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TRANSCRIPT OF PROCEEDINGS

**PRODUCTIVITY COMMISSION (VICTORIA)**

**MS D. BRENNAN, Commissioner**

**MS L. GROPP, Commissioner**

**MR M. STOKIE, Commissioner**

**PRODUCTIVITY COMMISSION EARLY CHILDHOOD EDUCATION AND**

**CARE PUBLIC HEARING**

**FLEX BY ISPT (KING ROOM), LEVEL 2, 345 GEORGE STREET, SYDNEY**

**1.29 PM, MONDAY, 26 FEBRUARY 2024**

MS D. BRENNAN: Thanks, Miriam. All right. Well, good afternoon everybody. I’m going to just begin with some preliminary remarks, but welcome to this afternoon’s public hearing for the Productivity Commission’s inquiry into early childhood education and care. I would like to begin by acknowledging the traditional custodians of the lands on which we’re meeting today and pay my respects to elders past and present. I’m Deb Brennan and I’m a commissioner with the Productivity Commission and I’m joined today by my fellow commissioners Lisa Gropp and Martin Stokie.

MR M. STOKIE: Good afternoon.

MS BRENNAN: Also in the room, Miriam Veisman-Apter one of our assistant commissioners and Guy, a team member and we have some other members of our inquiry team online. So what we’re doing in these hearings is facilitating feedback from the public, feedback and comment on the recommendations – draft recommendations and findings that we made last November. And then following these hearings we’re working to finalise the actual report and to deliver it to government by the end of June this year, and that’s once we’ve considered all the evidence at the hearing, the submissions that we’re receiving in response to the draft and also additional work, modelling and analysis that’s being undertaken by the Commission. And we will let everybody who has registered their interest in the inquiry know about the final release of the report by the Australian Government. That doesn’t happen immediately when we give it to them but it has to happen within 25 parliamentary sitting days of our delivery of the final report. So we’re very grateful to everyone, the organisations and individuals who’ve taken the time to meet with us and to make submissions and to come along to the hearings.

After this very formal introduction, I will say that we’re aiming to actually conduct these hearings in an informal manner but there are a few formalities associated with this process. One is that – that the proceedings are being recorded and there’s also a full transcript being made and that will be put up on our website in due course and that means that we can’t take comments from observers during the hearings but at the end of the afternoon’s proceedings there will be an opportunity for anyone who has joined us to make a comment or short presentation. People aren’t required to take an oath but under the Productivity Commission Act it is a requirement that people be truthful in their remarks.

We don’t have any media here today but I will still mention that there are some rules. It is not permitted to broadcast proceedings and taping can only take place if there has been an agreement about that. But if the media do join us, they’re able to tweet and use the internet to convey some of the content of the hearings, so it’s worthwhile to know about that. Yes. The hearing is being made available online in real time for members of the public to observe and occasionally we do see people coming in and out and, of course, we ask people online to keep their microphone on mute. Well, we do, as a formal matter, need to remind you that in the event of an emergency we go out the door here and get out quickly and follow any signs. I think with all of those

things out of the way, I am going to welcome you, Jackie, Jackie Emery from Royal Far West. So – and ‑ ‑ ‑

MR STOKIE: You’re welcome to ‑ ‑ ‑

MS L. GROPP: Sit up at the microphone.

MR STOKIE: It just helps with the ‑ ‑ ‑

MS GROPP: Transcript.

MR STOKIE: ‑ ‑ ‑ transcript.

MS BRENNAN: Yes. So – so welcome, Jackie, and thanks very much for your engagement with the inquiry to date including your initial submission and your post-draft submission. So I’m sure you know the drill, we’re here to receive responses to the draft and I think you may have indicated to our colleagues that you have a few particular issues that you would like to raise with us. But you might like to begin by, for the record, stating your name and the organisation that you’re from and then perhaps just make some opening comments and then we will have a discussion with you.

MS J. EMERY: Terrific, thank you. My name is Jackie Emery. I’m the CEO of Royal Far West and I would like to also acknowledge the traditional owners of the land on which we meet today and pay my respect to elders past and present and children who will become our future elders. First of all, thank you to the commissioners for allowing me to address the public hearing and I would like to make a few remarks. Royal Far West is in its 99th year of operation.

MS BRENNAN: Goodness, that’s impressive.

MS EMERY: It is.

MR STOKIE: Well done.

MS EMERY: We are a specialist child development service supporting children in rural and remote areas across four states. We work with some of the country’s most vulnerable, disadvantaged and isolated children and families. We provide assessment and therapy services to children and build the capacity and skills of the key adults around the child. This includes their parents or carers, teachers and early educators and local health professionals. Much of our work takes place in schools and we are increasingly providing services into early years – early learning settings. We see a dramatic difference in the impact we can make with a child if we can reach them before they start school, identifying their developmental challenges, delivering targeted treatment plans and helping their parents to develop the knowledge and skills to best support them and, importantly, building the capacity and confidence of

early educators to employ the right strategies in the classroom. This sets everyone up for success.

In the communities we work with, up to four children in 10, and in some cases eight children in 10, are developmentally vulnerable and this makes for a highly complex learning environment and early educators are struggling with limited professional development opportunities and little or no access to allied health. The Productivity Commission draft report makes great strides in understanding the complexities and limitations of our current ECEC model. A universal early childhood system needs to address the inequities of the current system that leaves children in underserved and unserved markets consistently falling behind. Although achieving this goal may be a decade in the making, it is important and urgent to put in place interim solutions to support the cohort of children that have been disproportionately affected by events of recent years: drought, floods, bushfires, pandemic, cost of living crisis and now a rural health workforce crisis in order to avoid significant downstream cost to government.

We would like to see solutions now that target (1) access, supply-side funding and supports for alternatives to centre-based day care, nationwide access to three- and four-year-old preschool; (2) affordability, the abolition or relaxation of the activity test; and (3) integrated care, more expansive and fit for purpose inclusion supports that acknowledges the role of allied health professionals working in partnership with early educators to enrich child development outcomes whilst working towards a universal high quality child development system that gives every child a chance to reach their full potential. Thank you.

MS BRENNAN: Thank you so much, Jackie. And I just think it’s appropriate to say congratulations on representing an organisation of such longevity and high reputation in the community. And you’re bringing to us information and a perspective, as you’ve said, from some extremely vulnerable and disadvantaged communities, those figures of four in 10 and perhaps 8 in 10 children – did you say being developmentally vulnerable, is that the phrase that you used?

MS EMERY: Yes.

MS BRENNAN: Yes.

MS EMERY: Yes. So as measured by the Australian Early Development Census ‑ ‑ ‑

MS BRENNAN: Yes. Yes.

MS EMERY: ‑ ‑ ‑ they may have a concern on one or two, often two developmental domains and we see that more and more the further you get away from regional areas.

MS BRENNAN: Yes.

MS EMERY: From metro areas, yes.

MS BRENNAN: From the big – so that’s interesting because you would see – you would see those figures from the census when the children start school but I guess you’re saying to us you observe it in the early years settings as well.

MS EMERY: Yes, absolutely. I note in my – in the response to the draft submission we ran a program called the Healthy Kids Bus Stop which was a developmental screening program for about eight years and we did 18,000 assessments across 420 communities, rural and remote communities. And part of that program was going and finding children, so we would work really closely with the communities because most of those children weren’t attending early education and care because there was no availability. And throughout the eight years that program ran, 80 per cent of the children that we screened had a developmental challenge on one or more.

MS BRENNAN: Yes.

MS EMERY: So the need is really great. And what we find and which is backed by the evidence that if you can support children before the age of five then you can really make a difference. And sadly a lot of the kids that we see at Royal Far West are more in that eight or nine year groups so they haven’t really been picked up until they’ve started school and by then a challenge that might have reasonably easily been resolved as a – as a preschooler has now cascaded into mental health issues alongside the developmental concerns that they had that were pre-existing.

MR STOKIE: Jackie, does the name suggest that that’s a mobile service, like it was literally bus stop – bus going around to various regional communities or areas?

MS EMERY: Yes.

MR STOKIE: Is that how it worked?

MS EMERY: Yes, it was. And so the – the screening process would take a week at a time ‑ ‑ ‑

MR STOKIE: Right.

MS EMERY: ‑ ‑ ‑ in these communities and they generally weren’t in really larger regional centres like Dubbo, for example. They were in smaller satellite-type communities so that we were really reaching the most needy children. And it – it was a mobile service and we’ve now since ceased that service when the New South Wales government determined that they would do developmental health checks for all children aged four.

MR STOKIE: Did the bus have the capacity, then, to have the children come on board and do the assessments in, I suppose, a private sort of environment? Is that – is that right?

MS EMERY: Yes. And – well, partly in the bus so it was a specialised setup with kind of audiology ‑ ‑ ‑

MR STOKIE: Yes.

MS EMERY: ‑ ‑ ‑ equipment, etcetera.

MR STOKIE: Yes.

MS EMERY: But also we would use things like community halls. We would often work within a school as well and actually identify – but often just like a town hall, a local town hall and we would have stations with speech pathologists, occupational therapists and we tend to do – we tended to do this in collaboration with the local health districts.

MR STOKIE: Yes. The reason I belabour the questions is that we have had some conversations where jurisdictions are moving to do that but then they raise the concern of, well, in the service, in the centre wherever that was to be they don’t have the facilities to do anything but provide the early childhood education care, they can’t take out – they don’t have a spare room or capacity.

MS EMERY: Yes.

MR STOKIE: But if it’s a mobile service, then it sounds like it actually would work particularly well and you can get to everybody and not restricted other than parking, I suppose.

MS EMERY: Absolutely. And generally there’s plenty of space for that in rural areas.

MR STOKIE: Exactly. Exactly.

MS GROPP: Jackie – thanks for that. For the children who aren’t attending ECEC, what do you see – is it affordability issues, is it the activity test, is it access to all of the above? What are the – you know, we have proposed 100 per cent of – you know, a subsidy of 100 per cent of the cap for families on incomes below $80,000, removal of the activity test up to 30 hours or three days in lieu and then also expansion of CCCF funding to sort of target these areas. What – do you think that’s going a fair way with – if that were implemented, and assuming we can get the workforce, that’s a big assumption, but would that – how would that help these families? Do you think there would – there’s still barriers? You know, just how far down the track would we be able to get with those recommendations.

MS EMERY: Well, I think – I mean, this is the complexity of operating in a rural area and I suppose this is why they have been long term underserved or unserved markets because there are multiple kind of points of failure, if you like. So, you know, housing is an issue. So for attracting early educators, available housing we – I think we reported in our first submission that we have known of early educators that have been couch surfing and not being able to find accommodation. Of course the work force – and the work force issues are really – and the revolving door that we see of early educators is very much linked to the complexity of the kids in those spaces.

I have gone and met with hundreds of early educators, directors that have been in this game for decades leaving the industry in droves because of the complexity of the challenges that children are presenting with in these areas. So it’s very much linked to retention. It’s not just about pay but it’s also about acknowledging how difficult their job is in some of these environments and just the ability to actually be able to provide early learning, play-based learning is really difficult when you’ve got children – many children with these kinds of challenges that often do display with behavioural issues, etcetera. All of those things that you mention will go a long way, however, and I think that currently the biggest issue, and we know this through the Childcare Deserts Report, is just the accessibility.

Transport is part of that, so often there just is no transport like there is for school getting children from the farm to the early childhood centre or – in addition to that there’s – you know, there – where there are – where there is provision through things like mobile play groups or family day care there’s just not the kind of funding models to support the longevity of those kinds of services and so that’s an issue. I think with the funding issue around the CCCF these centres where there are centres are so under the pump. The don’t have, number one, the time to apply for grants; they don’t have the knowledge in how to apply for grants. And so they’re two very big barriers for some of these services. I note that with the CCCF there is an advisory service once you actually get your fund but really there needs to be an advisory service, I think, and easier tools for community ‑ ‑ ‑

MS GROPP: Didn’t we ..... recommend ‑ ‑ ‑

MS BRENNAN: We – we agree with that, yes.

MS GROPP: Agreed some sort of navigator assistance to .....

MS BRENNAN: Yes.

MS GROPP: And we’re also hearing about the – the time and the nature of some of the – so you have to reapply.

MS EMERY: Yes, exactly. So it’s that fragility of funding. So for those keeping their workforce is such a challenge when people know that the funding’s running out at the end of this year and then having to go back and reapply all the time. And I

think, you now, finally, we saw when – when day care was made free during COVID we worked very closely with Bourke & District Preschool Services and they had so – they had much greater demand, much more participation in the local community because of dropping that barrier and I think that, you know, for many of these communities once there is an understanding that there is that availability, there is that affordability, suddenly you will actually – I mean, it will be interesting to test the potential size of the market when those barriers have – have gone.

MR STOKIE: ..... We’ve heard this a lot. There’s no data on this because they turned off the data and then opened the doors and so they weren’t tracking who was coming. So we hear a lot that people were coming but do you know of anybody who has actually had insight?

MS GROPP: .....

MR STOKIE: Is that – do you – yes. Like, is it people who weren’t previously getting access to it before or they were now using it a little bit mor than they were before, were they going somewhere else and now they’re coming up here or ‑ ‑ ‑

MS EMERY: Yes.

MR STOKIE: What was ‑ ‑ ‑

MS EMERY: Well, I mean, we wouldn’t track those numbers but Bourke District Preschool definitely did track those numbers so that’s – and that’s a pretty big centre calling on a very large remote area and obviously very highly vulnerable populations and it did – it did make a difference. So – I mean, I think unfortunately this is often part of the issue as well, actually getting some of that data from a really overworked workforce, and especially where they were seeing greater levels of demand. I mean, that is some of the problem.

MR STOKIE: And do you have any insight as to what was in demand? Was is the fact that it was free and so people were coming or was it the nature of many people were being asked to either work from home, or perhaps in remote regional areas that wasn’t the case, is it – were they essential workers who must go to work? Do you know what was going on as to – or was it just purely a pricing point that suddenly the administrative burdens fell away and the pricing challenge and affordability fell away and therefore we’re going to take advantage of this?

MS EMERY: Well, think it was probably a combination of those things. But I think for – for many families, particularly in vulnerable communities, even trying to navigate your subsidy and understanding what you would be entitled to is actually really hard.

MR STOKIE: Sure.

MS EMERY: And so just having no barrier, suddenly it really opened up an opportunity for so many of those families without having to apply for anything, without those sorts of issues. Certainly, essential workers were – were key in that as well and we saw that in many cases and obviously at the moment we’re hearing lots of reports about essential workers not being able to go to work because where there are early learning settings in the bush they’re – because of the workforce issues, they’re having to limit hours of operation, limit days of operation, it really is at a crisis point.

MS BRENNAN: Yes. Yes. Jackie, I say that during this inquiry we’ve had really quite strong engagement with representatives of regional, rural and remote communities, so I think that’s something that has been very pleasing to all of us. We met with the rural – the National Rural Commissioner, we’ve had the Isolated Children’s Parents Association, we had The Parenthood who had done their ‑ ‑ ‑

MS GROPP: Grain growers.

MR STOKIE: Grain growers.

MS BRENNAN: Grain growers, yes. Really – really strong engagement. And one of the things I think we hear quite consistently is that you can’t conceptualise ECEC in these communities with hard boundaries around it. It just – life doesn’t work that way and children don’t work that way. And I know that you and your organisation has a strong commitment to integrated service provision and you’ve been alluding to that in your comments too. But I wonder if you would like to say a bit more about that, what it actually means and – and some of the problems about getting integrated service delivery.

MS EMERY: So – look, yes. We like to work in an integrated way. It’s an evidence-based model. It is how you get the best outcomes. So for children, whether it’s mental health, developmental health, supporting kids around their behaviour, you really need to work not only with the child but all of those key adults around the child to get the best outcomes. And so, you know, what we find as well, we’ve been working in over 250 schools and preschools since 2014 with a combination of telehealth and on the ground work and what we found and what we’ve witnessed through that process is that addressing health issues inside the school gate, inside the preschool gate is actually a really sensible place to do it, especially for vulnerable families.

So where parents, and many of the parents that we work with, have a lot of challenges themselves, 72 per cent of the parents that attend our assessment service have identified mental health needs themselves, and so you really need to be engaging and looking at those protective factors that early education provide. However, what teachers tell us consistently, and early educators, we are not health professionals. These children have health issues; we need the supports. And so sometimes the early inclusion supports do not go far enough or even with NDIS it’s the same issue. It’s really – we’re really struggling with access to services. And so it

does mean that communities need to have flexible options. And although we would like all of the workforce on the ground, it has probably never happened. There are a lot of great long-term reforms in place that may change that, but they’re going to take a generation to really change the dial.

MS BRENNAN: And are you able to make use of technology?

MS EMERY: Yes.

MS BRENNAN: And could you tell us a little bit about how that can happen?

MS EMERY: Yes, absolutely. I mean, there’s telehealth and there’s telehealth. We’ve been working with children via telehealth since 2014. We do over 1000 telehealth sessions a week. Certainly coupling that with visits on the ground into community, having one of our clinicians working closer to the community that we’re supporting, all of those things really enhance the outcomes. But it’s a great methodology for supporting children and supporting early educators with capacity-building and professional development because they don’t have to drive hundreds of kilometres to access services. It is in the comfort of their own space. We, as a health service, can determine the physical environment as well and actually understanding that and supporting them with the physical environment can make a big difference to outcomes for children. And it’s just very effective.

We’ve had a number of studies around the efficacy of telehealth at Royal Far West and more broadly there’s lots of studies around that and, you know, we constantly hear people saying “we just couldn’t have accessed this service in any other way”. And so it really needs to be considered as part of the mix and it’s hard to – as you say about the hard boundaries, it’s hard to rule anything out in these communities because I think it has been acknowledged that this universal system cannot be one size fits all, it cannot be uniform. And the only other comment I would make is that, you know, there needs to be better understanding of who is in these communities doing a great job now and they need to be sustainably funded because there are some excellent service providers, whether it’s ECEC, whether it’s mobile play groups, etcetera, who have been doing this work for a long time, have the trust of the community but they’re – they’re always on the knife’s edge around funding.

MR STOKIE: How would you extend that discussion to the delivery of early childhood education and care? Or is that not possible from a technology remote delivery?

MS EMERY: I mean, it’s difficult but, however, you know, one of the concerns about family day care is is it of a high enough quality to get the outcomes of a high quality early childhood system. And, you know, potentially there’s lots of examples overseas around not necessarily in that space but around communities of practice. And so you could build up the capability of family day care providers in order to provide the right kind of supports for children in their care and there’s a lot of interest from people in the bush around better supports for family day care as a great

– as a great opportunity to support children that live in those communities that can’t access centre-based care.

But the – I think the other thing to note is that in New South Wales, for example, there are 1000 rural and remote schools and for me that’s a bit of a no-brainer, partly because we work in schools. Most country towns have a school. Most families have to get their children to school. And so the opportunity to look at universal three- and four-year-old preschool in the states and the Commonwealth cooperating around a plan for that I think is a really good step forward because the infrastructure is already there, there is potentially more supports for early educators in those kind of environments and it’s a lot easier, then, than actually looking at the infrastructure requirements to set up centre-based day care right across the bush.

