No way. The hundred is there. *

The child is made of one hundred.
The child has
a hundred languages
a hundred hands
a hundred thoughts
a hundred ways of thinking
of playing, of speaking.
A hundred always a hundred
Ways of listening
of marvelling of loving
a hundred joys
for singing and understanding
a hundred worlds
to discover
a hundred worlds
to invent
a hundred worlds
to dream.
The child has
A hundred languages
(and a hundred hundred hundred more)
but they steal ninety-nine.
The school and the culture
separate the head from the body.
They tell the child:
to think without hands
to do without head
to listen and not to speak
to understand without joy
to love and to marvel
only at Easter and Christmas.
They tell the child:
to discover the world already there
and of the hundred
they steal ninety-nine.
They tell the child:
that work and play
reality and fantasy
science and imagination
sky and earth
reason and dream
are things
that do not belong together

And thus they tell the child
that the hundred is not there
The child says:
No way. The hundred is there.
(Edwards, Gandini, & Forman, 1998, p. 3)
*Translated by Lella Gandini

About us
Our Philosophy

We believe that the centre should be a place where children and their families feel comfortable, have a sense of belonging and a sense of ownership.

We believe that the centre is in the community and the community is part of the centre.

We believe that people should be valued and respected, that differences in attitudes and beliefs should be honoured and used to broaden our understanding. We respect cultural values within families and the wider community, and believe that it is our role to be responsive to cultural diversity.

We believe children and their families deserve quality care and that this is best served by caregivers and parents sharing this responsibility, sharing their relevant skills and information.

We believe in equal opportunity, equity and social justice for all.

Background Information

Swallow Street Child Care Assoc Inc is a parent managed, community based (not-for-profit) child care centre that was opened in March 1976. The centre provides programs for children aged 6 weeks to 5 years and includes a government funded Kindergarten program that is provided the year prior to attending formal schooling. We have 58 places per day [8 under two’s (3 places under 15 months and 5 places for 15 months to 2 years)] with two group leaders (diploma qualified); 11 two to three’s with 2 staff [one diploma qualified and one certificate III qualified (who is studying for her diploma)]; 16 pre-kindergarten children (3 - 4 years) with 2 staff [(one Advance Diploma qualified (also Co-Educational Leader)) and one Certificate III qualified (who is studying for her Diploma)]; and 23 Kindergarten places (two degree qualified staff who job share and one staff member with a Certificate III). We also have 4 children who attract an inclusion support worker, one in the Kindergarten room for three days, one in the 2 – 3’s room for three days and two children in the Pre-Kindergarten room (one attends Monday and Tuesday and the other Wednesday to Friday). All our inclusion support workers are Certificate III qualified. We also have floats and relief staff who all have at least a Certificate III qualification. Our director (Nominated Supervisor) has a degree in Early Childhood Education as well as a degree in Social Work. Our other Co-Educational Leader who is also our administrator has a degree in Early Childhood Education as well as a Bachelor of Commerce. We provide all meals at the centre ie morning and afternoon tea as well as lunch. We only ask the parents to bring one piece of fruit per day which is shared for morning tea.

The centre is situated in Inala, Brisbane. Based on the 2011 Census, Inala is situated in a low socio-economic area which is considered to be the 2nd most disadvantaged S2 in the Greater Brisbane Area.
We currently have 89 children at our centre, the utilisation rate being 97.9%. Sixty-five of these 89 children (73.03%) are from cultural and linguistically diverse backgrounds (most originally arriving in Australia as refugees) and 7 children (7.8%) identify as from Aboriginal and Torres Strait Islander background. Seventy of the children’s families are entitled to the maximum percentage for Child Care Benefit or are receiving AMEP (Adult Migration English Program) (78.65%). Only 5 families are on less than 90% entitlement to Child Care Benefit (5.61%). The families have a diverse range of home languages including English, Broken English, Sudanese, Vietnamese, Arabic, Tigrigna, Acholi, Dinka, Kunama, Creole, Swahili, Kiswahili, Mandingo, Lingala, Kirundi, Madi, Tamil, Thai, Mandarin, Maori, Samoan, Tongan, Indonesian, Hindi, Persian, Hazargi, Bangla, Bengali, French & Serbian.

Many of our children have to deal with multiple disadvantages, the most obvious disadvantage being poverty. Many of our families suffer from trauma due to the situations that occurred resulting in them being granted refugee status. Seventy-seven (86.52%) of our children meet the criteria for the first two categories of the Priority of Access list ie child at risk or working/looking for work or studying (or with an exemption from meeting the Work Activity Test for numerous reasons eg child with a disability) with all our children under two meeting one of these two criteria and only 1 child over two but under 3 years of age not meeting the first two categories of the Priority of Access. Forty of our children (44.94%) have a disability or suspected disability (including speech and language and learning delays) and 32 children (35.96%) experience other disadvantages including:

- Immediate family member with a disability;
- Parent with mental health issues;
- In foster/grandparent care due to dysfunctional/abusive home situations;
- Child at risk due to home situation including abuse, parental use of alcohol and drugs, lack of supervision and are being monitored by Child Safety;
- Exposure to domestic violence:
- Homelessness;
- Families in high stress situations; and
- Families experiencing social isolation.

(The above list does not include children of parents experiencing difficult separations and sole parents who have limited financial and practical support).

Thirteen children (14.61%) of the total children attending our centre are under both of these categories ie have a disability/delay and other disadvantages as stated above (not including poverty and refugee status). Therefore, 59 children (66.29%), who currently attend our centre, experience multiple disadvantages.

Only 3 of the children with a disability/under assessment for a disability were identified prior to attending this centre. The rest were identified at this centre by our qualified staff (diploma and degree qualified educators) and referred to an appropriate medical practitioner/therapist. Most of our families rely on the public health system for medical assessments and identification of delays or disabilities and may wait up to 2 years before being seen by a specialist and three years before a diagnosis has been completed.
We have connected with a Brisbane University to undertake a Speech and Language assessment clinic at our centre (free) based on our referrals to the clinic. In the first 6 months of this year (semester one), 23 children were confirmed by the University clinic as having some Speech and Language difficulties ranging from mild to severe. We had concerns for another 16 children during this time; however, the families of these children were not able to bring their child on the day the clinic was on at our centre.

**Issues relating to the Draft Report**

We would like to clarify that our discussion relates to formal Early Childhood Education and Care ie provided in a child care centre. We have limited experience with other forms of care.

