



National Disability Agreement Review
EARLY CHILDHOOD INTERVENTION
AUSTRALIA SUBMISSION
22 August 2018

Prepared by Enis Jusufspahic
National Manager, Sector Development
Early Childhood Intervention Australia Ltd
Level 19, 66 Goulburn Street, Sydney NSW 2000
PO Box 20690, Sydney NSW 2002
02 9873 2593 | www.ecia.org.au

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Early Childhood Intervention Australia (ECIA)

Who we are

As the peak body for early childhood intervention professionals, ECIA represents its members at a state / territory and national level in advocating for the rights of young children with developmental delay and disability, and their families, to have access to high-quality early childhood intervention services and supports.

ECIA has a collaborative relationship with the NDIA and other relevant government departments and organisations, as we work together to build capacity and improve services. We provide relevant, contemporary information and resources to professionals working in the field of ECI, along with professional development opportunities.

Early Childhood Intervention Australia (ECIA) over the last 12 months has transitioned from a federated state / territory based organisation consisting of four member Chapters, into a national single entity company limited by guarantee.

The Chapters that transitioned represent the geographical areas of WA/NT, QLD, NSW/ACT and SA. ECIA VIC/TAS is not affiliated with ECIA, the national entity.

We acknowledge the previous work in this state conducted by the ECIA NSW/ACT Chapter and referred to in this submission.

What we support

ECIA endorses a framework of evidence-based practices that promote, encourage and support principles that drive positive outcomes for children and families. These practices include:

- **Family centred and culturally responsive practice**, which creates culturally inclusive environments for families from all backgrounds, and recognises the central role of families in children's lives.
- **Inclusive and participatory practice**, which recognises that children, regardless of their needs, have the right to participate fully in their family and community life.
- **Engaging the child in natural environments**, to promote inclusion through participation in daily routines, at home, in the community, and in early childhood settings.
- **Collaborative teamwork and capacity building practice**, where the family and professionals work together as a collaborative and integrated team around the child, to build the capacity of the child, family, professionals and community.
- **Evidence base, standards, accountability**, to ensure ECI services comprise of practitioners with appropriate expertise and qualifications who use intervention strategies that are grounded in research and sound clinical reasoning.
- **Outcome based approach**, which focuses on outcomes that parents want for their child and family, and on identifying the skills needed to achieve these outcomes.

These practices lay the foundation for each individual's successful participation as a valued member within our diverse community. This has been articulated in the *ECIA National Guidelines on Best Practice in Early Childhood Intervention*.

What is Early Childhood Intervention?

Early Childhood Intervention (ECI) is the process of providing specialised support and services for children age 0 to 6 with developmental delays or disabilities and their families, in order to promote development, well-being and community participation.

ECI Services provide parents and families with the knowledge, skills and support to meet the needs of their child and to optimise the child's development and ability to participate in family and community life.

ECI Services provide individually tailored supports to the child including therapy, education, counselling, service planning and coordination, warm referrals to community and mainstream services. Services are focused on supporting the child in their natural environments and in their everyday experiences and activities.

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Whether the National Disability Strategy is required under the contemporary policy setting and, if so, what its purpose should be.

It is ECIA's firm position that that the National Disability Strategy is necessary in the current policy environment precipitated by the NDIS discussed further in the next section. Furthermore, we recommend that the Strategy be focused on achieving inclusion and be expanded to all relevant service services for different cohorts of people with disability including specific performance indicators and measures which are to be used to track inclusion across relevant domains.

ECIA's understanding of the National Disability Strategy

As noted in the National Disability Agreement Review Issues Paper (Issues Paper), the National Disability Strategy (NDS or the Strategy) is broader in scope than the specialist disability support system as it puts in place strategies designed to provide leadership for a community-wide shift in attitudes in order to improve the lives of people with disability, their families and carers across seven policy outcome areas:

1. inclusive and accessible communities;
2. rights protection,
3. justice and legislation;
4. economic security;
5. personal and community support;
6. learning and skills; and
7. health and wellbeing.

What should be the purpose of the National Disability Agreement?

The purpose of the NDA should be to deliver on the seven policy outcome areas outlined in the National Disability Strategy as well as specialist disability services which are now in the domain of the National Disability Insurance Scheme (NDIS or the Scheme). We believe that the policy outcome areas should be reframed and correlated directly with other service systems including mental health, healthcare, aged care, education, transport, housing, justice, community services, family support services, Early Childhood Education and Care services including childcare and the community more broadly so as to give effect to inclusion as the primary policy and outcomes driver for the National Disability Agreement.