MS BRENNAN: Particularly if there is infrastructure with spare capacity it certainly does make sense, yes.

MS GROPP: I was going to ask about family day care. So that you for that but, I mean, you mentioned technology as well and I know one of the issues is around, you know, preschool programs and family day care where you might have a teacher but is there an opportunity – if they – you mentioned schools and that’s certainly, you know, one way forward and that’s what’s occurring in several states. But, you know, could you use technology to bring in a preschool program into a family day care situation, that sort of thing to – would that be something that you could see occurring or ‑ ‑ ‑

MS EMERY: Yes, absolutely. I mean, we – I suppose we work with parents, mums, grandparents now around supporting them with programs to support their children’s development so it’s definitely a possibility. Connectivity in some places is challenging.

MS GROPP: Yes, assuming the NBN is there .....

MS EMERY: Assuming that’s there, absolutely. I think it really – as I said before, it really has to be part of the mix. There’s no reason why that you couldn’t actually deliver those sorts of programs or, if nothing else, support the capacity building of those family day care providers, especially around identifying, you know, early warnings for children’s development. And, I mean, I think that’s the – that’s where we come at this from. It’s such a great opportunity to identify if a child is going to struggle when they start school.

MS BRENNAN: You go.

MS GROPP: In terms of capacity of educators, etcetera, I mean NDIS review posed changes about, you know, mainstream services, foundational supports and ECEC is seen as a – you know, where a lot of these supports – it’s a mainstream service but would – providing, sort of, extra care, if you like, to – and – to children, particularly those with degrees of autism or different delays. What’s – but we don’t really know

what’s required. Have you got any thoughts on that or how ECEC would – what role it would play in providing those supports? Because we’re – we’re also hearing that therapeutic approaches aren’t necessarily the way to go, and certainly one-on-one. So does that mean that you have wider supports available in services or do you retrain or upskill educators and teachers? Have you had any thoughts about that? Because we’re still trying to compute, if you like, that sort of thing.

MS BRENNAN: We are, getting our heads around the NDIS review.

MS EMERY: Yes. Look, it – I mean, it is – it is really complex and it intersects, of course, with this space. Interestingly on the NDIS website when you look up an early childhood partner there are virtually none in remote communities. There may be in, say, a Dubbo but actually they just don’t exist. So, I mean, that’s part of the issue. But when there are the supports, definitely there’s opportunities for early educators, allied health workers, NDIS support workers to support children and their needs. There’s definitely a role for that.

However, you know, to use an example, just because we’re hearing so much of this that I just can’t believe how much I’m hearing about selective mutism with the early educators that we work with and what they’re seeing coming through with kids of basically the COVID generation, so the kids that have come in to preschool now. Selective mutism is an anxiety disorder and it’s a pretty serious anxiety disorder and children basically in some situations can communicate and in others not communicate. And there’s a whole range of different reasons for it but in that scenario that child needs cognitive behaviour therapy in order to overcome that and it can take years to overcome that. But you can imagine if you’re unable to communicate how difficult it makes – it would make it for you as a child to make friends, to learn, you know, just communicating. You need to be able to have those skills.

And so there are – there’s certainly a lot of conditions and when you’re talking about children in rural and remote areas that have these developmental challenges on two or more domains and you can see the prevalence of that through the early – Australian Early Development Census that they actually need clinical supports in many cases. So I’m not saying it’s clinical support in every case, but in children that have complex developmental challenges or global developmental delay, generally speaking they are going to need the services of an allied health professional.

MS BRENNAN: So does the general direction of the NDIS review resonate well with your understanding of what’s best for children that need those extra supports?

MS EMERY: Yes. Look, I think it’s heading in the right direction. I mean, I think that the funding – you know, much like the funding challenges in ECEC, it – in rural and remote communities where, again, you have underserved markets or unserved markets, user-pays or putting family in a – providing a family with a plan and getting them to go out and seek services through – through a planner is next to impossible. It’s not working for those families. So, number 1, they can’t navigate

the process of actually getting the plan; number 2, once they get a plan, they just can’t access the services or those services are being – the funds in their plan are being eaten up by report writing and very little therapy and so there’s virtually nothing left.

Also, you know, we’re hearing more and more about plans just being cut arbitrarily with no real reason. So it’s – what we like the sound of is certainly more of a block funding model for rural and particularly remote communities where as a community they can determine what are their needs and it can be a whole range of different things. It could be a bus to support, you know, actually picking kids up and bringing them to a service. It could be a whole range of different things that suit the particular context of that community. And communities know what they need and what is going to work best for the children in those communities. So it’s – we think it’s heading in the right direction but, you know, our understanding ‑ ‑ ‑

MS BRENNAN: There’s a lot to unfold.

MS EMERY: ‑ ‑ ‑ is it’s also going to take quite some time ‑ ‑ ‑

MS BRENNAN: Yes.

MS EMERY: ‑ ‑ ‑ to change the way the system is operating is what we’re hearing.

MS BRENNAN: Yes. Yes. Jackie, I wanted to ask you whether the focus of your organisation extends to children who might need out of school hours care.

MS EMERY: Yes, absolutely. So, you know, we see children – so a lot of the children that we see, and again for those reasons that I mentioned earlier in that eight/nine-year-old age group, again many of them don’t have access to out of school hours care. I think that represents a great opportunity as well, particularly where parents have limited capacity if they are getting supports for their child, you know, even in terms of homework learning, those sorts of environments are – are, I think, an advantage and, again, protective factors for those children. However, we don’t tend to interface around out of school care that much. Generally any services that we’re providing into a school tend to happen during school hours.

MS BRENNAN: Okay.

MR STOKIE: I just have a question which is taking you back almost to your initial statement. Jackie, you mentioned that many of the services that you’re engaging with might have four out of 10 or even eight out of 10 children who have developmental vulnerabilities, and I just wondered in terms of catering for those children with additional needs at what point does the, sort of, National Quality Framework standards start to break down a bit? Which is it might work when you have some additional support for one or two but at four or eight out of 10 it’s virtually every single child has additional needs and I just wonder if you’re seeing services and it has that extent of vulnerability or developmental need within the

children, what are you observing in terms of the resulting level of support or service from the care – ECEC service?

MS EMERY: Often they’re in crisis mode. And it’s – there’s not a lot of – necessarily a lot of learning going on. There might be significant regulation issues. So often what we – the kind of the work that we do with educators and teachers as well is to support them with regulation strategies and that’s – that’s all about how do we keep kids calm and alert. Because when they’re dysregulated and, you know, you might kind of consider that like a naughty child or someone that’s having an outburst, there’s not a lot of learning going on and that can also then impact everyone else’s learning and that’s why we see in these sorts of environment often there’s – you know, it’s just fighting fires all day long.

And in addition to that, often early educators can pick that there is an issue with this child, they might have a speech and language delay, they may have been exposed to early life trauma, but they actually don’t have the strategies to know how best to support them and this is particularly an issue in these rural and remote locations where there’s no funding model for professional development, there’s no – there’s not enough staff to take someone even offline to have them come in to more of a metro area, for example, to receive training to support those children. So, you know, we often refer to it as the double disadvantage. So the children are twice as likely to have these developmental challenges and yet there’s just no access to the services that they need to help them thrive.

MR STOKIE: Okay.

MS BRENNAN: Jackie, right at the beginning you mentioned the need in the communities that you serve for alternatives to centre-based day care and we have talked a little bit about the integration of services. Is there anything more that you would like to say about those alternative models, what potentially they might be?

MS EMERY: So, look, we get reports regularly about mobile play groups being highly successful. I think it’s just really identifying again – you know, it’s a service mapping piece to actually understand what’s happening now in what communities and what’s actually working. And we see lots of fantastic models working in community and then, on the flip side of that, we hear a lot of complaints about funding and fragility of funding. So, you know, for us I suppose the big ticket items are those, the family-based day care and mobile play groups and even better supports for distance education but actually tracking that into early childhood as well as opposed to just school for those really remote families out on farms.

MS BRENNAN: Yes.

MS EMERY: So, you know, they would probably be the biggest ones that we – we hear about. But then also where there is centre-based care, all the proliferation – New South Wales Government have just released their 100 new preschools that they’re building inside schools, that will be a game changer for many of these

communities, however still most of those preschools are located on the eastern seaboard.

MS BRENNAN: Right, okay. Not in the really rural – regional and rural ..... Yes.

MS EMERY: There are some, but the majority are in the eastern seaboard.

MS GROPP: Jackie, we’ve proposed an ECEC Commission which would – we hope would have some overarching view of the sector and particularly with a view to identifying where children – where there are thin markets where services aren’t being provided and looking at different models, different approaches to provide services in the areas. Would you see that as a – what’s your view on that? Is it something that you think could – we see it as a gap at the moment in terms of an overarching stewardship role.

MS EMERY: Look, absolutely. I think the stewardship role – I mean, that was one of the great findings, I think, from the report that we would absolutely support and partly because – and we sometimes get caught up in this, whose responsibility is it? So the Commonwealth have some responsibility, the states have a responsibility and often kids just end up falling through the cracks of those responsibilities. So looking at a more coordinated system I think is important. The other thing as well, especially given that there is such great acknowledgment now of these thin markets and the challenges in addressing those thin markets, that for a universal system to be achieved I think most rural and remote people would tell you someone’s going to have to keep an eye on that otherwise it ends up being great for metro markets and, well, that was a bit in the too hard basket for country communities and therefore it just perpetuates this disadvantage. So I think that stewardship role actually having some accountability, what are the metrics that – and what are the outcomes that the Commission are really looking for and measuring those over time I think will be critically important to ensure that whatever the final recommendations are are actually carried out and really address the needs of those markets.

MS BRENNAN: Well, I must say we covered a lot of ground, Jackie, in the – in the just about 30 minutes. Are there any issues that we haven’t asked you about or that you’ve thought of that you’d like to raise with us before we wrap up?

MS EMERY: Look, the – the only thing, I am hearing from some people around relaxing the activity test, that, you know, it’s going to create huge demand on a system that can’t meet that demand. And, I mean, it will have that impact but part ‑ ‑ ‑

MS BRENNAN: We will be careful in our recommendations around that, though.

MS EMERY: Yes.

MS BRENNAN: And we – we don’t envisage that that’s something that’s just something that’s going to happen immediately for everyone everywhere. It would

have to be carefully thought through and staged and we’ve identified workforce as the thing that without which nothing can happen. So I – we are certainly aware of the potential for that to happen if it’s not – if reforms are not carefully staged and implemented.

MS EMERY: I would say, though, on that that those families don’t have it now ‑ ‑ ‑

MS BRENNAN: Yes.

MS EMERY: ‑ ‑ ‑ can’t access it now.

MS BRENNAN: Yes.

MS EMERY: So at least if there’s acknowledgment that something is actually happening and getting done ‑ ‑ ‑

MS GROPP: It’s a – yes, it’s a good point. We will be doing – we did some modelling of this, we will be doing further modelling based on richer data sets we’ve now got access to. And you’re right, because what we’re finding is that that ..... the lower bands results in people accessing who haven’t – who aren’t in the system and children who aren’t in the system. So we will get more – get a richer view of that. But – so it is important.

MS EMERY: Yes. Look, I think as well the – you know, I know the Commission said in the draft report that perhaps there isn’t enough evidence around ECEC and the link to ongoing development or downstream costs, for example. I mean, we – we see thousands of kids a year and we see what happens when they haven’t got that opportunity for early education and care and I suppose part of that there is a supposition in that that they also potentially can access the supports they need if they’re identified earlier so there’s definitely an issue in that. But we – again, we see the impact of those kids that haven’t had the opportunity and where they end up at the age of eight or nine with their developmental window closing. And I think the final comment will be we haven’t really talked about it and I know that wages are being addressed now, it is wages but it’s also recognition of what a tough job it is for early educators that are managing their, you know, workforce shortages in their own centres on top of the challenging cohort of kids that they have and, you know, the lack of supports available to them. So I think it is pay but it’s also recognition for what a vital job they’re doing for our kids and what a difference they can make to them in these early years.

MS BRENNAN: Well, thank you very much, Jackie. That’s absolutely a critical point. So I can see our next group are waiting in the wings online, so I would like to thank you very much for your – for your contribution ‑ ‑ ‑

MS EMERY: Thank you.

MS BRENNAN: ‑ ‑ ‑ and for the work you do.

MS GROPP: Thanks, Jackie.

MS BRENNAN: Thank you, Jackie.

MR STOKIE: Thank you, Jackie.

MS EMERY: Good luck.

MR STOKIE: Good luck with your centenary.

MS EMERY: Thank you.

MS BRENNAN: Yes.

MR STOKIE: Next year.

MS BRENNAN: So good afternoon Municipal Association of Victoria. ..... Nice to see you. Hi. We’re going to move seamlessly into our discussion with you. Well, the only seam is going to be that ‑ ‑ ‑

MS GROPP: Introductions.

MS BRENNAN: ‑ ‑ ‑ I’m going to – I’m going to introduce ourselves. I’m Deb Brennan, one of the Commissioners on the inquiry. I’m joined by ‑ ‑ ‑

MS GROPP: Lisa Gropp, another of the Commissioners.

MR STOKIE: And Martin Stokie, the third Commissioner.

MS BRENNAN: Yes.

MR STOKIE: Good afternoon.

MS GROPP: I don’t know if – don’t know if they can see us, but .....

MS BRENNAN: Yes. Can you see us okay? Yes. So ‑ ‑ ‑

MS GROPP: It’s like the Last Supper in there.

MS BRENNAN: It’s a bit like the Last Supper. So we’re looking forward to the discussion with you and I just want to mention in a moment I will ask you to introduce yourselves and give an opening statement, if you would like to do that. I just want to mention that we have a number of members of our team both in the room and online and our proceedings are being transcribed and recorded and a transcript will go up on the website as soon as we can manage that. I think with those preliminaries we will move straight to – to you to get us going for the next session.

MS K. HOWLAND: Thanks, Deb. So I’m Kim Howland, I’m the manager of community wellbeing at the MAV. We’ve just recently had a restructure of community wellbeing not community services now. And I have with me Jacinta Barnes who’s one of our early years policy advisors and also Leonie Taylor is one of our other early years policy advisors and both Leonie and Jacinta specialise in particularly the reform – the reform stuff that’s happening in Victoria at the moment. So I’m going to give a bit of an opening and then I’m actually going to hand to Jacinta to talk through, I suppose, our points of difference from the submissions to ‑ ‑ ‑

MS BRENNAN: Yes.

MS HOWLAND: ‑ ‑ ‑ many of the other organisations, I think, being the representatives of local government.

MS BRENNAN: Thank you.

MS HOWLAND: So I just do want to start by doing a acknowledgment of country. I’m up in north-east Victoria, so – and it’s contested land, so let’s just acknowledge the traditional owners of all the lands or the countries up here and any other countries that are represented today and any aboriginal elders with us as well. So the MAV, as you guys know, is the peak body for local government in Victoria by statute. We work under the Municipal Act of Victoria and also under, obviously, the Local Government Act and our role is to represent, advocate and build capacity within Local Government Victoria. With reforms happening at the moment in Victoria, huge amount of work being done in the early years, so we have actually quite a big early years team at the moment which is funded by the state government or to – so, I suppose, assist with the capacity building in local government but also to advise state government on what’s happening on the ground as well. And I’m reading my notes so that I don’t go off track otherwise I won’t leave Jacinta time.

So I suppose from MAV’s point of view, you know, we really welcome and support the aspirations and recommendations within the report. So particularly from our perspective the priority on focus for children, families experiencing vulnerability, disadvantage, disability and, of course, our First Nations children and families. And we recognise if we get this part right we will then – we will be able to respond to the vast and varying needs of all children and families. In our submission, we addressed a number of the recommendations and raised matters that were most relevant to our members to the local government centre and I suppose we have particular interest in the roles and responsibility of government and the proposal for the new coordination mechanisms referred to as stewardship in the report. We will comment and provide feedback on the importance of joining up planning and the need for joined up early years system. And I know that, Deb, we spoke a lot about that when Wendy and I were fortunate enough to come and speak to the Commission last time as well. And also the importance of data and ensuring that, you know, that we’re all able to use the available data and make sure that that’s implemented so that, you know, we’re really working in the best interests of the child.

So I suppose the local government being the third level of government we’re really interested in that how we all work together because there are so many strategies at a national and a state level and policies and a local level and, you know, there are so many things happening in this space it’s really busy and that’s so fantastic that it’s on every level of government’s agenda but how do we join that up and make sure that it’s really seamless and so that, you know, children are really at the heart of all of our reform and, you know, that we’re really trying to do the best thing for children and their education. So that’s kind of my opening but I might hand to Jacinta now just to, I suppose, take us through the three main points that we really wanted to speak to today around the joining of the data and then, of course, take any questions that you guys have a well.

MS BRENNAN: Thank you very much.

MS HOWLAND: So I will hand to Jacinta.

MS BRENNAN: Thank you, Kim. Thank you.

MS J. BARNES: Thanks, Kim. Hello, everybody. So three key points that we really wanted to focus on today was, first of all, about stewardship and partnership across all three levels of government and from MAV’s perspective, rather than a new independent commission that’s being proposed in the report, what we would prefer to see and what we would see as more – being more beneficial is a Commonwealth, State, Local government early childhood education care consortia. There really already exists significant collective knowledge, research and evaluation there’s capacity within all three levels of government. We recognise the importance of the commitment and potential of the partnership between the three levels of government to be able to respond to early years, whether we’re focussing on and amplifying positive outcomes for children, families and communities, whether it be their health, their wellbeing, safety, development, education, access and participation in services and programs and, as Kim said earlier, with obviously a focus on vulnerable families.

So what we’d like to really emphasise here is that local government is integral to this given the critical role that local councils play in the planning, significant provision of infrastructure and for many the actual operation of services and programs which includes direct employment of educators and personnel within early childhood services. Local government really manages the impact of Commonwealth and state government policies as they affect families and children so councils are in a compelling position to be at the table. Local government really is the level of government that’s closest to their communities and, as such, really well placed to be able to respond to the needs of families using a place-based approach. So the overarching ambition of the universal early childhood education care we really believe requires all three levels of government, not just the Commonwealth and state and territories as was being referenced in the partnership agreement. So really that’s the first point that we really wanted to make.

The second point is about joint planning. By planning and working together in an improved and outcome-focussed way, we believe governments can be the system stewards that use a range of levers available to them for planning, quality, workforce sustainability, data, funding and overall regulation. So stronger planning along with governance and funding to ensure investment in the early childhood and education and care market growth is directed to high quality provision with the right service mix and to areas where it is needed. If we focus in for a moment on Victoria as Kim referenced earlier, we know that already the state and local governments have embarked on a partnership agreement here for the planning of the system and with a particular focus on infrastructure, workforce and service planning.