As you can see from the background information that our centre has been a part, and we believe, a vital part, of the local community for nearly 40 years. We think that the information we provided demonstrates the importance of high quality Early Childhood Education and Care and, we believe, (and it has been demonstrated through the Accreditation process) that we provide this. Some media outlets believe Early Childhood Educators are “quasi professionals” and “really anyone can care for a child”. We have included examples that demonstrate that we provide much more than care for the children and families at our centre.

We have seen over the last 40 years, a huge number of changes in government legislation and policy relating to Early Childhood Education and Care, and it seems, once again, further changes will be implemented. Unfortunately, based on the Draft Report released by the Productivity Commission, many of these changes being considered will do little to support high quality Early Childhood Education and Care.

Where is the child in the current discussions and recommendations? It appears that the most concerning thing for the adults in these discussions is what is good for them. It’s about economics. The government wants to save money and appease interest groups, parents want affordability and many care providers want more money and less costs ie profits. It appears that the only concern for the child is for those who are in the year prior to formal schooling ie school readiness. In the Draft Report the Commission has suggested that there needs to be an acceptable level of care provided to children. What is acceptable? Is it acceptable for a child to be sat in front of a television for most of the day while lying/sitting in a playpen? They would certainly be safe and more than likely, happy. Is this what we want for our children? More than likely most people would say, no. Well, what about limiting television to only 3 hours a day while in a care environment and they must be taken out of their playpen for at least an hour a day? That’s better isn’t it? No? Again, we ask what is acceptable. Is the only requirement that children are safe and happy? What about nutrition? What about exposure to language and literacy enriched environments? What about songs, nursery rhymes, fairy tales? The Arts? What about just listening to a child and responding to their needs and interests? What about exercise and fine motor development? What about their social and emotional development, probably the most important aspect of children’s learning and development? Not just at four years of age, but from the beginning. Do adults in this discussion really only want acceptable care. We are
sure that most people would want the best for all children and if children are in a formal Early Childhood Education environment for whatever reason then they should have access to the best possible learning and care environment that the Australian community can provide, regardless of parents/families ability to pay or the reasons they have decided why they require Early Childhood Education and Care for their child.

So we ask you and the wider community – where is the line drawn between Early Childhood Education and Childcare, when is one care and the other education and do they have to be/can they be mutually exclusive in a formal setting? We also believe that the expectations by families and the wider community on a formal childcare setting ie centres are different to those for care arrangements that are less formal eg nannies, family day care.

When trying to identify what quality early childhood education and care means, two of the most common factors listed are the qualifications of the staff and the ratio of staff to children. So why would it even be considered to reduce the qualification requirements of staff in a formal setting? It is vital that the Early Childhood Education sector attracts well qualified Educators, such as those with a diploma, advanced diploma or degree. These Educators also need to be retained in the workplace for continuity of high quality care and education for the children (including forming a bond) and in order to capitalise on the knowledge, skills and experience of the higher qualified Educators. The draft report recommends that the minimum qualification for staff educating and caring for children under 3 in a formal setting should be a Certificate III in Child Care. Currently, the main educator has to have, at least, a Diploma qualification. We plead with the Commission to reconsider this recommendation. For one, this qualification does not provide the in-depth knowledge required to support children’s learning, including knowledge of child development and knowledge of educational theories that underpins best practices. Also the Certificate 111 qualification does not include knowledge of children with disabilities and vulnerable families with difficult home circumstances that enables an Educator to pick up on a child having a disability or a family needing extra support, whereas the Diploma qualification does. The other concern is that previously a Certificate III would take a year full-time to complete, therefore, providing some skills and knowledge required to support children in their learning. However, doing a simple Google search brings up an advertisement boasting that someone can obtain a Certificate III in Childcare in three weeks. Three weeks!!!! What skills and knowledge could you gain in three weeks? We have also heard within the community that these certificates can now be bought on the black market. Would you want your child in the care of someone who has limited, genuine skills in childcare and is also unethical? The Commission has stated in their report that families have choices and if they want more qualified staff involved in their children’s education and care that they can choose to pay more to a service who voluntarily provides this. What choice does a family living in poverty have? Virtually none. Research clearly shows that access to high quality Early Childhood Education and Care (and not just at 4 years of age) is one of the best ways to provide early intervention for those children living in poverty/socio-economic disadvantages. This is also why taxpayers should financially support families to access Early Childhood Education and Care (for 2 days) even if they do not meet the activity test especially in low socio-economic areas. In many cases this will be the first time that children and their families have exposure to services that can identify many disadvantages eg disability, abuse, domestic violence and can provide support to these children.
What is the difference between Early Childhood Education and Care in a child care centre?

• We believe that we provide both care and education simultaneously and that they are not mutually exclusive ie in a child care centre situation you cannot provide one without the other regardless of the age of the child.

• Many times throughout the day, care incorporates education and learning and vice versa eg an unqualified/certificate III person may know that babies love playing peek-a-boo but a more qualified staff member who has studied development in early childhood in depth will know that it is important to play peek-a-boo and why it is important and then develop further strategies to support that learning. Other examples: rolling – tummy time on floor during wake time; importance of crawling; climbing, nutrition eg juice, independence, transition from bottles to solids, stages of drawing and writing.

• Our professional support for families in relation to the care and education of their children eg offering guidance relating to nutrition and physical activity, stages of development, understanding the importance of social and emotional development as well as play based learning that will support their entry into formal schooling.

• We believe that the role and expectations of a child care centre is perceived to be and is different to other forms of care.

• We believe that the difference between just care and quality education and care is vast. If the criteria for care is the safety and happiness then the carer could feed the child eg a toddler hot chips and a coke for morning tea in their high chair (they would be pretty happy and safe) and once they were finished, plonk them into their padded playpen in front of the TV for the remainder of the morning (couldn’t be safer especially from those other pesky toddlers that push and shove and grab their toys.)

• Alternatively, a toddler at our centre would have developed the skills to wash their hands with guidance, sit at a small table with other children and wait for their turn to be served, feed themselves a drink of water and a selection of fruit and yoghurt/cheese, interact with each other and the adults in a positive way, attempt to clean the table in front of them and then their hands, and then choose with what, where and with whom to play with the support from the educators eg art experiences, water play, climbing, dress ups or role play, play dough, music, singing, stories all provided by an experienced and qualified educator and the program that they have developed for both the individual child and the group of children.

• Language development and exposure to learning opportunities that supports their language development – language acquisition begins from when the baby is in the womb and is an ongoing process from birth to when they speak their first word and first sentence and beyond as well as comprehension.