In this context inclusion means full and effective participation in all aspects of Australian society on an equal basis with others, echoing the principles set out in the Convention on the Rights of Persons with Disabilities. Improved inclusion would also provide an economic benefit to the community through increased employment and taxes, as well as reduced use of government services as inclusion at an early age leads to better outcomes for children and their families because inclusion in early life builds successes which can be carried forward to later life stages.

ECIA believes that the NDIS is a core component of the NDS and as such should be incorporated into the next iteration of the NDS as key component in providing support and fostering inclusion of people of disability.

We agree with the Productivity Commission's assessment in the Issues Paper, stating that the interface issues between the NDIS and other government systems need to be resolved on a service system level for each jurisdiction according to the Principles to Determine the Responsibilities of the NDIS and Other Service Systems. This lack of clarity about policy and programmatic responsibility is having a significant impact on access to government funded services for people with disability.

We affirm the point made in the Issues Paper that it is the responsibility of state and territory governments to provide supports to people with disability who are not covered by the NDIS. The nature of provision of services for people with disability not covered by the NDIS differs significantly according to jurisdiction and age cohort. We recommend that the identified policy outcomes areas be specified in scope according to key life stages as utilised by the Scheme actuaries, these being:

- Children age 0-6;
- Children and young people age 7-14;
- Young people age 15-18;
- Adults age 19-24;
- Adults age 25-34;
- Adults age 35-44;
- Adults age 45-54;
- Adults age 55-64;
- Adults age 65 and over.

Furthermore, we recommend that the next iteration of the NDS be aligned with relevant service systems. For example, the relevant service systems for children age 0-6 would be:

- Early Childhood Education and Care services funded by the Commonwealth and States and Territories;
- Health services for babies and new parents including Community Health services focusing on child development and diagnostic services funded by the Commonwealth and States and Territories;
- Child Protection and Family Support services funded by Commonwealth and States and Territories;
- Community Services funded by States and Territories and local government.

Performance indicators and outcomes measures

As noted in the Issues Paper policy outcome areas are not tied to benchmarks and performance indicators. We note that data about accessibility and inclusion of people with disability in the community and key service systems is fragmented. We recommend a baseline data study to map and consolidate available data across jurisdictions including the development of a common data set which is to be used to benchmark accessibility and inclusion for those service systems where there is paucity of data.

We note that the dataset needs to reflect performance indicators and outcomes measures that are specific to the age cohort and the service system together with the responsible regulator or oversight body as well as any common measurable outcomes.

The purpose of the aforementioned dataset is to provide detailed information about key barriers to inclusion for different age cohorts across Australia. This would provide a rich dataset about accessibility and inclusion which is to target investment in capacity building and sector development initiatives designed to address specified barriers to inclusion.

The data collected on accessibility and inclusion would also provide insight into gaps in services. During the transition to the NDIS in NSW Early Childhood Intervention (ECI) service providers in NSW identified that the following groups of children are developmentally at risk:

- Children with one delay only who are not covered by the NDIS and often referred to Community Health and Early Childhood Education and Care Services;
- Children with mental health concerns and no delay in development;
- Developmentally vulnerable children with behaviours of concern and no delay in development;
- Pre-term infants;
- Children from families experiencing vulnerability who may or may not have an NDIS plan.

The impact on these at risk groups is discussed in detailed in the NSW Position Paper on Gaps in services for children age 0-6 with developmental delay and disabilityⁱⁱ (the Gaps Paper).

Capacity Building and Sector Development

The identified systemic barriers to inclusion are best addressed through targeted Capacity Building and Sector Development activities. We recommend providing a funding pool under the National Disability Agreement to state and territory governments, peak bodies and advocacy organisations to address significant barriers to inclusion.

Furthermore, we acknowledge that significant work has been done to support inclusion of children with developmental delay and disability age 0-6 across Australia by Early Childhood Intervention Australia by way of capacity building initiatives such as *Does This Child Need Help?*, the *Transition to School Resource*, the *Inclusion Toolkit* and the *Working Together Agreement*.

Recommendations

We recommend that the Strategy be focused on achieving inclusion and be expanded to all relevant service services for different cohorts of people with disability including specific performance indicators and measures which are to be used to track inclusion across relevant domains.

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We recommend providing a funding pool under the National Disability Agreement to state and territory governments, peak bodies and advocacy organisations to address significant barriers to inclusion.

ⁱ *Principles to Determine the Responsibilities of the NDIS and Other Service Systems*, Council of Australian Governments, 27 November 2015, <https://www.coag.gov.au/sites/default/files/communique/NDIS-Principles-to-Determine-Responsibilities-NDIS-and-Other-Service.pdf>

ⁱⁱ *NSW Position Paper on Gaps in services for children age 0-6 with developmental delay and disability*, Early Childhood Intervention Australia NSW/ACT, April 2018, <https://www.ecia.org.au/News/ArticleId/90/gaps-position-paper>