This approach is already creating many benefits and positive outcomes for children and will continue to do so as we work together on the rollout of the Best Start Best Life reform agenda with a particular focus now on the rollout of pre-prep, so 30 hours for four-year-olds, as well as the ongoing rollout of the 15 hours for the three-year-olds. We note this is about increasing the dosage of attendance for young children, more hours and free kindergarten here in Victoria. We also wanted to draw attention to the compact which I know Kim and Wendy have spoken to you about before which is really an agreement between the Department of Education, Department of Health and Human Services and local government. It’s a really clear example of the state of local governments working together to strengthen the collaborative relationship between each department and local government in both planning, development and provision of early years services. And really at the heart of this compact is improving and sustaining outcomes for children and families across all Victorian communities.

And third, last point I wanted to make – we want to make, was the importance of joining up of the service system. So really I think we all know how critical it is to have a well-planned, joined up early years system that follows the child’s journey rather than services, the programs or the funding. So we would like to see a really clear, comprehensive, coordinated system of Commonwealth, state and local governments planning and investment in early childhood education and care which results in equity of access and affordability for families whether they’re attending childcare, preschool, integrated services or whatever the program or service is that they attend.

An example of this here in Victoria is the delivery of integrated and coordinated models of education, health and care services which is really well understood by councils in Victoria which has led to building multiple integrated facilities and implementing other levers and services to provide more effective support to families. So just in closing, really, local government plays an indispensable role in the productivity of Australia’s economy. I think sometimes local government can be seen as bit players in the big policy moves that are orchestrated by the Commonwealth and the state governments. And despite this preconception, we do live our lives in local places. The standard and efficiency of our local services including early childhood education and care are no less important in determining our quality of life than the macro policy settings that are determined by other spheres of government,

so re-emphasising local government being closest to their communities and the holistic view that local councils take of their citizens.

So thank you for the opportunity to present today. We clearly did address some other issues in our submissions such as workforce funding and affordability and the important needs of CALD families, but really the key things we wanted to get across today are those that are just emphasised above and definitely whatever improvements are implemented or taken forward from the recommendations that they have at the heart of them what is in the best interest of the child. Thank you.

MS BRENNAN: Thank you very much, Kim and Jacinta. Leonie, were you going to come in at this point?

MS L. TAYLOR: No, I’ve left the other ladies to do it.

MS BRENNAN: Okay.

MS TAYLOR: It’s more if there’s any questions, and I will contribute if there’s any need.

MS BRENNAN: Yes. All right.

MS TAYLOR: Thank you.

MS BRENNAN: That’s great. Well, look, can I say, first of all, thank you for, again, reminding us of the critical role that Local Government plays in Victoria in early childhood education and care and the support of families. I think – I will just speak for myself in saying I think it’s quite possible to say we’ve not done justice to Victoria’s role in ECEC at this point. One of our challenges, as you can well imagine, is just grappling with the complexity of all the jurisdictions around Australia, and I’m sure you would be very aware and I’m sure you would be very proud – you are very proud, and rightly so, of the role that Local Government plays in this space in your state; a very large state and a very – and a state that has a leading role in policy thinking and initiatives and so on.

But you would also very aware that other states are just not like Victoria. We grapple with this in a whole range of areas. We talk about it a lot in relation to preschool and just how extraordinarily varied the jurisdictions are. But it’s equally – it’s the case, too, in relation to Local Government. And we’re going to have to really think that through. In relation to the Commission, we’ve just – we’ve been engaged in these consultations for a couple of weeks now, and we’ve talked with almost everybody about the Commission and their reaction to that idea. And one of the most common responses we get is, “Please don’t duplicate,” you know, “please have a look at what’s here first.”

And in a way, you’re saying to us kind of a different perspective, “Don’t ignore” – well, I guess it’s the other side of it – “but don’t make invisible something that is

Already here.” So I think at this point all I can say about that is we’re hearing loud and clear the message that you’re delivering to us, both in the hearing and in your initial and your post-draft submissions. So I think we might just stay with this topic for a bit. I want to make sure that we do come back to the other areas in your submission around workforce, CALD families and funding, particularly, potentially around integrated funding. But I suspect that both Lisa and Martin are jumping out of the blocks with questions.

MS GROPP: Thanks, Deb. Yes. Just on the Commission, I know in our draft, we’ve – it’s not a fleshed-out model, I would have to say, and that’s probably half-deliberate and half maybe because we weren’t quite sure. We’ve asked a lot of questions around it. But I guess where we were coming from was to have some standing body that would have to have the buy-in of the different jurisdictions. It has to be sort of owned by the players, if you like, in that sense. But it would keep an eye on areas where there were sort of gaps; thin markets, for example, whether there could be research could be done.

But it wouldn’t override – like, we’ve got AERO doing research; we’ve got ACECQA doing quality – setting quality standards. So it would be the sort of overarching monitoring and advisory role, sort of just a monitor of the system, if you like, and advising governments. And it’s not usurping the role of governments, though; it’s sort of supporting them, if you like, and where there could be better coordination in different areas. I just – is that how you understood it and you still don’t like it or is it – I would just be interested.

MS HOWLAND: You go, Jacinta.

MS BARNES: Yes. No, I don’t think it’s a case of not liking it. I think it’s rather – I suppose our view was that rather than setting up this whole new body which will be – you know, take time in itself and setting it up and establishing it, there really already is that in place.

MS GROPP: Okay.

MS BARNES: And that would best be achieved through a consortia. And I think the key thing we were really trying to say there was what was in the report was saying Commonwealth and state as opposed to ensure Local Governments are included.

MS GROPP: Okay. Sure. Point taken.

MS BARNES: And Deb, totally agree; I’ve had the opportunity to work in different jurisdictions across different states, and it is different.

MS BRENNAN: Yes.

MS BARNES: And I think, proudly, we can say what happens here in Victoria is incredibly, you know, forward thinking in terms of what we are doing here in Victoria.

MS BRENNAN: Yes.

MS BARNES: It has been great to see some of what has been happening here in Victoria being replicated in other states. So I think the aspiration of the concept of the independent Commission is still achievable in terms of its aspiration around the research agenda, the evaluation and the monitoring. But it just, from our point of view, didn’t require the establishment of a new Commission. It could already happen because the partnership is already there and very strong in terms of what each level of government has.

MS BRENNAN: At a national level, though?

MS BARNES: So at a national – what does that – I mean, what does that partnership look like at a national level? I mean, you may have it in – between the State Government and Local Government in Victoria, but is it operating at – yes, how does it operate at the national level?

MS BARNES: Kim, did you want to respond to that?

MS BRENNAN: You’ve got that one, Kim.

MS HOWLAND: I think it’s a really good question, and something, I suppose, we do struggle with even from MAVs perspective, trying to get ALGA, our peak body involved at a national level in early childhood, because there’s only really us and New South Wales where Local Government are involved and about to be South Australia because the Premier – South Australian Premier just stole Kim Little across to there. So they’re looking at having Local Government more involved. Yes, that’s a good question, Lisa, and I don’t have an answer for you.

But I think from our perspective – and look, whatever we set up, I’m pretty sure in Victoria, Local Government will be at the table. But I think even if Local Government aren’t directly delivering kindergartens in other areas, they are still responsible for the planning and coordination of services within their municipalities. So they still really should have that buy-in around how – you know, how young people and, particularly, you know, children in their state are faring in getting services. Sorry, Leonie; did you want to add to that.

MS BRENNAN: Do you have a virtual hand up there, Leonie?

MS GROPP: There’s a virtual hand, yes.

MS TAYLOR: I think my comment is around just hearing what you were saying today about Victoria versus the nation. I think it’s a really valid point. And we’re

very blessed to be in the state that’s progressing quite significantly in that patch. But having been a kindergarten teacher myself and knowing what’s happening on a national scale, I’m quite aware of those differences and complexities in the work that you’re doing. I think where I would like to go with the conversation is around the idea of the moderating, so I think that part is the bit that I really like because it holds people accountable.

So I think that concept, out of everything where we’ve got our difference of opinion because of what we experience in Victoria versus national-wide, I think having someone moderating whatever gets agreed to and what’s put in place is probably at the heart of getting some actions and tangible things happening. So that is just what I wanted to add in terms of, probably, a slightly different comment to maybe what was in our submission now that we understand your feedback on that and the complexities of the national perspective on that versus Victoria.

MS BRENNAN: Great. Thanks, Leonie.

MR STOKIE: Well, perhaps like my colleagues, I had a sort of related series of questions, and it goes to just clarifying what I understand you to mean when you talk about, say, like a tripartite or a tri-tiered partnership agreement coming together as part of an advisory body, what I haven’t heard is what I understand is your view about early childhood education care as a whole. I’m hearing – but I don’t want to put words in your mouth, so I will put this as a statement, really, to test, which is you’re very much focusing around preschool. You talk about a partnership agreement between the State of Victoria and yourselves, and that will be around preschool, doesn’t include the Commonwealth, and it won’t include one year olds or two years olds and may include some three year olds. Correct me if I’m wrong.

It won’t include family day care. It won’t include, necessarily, centre-based day cares that are delivering, say, even at the four year old. Correct me if I’m wrong. And even in the preschool – our task is to think about – we’re deliberately putting the child to the fore but not just the child but families and workforce participation and what works for parents. And we talk about three year old – at least, as the state is thinking about it – at 15 hours. In no way will it work for families if that was the only thing that was able to be delivered. And so there’s an element to which – I don’t disagree having the key people in the room as part of an arrangement, and that’s food for us to think about in terms of a commission or whatever form it takes, is where is Local Government in this, and I think that’s a really useful feedback for us.

But my challenge back to you, because I’m not hearing it, is are you only interested – and I understand the state might be interested because that’s their area around preschools and that’s what they’re funding and that’s – and they’re almost explicitly deliberately, saying, “No, no; we’re not – no, that’s the Commonwealth’s responsibility for two year old and one year old.” From a Local Government association where you do have planning accountability responsibilities, you have – or, at least, some of your members will have infrastructure that is historically long-

term delivery, centre-based day care services under some sort of lease arrangement and arrangements. So there is a broader perspective, I think, Local Government brings. But I’m not hearing that.

So that’s a longwinded way of saying where is the Local Government’s view around early childhood. What do you consider early childhood? Is it birth to five? Is it birth to 12 or birth to eight like the UNESCO definition? Are you as equally interested in a centre-based or long day care as you are in preschool delivery? Are you equally interested in family day care as you are – and so they’re the things that are grappling with us. When we think about a commission, we think about the gaps. Where are the gaps here that aren’t being adequately addressed as opposed to sort of like planning approvals. And again, I will happily stand corrected, but maybe there’s good planning laws already; that’s just a natural process. It should take its course, you know. The planning rules should be adhered to, it doesn’t need a special arrangement. Anyway, it’s a long position, but I was just interested, more broadly, where you were coming from.

MS BRENNAN: Back to you.

MS HOWLAND: Yes, definitely. Thanks, Martin. I will start and then I will hand over to my colleagues. So absolutely. Local Government is nought to eight. Actually, you know, we do municipal early years plans that, you know, cover nought to eight and now sometimes up to twenty-four. So local government plans for the whole of community. I think, once again, you know, Victoria, we’re very blessed so we have the Maternal and Child Health Service and, you know declaring I’m a maternal and child health nurse by background. So, you know – which we start engaging with families preconceptually. I mean, some of those buildings are – you know, the services are 100 years old in Victoria – over 100 years old – and some of the buildings are almost that old as well.

So absolutely, infrastructure is huge, you know, whether it’s for long day care, whether it’s for maternal and child heath, whether it’s for kindergarten, whether it’s for the – at a Local Governments are still responsible – in Victoria, a lot of Local Governments are still running after-school and holiday programs. Family day care is still a really big part of our offering in Victoria. So we certainly are, from a Local Government perspective, interested in the gamut. And it changes. As you would know, it changes from Local Government to Local Government so a bit like you were saying; you’re looking for where the gaps are. That’s what Local Government does. So Local Government doesn’t feel that – or doesn’t, by statute, have to deliver all these services. We have to ensure that they’re within our municipality whereas – where our planning, our planning statutes and that come into play.

So we’re also looking, I suppose, at the health and wellbeing of the whole community through our health and wellbeing plan which the municipal early years plans drop off so infrastructure is probably the biggest investment that Local Government makes. Whether they are directly involved in delivering any of those services or contract them out, they are responsible for the infrastructure for all of maternal and

child health which is nought to four, and then, you know, long day care and kindergarten buildings, unless they’re private, and then even, you know, a lot of the Local Governments are still running the family day care schemes.

So absolutely, we’re looking at the whole gamut of things. I suppose we get driven a lot by the Best Start, Best Life reform, as you rightly pointed out, which is around kindergarten, because that’s where we see we can pick up our vulnerable children and make sure that they’re getting those two years of education before they hit school and, you know, to set them up. But we’re certainly looking at planning for the whole of community. Leonie or Jacinta, did you want to jump in and respond to any of that?

MS TAYLOR: I’m going to, because I’ve been an advocate in this space for a long time. Zero to five, zero to eight, zero to wherever; I think there has been a shift in terms of the whole child’s journey and how that contributes in terms of family and the support services around it. So I’ve recently come to the MAV after working in a Victorian council for many years, and we are all saying the same thing about that joined-up approach; joined-up services. And I think the challenges that we face is that the funding streams are in different areas, for example, MCH; Department of Health; Department of Education for early years, kindergarten and so on and so on.

But I think there’s a lot of wins in the systems space. We could break down a lot of barriers for families, particularly, CALD families, if we had systems that the parents or families only got asked to fill it in once, and that information could then be forwarded to the next part of the journey in a seamless way. So I think systems integration is a big part of some solutions that we are certainly and have been advocating for on behalf of our members in the MAV. But I also think it’s about working with families and making it easy for them to participate, enrol and not have to do it multiple times and under very difficult circumstances.

So I completely agree with you that it’s more than just kindergarten. Obviously, we’re funded, like we said, for the BSBL reform. But when we look at it, we do not look at that in isolation of maternal and child health; supported playgroup; PSFO service; all the things that sit around kindergarten in itself. So I completely agree with you. And transition is the other point. That’s where children drop off and that’s where they’re most at risk, when they go from once service to another and there’s not a shared approach to transitioning that child from on entity to the other.

MR STOKIE: Yes.

MS BRENNAN: I was just confirming with my colleagues that we can spend a few more minutes. Our time with you is notionally finished, but we’re happy to go a few more minutes. And I know that Martin has another question.

MR STOKIE: Yes. And your point, Leonie, that’s what’s exercising a lot of our mind, which is not just a component piece which may be getting, as you say in your

words, a lot of attention right at the moment; it’s the system as a whole. I just had a question around the planning consortia in your mind, and I presume in order to bring that to effect, if that’s where it was to go, you’re envisaging some sort of almost secretariat to support the consortia. I presume that, you know, you’re not expecting each – how do you co-ordinate the work of the consortia without something – some capacity?

And then if that’s the case – so again, I’m trying to clarify what you say and potentially put words in your mouth – if that’s the case, is the planning consortia more like a governance model which actually could translate to a ECEC Commission but with representation from the states and the Local Government and the Commonwealth? Is that a different way to think about what your suggestion is? But again, I don’t want to – I’m putting it as a statement for you to challenge and dispute or ‑ ‑ ‑

MS BRENNAN: Well, if I can just say, I think our concept of the commission which Lisa articulated is broader than planning.

MR STOKIE: Yes.

MS GROPP: I mean, planning will be really important, especially ‑ ‑ ‑

MR STOKIE: I’m just using the words that the MAV has put forward.

MS GROPP: Yes. Sure. I will let you respond to that.

MR STOKIE: But yes, I agree with you. Yes.

MS GROPP: Yes.

MS TAYLOR: Yes, I think we do, I might hand over to Jacinta, because she has done more work in this space. But yes, we’re – and totally agree; much bigger than planning but if we use planning with a capital P around how we make the systems work and come together. Jacinta.

MS BARNES: Look, Martin, I think, sometimes the way you look or any of us can look at this is, you know, semantics and the wordings we use, that at the end of the day it’s about the outcomes that we want to achieve. So in terms of the actual mechanics and how you bring that together, I hear you; it is really about the governance of this and it does need to be coordinated. It’s not just going to happen, because there happens to be three levels of government. So probably, the devil will be in the detail of which we don’t have any magic to share here. I think, really, we were just making the point: don’t leave out Local Government but also there already is this wealth of knowledge and expertise around the three levels of government.

MR STOKIE: And for that ‑ ‑ ‑

MS BARNES: But in terms of how you bring that together to deliver on the aspirations of the agenda that we have in front of us, I don’t think any of us have a magic answer to that. But I hear what you’re saying.

MR STOKIE: Well, we are being asked for greater clarity in this, so I’m just testing with yourselves and for people who have strong views or views in this space.

MS BARNES: Yes.

MR STOKIE: And we hear loud and clear that the view of trying to make sure that all the important critical parties are part of the process, so thank you.

MS BARNES: Yes.

MS HOWLAND: I’m happy to take that onboard and perhaps, if appropriate, to come back once we had an opportunity to discuss that amongst ourselves and colleagues who are not here with us today.

MS BRENNAN: Absolutely. We would be very happy for you to come back if you would like to do that. I think – we’re going to have to take a short break before we move on to our other participants. But I just wonder is there – and we don’t have time to go through the three things that I know you’ve missed out – but is there one, in particular, out of workforce funding and CALD families that you would really like to say a couple of words about?

MS TAYLOR: We will have to be careful here, Jacinta; we’ve got our colleagues’ burning ears sitting beside us. I think I’ve mentioned CALD, so let’s go to workforce because I think I talked about CALD in terms of joined-up systems.

MR STOKIE: Yes.

MS TAYLOR: So Jacinta and I, we work with the workforce advisory and very close with DE on workforce. And, you know, similar to what MCH has faced recently, the shortage of staff is just palpable everywhere and having really significant ramifications for what we’re trying to achieve in Victoria. So I would have to put workforce forward. I think it’s interesting ‑ ‑ ‑

MS BRENNAN: And are we on track?

MS TAYLOR: Yes.

MS BRENNAN: Are we on track in our recommendations around workforce or are there gaps in what we’re proposing? Is that ‑ ‑ ‑

MS TAYLOR: Jacinta, did you want to comment further on workforce?

MS BARNES: Sorry. I missed the question.

MS BRENNAN: I was just wondering whether, in terms of our draft – the recommendations of our draft report around support of the workforce, whether you think we’ve hit the mark; missed the mark; overshot or ‑ ‑ ‑

MS BARNES: No, I think you’ve absolutely addressed all the issues that I think we’ve all known for a long time, but it has become exacerbated in terms of issues about retention; attraction; the competition, for want of a better word, of where early childhood educators may go elsewhere to work or not even finish their training and work elsewhere because of pay and conditions. I think the industrial agreements play into this.

MS BRENNAN: Yes.

MS TAYLOR: So the promotion, you know, the value proposition of working in early childhood education, so I think you’ve addressed all of those things in your report, and, you know, we raised the same sorts of things when we made our response to the job and skills report, as well, about those critical elements of retention and attraction of personnel.