• We believe that high quality Early Childhood Education and Care supports a “child’s readiness to learn” as well as their “school readiness”. These two concepts are different. Research has shown that “school readiness is not something that suddenly happens, but rather is an outcome of a child’s life up to school entry (Hilferty, Redmond, & Katz, 2010). “Readiness to learn” supports children’s “school readiness” and is “ongoing and multi-faceted” (Hilferty et al, 2010, p. 64).

• In our capacity as educators we have to write professional reports and letters to government and non-government organisations, doctors, therapists and schools.
These communications require a high level of knowledge of child development and learning that comes with higher qualifications ie Degrees and Diplomas.

**Access to subsidised care and education for at least two days per week for all children regardless of their family/guardian situation eg work, study or at home.**

- Most child care centres charge per day which is based on the number of hours they are open during the day usually between 10 – 12 hours. The reason why long day care centres charge per day is that they cater for a wide variety of hours required per day. Even if a child only attends eg from 8.30am to 4.30pm the centre is not able to fill the unused parts of the day ie from 6.00am to 8.30am and 4.30pm to 6.00pm.
- This is why government policy allows 24 hours per week for families who do not meet the activity test for Centrelink. It enables their child/ren to attend 2 days per week at a centre regardless of opening hours and receive financial support from Centrelink for child care according to their family income. However, if these hours were reduced or stopped it may become unaffordable for the most disadvantaged families. Maybe, the policy should be based on days and not hours as different care providers have different session times.
- We believe that by restricting subsidised care and education to those who meet the activity test disadvantages families who are already dealing with many disadvantages. The choice is taken away from families who live on limited income because they would not be able to afford full fees.
- We also believe that all children should have access to at least two days a week due to the following reasons:-
  - We believe that all children have a right to access quality education and care;
  - We believe that for young children their social/emotional development prior to formal schooling is crucial and that it takes many years for children to learn to share, play co-operatively with other children and make a friend. A significant number of children do not have opportunity at home to socialise regularly with children of their own age;
  - Many parents are not aware that their child/children has delayed development or a disability until their child attends child care and a qualified educator makes them aware that their child needs a lot of extra support to grow and learn;
  - At our centre a high number of parents/families are just trying to survive and cope with their difficult home circumstances and thus they desperately need a break from caring for their children;
  - It is frequently not till a child attends child care that a qualified educator determines that the child is at risk of neglect or abuse;
  - The Department of Child Safety regularly uses qualified educators at child care centres to monitor the safety and progress of children who are at risk and contacts them for updated reports.
  - The vast majority of the families from refugee and C.A.L.D. (Culturally & Linguistically Diverse) backgrounds have not had the opportunity to have any formal education in their home country, have a home language that is verbal only (and not written) and have never previously held a pen or pencil in their life. Therefore, these families along with some parents who are born in
Australia but are not literate, are not able to model or support the
development of English speech and language for their child/children.

- A significant number of our families are disadvantaged due to having very little or no family support outside of their immediate family, which also can result in social isolation.
- Domestic violence, abuse, depression and many other risk factors are not limited to low socio-economic backgrounds. In fact, families dealing with these issues in more affluent areas may have even further difficulties as the community does not expect these things to happen in “rich”, educated or “well-off” families.

Rather than using an hour limit for child care purpose when families do not meet the activity test, the commission should recommend that it should be limited to days ie 2 days (limited to 12 hours per day) rather than 24 hours. Using hours as the criteria gives the wrong impression that people are sending their children to centres and services for longer than they actually are utilising child care. Even the Assistant Minister for Education commented recently that people who were not working were getting 3 days subsidised child care which in most cases is incorrect.

**Expanding the criteria for an approved service provider**

Although the basic concept is attractive, we can see that this recommendation could be fraught with problems. The current arrangement for nannies with many families is done through the cash economy. Many nannies live in and receive free board and lodgings but at a reduced rate of pay in exchange. There is no tax paid on the arrangement, neither PAYG nor Fringe Benefit Tax. Most families do not pay their nannies holidays or sick leave and most do not contribute any superannuation. It is assumed if this proposal is implemented that these issue would have to be addressed. A nanny would be classed as an employee under taxation rules regardless of the fact whether the nanny has an ABN or not. Who will ensure compliance to legislation and regulations, not just Early Childhood Education and Care but all government regulations eg tax, OHS? The nanny or the family? Will they need policies? Meet food safety requirements? Will the family have to become a tax collector? Will they be responsible to ensure that their home meets OHS requirements? How will the issue of non-care duties eg housework be addressed? What value will be placed on free board and lodgings? Will the family have to pay an award rate of pay, holidays and sick leave?

Of course, it would be easy to expand the Family Day Care and In-Home care schemes to accommodate the provision to employ nannies. But this would mean that the co-ordinators of these services would then be responsible for employee matters eg tax whereas Family Day Care carers are considered to be self-employed so the co-ordinators do not currently have this responsibility.

This arrangement, of course, would be further complicated if grandparents can be considered as approved providers for subsidy purposes. Will the grandparents be classed as employees? Who is responsible for the implementation of legislation and regulations? Will it be different depending on where the grandparent looks after the child/ren? Their house?
The parent’s house? How is it determined when a grandparent is looking after a child/ren for child care purposes and when they are just spending some time with their grandchildren (which is what most grandparents do)? We are not trying to undervalue the role grandparents play in families need for child care. What we are asking is where is the line drawn between carer and grandparent?

As soon as governments start paying child care subsidies to nannies and grandparents, they will ultimately be held responsible for anything that goes on there (which we have seen in recent history when other schemes are rushed and not thought out). What happens to the whole industry if this provision is not well thought out and administered correctly and with regardless to what is best for the child?

All the changes we have seen in the industry over the years have resulted in many reactive decisions. Many times governments have to react to poor legislative decisions. Please urge the government to ensure that this provision is carefully considered so that they get it right the first time.

