support from the VIA, what resources has your service/ organisation contributed towards strengthening inclusion in your care environments?

We have worked closely with our Preschool Field Officer to support the children and team. We have used our Kinder funding to access additional educators for the space.

Educational leader in Centre-based day care

Can you tell us about a time when your Inclusion Professional assisted your service to include a child/children with high support needs?

We had a child who clearly had some challenging behaviours and needed support to be included in our daily program. Parents were not open to the possibility of meeting with professionals to get a diagnosis and were under the impression there was nothing wrong with their child. We clearly needed support in the room and our Inclusion Professional, observed this on a visit and organised some emergency support whilst we met with parents and discussed what we needed to support



their child. With support from our IP we were able to have positive conversations with the family and reach a diagnosis and plan of support.

How has your Inclusion Professional helped your service to address barriers that may have prevented children and their families accessing your service and program?

Our IP has always been such a great support for our centre. Always available to offer advice and guidance with writing SIP, talking about strategies that we can use to support children and families.

One of the final questions we had for services in our 2024 survey was *Alongside the support from the VIA, what resources has your service/ organisation contributed towards strengthening inclusion in your care environments?* We received 178 different responses illustrating the depth and complexity of skills and knowledge that goes into providing inclusive care. A selection of the responses grouped in broad themes is included here.

The consideration of specific resources in the care environment and specialised programming

"Emotional resources for self-regulation of emotions and support challenging behaviours. buying emotional support resources, behaviour guidance training for educators through School readiness funding."

"Ensuring our resources allow for children to use their imagination and creativity."

"Cosy corners/nooks. Soft furniture."

"We created calm corners and visual aid resources."

"Buying resources to support children in the rooms and outdoor yard from specific stores which provide such resources. Attending PD's to learn more about Autism, ADHD, selective mutism, developmental delays."

"Our service has focused on environment and set-ups and tailored this accordingly to support inclusion of the needs we have."

"Adjusting routines and assisting students that require it to suit their needs during attendance to session e.g., communicating with school and agreeing that student can come and settle into the session a bit earlier if needed."

"Upgrading our environments, adding ramps, community engagement and working towards these goals collectively. Working closely with paraprofessionals."

Collaboration with allied health and other child development professionals

"We got more contacts to help from the Council and got some further links for speech pathologist."

"Inviting allied service support such as OT, Speech pathologist, Intensive support plans." "Only About Children Speech pathologist and OT help."

"Professional Development for Educators, liaising with Pre-school Field Officer, utilising Kindergarten Inclusion Support, liaising with specialists - speech therapists, music therapists, physiotherapists, music therapists, behavioural psychologists etc. Educational Resources - Sensory Items, Visual Aids."

"PSFO, MHN Outreach Program, LINK, NDIS services, Community and Allied Health."



"Connections, Asthma Foundation, Epilepsy foundation, OT, Speech and Child Phycologist engagement."

"We have engaged in over 10 professional developments this year to support our development and understanding of additional need, inclusions support, emotional coaching, accessibility and toileting."

"We had an Occupational Therapist deliver a session on children's behaviour and dispositions to empower and upskill the team and a Paediatrician who talked about respiratory conditions affecting children's capacity to learn."

"We have all of the resources for children and are looking to get more of what has been working really well. We are also working with children's allied health professionals such as OT to give us more ideas and strategies."

"We work closely with children's allied health professionals and often have them complete sessions at the centre with the children. Educators attending different professional development opportunities and network meetings have also helped. We have engaged a Koorie representative as we begin to create our centre Reconciliation Action Plan." "Access to community agencies such as Vision Australia."

Collaboration within teams

"Staffing arrangements and awareness to provide mindful, educational, and caring time with the children in mind. Working as a team of staff to discuss and bring about changes for inclusion of children with vulnerability, differing needs and strengthening of our presence of cultural safety for Aboriginal and Torres Strait Islander children and for the centre to be a welcome, safe and inclusive space in the community for those families and kinship identifying as Aboriginal and Torres Strait Islander."

"Staff training, purchasing learning resources, regular discussions about children at team meetings."

"Building capacity in our educators through Professional Development, establishing opportunities for peer observation and modelling."

Building relationships with families and children

"Collaborative effort among various educators, parents, inclusion team and management to find best support structure for each child and ongoing communication between educators and parents."

"Positive relationships with children and families finding out what kind of service they need. Making changes based on family input to increase numbers since new management/program started at beginning of year."

"Educators are always working with the school and families to address any concerns and work to an exceeding level to support every family in our care. We always strive to support each child no matter their abilities or limitations and ensure that all children are able to participate in our program."

"Flexibility with enrolments and in how we work with families."

"More visual parent information books and boards. Training with FKA through SRF funding. Using translation services to offer our parent community information in other languages."



Professional development

"Attending professional development courses relating to children/young people mental health and vulnerability, updating child safe knowledge, attending OSHC conference, weekly professional reading, and research."

"Additional training to support educators in understanding how to support children with inclusion."

"Internal quality and inclusion SMEs visit. Shared Professional Development resourced from Community Child Care, BeYou, ACECQA, and others. Collaboration with school teachers and wellbeing officers."

"One on one training with our internal education team, implementation of various other behavioural guidance strategies."

"PD for educators, time release for collaborative planning, time release for educators to attend Network meetings."

"Supporting educators to access professional development opportunities to increase their understanding of challenging behaviours and how best to support them."

Conclusion

Inclusion of each child and every family in early education and OSHC is essential for their learning and development and for every child to have the opportunity to thrive. By sharing our knowledge, we hope to support more evidence-informed reforms, policies, and programs.

The evidence in Victoria leads us to be particularly concerned about children in regional areas and those from low-income households, whose inclusion is tracking backwards. We continue to work towards increased inclusion of children with Aboriginal and Torres Strait Islander backgrounds, culturally and linguistically diverse children and those with disability. We know that access is only part of the picture, that culturally safe services, and supporting children with disability, neurodiversity or trauma is a sustained and reflective effort. We hope that in the future we will see better collection and availability of data of children in out of home care or from refugee or humanitarian backgrounds and their access to early education and OSHC.

The landscape of inclusion in Victoria includes time poor service leadership, staff that are experiencing burnout, an increased demand for support from services and issues with staff turnover. Programs that support inclusion need to be streamlined, simple to access and build the capacity and knowledge of new educators. Reforms that consider the role of educators and service leaders need to understand the pressure they are experiencing. Educators and service leaders are highly skilled and knowledgeable in implementing inclusion practice in their environments. Inclusive practice is a legal and ethical obligation and currently not fully recognised and respected as one of the core skills educators require. We thank each and every educator, service leader and our staff for their time and sharing of their experiences in our survey collections.



Contact us

Thank you for your consideration.

If you would like to discuss this report, please contact CCC on (03) 9486 3455.

Yours sincerely,

Nikki Graham Evaluation and Research Co-ordinator Community Child Care Association

ABN: 90 494 504 678 **Registration:** A0030026F **Phone:** (03) 9486 3455

Email: reception@cccinc.org.au

Mail: PO Box 1730 Preston South VIC, 3072

www.cccinc.org.au