MS BRENNAN: Yes, and thanks for drawing your response to that to our attention. We’re going to take a short break now. We’re going to conclude this section, our meeting with the Municipal Association of Victoria. We will resume in six minutes at 3 o’clock. Thank you very much for your participation. You’re welcome to be listening in later into the afternoon should you choose, and for everybody online, we will be back with you in a few minutes. Thank you very much.

MR STOKIE: Thank you.

MS GROPP: Thank you.

MS HOWLAND: Thank you.

MR STOKIE: Thanks for your time.

MS TAYLOR: Thank you.

ADJOURNED [2.52 pm]

RESUMED [3.00 pm]

MS BRENNAN: All right. Thanks everybody. We’re going to resume the public hearings for the Productivity Commission Inquiry into Early Childhood Education and Care and I’m going to call on Georgie Dent from The Parenthood. Just before that, though, Georgie, I know that you have met Lisa, Martin and myself. I’m just

going to remind you that – or let you know that in addition to several colleagues from the inquiry in the room, there are most likely people online – have we lost them?

MS GROPP: I don’t know whether – don’t know ‑ ‑ ‑

MR STOKIE: I’m not sure.

UNIDENTIFIED MALE: They’re there.

MS GROPP: They’re there.

MS BRENNAN: They’re there.

MR STOKIE: We just can’t see everybody else. Okay.

MS GROPP: We can’t see them. Okay. Okay. Sorry.

MR STOKIE: So long as everyone can see us, that’s okay.

MS GROPP: Sorry, Deb.

MS BRENNAN: Yes. That’s all right. So, some colleagues from the Commission, potentially some other interested people just so that you know that. You know that the proceedings are being recorded and transcribed and a transcription will go up on our website. So I think, without further ado, I’ll pass to you but I’ll invite you to, for the record, to say your name and the organisation that you represent and then lead us into the conversation.

MS G. DENT: Yes. Well, thank you very much. It’s lovely to be here. I really appreciate the opportunity to appear today on behalf of The Parenthood. My name is Georgie Dent and I am the CEO of The Parenthood. The Parenthood is an independent not for profit advocacy organisation with a reach of more than 80,000 parents, carers and supporters nationally. Our mission is to make Australia the best place in the world to be a parent because when parents and caregivers are supported children can thrive. Our 2021 research report, “Making Australia the Best Place in the World to be a Parent” identified four best practice evidence-based policies that would enable parents and children to thrive in the critical early years. That report was underpinned by comprehensive economic modelling undertaken by Equity Economics.

Free and high quality early childhood education and care for all children and families is one of the four policies identified as delivering optimal outcomes for children, parents and the economy. Now, we know from our membership and community that not being able to access or afford early childhood education and care is a huge issue. The Parenthood agrees absolutely that lower income families need access to quality early education and care as a priority. However we also know that families earning

above $80,000 a year are also struggling to access quality, affordable early education care.

In October last year a nationally representative poll, that we commissioned Essential Media to undertake, of more than 1200 parents with children under six showed that 62 per cent of parents with children under the age of six say they are struggling financially. Only three in 10 parents who use centre-based early learning say the costs are easily manageable. Childcare costs are particularly concerning for those who report being under general financial pressure. The vast majority of parents, so 85 per cent of respondents believe that the current cost of living means that families don’t have a choice and both parents need to work. This rises to 90 per cent of those families that are feeling financial pressure. Interestingly, six in 10 parents say that they or their partner would definitely work different hours if childcare wasn’t so expensive.

Since The Parenthood was first founded in 2013, not being able to access or afford early children education and care has been a major obstacle for families with young children. It’s a reality. I know myself, as a parent of three, my children are through it now but I can absolutely tell you that my experience trying to access and afford early education 13 years ago with our first child absolutely set me on a path where running an organisation with this mission resonates. The cost of working crisis is how many parents of young children call the reality of trying to afford early childhood education and care. It’s one of the reasons this organisation exists to give voice to parents on issues affecting them. Because of that we are really grateful to have the opportunity to be here today and we are grateful for the work that the Commission is undertaking.

In the terms of reference for this inquiry, two purposes of ECEC are clearly identified, so supporting children’s learning and development in the early years and reducing barriers to workforce participation. Children must be at the centre of early childhood education and care policy, however the needs of parents and carers are fundamental and they are also inextricably linked with the needs of their children. The ability and capacity for parents to participate in the paid workforce impacts their ability to meet the material needs of their children. The current settings limit the choices and options of parents and particularly women when it comes to combining work and care.

After women have children they are less likely to be employed, more likely to work part-time if they are employed and likely to work for a lower rate of pay. Now, that is unfortunately a pretty consistent picture globally but there are other countries around the world, and especially those with universally affordable and accessible childcare systems, that have lower motherhood penalties than Australia. In Australia the motherhood penalty, according to Treasury data, is 55 per cent, which is considerably bigger than in other countries OECD countries, and we know that the average loss in earnings lasts for at least 10 years.

Australia has a peculiarly low female workforce participation rate and a high rate of part-time work. Given how well-educated girls and women in Australia are, their reduced workforce hours compared with global peers might seem odd. Given the high out of pocket cost of childcare in Australia, given the almost universal assumption that women provide the majority of unpaid care for young children before they start school and given the way the childcare subsidy interacts with our taxation and family benefit system it’s not really odd at all. Women’s workforce patterns are closely related to childcare policies. So, in Australia average wage earners with two children, aged 2 and 3 in full-time care, spend 24 per cent of earnings on childcare even after government subsidies which is significantly higher than in countries like Sweden where it’s 5 per cent and Germany where it’s 1 per cent.

Lower labour force participation and part-time work for mothers seems to be a strong cultural norm in Australia compared to many other countries. The Parenthood disagrees that this reflects the deliberate choice of mothers here and that using three days a week of childcare, for example, is due to maternal preference. We would say it is more a reflection of the unaffordability of paying for five days of early childhood education and care. I note the ACCCs – one of its findings in its final report that the price of childcare significantly impacts how much childcare households use. If ECEC was universally accessible and affordable the evidence seems clear that norms and choices would change.

So we know that in 2009 48 per cent of mothers with young children stayed outside the labour force. By 2021 that number had fallen by one-third to 32 per cent. This would seem to indicate that mothers’ employment decisions are quite sensitive to changes in policy rather than fixed by historical norms. Between 2009 and 2021 Australia introduced a statutory paid parental leave scheme and invested significantly in the childcare subsidy. We know that the availability of free or low cost early childhood education and care plays a critical role in dismantling the structural barriers that limit women’s employment opportunities and perpetuate gender inequalities in the labour market.

Tapping into the unrealised potential of women’s workforce participation represents the most significant opportunity for Australia to dramatically increase productivity in the short, medium and long term. The Parenthood ultimately has a long-term aspiration that quality-inclusive early childhood education and care should be free or nearly free for all families in the same way school is, regardless of post code, regardless of parental income, every child deserves access to quality early childhood education and care. The Parenthood does believe the childcare subsidy is not fit for purpose to deliver a truly universal early childhood education and care system.

We note the ACCCs comment that the design and implementation of the childcare subsidy, including its hourly rate cap, has had only limited effectiveness in placing downward pressure on fees and constraining the burden on taxpayers. That captures the conundrum. The Parenthood is impatient for the reform pathway to a universal system to get underway but we recognise that reform needs to be staged with

significant investments and policy reforms to improve access and supply before boosting demand too much. We are acutely aware that the sector is exhausted after four years of crisis and significant change. We recognise that reform has to have regard to the capacity of the sector to deliver that change.

The Parenthood does support calls to establish a child-centred supply side fixed fee funding model in parallel to the CCS funded approach to address the undersupply of early childhood education and care in outer metropolitan, rural and remote areas. The Parenthood notes the Commission’s concerns with Quebec. A key takeaway from the Quebec experience, rolling out a fixed-fee funding model, is that fixed-fee early childhood education and care must be adequately funded, that quality needs to be prioritised and incentivised for it to be effective at delivering high quality universal early education.

We think there is another key takeaway from Quebec that cannot be ignored and it is that the fixed-fee model was very successful in improving availability and attendance and proved extremely popular with parents. The Parenthood believes that, with appropriate sequencing and timing, Australia could and should aspire to a universal quality early childhood education and care system that is at a fixed minimal cost to parents. Thank you.

MS BRENNAN: Thank you very much, Georgie, and thank you to The Parenthood for your very strong engagement with the inquiry for your initial submission and for putting together a substantial post-draft submission for us to consider. I notice in your document and in what you’ve said to us there are a number of areas – a number of findings and recommendations that you support. I’m just going to take those as noted and not spend any time on them because we don’t have a lot of time to speak with you. But clearly you’re bringing some pretty significant challenges to us around the way in which our draft report interprets and responds to the terms of reference and also in terms of the big vision that you’re laying out for reform.

I know my colleagues will have questions but I’m going to just take my prerogative to ask one and that is, you talk about a child-centred funding mechanism – first of all, you talk about the CCS not being fit for purpose to deliver on the big vision, I would like to hear a little bit more about that. And also you talk about an alternative funding mechanism running in parallel to CCS, so could you say a little bit about how that would work.

MS DENT: Yes. So, broadly, the CCS is incredibly complex for parents. It is really difficult for families to even get a clear handle on exactly what they will be paying for early education. We have got members every single year who, at the end of the financial year, lodge their tax returns and get either refunds or debt notices. We know that it is really difficult for parents to get a clear understanding of exactly what they’re paying. We do note that since the introduction of the childcare subsidy attendance has absolutely increased and usage has increased but what we have seen is that each time there has been a significant investment of taxpayer money we have

seen fees ultimately creep up to the point where, within a year or two, the affordability relief that parents had has been evaporated.

We also know that the out of pocket costs have continued to rise which is – those two issues are obviously related. We would say that the childcare subsidy being linked to parental income is counter to universality, so we would note that with superannuation the rate is the same regardless of if you earn $500,000 a year or if you earn $50,000. We don’t taper that and that is described as a universal system. Now, with Medicare we do obviously have the Medicare levy but when you turn up to a hospital or a GP clinic the Medicare benefit that you are entitled to, either yourself or your child, it’s not linked to your income. It sits with the individual who’s using the health system.

And we would argue that ultimately early childhood education and care should be funded and conceptualised in the same way, that the entitlement sits with the child and that is less relevant what their postcode is or what their income is. When we have made – as I said, we do have our long-term aspiration that we recognise would be incredibly expensive and impossible to roll out really in – I mean, I think even 10 years would be ambitious to say if we had a free, high quality, early education and care system that everyone could attend. So we are realistic about the challenges, about the work that would need to be done to roll out a system like that.

So, we then be pragmatic and think, well, what are the things that we could do and we know really clearly, from one of the other research reports we did last year, was on families that live in regional, rural and remote Australia and we know that the access issue there is so significant that parents dream of having affordability issues, they just can’t get a spot. So what we would say is rolling out, testing alternative funding mechanisms in thin markets like that, in parallel with the CCS, with the changes that are being proposed could be a way to move forward. There could potentially be multiple funding mechanisms while we build towards a truly universal system.

MS BRENNAN: Thank you for that.

MS GROPP: That’s essentially what we’ve proposed with expansion of the CCCF fund for supplying services as required in thin markets and we haven’t – you know, there might be different models of how that’s done but essentially it would be supply side funding to enable access in those persistently thin markets alongside the proposal to have 100 per cent of the cap for almost a third of families below 80,000. So that would – do you see that as going some way towards – because they’re the – that’s where the big gap is at the moment.

MS DENT: Yes. Absolutely. We support that.

MS GROPP: Okay.

MS DENT: Yes. I think the broad point is we recognise that probably there’s not going to be one model or change that can help – that can fix all of the problems all at once. We’re going to do multiple things at the same time.

MS GROPP: Sure. Another thing to point out is that if the proposal for 100 per cent of the cap for the lowest 30 per cent of households would necessarily – which I think we’ve got an information request about it – would necessarily entail some change to the taper rate as well, so there would be knock on effects – benefits, I should say, for other families as well across the spectrum. So there would be an impact, not just for those households up to 80,000.

MS BRENNAN: There’s a lot of common ground by the sounds. Part of the issue is what’s our endpoint and the endpoint that you’re setting out is very different to the one that we’ve emphasised in the draft report.

MS GROPP: Yes. You’ve done some work on this and we will be doing further modelling. We did model a flat fee, I think it was $15 or $10 – $10.

MS DENT: Yes.

MS GROPP: And I guess it goes to what’s the – if you’re interested in the participation – it’s what we model, essentially, the participation response. It’s, sort of, a – and we will be doing further work on that to see what you get for extending it across the income spectrum.

MS DENT: And, I mean, that’s something that we are really interested in and I think that that would be really helpful modelling to see because certainly we know from – I mean, Quebec is one market but that’s not the only place in the world that has got a fixed-fee low cost. And each time a change like that has been introduced we have seen a significant lift in maternal workforce participation.

MS GROPP: It’s interesting that we’ve done some work which we have to be a little bit careful of international comparisons of participation because of other countries include parental leave as – count that as employment. We don’t so we have to make some – so, the gap is not quite as – to the extent there is a gap, it’s not quite as large. But we certainly have a high part-time ‑ ‑ ‑

MS DENT: Yes.

MS GROPP: Yes.

MS DENT: One of the pieces of research we did – we published this in December 2021 but it looked at the – it compared the workforce participation of women in four countries, in Australia, in Sweden, in Germany and – now I’m going to be able to forget where else but basically it showed that women in Australia – sorry, Canada, so Australia, Canada, Germany and Sweden and it showed that the workforce

participation of women in Australia is higher than it is in Sweden until they have a baby. And then what happens ‑ ‑ ‑

MS BRENNAN: I see. Yes.

MS DENT: ‑ ‑ ‑ is their participation stays quite consistent, ours significantly drops. And, again, this research really shows – and it’s certainly not the only research that shows this but the gap between men and women’s workforce patterns after having a baby is a key structural issue that we have. So, men’s workforce participation drops for one month when a baby arrives and then it, sort of, recovers and their earnings actually tend to increase after that point. With women, we know it drops really significantly.

MR STOKIE: I’m interested in the question around, I suppose, intensive versus extensive, so additional support around early childhood education and care, whether that’s going to – do you see it as the critical area of concern – the mother in particular but the second income earner who is returning, say working two days a week and going to three days or three days to four days, or is it the person who isn’t in the workforce, having left to look after a child, taking parental leave or maybe having to leave work altogether, is it getting them back into the workforce that’s the challenge, in your view, or is it the intensity as in the level or extent of work going ‑ ‑ ‑

MS DENT: Well, it’s ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ you know, increasing the level of part-time and – yes.

MS DENT: I would say it’s both. So we have got a situation in Australia where we have got highly skilled, highly educated women who are either not working – certainly not working full-time in numbers that women globally are. And we know that there are women who work part-time. We also know that lots of women – when they return to work after having a baby, it’s not just that they go part-time but they will often take a demotion effectively because they do have to carry – we know this in, sort of, hours, that women do take on the lion’s share of the caring responsibility in the early years and that means that a woman’s capacity to participate in paid work is going to be limited by the caring responsibilities.

Now, what we see globally is that where countries have invested in really decent and equitable paid parental leave schemes that set families up where both parents, where there are two parents, participate in care and in paid work. What happens is there’s a much more consistent connection to paid work over the, sort of, course of the family’s life. What happens in Australia is we really see the working patterns between men and women diverge very starkly after having a baby. And for some families the financial reality might mean that they can get by with one person working part-time but there’s a really significant economic and social cost that is often attached to that and it means it’s the person losing their skills, it’s losing the

opportunities for promotion, it means losing superannuation for longer period of time.

And when you extrapolate that out over the course of a woman’s life, it’s why we’ve got a situation where women over 55 are the fastest growing group of Australians who experience homelessness. The former sex discrimination commissioner, Elizabeth Broderick, said it very well that:

Poverty is the price we expect women to pay for spending their lives caring.

When she delivered that she was talking about the paid caring work that women do because it’s so low paid but also the unpaid caring responsibility that women take on and the financial cost that they forego over the course of their lives. And in Australia we’ve got a situation where if we are interested in increasing productivity and increasing participation, women are the giant iron ore deposit under the ground that we could mine. So we can – if we’re looking at it from a productivity perspective, there might be women who want to go from no work to three days a week, there might be woman that go from three days to five days, there might be someone that goes from three to four.

Every single gain is going to be helpful when we’ve got workforce shortages that we’ve got when we’ve women unable to attain economic security because they can’t stay attached to paid work. So I would say all of those scenarios are positive if and when it is the free choice of those women to work. And that’s what, at the moment, a lot of families that we speak to don’t feel they have a choice. They either can’t afford to work more or they can’t get the days they need to work more and that’s not free choice.

MR STOKIE: We’ve got quite an extensive level of modelling around this which is looking at elasticities in this area around early childhood education and care costs etcetera but also availability, so for those who’ve participated in survey work and responses around would they work more if it was available, would they work more if it was cheaper etcetera. You’ve looked at – hopefully you might have had a chance to look at our work. Do you have comment on the modelling work that we’ve done in this space?

MS DENT: I feel more confident speaking off the, sort of, surveys and research that we have done and that has shown really consistently that people would work more if ‑ ‑ ‑

MR STOKIE: Yes. We find that.

MS DENT: Yes.

MS GROPP: Question is how much.

MR STOKIE: It’s not 100 per cent of all – it doesn’t approach, I don’t know, the same level of participation and intensity that, for instance, what we see in the stats around, historically anyway, fathers who are working, who are full-time and seem to be – but even the convergence around for mothers, once the child hits about five the participation rate seems to converge from five to 10, 10 to 14 and 14 and older for the child. It doesn’t seem to go up higher. Now, maybe the intensity for work over that period ‑ ‑ ‑

MS BRENNAN: Yes, the hours.

MR STOKIE: ‑ ‑ ‑ the hours increases but the participation doesn’t – at least historically hasn’t seemed to be the case. And there might be a whole range of reasons for that and the interplay between tax – effective marginal tax rates ‑ ‑ ‑

MS DENT: Yes. Yes.

MR STOKIE: ‑ ‑ ‑ family benefits. But early childhood education and care is only – well, a very critically and important part of the early stages but by the time the child is hitting, sort of, 14 and over it’s not but ‑ ‑ ‑

MS DENT: Well, yes, I mean, I think that certainly the task of caring for a child who is 14 is ‑ ‑ ‑

MR STOKIE: It doesn’t stop.

MS DENT: ‑ ‑ ‑ very – is dramatically different to looking after a one year old or a four month old or a four year old but I would say that the caring responsibility doesn’t end at 14 and we still – and particularly, you know, if you look at the mental health picture for teenagers right now, there’s a lot of parents for whom participating in paid work is still difficult because of the family responsibility, so that exists, we know that.

MS BRENNAN: Georgie, I want to ask you, what I’m hearing you say, and I’ve read as well, that you’re not just talking – you are interested and supportive of more mothers having the possibility of doing more paid work should they so choose. But you’re also interested in men’s engagement in family life and in paid work. Could you say more – or could you talk a little bit about whether you see ECEC fitting in to those gender decisions about care as well as paid work.