**Pre-school – Universal Access**

We support the Commission recommendation to continue funding for pre-school in both stand-alone and those located within schools and long day care. However, we strongly urge the Commission to recommend that all Pre-schools/Kindergartens remain under the National Quality Framework and that Federal and State governments should negotiate strenuously to ensure all states and territories are under this framework. Also, should Preschools (Kindergartens) become the responsibility of the state and territory education departments, then we would have two concerns. One is that the Pre-schools/Kindergartens would be generally viewed as education whereas the programs for children aged from birth to the year before Pre-school/Kindergarten would be seen as only care and not education. Our other concern is that Pre-schools/Kindergartens may become much more formal and structured, to the point where they lose the wonderful educational benefits of play based learning, for example, in Queensland, Prep was supposed to be play based learning and now it has similar academic expectations of the children to that of Grade 1 before Prep was introduced. However, the emphasis in Pre-school/Kindergarten should be the children’s social and emotional competencies as well as their continuing development of their enjoyment of learning.

**Quality assurance processes and regulation of ECEC**

The goals of the National Quality Framework is to raise the quality in ECEC and motivate the continuous improvement and consistency in all services (Department of Education, 2014). We are very concerned that a framework that was achieved after a lengthy campaign by many stakeholders throughout Australia that supports children and their families to access high quality Early Childhood Education and Care. The framework supports consistency within the sector ensuring that the expectations are very clear to all concerned. We feel that the argument that there is too much paperwork and “red tape” is an exaggeration. Service providers need to examine their practices and streamline the paperwork required under the Framework. Any changes would involve further costs, both administrative and retraining as well as further stress to staff who have to implement these frameworks.
**Standard of Qualifications**

It is imperative that the standards of training and education for Educators be consistent throughout Australia. Originally a Certificate 111 required studying for one year full time or two years part time and a Diploma required studying for two years full time or four years part time. Over the years this requirement along with the standards of these two courses has been eroded through the deregulation of Training Providers and through many of these Providers attracting students by offering courses that are far cheaper, far less work and that take far less time i.e. fast tracking. We believe there are many disreputable Training Providers and have observed first hand a number of students coming to placement at our centre and being expected to complete a multitude of competencies in, for example, just five days. (In five days a student can barely get to know the children, the Educators and the routines.) Of course we have only marked off the competencies that the student has genuinely achieved and have refused to mark off any others. We have also experienced quite a few Training Providers not taking on their training responsibilities of marking off competencies, assisting students with assignments and monitoring students on placement but rather putting all of these responsibilities onto staff at our centre. Some Training Providers have not even visited the students once during their placement. One Training Provider lied by saying that there were no competencies to be marked off, but a week after the student commenced placement a thick workbook of competencies to be completed was dropped off at our office. We are extremely concerned about Educators who are fast tracked not being competent with safety and health issues; not knowing the basics like how and why you wash your hands and change nappies using required techniques; not being able to prepare paint and make playdough; not having resource folders for songs, finger plays and stories; and most importantly not being able to interact positively with children, their families and other Educators. For the aforementioned reasons we believe that the only way to maintain and improve standards of education/training and the only way for Educators to be seen as professionals would be for all education/training to be under TAFE or University.

**Administrative Matters**

**Combining Subsidies and the Deemed Cost Model**

Although the recommendation to combine CCB, CCR and JET into an ECLS appears to be a sound, the commission should realise that this system of combining subsidies has been done before by the Howard Government. At the time a Child Care Assistance and a Child Care Cash Rebate (which the family claimed through a Medicare Office after payment of their fees) was available to families. Soon after the payments were combined, there was a large increase in the amount some services charged. One benefit of the current system is that those families who do not meet the Work Activity Test can only access CCB. Therefore, the “Latte Mums” who use child care to “attend Yoga classes and meet up with friends for coffee” would more than likely have to pay for the full cost of child care as most families who live in poverty or on a middle class income could not afford to do this every week.

The Commission has recommended in Draft Recommendation 12.4 that a deemed cost model should be implemented so this may alleviate some large increases in fees to the parents although there may be more cost to the Government if there are services currently
charging less than the deemed cost. Another problem is to have a deemed cost that reflects the acceptable costs of all centres. As mentioned in the draft report this is difficult due to the huge discrepancies in fixed costs between geographical areas.

The other problem with the deemed cost model is that the hourly rate will be determined by what is deemed to be a reasonable cost, taking into account expenses eg wages, rent plus a reasonable surplus/profit. Obviously, at the moment, this is how services calculate their fees ie calculating their total costs plus surplus/profit.

Regardless of how many hours a child attends per day, the costs for the centre incur for the whole day eg they must have at least two staff members at all times regardless of the number of children ie if there is one child at the service there must be two staff and then staffing increases during the day taking into account ratios, needing an extra staff member each time the service is one child over the appropriate ratio. For example, you need one staff member for 4 under two’s and 2 staff members for 5 under two’s. It is virtually impossible to sell hours that are not used by a particular child on each day. For example, if a child attends LDC from 7.30am to 5.00pm and the service is opened from 6.00am to 6.00pm, there would be virtually no market to sell the hours from 6.00am to 7.30am and from 5.00pm to 6.00pm. Consequently, this is why services charge per day and why the 50 hour limit for education and care provided in a LDC becomes problematic, especially under a deemed cost model.

CCB entitlement is currently calculated based on income, the work activity test and how many hours are utilised by the family for each child. For those families using 24 hours or less their CCB entitlement has a loading of an extra 10%, for those using more than 24 hours up to 36 hours their CCB entitlement has a loading of an extra 4% and 2% for between 37 to 38 hours. If they utilise more than 38 hours per week, their total CCB is paid at the normal rate calculated on income up to 50 hours. Child Care Assistance was paid for up to 60 hours but this was reduced to 50 hours with the provision that if families can prove that they require more than 50 hours due to work commitments and travel (not because their centre charges 12 hours a day) then more hours can granted. As a result for any service that is opened more than 50 hours per week ie more than 10 hours a day, the family cannot receive CCB for the extra 10 hours the LDC is open.

Consequently, the family receives very little CCB entitlement for the fifth day and actually has to pay considerably more compared to someone who uses only 4 days per week (before CCR). If the family is entitled to CCR then this makes the fifth day more affordable. For example:

Service charges $100.00 per day. This is $400.00 for 4 days and $500.00 for 5 days. Family is entitled to 100% CCB for one child. Their gap between fees charged and CCB payable and their CCR entitlement is:
Deemed Cost Model

<table>
<thead>
<tr>
<th></th>
<th>ECLS</th>
<th>Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 days (90%)</td>
<td>48 * 7.53 = 361.44</td>
<td>38.56</td>
</tr>
<tr>
<td>5 days (90%)</td>
<td>50 * 7.53 = 376.50</td>
<td>123.50</td>
</tr>
</tbody>
</table>

As you can see although the family who are using 5 days under the deemed cost model are slightly in front compared to the current system ($26.00) they are far worse off when comparing them to families using 4 days a week. The difference under the current system between 4 days and 5 days is $47.90 but under the proposed model it will be $84.94. This may actually work against the government’s goal of increasing work participation.

For example, currently, at our centre, families who use 5 days per week on a 100%, pay a gap fee nearly double to those who use 4 days even though the 5 days daily fee charged (before subsidies) is discounted by $6.00 a day compared to the fees charged for the 4 days daily fee. At the moment although the government limits CCB to 50 hours, CCR is paid on the total out of pocket expenses including anything that is paid for more than 50 hours.

The next problem with the Deemed Cost Model (or many other models) is that this model is trying to cover acceptable costs plus a reasonable surplus/profit. As pointed out in the draft report this may vary greatly between centres, cities/towns and states/territories. However, regardless of these considerations, the first problem is covering reasonable costs while limiting the subsidy to 50 hours. As previously pointed out all costs can’t be covered by government subsidies as there is no relation between hours open (and therefore, costs) and hours subsidised. As a result, the new deemed model will not cover the full cost and will need to be made up by the families, resulting in the scenario described above.

The general rule of thumb to calculate fees is to work out all your expenses plus surplus/profit for the year divide this by the number of weeks the service is open, work out what you believe your average number of children will be over these weeks and divide this into your calculated weekly expenses then divide this again by 5 (Equivalent Full-Time Rate). This figure is your daily fee. (If you charge based on age you would have to do this process for each different age group.) For example:
Total Expenses (not including surplus/profit)(amount used for simplicity): $780,000

Number of weeks open: 52
Weekly Expenses plus surplus/profit: $15,000
Average Number of Children per day: 50
EFT (fee for each equivalent weekly place) $300.
Divide by 5 for daily fee: $60.00

I have provided the example of calculating fees to show regardless of whether a centre charges for a full day or only 10 hours a day (even though they are open for 12 hours a day), they still need to receive, on average $60 per day for each place ie 50 places to break even. So, therefore, the deemed cost model hourly rate will be higher under the 50 hour limit compared to a 60 hour limit resulting in all centres getting the higher rate regardless of the hours they are open. For example, all fixed costs (eg rent) are the same in this example – the only costs that are different are the variable costs (eg wages):

The Deemed Cost Model - 50 hour limit – hourly rate $8.00
Centre 1 open 10 hours per day 8*50 = $400.00 * 90% = $360.00
Centre 2 open 12 hours per day 8*50 = $400.00 * 90% = $360.00

The Deemed Cost Model – 60 hour limit - hourly rate $7.00
Centre 1 open 10 hours per day 7*50 = $350.00 * 90% = $315.00
Centre 2 open 12 hours per day 7*60 = $420.00 * 90% = $378.00

So, as you can see, although the government is paying out more under the 60 hour limit for Centre 2 compared to the 50 hour limit ($18), it is paying out far less for Centre 1 under the 60 hour limit compared to the 50 hour limit ($45) as the deemed costs are spread over different hours reflecting better the costs of each different centre ie less variable costs for Centre 1 compared to Centre 2.

However, coming up with a working model that is fair to all ie centres and families, will be very difficult. The only solution I can think of for the geographically discrepancies is to work out what an acceptable level for fixed costs ie rent that is applicable for the centres not affected by their location ie centres not in Melbourne and Sydney and pay the centres in Melbourne and Sydney a subsidy directly to cover the difference (they would have to submit a claim with proof of rental costs or maybe it could be done through the tax system when the centre lodges its tax return – however, this would only work for enterprises that have to lodge tax returns ie private centres). Of course, the expectation would have to be that they would then charge less to their families.

Paying the ECLS directly to services would certainly provide certainty to services. Currently, families have the option to choose if CCR is paid directly to the service or to them. If the families chooses to have CCR paid directly to them, this is currently paid regardless of whether the fees owed to the service have been paid. Thus, currently, families are able to receive taxpayer’s money even when they have not expended any money themselves.
Information Request 12.4 asks what would be the best way to determine a deemed cost of providing early childhood education and care. One suggestion could be to use the taxation system to look at private organisations profit and loss statements and obtain an average from this. No identification of individual services would be needed but using data from information lodged would enable the government to look at different factors that affect the cost eg location, rent, etc. Because tax returns have to be lodged yearly, the information would be relatively up-to-date. Also, non-profit organisations usually have to an incorporation or company limited by guarantee and these organisations have to lodge their audited reports to a State Government Department annually to meet the requirements for that type of entity. Therefore, there is a wealth of information already available to help determine the deemed cost for providing early childhood education and care. The government could add a CPI increase since the information would be a year old. This suggestion would obviously have to be looked into in more detail as some expenses (and income) may be unusual compared to the industry norm and adjustment would have to be made based on this.

Centres dealings with Government Departments and Agencies – Centrelink and Non-Government Organisations

I actually am finding it difficult to describe our dealings with government departments, their agencies and other non-government organisations (Inclusion Support Providers and Agencies). Obviously, by its very nature when you are dealing with bureaucracies it can be frustrating and exhausting. This has been especially noticeable since recent governments (including the current one) have been reducing the size of the public service dramatically and expecting outsourced work to be done for less cost. These reductions have resulted in a greatly reduced level of service for both us as a centre and for our families. I suppose because we have such a high number of families from culturally and linguistically diverse backgrounds it is more compounded but when basic entitlements are not processed correctly, it is of great concern especially when this can result in a multiple number of contacts to try and resolve the issue.

The reason why I bring this up is that in the draft report many recommendations especially those relating to children with a disability, work activity tests and families with disadvantages are based on the assumption that entitlements will be processed in a timely and correct fashion. I’m sorry to tell you that this may not occur. We, for example, had one family (grandparents who had their grandchild placed in their care) who waited 3 months before Family Tax Benefit (FTB) was granted and another 1 month before their CCB was granted (and the CCB was only granted from the date processed not the date claimed resulting in a large bill which we had to write off (we can backdate up to 28 days from date of grant) – something we cannot afford by any stretch of the imagination). They were entitled to the Grandparent CCB (GCCB) which covers the full cost of care (at our centre) but this was not granted until they recontacted Centrelink which took another 3 weeks to process, again only being reassessed from the date processed. The other problem of the original grant of CCB was that they were only granted 24 hours not the 50 hours they were entitled to be granted (as they had an exemption which entitled them to 50 hours). The whole process was very stressful for both us and the grandparents. But what is worse is that this is not a rare occurrence (we regularly have families who are granted from the
wrong date and for the wrong hours). Luckily, in most cases, it is not as extreme as the case mentioned but that is not the point. These claims and reassessments should be done correctly and, because we are all human and mistakes happen, if there is a mistake then that mistake is fixed up from the correct “date of effect” (DOE). I have had Centrelink staff deny that families with a parent or child with a disability are entitled to 50 hours and I have even had staff deny that claims and reassessments must be done from the date claimed or date of notification ie little understanding of the concept of what is the DOE. It is clearly stated in both legislation and the guides to legislation that claims and notifications must be dated from the date lodged but many staff have little or no understanding of this. I have tried to address this issue on many occasions but because I am not a “client” of Centrelink ie I’m ringing as a representative of the centre I do not achieve any results. All it needs is a little training and some reinforcement at local Centrelink services to resolve the problem. I’m hoping that the Commission could make a general recommendation relating to this issue.