MS DENT: Yes. And, look, this question comes up a lot. I would love for the question of access to early education and care to not be gendered. It would be amazing if mums and dads were impacted, their decision making and their workforce patterns were the same. But we know that they’re not. There is a huge gap between the decisions that families are making for mums and families are making for dads. So by virtue of that we know that early childhood education and care is a gendered issue because we know that when it’s either not available or whether it is too

expensive, we know that when someone chooses to reduce their participation in paid work it tends to be mums.

Now, at The Parenthood we have got three policy priorities, one of them is one year of paid parental leave that is shared between parents and that’s because we are interested in creating a context in which parents are supported to raise their children. And part of raising your children is being able to have an income so you can provide for your children. We don’t live in a utopia where you have a baby and suddenly all of the costs of living are covered. Mums and dads need to be able to do that. So we are holistically really interested in families being supported to combine their caring responsibilities with their paid work responsibilities, so paid parental leave is one of those changes.

Having access to totally affordable early education and care, that is quality, that is inclusive we believe is a game changer for families and a game changer for gender equity. We would say that the combination of reforming paid parental leave and early education and care and our research shows that that would be very significant at creating – changing the structural – the systemic issues that put men and women on such different paths in Australia. So we do consider it a gender issue. We know that if you look at it – if you step back and look at the way Australia educates women compared to the way women work, there is something there that is unusual. We don’t follow the same pattern that women – other countries do. There is a motherhood penalty in every single country but it is really significant in Australia.

MS BRENNAN: It is very much, yes. Yes.

MS DENT: Does that answer the question ‑ ‑ ‑

MS BRENNAN: Yes, no, that’s fine. That’s fine.

MS DENT: It is a context but we exist because we actually – we also know that children do really well when their parents are supported and able to participate in paid work and it’s not just participating in paid work. We know there are lots of families where just having somewhere safe and trusted and culturally appropriate is – that could be the most significant positive thing that could happen in a little person’s life. We know that so it’s not – we certainly don’t advocate for these policies just because we would like women to be able to participate in paid work. But we also know that – also there’s a lot of single parent households and the majority of single parent households are headed by women and they are caught in the same structural issues that make participating in paid work hard and we know then that creates – they’re more likely – those households are more likely to be in poverty than others. We know poverty is detrimental to child development outcomes. So there are a whole lot of reasons why we believe these policies are really important.

MS GROPP: I guess that’s one of our objectives in targeting the bottom three deciles because it would pick up a lot of single parent households and their children so I think that’s – and when we do the modelling of that we see that there’s quite a

big response, as Martin talked about the intensive, extensive. These are people who aren’t using – you know, coming in and presumably if their children are coming in, that’s freeing them up to work as well. But I was going to take it in a somewhat different direction because your end – your ambition is a supply-funded model but you did say provided it’s funded and there’s incentives because you need to incentivise providers to deliver. In your work, what sort of models around – we did look at some international models but have you got some exemplars that you would – on the supply side funding?

MS DENT: Look, I don’t and I also have to say – because we are a parent advocacy body we don’t have the same sort of – we work closely with a lot of big providers so I certainly – we do have some expertise but nowhere near what the big providers ‑ ‑ ‑

MS BRENNAN: You’re not modellers or ‑ ‑ ‑

MS DENT: We’re not modellers.

MS GROPP: No, no, I’m – just in terms of ‑ ‑ ‑

MS DENT: One of the concepts that I find really interesting is that – I haven’t said this yet but we agree with the – this comes out clearly in your report, that we all know that the workforce is a critical issue and however a system is going to be funded, it’s going to need early childhood educators, so if we don’t fix what’s happening with the workforce everything else is moot. But I’ve been thinking about that a lot and thinking, we know that the biggest determinant ultimately of quality in early childhood education and care are the educators and the teachers themselves. Is there a system by which the educators and teachers are funded because we know that that is the – you know, that’s the most significant cost of delivering early education and care and I wonder whether there is – and I do know there are examples of this happening.

MS BRENNAN: Are you saying – sorry to interrupt you. So, are you saying one model is, like, turn everything over to supply side funding directed to the provider but there might be intermediate positions. Is that what you’re saying, where some funding is ‑ ‑ ‑

MS DENT: I am open to these things being modelled ‑ ‑ ‑

MS BRENNAN: Yes. Okay.

MS DENT: ‑ ‑ ‑ but one of the options – considering that we know that parents themselves and taxpayers have been spending – are spending huge amounts of money every single week, every single year on early education and care. In terms of the efficacy of that investment, we know that where we get that return is actually in the quality of the experience for the children. That’s ultimately where we get improved outcomes for them and we know that that turns on the educators themselves. So is there a way of marrying up – because a lot of our community

members who struggle with the cost of early education and care, they also struggle with the reality that they’re seeing which is early educators are leaving all the time and that directly impacts the quality of the experience the child has because when you’re dropping off a little person, if it’s a different educator every second day it’s really difficult, it’s really hard.

So parents have known this conundrum which is their fees are going up and up and up but they’re looking at educators walking out the door and they’re thinking, “How can we marry these” and so conceptually there’s something to me – and I would love for this to be modelled – is there a way that the public investment in early education and care goes towards wages for early educators or is there a mechanism by which there is a fee per child. And I think also we need to be realistic that the cost of delivering early education is quite different for two and three year olds as four and five year olds. When we look at zero to five they’re different.

MR STOKIE: Yes.

MS DENT: So maybe there is a fee per child that is paid to a service for each ‑ ‑ ‑

MS BRENNAN: Yes. Okay.

MS DENT: I don’t know.

MS BRENNAN: I think I would like to take that in a related but slightly different direction which is that in your recent submission you advocate specifically for growth in the non-profit sector. We haven’t done that, we have talked about supply side funding ‑ ‑ ‑

MS DENT: Yes.

MS BRENNAN: ‑ ‑ ‑ and we’ve talked about maybe some – or some restrictions around providers expanding if they don’t currently meet quality settings but could you say a bit more about why you think specifically there should be expansion in the not for profit sector.

MS DENT: Broadly we find the evidence pretty compelling that overall the quality in not for profit providers is higher. We accept that that’s not the case in every single instance and there are certainly for profit providers that do have a high quality rating. But we also – we think that there is a conundrum when the provision of early childhood education and care is commercial. We do note that a lot of the growth that has occurred has happened in the for profit areas. We know that it’s not actually meeting the needs of enough children and families. When you look at the situations we’ve got in thin markets, you know, one of the reasons they are thin markets is because there’s not a commercial return there, so providers aren’t thinking about setting up there. But that doesn’t actually mean there’s not terrific need in those communities for an early education provider.

MS GROPP: Not for profits aren’t going there either. That’s one of the things we ‑ ‑ ‑

MS DENT: Well, that’s true but not for profits are not going there because a lot of not for profits are under financial pressure themselves. Covid – obviously Covid was difficult for a lot of different organisations, almost every person in the country but certainly a lot of the large not for profit providers, they took a hit financially. And it is not the case that – delivering high quality early education and care is a costly exercise and so I think when there is a thin market where there’s even less viability, even for a not for profit provider, they have to be conscious of their balance sheet and how is this going to play. That’s where I think there is a role for public management to recognise that the system we have is clearly not delivering for all children and all families so how are the ways we can fix that.

Are there ways that we can partner with not for profits so that they are incentivised to set up in areas where they’re not currently going because it would be too expensive. Does that make sense?

MS BRENNAN: Yes. They are going there more than the for profits though. They are.

MS DENT: Yes. But I think that there is a – I mean, broadly – and I did reference this – when we think about a universal early learning system we do think about how schools work. Now, if schools were delivered in a commercial context I can’t imagine there would be very many schools that would go and set up in a whole lot of different communities where they are right now. And we do have a private school system but schools are not for profit. They’re not allowed to make a profit, even the private schools. I mean, they’ve got extraordinary amounts of money but they’re not allowed to make a profit and that is because we see the education as a public service. And that is ultimately the paradigm shift that we think a truly universal early education and care system would mirror school.

MR STOKIE: Georgie, just on the schools, and we’ve heard this from a number of people, I presume you’re referring to the concept around funding which is government funding rather than – but the school system runs from 9 till 3 or 9 till 3.30, fixed days ‑ ‑ ‑

MS DENT: Yes.

MR STOKIE: ‑ ‑ ‑ certain days of the week and only certain weeks of the year.

MS DENT: Yes.

MR STOKIE: Early childhood education and care from a parent’s point of view, particularly the workforce we talked about but also from the child’s needs extends over 52 of the year, not 40 weeks of the year. Is the ambition around school funding – and we hear it a lot in preschool which is kinder etcetera ‑ ‑ ‑

MS DENT: Yes.

MR STOKIE: ‑ ‑ ‑ which is ..... but also again it’s only a partial coverage of what parents and children need and often the advocates for that don’t really acknowledge that, so are you saying that it’s really more the concept around how schools are funded which is not dissimilar to – you could have an argument around funding of hospitals and activity-based funding arrangements and there are other parallels in other areas or is it specifically around ECEC should mirror the school curriculum – well, not – the timetable and ‑ ‑ ‑

MS DENT: No, absolutely not and, I mean, look, the evidence ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ locations and ‑ ‑ ‑

MS DENT: No. And the evidence is very clear that we are not talking about – three year olds do not need to be sitting in a classroom and ‑ ‑ ‑

MR STOKIE: Indeed.

MS DENT: ‑ ‑ ‑ we do not need to do ‑ ‑ ‑

MR STOKIE: Well, we wouldn’t ‑ ‑ ‑

MS DENT: No, I know. So we know that play-based learning ‑ ‑ ‑

MS BRENNAN: That’s not where you were going, yes.

MS DENT: ‑ ‑ ‑ is very different. What I’m talking about is that when you have a child that turns five or is turning six, depending on the State and territory, what age it is, your child is entitled to a position at the public school and it doesn’t matter if you earn $3 million a year or you don’t work at all. And it doesn’t matter if you live in ‑ ‑ ‑

MR STOKIE: Yes. So it’s the funding model ‑ ‑ ‑

MS DENT: ‑ ‑ ‑ North Sydney or you live in Bourke, there’s – it’s not so much the funding model, it is the model that we recognise that is something that every child is entitled to. And that’s why we’ve got things like School of the Air for super remote areas because we recognise, well, hang on, there can’t be a school in every single community so we’ve developed solutions for those places. But the principle is every child, no matter the postcode, no matter your parents’ work habits, there’s a place for you and that’s what we believe a universal early education and care system should look like. Now, there’s a whole lot of – at The Parenthood we also campaign for properly-funded and accessible outside school hours care because we know that 9 to 3 is not the working day for a lot of people.

With preschools, for example, you know, a lot of preschools are 9 till 3. A lot of preschool programs are two days a week one week and three days a week the next fortnight. Now, none of that is easy for families to navigate at all.

MR STOKIE: Yes. We would agree.

MS DENT: I would say and I believe this was referenced in the South Australian Royal Commission report that came out but the idea of wrap around services for preschool ‑ ‑ ‑

MS BRENNAN: Yes, we ‑ ‑ ‑

MS DENT: ‑ ‑ ‑ which is ultimately – if you think about it, if you think about long day care services that deliver a preschool program, the preschool program doesn’t start at 7.45 in the morning but drop off is from 7.45.

MR STOKIE: So we’ve made draft recommendations around that. Is that ‑ ‑ ‑

MS DENT: Yes. Yes and I think ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ consistent with the ‑ ‑ ‑

MS DENT: ‑ ‑ ‑ that sort of thing is worth considering because ‑ ‑ ‑

MS BRENNAN: Yes.

MS DENT: ‑ ‑ ‑ we do ‑ ‑ ‑

MS BRENNAN: We think that does make sense to at least make childcare subsidy available to preschools who wish to offer extended hours or holiday programs or whatever. We’ve also tossed around – we’ve tossed around with people who have come to speak to us too, whether there should be further integration of preschool or kindergarten and long day care and this may be taking it a little bit outside your submission actually but that is something that we consider. Is it a good idea having these really separate models, should we ‑ ‑ ‑

MS DENT: Yes.

MS BRENNAN: ‑ ‑ ‑ be working to something more integrated ‑ ‑ ‑

MS DENT: I think integration is so important because it is really complex and a lot of families don’t understand ‑ ‑ ‑

MS BRENNAN: It’s so complex, yes.

MS DENT: ‑ ‑ ‑ the difference between preschool and kinder in different States and why do you get the childcare subsidy for one and not the other. It is really

complicated. And families do their best to create a patchwork but also it’s – the lack of continuity is tricky as well for kids and it’s one of the things that – in Canada, for example, where children – it is, sort of, the cultural norm that if children are in early learning they tend to go five days a week and that creates continuity. When you’ve got children – and, I mean, personally I was in this situation multiple times so we were using two different services and then that meant – I didn’t even think about it at the time because it was our only option but for a little person having to navigate multiple environments, different teachers, different cohorts, that’s a lot and so I think there are really significant reasons to think about integration where that is possible.

And I also think that – and I’m sure other people have made this comment – when we are talking about schools, that infrastructure is there so, while I said not every single community in Australia has got a physical school, a lot of communities that don’t have early childhood education and care do have a school.

MS BRENNAN: Yes.

MS DENT: So what are the options there and that’s where I think there is scope for engaging not for profit providers potentially, that if they didn’t have to – obviously there would have to be capital expenditure but if we had the – if the land is there, when you look at what it costs to run early education and care, land and building costs are significant.

MS BRENNAN: Just saw we’ve gone over time. Have we?

MR STOKIE: Yes, we have.

UNIDENTIFIED FEMALE: No, we’re fine.

MS BRENNAN: I do want to ask one more question though, Georgie, because – I notice that you’re broadly supportive of the establishment of an early childhood education and care commission in your ‑ ‑ ‑

MS DENT: Yes.

MS BRENNAN: ‑ ‑ ‑ submission but you also talk about having families and educators represented – say represented – or having the voices of educators and users represented in the commission. That’s an idea that we’ve not actually heard a lot so I’m interested in why you think ‑ ‑ ‑

MS DENT: Yes.

MS BRENNAN: ‑ ‑ ‑ that’s so important.

MS DENT: Well, I mean, our – the whole reason our organisation exists is to give parents a voice on issues that affect them and the reality is that when you become a parent there are some problems you can solve on your own and there are others that

you absolutely cannot. And creating an early education and care system that works for you and your child and your family is something that individual parents quite obviously cannot do themselves. But we do think it’s really important that their voices and experiences are heard. The early years strategy – sorry, the Commonwealth Early Years Summit, which was held to try and develop a Commonwealth Early Years strategy, there were lots of parents’ voices in the room.

MS BRENNAN: Yes.

MS DENT: There were also educators’ voices, there were also health professionals because it represents the, sort of, ecosystem, I suppose. And what I would say is, when we’re talking about early education and care, children, parents, educators are critical components of that ecosystem. And so I don’t necessarily think that they would have to be – I don’t think the Early Years Commission would have to be developed around the voices of parents specifically but I do think that the capacity for the Commission to hear from and speak with parents would be valuable.

MS BRENNAN: It’s a very important idea. Well, look, we actually have gone over time, Georgie, so I’m going to have to draw this to a close. But thank you very much for being here today and, as I said, thank you for your two submissions. We’re really pleased with the level of engagement, and although you’ve thrown us some quite challenging ideas and told us that we haven’t come up to the mark in certain areas, we do very much appreciate hearing those perspectives and we will be giving them due consideration. Thank you.

MS DENT: Thank you very much.

MS GROPP: Thanks, Georgie.

MS BRENNAN: Thank you.

MS GROPP: Thanks, Georgie.

MS DENT: Thank you.

MS BRENNAN: And you’re welcome to stay, Georgie, but we’re moving on now to hear from Amanda Johnstone.

MS A. JOHNSTONE: Yes.

MS BRENNAN: I was looking for you on the screen, Amanda. Yes, sorry, I was looking ‑ ‑ ‑

MS JOHNSTONE: .....

MS BRENNAN: Yes, we have. Yes. Welcome.

MS DENT: I will sub you in.

MS JOHNSTONE: If you want to stay, stay ..... a lot of things that I was going to say that you said for me but there’s a little bit extra.

MS DENT: Okay.

MS JOHNSTONE: So if you’ve got time ‑ ‑ ‑

MS DENT: Okay, I’ll sit and listen for a bit. Thank you,

MS BRENNAN: Welcome Amanda.

MS JOHNSTONE: Hi.

MS BRENNAN: While you’re settling in I’ll just say it’s good to see you again and I think you know our names but ‑ ‑ ‑

MS JOHNSTONE: We’re a lot more wise now, aren’t we.

MS BRENNAN: Yes, right, well ‑ ‑ ‑

UNIDENTIFIED FEMALE: There is water there if you want it.

MS BRENNAN: Yes, there is water too if you would like some. So my colleagues are Lisa and Martin and I’m Deb. In a moment we’re going to get you, for the record, to just say your name and the name of your organisation or business and then there will be a transcription made of our conversation and it will go up on the website as well. We’ve got colleagues in the room and online so a cast of thousands out there, Amanda. So, thank you very much for coming along to respond to our draft and over to you to get us started in the conversation.

MS JOHNSTONE: My name is Amanda Johnstone and I actually run in-home childcare AGJ businesses in Newcastle which goes around the whole of the Hunter Valley. Now, there is an issue at the moment, the government is trying to close me down, so I came straight from Federal Court to here. And that’s because of lack of funding and that’s affecting every childcare centre in Australia. They will be receiving a letter at some stage to say that you have to fight for your company, you have been made insolvent. But, apart from that, I’m here for the families and for my carers. I did pick five topics but I’ve got it down to three.

MS BRENNAN: Okay.

MS JOHNSTONE: So my first topic is really confusing because it’s actually the eligibility. Now, there’s two types of eligibility. There’s one that the government – the parents go online and they put down what hours they do and then for in-home care there is another one. So, for example, a family – I’ve actually written one down

for you – has three children, one goes to day care one day a week, one goes to OOSH couple of days a week and another one stays at home. Now, the problem is the mother is a nurse. She can work 24 hours a day, five days a week one week, nothing the next or bits and pieces. So, being eligible for 100 hours a fortnight is the issue because ultimately she is going to go over her hours with using all those types of care.

Then, because there is a cap on each of those services, she will be paying the full fee to whichever service happens to not get their hours in at the right time. Each of those services themselves have a – what’s called week one and week two. Okay. Nobody knows what week one and week two are, so all I can do it put in the hours but I don’t know whether that’s going to work out for week one or week two. So week one would be the biggest amount of hours that they can use, so if they use all their 100 hours in the first week they’ve got nothing to use the next week therefore they pay the full fee and that could be for all of the three services. We charge differently because we charge per family ‑ ‑ ‑

MS BRENNAN: Right.

MS JOHNSTONE: ‑ ‑ ‑ not per child. It used to be per child and it worked fine, there was no problems whatsoever and that’s really one of the biggest issues because the in-home care can turn around and say, “Well, we’re only going to give you 10 hours a week”. Families are turning down work because of this because they don’t have the eligibility from the in-home care. And the eligibility of 100 hours a fortnight never fits in with their rosters and the rosters for particularly the nurses will change each week. So that was my first topic.

MS GROPP: Can I just butt in there.

MS JOHNSTONE: Yes.

MS GROPP: Why was it changed from ‑ ‑ ‑

MS JOHNSTONE: The nurses, you mean?

MS GROPP: No, from the per child, follow the child – became a family thing, what – you said it was okay when it was ‑ ‑ ‑

MS JOHNSTONE: Yes. All services – well, in-home care used to be per child.

MS GROPP: Yes.

MS JOHNSTONE: So you would have a fee and you could – say it was $12, that’s $4 per child and each child would get that special childcare benefit or childcare benefits at the time for each of those children. So there would be 100 per cent fee, 104 per cent fee and 108 per cent. So when you got to the 104 you’re, pretty much, paying nothing. Definitely when you got to the 108, because you had the three

children, you were paying nothing, so it was only if you had the one child. That was actually unfair for the family that only have one child because they were paying a larger fee. With that as well it actually confuses families, boy, doesn’t it confuse them.

I’ve had questions, “Well, why are you charging a different fee to what the OOSH charge”. We’re a different type of service. But you should only be paying the same thing. I have a lot of families that don’t pay. I’ve got a lot of debts because of the families.

MS BRENNAN: Right.

MR STOKIE: I don’t know if you’ve seen, we made some – sorry, I know we’ve stopped you on ‑ ‑ ‑

MS JOHNSTONE: No, you’re right. No, no.

MR STOKIE: ‑ ‑ ‑ point (1) so we will give you the opportunity to go two or three. We’ve made some recommendations around the activity test which ‑ ‑ ‑

MS JOHNSTONE: Yes.

MR STOKIE: ‑ ‑ ‑ which would go – effectively removing that, at least for three days. Is that going to – that’s not going to cope with your example of the 100 hours over a fortnight, the 50 hours a week because ‑ ‑ ‑

MS JOHNSTONE: I don’t think it will make any difference because the eligibility from the government to the eligibility for what the support people are giving them, the support people give them whatever hours they need. They shouldn’t be saying, “You can only have X amount of hours” because they have to turn down work ‑ ‑ ‑

MR STOKIE: It’s an interesting example because ‑ ‑ ‑

MS JOHNSTONE: ‑ ‑ ‑ and it clashes with the other services.

MR STOKIE: We’ve been grappling it with, well, okay, for three days or 30 hours, what do you do for the fourth and the fifth day and your example is, well, somebody is working a rostered system, they might ‑ ‑ ‑

MS JOHNSTONE: They all are. They’re all children at risk ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ be working five days a week and then ‑ ‑ ‑

MS JOHNSTONE: ‑ ‑ ‑ or they’re ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ not very many the following week and, spread over the course, it might be – it might smooth out but it may not as well.

MS JOHNSTONE: Yes.

MR STOKIE: Reflects that life is a lot more ‑ ‑ ‑

MS JOHNSTONE: Most of the time it doesn’t.

MR STOKIE: ‑ ‑ ‑ complicated than simple rules.

MS JOHNSTONE: Yes.

MR STOKIE: Okay. Sorry.

MS JOHNSTONE: No, you’re right.

MR STOKIE: But that’s a good example. Thank you.

MS JOHNSTONE: My next topic was actually – topic (3) which is the costs which was explained just what I said anyway. They, kind of, go together. And that actually comes in to – actually, with the other services, if they’re using another type – like, if they were using in-home care the other service would get a discount for the fees for those children that have been using both services but it doesn’t work the other way. So if somebody was using an OOSH or a long day care, that discount then doesn’t pass on to the in-home care children because it’s not per child.

MS BRENNAN: I’m not sure I follow that one, Amanda. Were you saying if families are using two different service types ‑ ‑ ‑

MS JOHNSTONE: Or three different services, yes. Yes, so it goes ‑ ‑ ‑

MS BRENNAN: There’s a fee discount.

MS JOHNSTONE: Yes. The discount goes to all other services if they’re using in-home care but it doesn’t work the other way and it can’t because we charge per family. If we charge per child, whichever child that was linked to would get that discount but we have to go back to the per child and the reason for it to stop was because it was costing so much money. But in-home care is about this much, the rest of it is about this much. There’s not much in in-home care at all. You’ve got a question.

MS GROPP: Keep going. I’ve got a question.

MS JOHNSTONE: Okay.

MS GROPP: You keep going and we’ll come ‑ ‑ ‑

MS BRENNAN: We have to restrain ourselves.

MS JOHNSTONE: Okay. I think that was just topic (4) and that was the – with the cap, okay, you’ve got – with all services you have a cap. There is – if a family gets the 90 per cent there is still, with in-home care, and I believe with other services, a 10 per cent withholding.

MS BRENNAN: Yes.

MS JOHNSTONE: So if the fee goes over then the government have got some money to take back. That was stopped, I believe, many, many years ago and then it crept back in again. Now, you’ve got to pay that on all those three services, so then those families are paying more and more each time. In-home care, if you’ve got the special – sorry, ACCS, you don’t pay any back. They come off that and they’re hit with this massive bill because – nobody seems to understand how it works. Parents ask me to explain their day care bills. I’m sorry, I can’t understand their day care bills. I understand mine but that’s only because they’re a software from the government – one of their approved software’s but parents seem to think that we do them. We don’t. We can’t fix them. That’s not something that – we haven’t programmed them in so we can’t do anything with them.

So there’s – I mean, there’s so many things to talk about but I think that and funding back for the in-home child care – and they took it off family day care in 2017 and also in 2018 – is really needed because we just can’t pay. And when parents don’t pay that makes it even worse.

MR STOKIE: In your example where a family might be getting the additional childcare subsidy ‑ ‑ ‑

MS JOHNSTONE: Yes.

MR STOKIE: ‑ ‑ ‑ and then you’re saying they’re coming off that ‑ ‑ ‑

MS JOHNSTONE: Yes.

MR STOKIE: ‑ ‑ ‑ what’s driving them coming off that? Have they – they have employment ‑ ‑ ‑

MS JOHNSTONE: No, not necessarily.

MR STOKIE: ‑ ‑ ‑ or income or is it ‑ ‑ ‑

MS JOHNSTONE: No, not necessarily.

MR STOKIE: What’s ‑ ‑ ‑

MS JOHNSTONE: Usually it’s the children at risk.

MR STOKIE: Right.

MS JOHNSTONE: So have quite a few children at risk.

MR STOKIE: Right. So they’re no longer considered at risk and they’re ‑ ‑ ‑

MS JOHNSTONE: No, not really, no.

MR STOKIE: Right. Okay.

MS JOHNSTONE: There’s – you can put in a certificate which is six weeks first up so then you get the information on why this child is at risk.

MR STOKIE: Yes.

MS JOHNSTONE: After that you have to put in a determination. I believe – and I could be wrong – that since this system changed that determination was actually done by – it wasn’t done by a human, by something looking at the letter and saying if it doesn’t say “risk” on it it’s rejected.

MR STOKIE: Right.

MS JOHNSTONE: You cannot appeal that or rather I can’t. The parent can but if those children are at risk from something, alcoholism or whatever, of that parent, that parent doesn’t have the ability to do it. So basically those children get left at home while the parent goes off and does what they want and it does happen, which previously it used to be just send the forms in, someone picks it up and says, “Yes, okay, I know these children. I know this situation. Let it go through”. Now it doesn’t happen.

MS BRENNAN: Would a lot of the – sorry, Amanda.

MS JOHNSTONE: No, you’re right.

MS BRENNAN: I was just wondering would a lot of the families you’re speaking about be low income families?

MS JOHNSTONE: Well, on the way down here I heard that middle income now is over $100,000 a year so they would definitely be, yes.

MS BRENNAN: Sorry, I should have been more precise because I’m thinking about our recommendation of 100 per cent – well, actually it’s different for in-home care, isn’t it.

MS JOHNSTONE: It won’t be 100 per cent at all.

MS BRENNAN: Yes. No, it’s different. Yes.

MR STOKIE: Doesn’t have to be though.

MS BRENNAN: Yes.

MS JOHNSTONE: There is a way around that though, well, kind of. You know how people talk about it going to the tax system, they have it taken off at their tax time, anything that is paid over the amount, so if they have to pay full fee for certain hours, that comes off their tax. That’s another way to think about it but then also that comes back to, okay, if families haven’t paid us, why can’t we claim at tax time because they’ve been given the money basically off their fees and they’ve only got a little bit to pay but we don’t get anything.

MS BRENNAN: So you’re telling us it’s not a sustainable model and your experience is bearing that out.

MS JOHNSTONE: Yes. It was beforehand but now it has changed it’s not. They took that funding and that’s – and the way that they did what’s called now the CCS and that has totally wrecked everything.

MS GROPP: And what about the quantum of the – where the cap is and – because the ACCC put out a report recently and they pointed to in-home care and said that the cap ‑ ‑ ‑

MS JOHNSTONE: Needs to be higher.

MS GROPP: ‑ ‑ ‑ was way out of whack with the reality of costs.

MS JOHNSTONE: It is. Definitely. Yes. One of my suggestions was, okay, if somebody works – they’re doing shiftwork. They finish at 10 o’clock at night. Okay. There’s a different cap from ‑ ‑ ‑

MS GROPP: For out of hours.

MS JOHNSTONE: ‑ ‑ ‑ say, 10 o’clock or 12 o’clock at night till 6 o’clock in the morning because from 6 o’clock in the morning, if they can get into an OOSH or a day care they go there. If they work at the weekend, the same thing. But that goes against my grain, even though I’ve said it, because in-home care was set up for any family. Doesn’t matter what they work, where they work, they all get charged the same fee and that shouldn’t change even though I’ve just said what I did.

MS GROPP: Because we actually – in our draft report we also proposed that there be a higher rate for out of – you know, atypical hours.

MR STOKIE: Yes, in-home care.

MS JOHNSTONE: People have picked their ‑ ‑ ‑

MS GROPP: Well, even long day care.

MS JOHNSTONE: The families have picked their jobs and why should they be penalised for what they want to do. I mean, you can turn up at a hospital and there’s no nurses there. You want an ambulance, well, sorry, the paramedics couldn’t make it. There’s so much complication in the system now when before it was so much easier.

MS GROPP: What’s your assessment of the demand for in-home care and flexible – I mean ‑ ‑ ‑

MS JOHNSTONE: I have seven families at the moment waiting just for the process to go through and when the new service took over – previously we used to do everything ourselves so it could be done within a matter of days, everything would be done. Now it’s taking about three weeks for one person to get care and by then they could have lost their job.

MS BRENNAN: And, Amanda, what about getting people to provide in-home care?

MS JOHNSTONE: I try to keep it within 30 minutes of where they live.

MS BRENNAN: Right. Are people stepping forward to be willing to provide in-home care?

MS JOHNSTONE: As long as it’s, like, either where they live, where a relative lives so if somebody wants somebody in Port Macquarie for three days a week they would go and stay with their mum for three days a week because she lives in Port Macquarie. So it’s all – you’ve got to take them on a case by case basis.

MS BRENNAN: Okay.

MR STOKIE: Just going back to the comment you made about the length of time for approval, what’s driving that? Is that ‑ ‑ ‑

MS JOHNSTONE: I don’t know.

MR STOKIE: ‑ ‑ ‑ they’re not dedicating enough time or is there some additional hurdle or obligation or paperwork that’s needed ‑ ‑ ‑

MS JOHNSTONE: Okay. They were given a four year contract in July 2018. That has been extended. In January everything changed hands, there was new – new people took over and things have changed since then. Instead of ‑ ‑ ‑

MR STOKIE: For the better or for the worse?

MS JOHNSTONE: For the better.

MR STOKIE: Right.

MS JOHNSTONE: Instead of the support people saying what service they will give the family the information for so they can only pick from these service people – these services, it’s now whoever they want. So we’re not restricted and we can only have families the support service basically said we can have which means we can apply for funding because we were restricted on – if we didn’t fit that funding model that they wanted, we couldn’t apply for anything. So as the new people – I really don’t know how many people are doing it now. They’re talking about having one certain area to do it because previously in New South Wales – well, my support services do New South Wales and South Australia.

We know at least 50 per cent of services have already closed and there’s more trying to figure out whether they’re solvent or not. So things are looking good but we just don’t know. It’s just time. And answering your question, if everything is given to the support services straight away, really all they’ve got to do is tick a few boxes. That’s from what I can see anyway.

MR STOKIE: I don’t know if we’ve distracted you from your list of three but are there other things you wanted to raise with us?

MS JOHNSTONE: I think you ladies have my – do you have my submission there?

MS BRENNAN: Yes.

MS GROPP: Yes, we’ve got it.

MS JOHNSTONE: You do. You ask me because – I thought the place is going to be packed but – and you’ll have lots of other people to see so I only picked a couple of topics that really make a difference.

MS BRENNAN: I think you’ve covered the key things in your submission. The funding for the in-home care unit – for the central unit is obviously critical.

MS JOHNSTONE: Yes. And the ability to be able to get grants as well.

MR STOKIE: I think there was something around inconsistency between jurisdictions ‑ ‑ ‑

MS BRENNAN: Yes. Yes.

MR STOKIE: ‑ ‑ ‑ so, States and territories etcetera. Is there something you wanted to let us – or make us aware of?

MS JOHNSTONE: Yes. We were given a guideline – an in-home guideline book which is being interpreted differently by each provider.

MR STOKIE: Right.

MS JOHNSTONE: So it would be, okay, mother’s in hospital, she’s on her own, doesn’t have anybody to care for the kids. Comes home anyway but she still needs help. My support service would say, “No, she’s not getting it” but then one from Queensland would say, “Yes, they can have it”.

MS BRENNAN: So inconsistencies.

MS JOHNSTONE: And that’s one of the things that I had, somebody came down from Queensland, exactly that. She was – she did need help at home to be – for the kids, because that’s what it’s for, and support service said no, she can’t have it. And she said, “But I got it in Queensland. Why can’t I have it here”, so it’s interpretation of it which is being looked at, as I’ve been selected as part of that program for the in-home care but whether or not I can even go to it now, I don’t know. I don’t know what’s happening.

MS BRENNAN: No, it’s a lot of uncertainty.

MS JOHNSTONE: Anything else?

MS BRENNAN: Well, from my perspective, I’m happy that we’ve covered the main issues from Amanda’s ‑ ‑ ‑

MS GROPP: No, it has been ‑ ‑ ‑

MS BRENNAN: ‑ ‑ ‑ submission. There’s a couple of minutes if there’s anything ‑ ‑ ‑

MS JOHNSTONE: Yes. Let me just think. Out there there’s lots of other things of course.

MS BRENNAN: Sure. Yes.

MS JOHNSTONE: I think the costs, the eligibility, the ‑ ‑ ‑

MS BRENNAN: The cap.

MS JOHNSTONE: ‑ ‑ ‑ understanding of – being able to understand what – like, parents know all about the Centrelink stuff, family assistance stuff. They come to us but we have no idea. We just say go back at this site.

MS BRENNAN: A complexity.

MS JOHNSTONE: But we need to know all about that as well so that we can steer them in the right direction instead of everybody going backwards and forwards, backwards and forwards, if we have some sort of training on it, it’s going to help an awful lot.

MS GROPP: Help them navigate. There are some online tools but ‑ ‑ ‑

MS JOHNSTONE: But that doesn’t help ‑ ‑ ‑

MS GROPP: Yes.

MS JOHNSTONE: ‑ ‑ ‑ doesn’t really help because, as I explained earlier, families don’t realise that you’ve got three different services which you’re told that you have to use, it’s not a choice, that they’re going to get charged three different fees, they’re going to get charges of three different fees again off your amount but nobody knows that. People just sign something and off they go because they’re happy, they want the childcare. And we have carers waiting, we have families waiting.

MS BRENNAN: Okay. Well, you’re certainly – your comments are very much in line with others that we’ve heard about, the complexity of the system, the need to be able to support families to work their way through it.

MS JOHNSTONE: Not turn them away.

MS BRENNAN: Yes.

MS JOHNSTONE: And that’s what’s happening.

MS GROPP: Yes. Particularly with different – the ones who don’t fit the nine to five – yes.

MS BRENNAN: Well, Amanda, thank you very much for coming along ‑ ‑ ‑

MS JOHNSTONE: Thank you, thank you for having me.

MS BRENNAN: ‑ ‑ ‑ and thank you for your submissions as well.

MS GROPP: Yes. Thank you.

MS BRENNAN: And, yes, all the very best. It obviously is a really uncertain time for you.

MS GROPP: Yes. I hope it works out for you.

MS BRENNAN: Yes.

MS JOHNSTONE: Yes. I wouldn’t say it has been great.

MS BRENNAN: No.

MS GROPP: No.

MS BRENNAN: Look, we might just take a two minute break. I know Anne is there waiting for us but we’ve just got – we might just break for two minutes and resume at 4.15.

UNIDENTIFIED FEMALE: Yes.

ADJOURNED [4.11 pm]

RESUMED [4.15 pm]

MS BRENNAN: Welcome back, everybody. We’re resuming our proceedings for the afternoon and welcoming Anne Hollonds, the National Children’s Commissioner. Hello there, Anne.

MR STOKIE: I think you’re on mute.

MS GROPP: You’re on mute.

MR STOKIE: Yes.

MS GROPP: The old curse.

MS A. HOLLONDS: Of course I was on mute.

MS BRENNAN: The first person here.

MS HOLLONDS: Hello, Commissioners. Thank you so much for having me and allowing me to join online and ‑ ‑ ‑

MS BRENNAN: It’s a pleasure.

MS HOLLONDS: ‑ ‑ ‑ I’m very appreciative of your time. And I’d like to, firstly, just say that I regret that I was unable to provide a formal submission and that was not in any way a reflection of the importance of this inquiry. It was an absolute lack of resources at my end.

MS BRENNAN: Oh dear. Okay.

MS HOLLONDS: And I just was unable – I was hoping, you know, even ‑ ‑ ‑

MS BRENNAN: Well ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ very recently that we could get something in but I haven’t been able to do it. So ‑ ‑ ‑

MS BRENNAN: Well, look, we’re very happy to talk to you and ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ I – what I propose to do is just to touch on three issues. I sent those issues to Guy. I don’t know if he has passed them on.

MS BRENNAN: Just before you do, Anne.

MS HOLLONDS: Yes.

MS BRENNAN: Sorry. Very sorry to talk over you. But because we’ve got our transcriber and we’re being recorded, I’m just going to ask you to say your name and ‑ ‑ ‑

MS HOLLONDS: Yes.

MS BRENNAN: ‑ ‑ ‑ the organisation you represent and then launch, as you were about to, into some general comments and then we will pick up the threads for a conversation with you.

MS HOLLONDS: Thank you. So my name is Anne Hollonds and I’m Australia’s National Children’s Commissioner.

MS BRENNAN: Thank you.