One way that centres could be “used” to support the processing of CCB (or the proposed ECLS) is by giving centres the ability to submit an enquiry through CCMS for families. This enquiry would register a transaction on the Centrelink database which could be selected by staff at Centrelink who process the enquiry thereby ensuring that the correct details are processed eg DOE. The enquiry would only be processed once contact was made by the family (maybe with a time limit eg 14 days that contact needs to be made or the transaction is automatically cancelled). This would be extremely helpful for families, the centre and Centrelink especially if the centre had the ability to put notes into the transaction. There would be no issue with the Privacy Act as the centre would not be receiving any information other than that they already receive through CCMS ie percentage, hours and details regarding CCR.

Another suggestion that may support a more efficient processing of CCB would be to automatically grant CCB at the time the family claimed FTB (which a majority of families would do). As child care subsidies are only paid when the family actually utilises child care, there would be no extra costs associated with this recommendation (except for a change in software). Families already have to notify Centrelink of changes so if both FTB and CCB was updated then in most cases, the current information would be correct. This would mean that when a family uses child care for the first time, the centre can advise the family immediately when the fees are payable.

We also have considerable dealings with Inclusion Support Providers and Agencies. The government is constantly changing criteria as well as the forms, formats of reports and documents we need to provide when we are applying for Inclusion Support Subsidy (ISS). Sometimes it is not made clear by ISS as to the range of documents that are acceptable and the precise wording of an Evidence Letter that is acceptable. This can result in even more time being taken for the application to be approved. The following is an example of the cumulative delays we experience on a regular basis. A week after it was requested a paediatrician provided an Evidence Letter regarding a child who was still waiting for their assessment. However, the wording of that letter was not accepted for the IS Application. Then, even though I faxed a request for another letter to the correct fax number, this request was collected by a different section who held onto the fax for a week and did not
pass it on to the relevant section. Following this week’s delay, due to the paediatrician only working part time at that location and being extremely busy, it took a further two weeks for the paediatrician to provide a letter that was deemed to be acceptable. When a centre is granted ISS it is only granted for a limited period of time and the centre has to reapply for the subsidy. This year the period of time for which the subsidy has been granted has been decreased by the government and as a consequence we have been required to do a lot more paper work. This in turn has resulted in taking up much more of our time and energy and this along with constant delays has caused us significant stress. Furthermore we are now required to input more information for the online IS Application which in the past was done by the Inclusion Support Officer. This added responsibility has been especially cumbersome and frustrating as the system constantly has multiple errors and frequently freezes. We currently have one child whose support ceased in May and although we reapplied more than 16 weeks ago it still has not been granted. There are constant delays because the case worker at the agency was sick for a period of time, the Provider needed extra information (which had already been provided) or they needed that information on a new form or in a different format. On one occasion a child had to be taken off an IS Application due to a delay in the provision of an Evidence Letter and later put back on the Application. From when we finally received this Letter of Evidence from the paediatrician, in spite of constantly requesting the application form from the Inclusion Support Agency, it took two weeks just for the Inclusion Support Agency to e-mail us the application form so that we could attach the Evidence Letter on line. It just goes on and on. Due to the Additional Worker no longer being funded to work in this child’s room the child experienced a break in the bond of attachment they had formed with the Additional Worker and a lack of continuity of education and care. This child has regressed since we lost the extra person in his room to the point where he again displays withdrawal behaviours and aggressive behaviours such as throwing things at other children and staff, pushing other children and pressing cushions against children’s faces. He’s probably back to where he was when he first started at our centre. Again I’m mentioning this because this process does not support inclusive practices. It should be noted that these constant delays and long gaps in the provision of an Additional Worker for the room also mean that the Additional Worker loses their job and income and may not want to wait indefinitely until their position is reinstated. Ultimately, if the Additional Worker leaves to find other employment, then this will substantially affect the child as they will have to start all over again with forming a bond and developing a relationship of trust with the Additional Worker.

AMEP

When a family is entitled to AMEP, this is approved (in Queensland) by TELLS. The time framework for this approval can vary and we have, on some occasions, waited up to 4 weeks before being advised of a family’s approval for AMEP. AMEP is not paid through the normal CCMS through which other subsidies are paid but is done manually with the service having to submit a tax invoice for payment. In many cases these payments can be made up to 2 months from when the care (and entitlement) commenced. It is a very cumbersome system and there are no links between the two systems. We have been told that there are some service providers (but certainly not the majority) who will still claim CCB for children for whom they already receive AMEP as there is no way that the CCMS knows that AMEP is being paid.
I have never understood the philosophy behind paying AMEP under a different system although I'm sure that someone from the relevant department would be able to explain the reasoning behind it. However, although I support AMEP and the fact it covers the general costs of childcare for certain circumstances and types of care, I do not understand why it cannot be part of the CCMS which would save considerable time as well as the funds being made available 2 – 3 days after submitting attendances rather than up to 2 months. I know the Commission is recommending changes to JET and its administration but maybe AMEP could be run under a similar administrative process (although it does cover all the cost whereas JET covers most of the cost up to a certain limit) or maybe just do away with AMEP altogether and just have 100% subsidy under the proposed ECLS for those who meet the criteria for AMEP.

**Children with additional needs**

In the draft report many references are made to children with additional needs. Unfortunately, in the world of the public health system, obtaining a diagnosis for a child with additional needs is very drawn out. We have many families who are on the waiting list with the developmental unit at the local community health centre or at the children’s hospital and have been for over a year. If entitlements to extra support, whether that be through extra child care subsidies or extra funding, for the centre to support a child with extra needs is dependent on a diagnosis then many children and their families will be placed in a situation of great disadvantage.