MS HOLLONDS: And, again, thank you and what a big job you’ve got. My goodness. The scale and complexity of your interim report is just mind blowing so I’m fully respectful of the important task ahead of you. I am going to touch on just three things, drawing on my work as National Children’s Commissioner. The first one is barriers to access which you’ve got significant content in your interim report. And you’ve outlined the many complex ways that we make it hard – we, as the society – we make it hard for children and families to access the services that are the focus of your inquiry, especially children and families with complex needs, poverty, disadvantage, discrimination and trauma. All of those sorts of things.

And I wanted to recommend that we not just consider these in the ECEC system in isolation but see the broader cross sectorial cross system conditions that are barriers and so, on that note, I will just draw briefly on the consultations that I run in this role with children and families. All of the people I have spoken to have been in those high needs, high complex needs, cohorts.

MS BRENNAN: Right.

MS HOLLONDS: There’s one report, in particular, that I can send a link to, if that is useful, for keeping kids safe and well, Your Voices.

MS BRENNAN: Yes.

MS HOLLONDS: And that was to inform the national framework for protecting Australia’s children. But I’ve also done lots of other consultations for other purposes and I hear the same things. So, basically, what I’m hearing is ‑ ‑ ‑

MS BRENNAN: And, Anne, can I just say ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ that the lack of access to the bank – sorry, did you want to say something, Deborah?

MS BRENNAN: I was just going to say, that’s a good way for you to engage with us, given your resource constraints. We’re very happy to receive links or reports or whatever.

MS HOLLONDS: Okay.

MS BRENNAN: So – yes, please do that.

MS HOLLONDS: Sorry, I can’t see you. You’re very small on the screen so if you want to ‑ ‑ ‑

MS GROPP: I know. We’re way up in the ‑ ‑ ‑

MR STOKIE: Can you blow us up?

MS HOLLONDS: ‑ ‑ ‑ interrupt at any time, but just wave. I will try to – or just shout.

MS GROPP: Yes. Maybe to – we should be wearing high-vis or something so you can see us.

MS HOLLONDS: And it’s quite dark in the room, for some reason.

MS GROPP: I know.

MS BRENNAN: ..... terrible.

MS HOLLONDS: Okay. So I will do that. I will send Guy a link to that report. But, basically, what we heard was that it’s the basics that are the barriers, would be a way of putting it. So it’s the lack of the basics like housing, food and public transport. This came up again and again in far too many communities. The absence of basic infrastructure becomes a key barrier to be overcome. Especially when the services that people are trying to reach are themselves fragmented, piecemeal, lacking coordination or sometimes non-existent. And, you know, on one location I visited last year for my new project which is going to lead to a report to the Australian Parliament, was a regional town or – I’d say – maybe call it remote, but remote makes us think it’s small. It was a town of 20,000 people. A mining town with a largeish population and the elders and the ACCOs I met with I met with told me that there is

no public transport in the town and that meant there was no school buses to get kids to school. And I was completely shocked.

And later on when I met with the police that afternoon, I checked with them. I said, “This is what I’ve been hearing while I’ve been in this town”, which has a high youth crime rate, which is why I was there. And they said, “Yes, there’s no school buses.” You know, so basic infrastructure is missing in places that you would expect that this would have been addressed. I also heard that the inability to trust the service provider was a key barrier, and I wanted to sort of stay with this just for a minute because it’s often not addressed in the policy documents that I’m asked to review about – and where access is considered. We don’t really go to this. And I heard this directly from kids and from their families, all around Australia. They told me that they are helped by service providers who understand them. Who don’t judge or discriminate against them and who treat them with respect and that all of this helps to build trust. And that this relationship of trust is a way of overcoming what are very broad barriers, as I said, even in the basics.

MS BRENNAN: Yes.

MS HOLLONDS: That if there is a service provider there, they will travel hours, they will spend hours travelling, to get a service if they know that they’re going to be treated with respect and that someone will listen to them and whom they can trust. And so this is often described as a relational approach to service delivery or, you know, it’s about relationships. Building those relationships of trust or a relational approach. I wanted to put that to you because, again, it’s something that I don’t see often in policy documents and I think it’s missing a key factor that people themselves talk about. Well, of course, onto our – before I move to the next point or do you want me to keep going?

MS BRENNAN: Well, I was just going to agree with you about that. And it is – it may not be widespread in policy documents but it is certainly something that I think has come to us in various ways. Actually, especially from some of the work from the social policy research centre. I do remember one extremely memorable article that I’m pretty sure it has been submitted to us, where a mother says, “I feel I’m judged like a horse by my teeth and my shoes.” And neither of them – and neither of those things actually cut the – make the grade. So, yes ‑ ‑ ‑

MS HOLLONDS: Yes.

MS BRENNAN: ‑ ‑ ‑ I think that judgment, not feeling comfortable with service providers, is absolutely critical to whether the children are ever going to make it into the service.

MS HOLLONDS: It is. And it’s – you know, this is what people themselves talk about.

MS BRENNAN: Yes, it is.

MS HOLLONDS: And in contrast, I’ve – at the other end, I’ve been in locations with – well, this one I’m thinking of is an integrated child and family centre in Tasmania where the mother with the two year old told me that she had previously lived in the area but then had lost her housing and had moved – had to move into a caravan park in Hobart. This place was in the north of Hobart. And that she now travelled – she took two buses and travelled for two hours a day to come back to that place because of her connection there and she would spend the whole day there with her two year old. That’s how important that relationship of trust had become and that she wasn’t able to find that elsewhere. So, you know, it really – when it works, it works really well. When it’s absent, that’s where you see the sort of – the barriers to access really becoming impenetrable.

MS BRENNAN: Thank you.

MS HOLLONDS: All right. Well, I will continue to point 2, was about your draft recommendation 7.1 which was about integration and I wanted to come at this to two different levels. So one is at the system level integration. So I really think it – that the design, the redesign of the ECEC service system needs to be well coordinated with all of the other national state and territory – national and state and territory plans and strategies that are touching the lives of children and families. And, again, you know, this is about ensuring that that broader view is brought to bear. So, of course, here I’m meaning the national plan for ending violence against women and children, the national framework for protecting Australia’s children, the national strategy for preventing and responding to child sex abuse. I mention those. I saw you mention in your report of the closing the gap and the First Nations early childhood education plan and also you mentioned the early youth strategy.

So the early youth strategy, of course, which is still under development, is a very critical piece of policy infrastructure that will be very relevant to what you’re doing. And I think we need to really see demonstrated how the ECEC system will – the new design will intersect with all of these and – sorry, I didn’t mention health also has their own plans. So all of those need to intercept at a system level. Then there’s the community level and this is where I think of it as what is the scaffolding that we provide kids and families with complex needs. So where – I think I may have said this to you when I met with you earlier that, in my view, integrated services across health, social services and education, including ECEC, this should be our default model, not the exception, not just targeting high needs cohorts or Aboriginal and Torres Strait Islander families. Integration should become the default and that people who aren’t – service providers who aren’t integrating at the local level should have to explain why not. I think we know so much now. The weight of evidence says that this is the benefit to all children and families but it’s a particular benefit to those who struggle to overcome the barriers we mentioned earlier.

Currently, the siloed operation of these basic service systems that are meant to help people is not meeting their needs. This siloing, in my view, is designed to suit the administrative needs of government, not designed to meet the needs of real people and this is something that we need to change. These basic service systems are mid-

last century in design and they’re not fit for purpose for complex needs today and I’ve actually had people say to me that they – experts that I’ve consulted have said to me that they think there is an epidemic of unmet needs out there and, hence, difficulty in addressing a lot of the problems that we keep trying to tackle. So that was my second point, was integration. I will move on now to the third point which was about the convention on the rights of the child and the participation of women in the workforce, which I know is a matter that you are asked to report on. And ‑ ‑ ‑

MR STOKIE: Anne.

MS HOLLONDS: Yes, Commissioner. Go ahead.

MR STOKIE: Sorry, can – if you – well, Commissioner to Commissioner. Can I just ask you a brief question around integration?

MS HOLLONDS: Yes.

MR STOKIE: And seek your views around – particularly around that community level of integration that you’re talking about. There’s different silos of government, and you rightly point out it’s all – a lot of this is all designed around how government wants to operate rather than how they serve collectively the child and/or the family needs and the community’s needs. I’m just wondering if you’ve got some insight or some helpful suggestions when you’re dealing with that multiple tiers, tiers of government, and different areas of government that are focusing on one aspect when, in fact, complex needs cuts across all of those areas and all of the needs, and how you bring that together in a way without, you know, almost blowing up the system but getting parties to work together. And I – you must see it all the time, I suspect, in areas that you’re looking at and I’m interested in what insights you’ve got that we should be taking on to help build that, I suppose, that community capacity for integration.

MS HOLLONDS: Well, it’s a big topic that you’re asking.

MR STOKIE: Yes, I know. It’s a ‑ ‑ ‑

MS HOLLONDS: But let me just make a couple of observations. One is that I think – if I go back to that example of the child and family centre in the northern parts of – north of Hobart, an hour north of Hobart, I mean, that was obviously set up as an integrated centre. That was – you know, it was a deliberate exercise and so the requirement was for the health services to be called in, the broader social and family services were brought in, to work inside what is – was, you know, an early childhood education facility. And so that, you know, the nurses would sit on the floor and do the, you know, early childhood checks on the floor of the play group and, you know the sort of thing.

MS BRENNAN: Yes.

MR STOKIE: Yes.

MS HOLLONDS: So it was designed that way. So the question is, if the centre – if you don’t have a centre that’s designed that way, then what’s the next best level of integration, or at least coordination.

MR STOKIE: Yes.

MS HOLLONDS: And can you get your nurses to come into another kind of early childhood centre to do the same. You know, like, if the Health Department understood this was critical then they would release their nurses to not have to work inside their office but to be able to do this. And I know it’s happening in some places so it’s not that it’s absolutely unreachable. Some of this is low hanging fruit, in my view.

MR STOKIE: Yes.

MS HOLLONDS: And it is ‑ ‑ ‑

MS GROPP: We heard about some mobile sort of check services, health check services today where they go around to centres in a bus and do it – they have a place there to do the checks so that, you know – so they’re different models.

MS HOLLONDS: That’s right. I’m sure sometimes they take the bus to the park when ‑ ‑ ‑

MS GROPP: Yes.

MS HOLLONDS: ‑ ‑ ‑ you know, people are in those – congregating in the park.

MR STOKIE: Yes ..... them off.

MS BRENNAN: Yes.

MS HOLLONDS: So all of it can be done but it is about each – and this to ask – to try and answer your question, so that every policy department, every silo recognising that they have a responsibility to find those intercepting opportunities. That it isn’t just one. The responsibility of one. It’s the responsibility of all at the local level. And it does often come down to leadership that – good leaders will do this anyway. I guess that’s one point we have to recognise. Part of it is good people who realise this is – they want to be able to offer their families, you know, a range of things that they need. But I also think there needs to be ‑ ‑ ‑

MS BRENNAN: Well, that’s absolutely right.

MS HOLLONDS: ‑ ‑ ‑ more authorisation from ‑ ‑ ‑

MS BRENNAN: Yes.

MS HOLLONDS: ‑ ‑ ‑ further up the food chain.

MS BRENNAN: We’ve seen some – I’m actually thinking of Sydney Day, SDN Children Services in Sydney. They’ve transformed their whole service system into an integrated service system which has involved retrofitting. It’s not as if they could build new buildings, or anything like that, but it’s everything, from health, early childhood education and care, early intervention and NDIS program. The whole – it’s the whole – there’s no wrong door. Everything is integrated.

MS HOLLONDS: But ‑ ‑ ‑

MS BRENNAN: So we do, we have some great examples but I think you’re right about the authorising environment and what – if it’s not part of the mission of the provider, what’s going to lead the provider there.

MR STOKIE: I like the turn of phrase, the next best solution, because collocating clearly is an ideal situation in many areas but that’s not just going to be practical and possible. And so what’s the next best solution, may well be around the sort of virtual integration or the communication or the network of relationships. A lot of that takes time and effort and it’s the glue. I think some people refer to it as the fabric or the glue that brings the parties and the components together and that just needs to be recognised and, perhaps, specifically funded and that’s maybe something ‑ ‑ ‑

MS HOLLONDS: Yes.

MR STOKIE: We’ve heard from others and you’re also reflecting on that need for – particularly for the intersectional elements that are critical. So, thank you.

MS HOLLONDS: Yes. And I think that where government is running these services or setting them up or they’re Goodstart, or something, you know, like – I think, that’s a different proposition to your, you know, single private provider.

MR STOKIE: Yes.

MS HOLLONDS: You know, that has one centre. Okay.

MR STOKIE: Did – yes.

MS HOLLONDS: And that’s where you need the Health Department in that local area and the local health services, you know, to be reaching out to them and offering a more, you know, a seamless connection for their families. And, you know, to build that coordination at least, integration at best. I’m not just talking about collocation.

MS GROPP: No.

MS BRENNAN: No.

MS HOLLONDS: We can’t – often we can’t do collocation but I think we need to strive to bring the services to the families, not the other way around.

MR STOKIE: Yes.

MS GROPP: Yes, we spoke to a PHN the other day too and that’s sort of a – how they – the obstacles but that’s sort of in their remit, because it’s about health outcomes for children and so how they ‑ ‑ ‑

MS HOLLONDS: Yes.

MS GROPP: ‑ ‑ ‑ link into that, into the ECEC sector. So I think ..... needs to ‑ ‑ ‑

MS HOLLONDS: I think – the reason I – I’m sure you’ve heard about this, you know, before. I’m sure not telling you something you don’t know but I wanted to stress it, firstly, because this is what I hear all the time from real people, that they – this is what they want. But, secondly, because I think to implement it we are battling barriers within government itself that will work against this. And so, you know, I just thought it was worth emphasising.

MR STOKIE: Thank you.

MS HOLLONDS: Okay. So my third point was, as I said, about the convention and women’s participation and I wanted to say, first by background, that Australia does not have a culture of respect or understanding of the human rights of children. I think, as Australia’s National Children’s Commissioner I think I can say that with some authority now. I’ve been in the job for three years. I think I am now seeing it for what it is. We hear a lot about worker’s rights, women’s rights, consumer rights, that kind of thing, but in parliament and in the news bulletins you never hear children’s rights talked about, and I think we feel, as a country, a little bit awkward about this, a bit uncomfortable. We don’t – you know, it doesn’t roll off the tongue. And this is in contrast to many European countries, including – and the UK, in particular, that have much more of a – it’s sometimes called a rights mindedness in their culture and in the way governments work.

And I wanted to make the observation that you have a graph in your interim report which compares the female participation rates across different countries or areas, like, I think we’ve got European, the Nordic countries and others. I can’t remember what the others were. And what I have noticed was that the countries that have the highest levels of female workforce participation happen to also be the same countries that have incorporated the convention on the rights of the child into their legislation. That they’ve gone much, much further. Further than Australia is even contemplating. No, there’s not even a conversation here to do so. And so, you know, there is something there, I think, worth looking at that – you know, we’ve got to think about this in that broader sense. It’s not just about early childhood education

and care and getting – helping mothers to get back to work. It is, more broadly, also about how much are we paying attention to what are the things that will affect the human rights of children.

MS BRENNAN: Anne, I think you’re right about that. We – in our draft report, we use the phrase quite a bit, and I think that we’re walking the talk, that we’re centring the child. That, in fact, we’ve actually been criticised a bit for putting so – a lot of focus on the child and perhaps not as much on maternal labour force participation. We don’t use – I think we might have one reference at a convention. We’ve not had much advocacy around it. We’ve had it – I can recall one submission from Professor Press at Griffith who has drawn the convention to our attention. And I think there are a couple of others too and they are particularly and they are particularly from people who work with children and bringing children’s voices to the table. And I’m not sure where we were up to with this when we last met, but we have engaged The Front Project and The Creche and Kindergarten Association to work with children to bring their perspectives. This is both kindergarten children and children in out of school hours and vacation care, to bring their perspectives. I know that’s not all you’re talking about at all. But I wanted to affirm, I think you’re right.

MS HOLLONDS: No.

MS BRENNAN: Rights talk is not big in Australia anymore. It was actually bigger 10 years ago but there is a little bit and I do hope we are, even if we’re not using the language, I hope we’re doing some of the implementation.

MS HOLLONDS: Well, that’s great to hear ‑ ‑ ‑

MS BRENNAN: It might not be good enough but ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ that you’ve got that work going on about with the voices of children. And, of course, article 12 of the convention is often – which is about the voices of children, is known as the gateway to all the other rights.

MS BRENNAN: Yes.

MS HOLLONDS: So it is very important. But I wanted to raise this as well because I am noticing, in the work that government is doing more recently, we’re seeing that they are trying to weave the convention of the rights of the child into the documents, recognising that the principles in the convention are actually practical tools to help guide decision makers and to find, you know, solutions. So it’s not pie in the sky and leftie human rights stuff this. They’re actually practical principles that can guide decision making. So I’ve seen some examples of the trying to weave it in. I’ve seen other examples where they just bung it at the end as an appendix or ‑ ‑ ‑

MS BRENNAN: Yes.

MS HOLLONDS: ‑ ‑ ‑ you know, they feel like they should mention the convention and the rights to the child ‑ ‑ ‑

MS BRENNAN: Yes.

MS HOLLONDS: ‑ ‑ ‑ but they don’t know what to do with it, right.

MS BRENNAN: Yes.

MS HOLLONDS: And so I think that is an opportunity. I mean piece of policy work that is about children, that it should actually be paying attention to the convention. If there’s anything I can do to assist with that work that you’re trying to do on that front, please feel free to reach out. There might be – I might be able to help in some way.

MS BRENNAN: Thanks very much, Anne.

MR STOKIE: That would be particularly helpful and the thing that comes to mind is where we’ve got draft recommendations that you look at and you say, well, that squarely fits within or should be informed by or should be influenced by the convention, then that would be very helpful. And I know we spoke very early on, and you may well be stretched and so it may not be possible, which is around making a formal submission. We have granted an extension to a number of people till around – but I’m looking at my colleagues now and hopefully I don’t say anything inappropriate – but to around mid-March. And so I don’t know if that helps you in any way, shape or form but ‑ ‑ ‑

MS HOLLONDS: Unfortunately, not really, because I am writing this big report to go to the Australian Parliament myself and I’ve got ‑ ‑ ‑

MR STOKIE: Yes.

MS HOLLONDS: ‑ ‑ ‑ far – very, very light on resources. But I am very happy to send you links, as we talked about earlier.

MR STOKIE: Indeed.

MS HOLLONDS: And also – and it might probably – the best use that you could make of me is if you are to send me this to go, how does that sound.

MR STOKIE: Well, that’s a ‑ ‑ ‑

MS GROPP: Okay.

MS HOLLONDS: I’m really happy to give you comment and I do that a lot for different government departments, you know, who are trying to ensure that when you

say that we’re centring children, well, we know what we’re talking about. That there is something behind it ‑ ‑ ‑

MS GROPP: Okay.

MR STOKIE: Yes.