I propose that instead of looking for a label to place on a child, that an emphasis be placed on what a child can do compared to what would be expected of a child of that age - similar to how eligibility to Carer Payment and Carer Allowance are assessed under Centrelink. I have attached a copy of the form that is required to be completed to claim Carer Payment and Carer Allowance (Appendix 1). As you see the form is completed by a medical practitioner. It looks at the highest level a child can achieve under certain developmental milestones (this is used if the child doesn’t have a disability that entitles the carer to an automatic eligibility to Carer Allowance – these disabilities are also listed on the medical report form). Centrelink than compares these answers to what would be expected for a child of that age and this determines whether the carer is entitled to Carer Allowance. I do not know about the comparison levels used by Centrelink and I think it is processed through computer software. However, obviously the government would be able to access this information enabling them to utilise this same system for support for families using child care. The downside of implementing this recommendation is that more people may then be able to access Carer Allowance and therefore, increasing the cost of that funding program.

**Averaging staffing requirements over the week**

I’m sorry but this recommendation would not work. Just because you might have been over your requirements for staff on eg Monday has no bearing on staff requirements for Tuesday or any other day in the week. If nothing else it would be completely unsafe and detrimental to the Educator/child interactions and the development and education of the children. I do not think that not being able to find staff to cover the ratio for a particular day or a particular part of the day can be any justification for actually implementing this
recommendation. The most number of staff we have had to find for one day was 7 including covering our cook. We still managed to cover all 7 staff by calling all our relief staff (we had three at the time), calling other centres to ask for help and obtaining names of their relief staff and calling a staffing agency. There should be no exception made to keeping the current ratios (or improved ratios) for lunch time, programming time or when staff are sick, away at appointments or on holidays. Ratios should be black and white and not grey. They should never be left open to interpretation. I can think of no situation that could justify implementing this recommendation and I think, in 99% of cases, centres would be able to cover ratio if they put their minds to it. Maybe a compromise could be that a centre could use a person without the appropriate level of qualification (as long as they meet the “working with children” checks) for one day with approval from their regulatory authority but I think even this should only be allowed for centres in remote areas where they do not have access to a staffing agency or many qualified relief staff.

**Subsidy for those families who do not meet the activity test**

I have addressed this issue under our general submission relating to the impact of this recommendation on children and families if implemented. However, I also would like to address this issue under administrative issues as it will also impact service providers, in particular, centres.

As you are aware, the number of children a centre can take is based on a number of issues. The first is their licencing capacity ie how many places they have been approved for, based on the size of both the rooms and the outdoor area. Secondly, the age of the children and ratio of staffing to the number of children. The shortage of childcare is mainly in the under 3’s. The reason for this is obvious – you need more staff for the same number of over 3’s based on the child/staff ratio. The older the child the more choice is available for families to utilise ie there are pre-kind and kindy programs provided in Long Day Care centres, stand-alone kindergartens and many schools, especially private schools. Therefore, because there are so many more services available for older children, centres would find it difficult to only take children from families who meet the activity test or rely on families to pay the full cost. This may work in an affluent area but it would be crippling for a centre like us. As mentioned in our background information, we only have one family who does not meet the activity test utilising child care for a child under 3 (they are 2 years and 9 months) and the rest of the families who do not meet the activity test are utilising child care for a child over 3. The reason being is we have less families enquiring for a place for a child over 3 who meet the activity test and therefore, we can offer 2 day places to families who do not meet the activity test. We could not remain viable if families had to pay the full cost as most of our families live in poverty. We also could not take just children under 3 as this would make the costs to families prohibitive again impacting on the viability of our centre. I am sure that most centres would be in the same situation.

I think the issue is to ensure that all children have access to childcare but limit the number of days to two for families who do not meet the activity test with the maximum number of hours for a day being 12 hours. I do not think that in a Family Day Care situation that 12 hour days or 10 hour days should be the norm as the costs and other issues in Family Day Care are considerably less. I think in a non-centre situation a day should be no more than 7 – 8 hours.
Fees and affordability

Much has been made about fees charged and affordability. I am providing the details of the fees we charge but I want to stress that charging such a small amount for fees impacts the centre greatly. We are well below average. However, there would be no point charging more as our families could not afford to pay and we would probably be less likely to get them to pay anything. At least, by having our fees lower, this allows families to access child care that they can afford and actually pay for without thinking they are receiving charity.

Our fees are:

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<thead>
<tr>
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<th>Full Fee</th>
<th>Gap if on 100% CCB</th>
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<tbody>
<tr>
<td>2 days</td>
<td>$122.00 per week</td>
<td>$13.76 per week</td>
</tr>
<tr>
<td>3 days</td>
<td>$177.00 per week</td>
<td>$23.49 per week</td>
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<tr>
<td>4 days</td>
<td>$224.00 per week</td>
<td>$27.20 per week</td>
</tr>
<tr>
<td>5 days</td>
<td>$255.00 per week</td>
<td>$50.00 per week</td>
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(We greatly discount full time due to the lack of CCB covering the 5th day. Even with the discount the gap for full time is nearly double that for four days.)

The centre provides nearly everything the child needs while at our centre. We provide morning tea, lunch and afternoon tea including milk at lunch time (we ask families to bring one piece of fruit to be cut and shared), hats, sheets, blankets, towels and all consumables eg tissues and sunscreen. The families have to provide bottles and the milk for children still using bottles and nappies as well as any changes of clothes.

Although we believe that we provide a high quality service (and this belief is supported by our assessment under The National Childcare Accreditation Council (NCAC) – we have not had our assessment under the new framework yet), this is mainly due to our great staff. Until about 5 years ago we nearly closed about 5 times due to financial difficulties. However, we are now managing much better but charging such small fees impacts us and the staff.

We are very time poor. We do not have the funds to employ enough administration support. Our families need considerable support and this support takes up a considerable amount of the non-contact staff’s time. We are swamped with paperwork that we cannot deal with in a timely manner and we have little time to follow up on things eg fee collection. Maintenance at the centre is a serious issue. Although we can afford to maintain the centre at a safe level, we struggle to be able to do anything further. All maintenance issues that cost more than a $1000 in any one year are reliant on us receiving a grant (which is not very often). We have received a number of large grants over the last 30 years that have enabled us to address serious issues relating to plumbing, drainage and roofing (we used to flood every time it rained heavily). The centre is nearly 40 years old and obviously needs more maintenance than a new centre. In the whole time I have been associated with the centre (1990) the outside has never been repainted.
We have always wanted to provide more services at our centre ie a hub. We can see a huge demand for therapists (speech and language, physiotherapy and occupational therapy), counsellors (especially relating to domestic violence and budgeting) and parenting courses. However, we do not have the funds and when we have approached government departments we have not been successful in obtaining any government support. With regard to supply and demand of a needy client base, we are in an ideal location to provide a hub service and we have plenty of land available for the construction of buildings. Also we believe that our families, with whom have established a relationship based on trust and open communication, would readily access such a service without feeling threatened, labelled or judged.

**Family Day Care**

One concerning thing which is rapidly taking over in the childcare sector in our local community is that many family day businesses are being opened up in the local community (previously family day-care could only be coordinated by community, not-for-profit, organisations). Many disturbing stories are appearing in the local community relating to these businesses. We know that this situation has been brought to the Commission’s attention previously but we would like to confirm that these concerns are genuine and involve:

- Swapping children for the purpose of accessing Child Care Benefit – because the carer is “working” they are entitled to 50 hours of subsidised care. In many cases, the swap is only on paper and they actually do not care for any other children other than their own. Many of the children are being booked in for 50 hours including weekends. In cases of school-aged children, even if the carer actually has other people’s children in their care it only involves the collection and dropping off of children between the child’s home and school. However, regardless of whether they have the children in their actual care or are just swapping on paper, they are claiming Child Care Benefit from 2.30 pm to 9.00 pm.
- Parents being asked to sign their children in and out of care even if the child was not booked in for that particular day or session.
- Claiming for days when the child is attending another service and not reporting absences. We have been told that some of these businesses rarely declare absences which in some ways is good as it enables government departments to gather evidence of non-compliance.
- Being pressured by members of their community to take their children out of other care and educational environments and to place them within the care provided by these family day care businesses. There are also some stories that children in these care environments are sat in front on the television for most of the day and there is great concern that children are not accessing Kindergarten Programs.
- Centrelink and taxation fraud – We have been told by community members that many carers under these providers submit incorrect and fraudulent tax returns which not only limits their taxation liability but ensures that they can access the maximum amount in Centrelink payments eg Family Tax Benefit, Parenting Allowance.
One of the reasons why we are bringing these concerns up is that these practices are, in some ways, the result of government policy. We request that the Commission and the Government investigate and implement stringent legislation and policies for both current care providers as well as for nannies and grandparents (if it is decided to subsidise these forms of care) to ensure that taxpayers’ money is provided for genuine care situations. We do have some suggestions to support preventing fraudulent practices which are as follows (we are not sure if any of these suggestions would be able to be implemented as legal and administrative issues would have to be addressed):

- Not allowing Family Day Care carers to look after children from other Family Day Care carers from the same scheme or who are under the same owner/co-ordinator. Carers and co-ordinators who are undertaking these questionable practices are creating the need for “care”. In other words, the only reason why they need care is so they can “take” children and make money. Because they are considered to by self-employed they are entitled to 50 hours subsidised care and therefore, each of the carers claim 50 hours for each child. I have been advised most of these dubious Family Day Care schemes claim 50 hours for nearly every child and virtually never notify of a child being absent. We have heard from the community that many of these “carers” are making about $2000.00 a week. This is more than double what our staff receive for full time work.

- All approved service providers have to submit their attendance weekly or fortnightly. Each attendance is linked to a child and is submitted under the service provider’s name ie the owner of the service. I’m suggesting for Family Day Care Schemes that each child being cared for by a Family Day Care carer is linked to that carer when the attendances are submitted. Therefore, there would be a sub-category when submitting the attendances. Each carer would have to provide either their Customer Reference Number from Centrelink, their Tax File Number or ABN. This would be inputted by the co-ordinator of the service into their software program and submitted as normal. Payment arrangements would remain the same. The benefit of doing attendances this way is it enables Centrelink and the Australia Tax Office the ability to see who should be submitting business income and expenses. It would be a great tool for data matching.

Initially, there would be a high work load for the co-ordinator to obtain and enter this information. However, after this was done there would be only a small increase in the time taken to enrol children. Previously when there has been a major change in administration requirements by the government a small grant was provided to cover these costs. Maybe this could be done again. The only other issue would be changes to software programs both for the Family Day Care scheme and the government.
Assessing for disadvantage

Information Requests 8.1 and 12.9 asks how can it be determined if children are developmentally vulnerable and how and what support do these families require to access education and care.

The issue relating to children (and families) with additional needs, whether those needs relate to learning, “at risk” or any other disadvantage is the best demonstration on why all families should have access to universal early learning and child care for at least 2 days. As previously mentioned in our background information, many children at our centre with additional needs were only identified when attending our centre. Families build trust with the children’s teachers and carers in early childhood settings and many times reveal very personal information that they may not even tell other family members. Issues relating to domestic violence, abuse, mental health issues etc are not just confined to low socio-economic areas. Staff at our centre have identified learning delays, abuse, domestic violence etc that had never been identified before. This is not an unusual situation. It would be terrible if a child was hurt by a parent/guardian for the first time if this could have been prevented by a family accessing subsidised early childhood education and care.

The issue should not be whether all families should be able to access subsided early childhood learning and care but when should they be able to access more than 2 days. One basis for assessment could be using the same concept previously mentioned to identify children who have learning delays or a disability. The income test could be used to determine other types of disadvantages relating to poverty. Another assessment that could be used is looking at geographical areas and where they rate under the socio-economic status complied by the Australian Bureau of Statistics.

Currently a service can be exempt from the 24 hour limit, ie all families are eligible for 50 hours regardless of whether they meet the activity test or not, if they meet certain criteria. These criteria relate to the location of the service (rural or remote), that they are the only service of their kind in the area and that they can demonstrate not granting the exemption would adversely affect their viability (Department of Education, 2014).

Although, I’m not suggesting that this be expanded for services, I am suggesting that a similar concept should be expanded to families who live in areas identified using the Socio-Economic Indexes for Areas (SEIFA) (Australian Bureau of Statistics, 2011).

This is one area for which the government must ensure they have the right balance.

Conclusion

We plead with you in your deliberations over the final draft that when you consider whose interests are the most important ie service providers, taxpayers, parents/guardians and children that you will put the best interests of the children before anyone else’s economic concerns.
LIST OF REFERENCES