MS HOLLONDS: ‑ ‑ ‑ rather than just a, you know, statement. Yes. So ‑ ‑ ‑

MS BRENNAN: Yes, okay.

MR STOKIE: Yes, well, that’s very generous and I think we will take you up on that and I’m looking at my colleagues ‑ ‑ ‑

MS HOLLONDS: Yes, please do. Yes.

MR STOKIE: ‑ ‑ ‑ who are nodding in the background saying yes, yes, we will ‑ ‑ ‑

MS BRENNAN: Yes.

MR STOKIE: ‑ ‑ ‑ do that. So don’t be surprised when we come back to you.

MS HOLLONDS: No. Yes, genuine offer. A genuine offer. And I’ve just got a final thing I’m going to throw in as a sort of concluding point, and it’s – I guess it’s about another system level barrier and that is the governance of the federation. So this is – it might sound a bit out there that I’m raising the federation but – so I note that, in your report, you referenced work on – that there’s work on a vision and a new partnership agreement between the Commonwealth and states and territories and I think – I read somewhere there is actually going to National Cabinet which is fantastic. I was really delighted to read that. Because what I’m seeing in other areas of children’s policy is that a key reform barrier is the fact that policies dominated by the concerns of adults with children invisible and their unique needs are overlooked.

And I will just reference one example. This is not just my opinion. The official list of issues that are considered to be of national significance or key priorities for National Cabinet, that document has a whole list of stuff and includes women and women’s safety. But when you look at it – and I’m happy to send a link – children are not mentioned anywhere. And so this is the governance structure for the federation. These are the issues that the federation – you know, all the governments are jointly making a national priority and children are not mentioned. I believe that that’s a serious gap and is of that, in itself, is a system level barrier to reform children’s policy.

So if you’ve managed – if this work is going to break through that barrier, that’s a fantastic thing. But I still think that children should be on that list. If we are serious about the reform objectives for the ECEC system redesign, as well as other policy initiatives, including the treasurer’s wellbeing budget. The wellbeing of children

needs to be elevated to become an issue of national significance. I will also – just so you know, I’ve recommended to treasury that we consider a child wellbeing budget statement in the way that we have the women’s budget statement or the gender budget statement, and I’ve noted that there are other countries who are now doing that as part of their legislative accountabilities for child wellbeing.

MS BRENNAN: Excellent.

MS HOLLONDS: Thank you.

MR STOKIE: Thank you very much, Anne.

MS BRENNAN: Thank you very much, Anne. You certainly do bring a unique perspective, as you know, to policy deliberations and we really appreciate all of your suggestions. We definitely will be following up on some of your offers there. And – yes, thank you for those very timely reminders.

MS GROPP: I also was going to ask one last question, Anne.

MS BRENNAN: Yes.

MS GROPP: You might have seen that we proposed an ECEC commission to sort of – to be the steward of the system, to monitor, etcetera. I mean, one of its objectives would be to – could be to uphold the, you know, interests of the child – well, we would envisage it – that could be quite explicit in its role that it’s – about the outcomes for children.

MS BRENNAN: Good point.

MS HOLLONDS: That would be fantastic if it was.

MR STOKIE: And ‑ ‑ ‑

MS HOLLONDS: That would be fantastic and – yes.

MS BRENNAN: Okay.

MR STOKIE: And it could make the contribution to any ‑ ‑ ‑

MS GROPP: Yes.

MR STOKIE: ‑ ‑ ‑ child wellbeing budget. It could run a research program which is reflecting on and targeting – yes, the wellbeing of children and children’s integration and the alignment of the policy to children’s needs.

MS HOLLONDS: Yes. And I think, you know, when you said before that you had some negative feedback about – talking about children too much. Did I understand that correctly? That it has ‑ ‑ ‑

MS GROPP: It’s a matter of balance.

MS BRENNAN: It’s just a question of balance, yes.

MS GROPP: A balance that we’ve put too much emphasis on the child.

MS HOLLONDS: Yes.

MS BRENNAN: But we, certainly, I think – we’ve dressed the previous imbalance where ECEC policy has been about parent’s workforce participation.

MS HOLLONDS: Yes.

MS BRENNAN: I think everyone agrees that we have put children at the centre of our thinking.

MS HOLLONDS: So just on that, I mean, I think – I don’t think you can emphasise children too much. Of course, I would say that, wouldn’t I? But ‑ ‑ ‑

MS BRENNAN: Well ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ just going back to that example of the Nordic countries that have a very rate of maternal workforce participation. When I have been there and met with colleagues there and I – you know, of course, heard about amazing things that they do in their policy and I asked them directly, “How do you manage to do this?” And the answer is, “We put children at the heart of our social policy.”

MS BRENNAN: Well, I would just like – yes, they do but they also put parents at the centre of policy.

MS HOLLONDS: Well, if ..... think about ‑ ‑ ‑

MS BRENNAN: And the rights and entitlements ‑ ‑ ‑

MS HOLLONDS: ‑ ‑ ‑ a child is not in isolation.

MS BRENNAN: And the child is not in isolation.

MS HOLLONDS: It’s always – child ‑ ‑ ‑

MS BRENNAN: Parent’s workforce participation is ‑ ‑ ‑

MS HOLLONDS: You don’t – no.

MS BRENNAN: ‑ ‑ ‑ critical and expected in pretty well all of those countries ‑ ‑ ‑

MS HOLLONDS: Yes. So ‑ ‑ ‑

MS BRENNAN: ‑ ‑ ‑ that have the best ECEC systems.

MS HOLLONDS: That’s right.

MS BRENNAN: Sorry, I’m getting on my ‑ ‑ ‑

MS HOLLONDS: So I should clarify, that I never thinking of children in isolation. You know, I am a family therapist ‑ ‑ ‑

MS BRENNAN: Yes.

MS HOLLONDS: ‑ ‑ ‑ by background so I always think of the family. But what I also have noticed is in policy documents I’ve seen in Australia, when it says women and children, what really gets the emphasis and the investment is the women bit. And so I think there’s a – we need to watch that. We need to watch that bit, in order to understand that our default as a nation is to always lean towards the adult in the room.

MS BRENNAN: Well, I think we would invite you when – you’re obviously terribly time pressed, but when you do have time to look in detail at our report, I think your sense will be that we have not fallen into that particular way of thinking. We certainly haven’t fallen into the way of thinking that women’s needs and rights trump children’s. We certainly have not done that.

MS HOLLONDS: No. And I see that and I just encourage you to keep – just to hold the line if you get pushback. Thank you very much.

MS BRENNAN: Thanks, Anne.

MS HOLLONDS: I really appreciate the opportunity to share some thoughts.

MS BRENNAN: Terrific.

MS GROPP: Thank you, Anne.

MS BRENNAN: Thank you so much. Thank you.

MS HOLLONDS: Thank you. Bye.

MS BRENNAN: Thank you. And, Anita, thank you for your patience ‑ ‑ ‑

MS A. KUMAR: That’s okay.

MS BRENNAN: ‑ ‑ ‑ because I have not been a very good timekeeper once again.

MS KUMAR: No.

MS BRENNAN: We’ve gone over a bit. But, yes, please come up and join us.

MS KUMAR: It’s an interesting conversation.

MS BRENNAN: Well, you probably heard a couple of other speakers get – set off on a path so you know what I’m going to say. I’m going to say welcome.

MS KUMAR: Thank you.

MS BRENNAN: It’s wonderful that you’re here. We’re looking forward to speaking with you. In a moment, I’m going to invite you to say your name, for the record, and the name of the organisation that you represent and then to make some opening remarks, if you would like to do that and then we will have a conversation. You know that there are people online.

MS KUMAR: Sure.

MS BRENNAN: And that the proceedings are being transcribed. So ‑ ‑ ‑

MS KUMAR: Excellent.

MS BRENNAN: ‑ ‑ ‑ with all of that, over to you.

MS KUMAR: Thank you. Anita Kumar from ECTARC, Early Childhood Education Services and Training. So we are a national RTO providing accredited training, certificate III and diploma in early childhood and out of school hours care, as well as provide children’s services in the Illawarra and the South Coast.

MS BRENNAN: Right.

MS KUMAR: So I thought the report was really, really good. So I just focused on – you asked a lot of questions towards the end of the report and said, “If you were working in the industry, what do you think we should do to address some of these concerns?” So in that – I’m just going to concentrate on two areas, which is workforce and VET education specific.

MS BRENNAN: Yes, good.

MS KUMAR: And the other one is a not-for-profit sector and the growth on that.

MS BRENNAN: Great.

MS KUMAR: So in my report I’ve actually put strategies upfront to say what are some of the strategies I think that we may have to consider, you know. And I’m not going to go through all the strategies. I just wanted to emphasise on a couple of them and leave the rest for you to ask questions.

MS BRENNAN: Great.

MS KUMAR: So as per in the review, and in the review, if you know, the diploma in early childhood education is a 24 month course but you cannot do a diploma straight away. You have to do a certificate III before you do a diploma.

MS BRENNAN: Okay.

MS KUMAR: Which means people who are also doing a diploma in early childhood education are doing three and a half years worth of education at minimum. The equal in bachelor’s degree is four years degree. The people also who are doing the three and a half degree, they are working in childcare throughout that period. There is – when you are studying in the university you can’t often work in a childcare centre because you don’t have a cert III qualification, or anything like that. These people are working almost full time or part time, doing a three and a half year qualification and yet their salary are comparatively low. I know the salary of the teachers need to be matched but I think we need to see why are we doing this so complex.

People – those who are taking VET qualifications are doing it because they have stigma around university qualifications. They’re seeing pathways other than that ..... so why are we making them study three and a half years to get a diploma when that’s not the case in many other professional diploma courses, and people can get that qualification in two years. So moving on from that, as well – and with a lot of consultation – did – rejigged the certificate III qualification. Because everyone said people are struggling to do it in 12 months’ time. We need more time. So as part of the review, not only did they make it from 12 months to 18 months, they rejigged all the qualification units in it. So originally we had 18 units. It’s now 17 but we have all the content of the 18 units and introduced two new units into it. The dropout rate currently is over 50 per cent in the VET sector. And 73 per cent of our workforce in early childhood education is certificate III and diploma.

It’s not going to work if we just tweak this. We’ve got to do something radically different in terms of stopping, reviewing. With all good intentions whatever we did is not working. We just have to do something different. The funding model is varied from state to state of how you go. So for instance, without going through the funding model – and we specialise in training people in regional and remote communities. So we get about $800 more to train somebody in regional and remote communities. So if you want to go from here to Bourke and send two of your trainees, that would be once in the whole course that you would send somebody to a remote community during the whole period that they are trained. Now, what are we saying? That these people don’t need to see face-to-face and once will do it? Or people like us come up

with some models to our own financial distress. Because one of the programs that we run, Deadly Connections which is at Bourke which works beautifully is because we go there four times a year.

Every school holiday we are there and it’s only run because the community actually is interested in the program. We have some funding that comes through to that community from the Commonwealth. The people don’t do much work between those semesters but that week when we are there, they do their studying, they do the assessments, they get feedback on the assessments and they finish the courses. And so, guess what, they’re all actually tracking really well in finishing their courses. Those people who don’t get that connection are not finishing because not many employers – and I’m not here to say for profit, not for profit, you know, but I am a not-for-profit advocate. So these students who are working full time are not getting their time to actually study. So the actual course says that these people have to get a certain amount of hours to study on a regular basis. That’s not happening. That’s not – and even good providers are struggling to do that because there’s not enough staff to take care of the children. How are they going to allow these people to walk away. So we’ve got to do something radically different in how we actually redo these courses.

The next part, I just want to say, just emphasises, if you think about the VET sector throughout – and guess what, both diploma and early childhood certificate III are the highest enrolled courses in the entire of the VET sector. And if you look at it, 72 per cent of the funding for the VET sector goes to TAFE and 49 per cent of graduates come out of TAFE. 28 per cent comes to the rest of the providers and 51 per cent of graduates come through the rest of the providers. I’m not here to advocate that TAFE needs to get less money. What I am here is, if TAFE is getting the funding then their knowledge resources should be broadly shared. What AI platforms are they using. What generative tools are they using. What LMS systems they are using, because they probably have a CTO, a CIO and a data officer which we can’t afford. So if they’re getting the funding then that knowledge has to be shared with the rest of us so we can also improve the way we work.

And then the school based partners. This is something that we are all trying to get, the school based partners. It’s certificate III as adults. People are struggling to complete. We’re talking about 15 year olds doing the same course and we don’t get any additional funding for that whatsoever and you can just see why that it’s not actually working. So we’ve got to really think about how each of these groups are being dealt differently. How can we improve the workforce in regional areas and remote communities because I’m in headquarters in Port Kembla and I can tell you the challenges in regional communities are ..... I’m talking to the converted. So I won’t even go there. There’s no incentive for them to travel either so some of them are – if you take a community in Lightning Ridge, they might be the only early childhood service there. They do not get to experience any other early childhood environment so we need to incentivise for these people to go and get that education outside of their community, and that’s not happening.

So I’m going to stop there. My first rant about the VET sector. The next part is the not-for-profit providers and I think previous people have spoken about the not-for-profit sector. I think, just sitting over here, the early childhood education and revenue or the operating model is really, really simple. We only have really three main things. We get fees. Employee costs is our main expenditure. Followed by – it’s either rent or debt repayment. And the other part is a small part. It’s the operation cost. So the only way you can make a profit is you’ve got to cut down on one of them. And the majority of the cost, as you would know, sits in the employee cost. So if you look at the for-profit services, you look at the number of waivers that we have, our requirements and ratios are minimum requirements. They are – everyone makes those requirements like they keep the requirements and therefore it’s done. That – they are minimum requirements and then you end up getting waivers on those minimum requirements.

And so if you are having more services growing and they’re having more waivers on it, whereas if you look at the not-for-profit services with a number of waivers, there’s far less not-for-profit services with waivers and one needs to sit down and ask the question, why is that. Because we don’t grow until we know we actually have the staff to actually grow. We pay the staff well. We have a number of staff. The ratios are much more higher and, therefore, we don’t make a great deal of surpluses in order for reinvestment. We also run in many vulnerable communities, in regional and remote communities where you have to run a small service, not your 60 place service where you can have some surplus. So in any financial modelling or scenario planning you look, any service under 48 children is not going to make much of a surplus at all. And so if you’re going to run small services in small regional and remote communities, you kind of are setting yourself up for failure, in some ways, unless you’re going to have 100 per cent utilisation.

So that is a challenge. On top of all of that is the fragmentation of how you actually get there. So when you look at local councils, they really only look at the DA requirements. Do you have a carpark, you know, do you have enough space. You comply with whatever the street landscape is and whatever your other – the state is going to look at the policies and the procedures and the licensing and then the Commonwealth really decides whether you get the CCS approval or not. It all happens fragmented. It doesn’t happen together. So you either end up with a market where there’s too many people or there’s a market where there’s not any people at all. You’ve got to work out how we do this in a much more structured way if there is, and we have taxpayer’s funds going in every single part of it. So we’ve got to really look at it in a much more – you know.

The last part I just wanted to talk about is, especially in regional and remote communities, I think if you know that there is a not-for-profit provider who is actually delivering good, high quality services, you can’t have them have a shovel ready project. Why not select the not-for-profit provider, provide them with funds to actually generate a shovel ready project and then gradually fund them through the course to actually build a service there. Instead of putting an application and saying, tell us who wants to come and build in Ulladulla and the project to build will need to

be shovel ready. To get a project shovel ready requires cost, requires time and if you want to do it really well in a community, then you need to work with a whole heap of people in the community. And all of those people are already far stretched and they don’t have many resources and, therefore, what I’m thinking is, why not in this – if you know that this community needs it, why not choose a provider and invest in them to create the service and then work out how you capitally fund them throughout the project, rather than just calling an EOI out of the blue.

And the last one I just wanted to emphasise is preschools. So a lot of services opened. There’s a huge number of preschool places. Very few babies and toddlers’ places. And why that is the case, I’m sure you all know, the costing model does not allow for much surpluses with babies and toddlers. It does allow for a lot more surpluses with preschool age groups. So we have to have some kind of regulation to say if there is a building, X amount of spaces have to babies and toddlers. Women, especially, don’t stop working for three years. We need those services, like we spoke about Nordic countries, all of that, because we have the opportunity to go and do – and we shouldn’t have to worry whether you can only do part time or full – we need to have that opportunity to have full time work if we wanted to go. So that’s some of the things that – and I’ve got a lot more but I will just stop right there and let you ask questions.

MS BRENNAN: Fantastic. Thank you very much, Anita.

MS GROPP: On the workforce challenges, and you’re talking about the courses, so what’s your – so do you have a solution to these – I mean, you said it’s a three and a half year to – you know, what are you suggesting then, that happens?

MS KUMAR: The diploma course has to be a stand-alone course for two years.

MS GROPP: Okay.

MS KUMAR: So whether you review the content of how you can make it a good two year course because these people are responsible from day 1 with everything in the regulation. So rather than just extending the course content, how can we make the course content in a way that they can do it in two years.

MR STOKIE: I’m interested in your thoughts around recognition of prior learning or life skills, etcetera. We’ve heard quite a bit and we’ve made some recommendations in here that either the length of the course doesn’t – you talked about a diploma – well, for two years but if what if you already had a certificate III and you’ve worked in the sector and so you’ve got the life experience plus some level of training, would the diploma still be two years – and, presumably, that’s part time whilst working but is it still two years or, in fact, it’s a shorter period because we’re going to recognise that? And if you’ve got life skills outside of the specific things that you’ve been training and then, similarly – and we’ve heard it in going to teacher qualifications or a bachelor degree, recognising the diploma elements, etcetera. So I’ve just – what are your ‑ ‑ ‑

MS KUMAR: Yes. So we do have the teaching qualification now recognised. So ‑ ‑ ‑

MS BRENNAN: Yes.

MS KUMAR: ‑ ‑ ‑ we have an accelerated program.

MR STOKIE: But not consistently. Like, some universities do that.

MS KUMAR: Yes, that’s right.

MR STOKIE: Like Wollongong does and ‑ ‑ ‑

MS KUMAR: Yes. And ACU is ‑ ‑ ‑

MR STOKIE: ‑ ‑ ‑ I think Deakin does ‑ ‑ ‑

MS KUMAR: Yes.

MR STOKIE: ‑ ‑ ‑ and, like, it will be one and a half years ‑ ‑ ‑

MS KUMAR: Yes.

MR STOKIE: ‑ ‑ ‑ but if you’re in Tasmania, it’s a graduate certificate after you’ve finished your three years. So you do it four years full time.

MS KUMAR: Yes.

MR STOKIE: And there’s a one and a half with experience versus four years, there’s ‑ ‑ ‑

MS KUMAR: I completely agree.

MR STOKIE: Yes.

MS KUMAR: I think there should be an accelerated pathway from certificate III to ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ diploma and accelerated pathway from diploma to early childhood.

MR STOKIE: Good. Yes.

MS KUMAR: The other thing I also think is if we are doing a certificate III for 18 months, that certificate III should – some of these courses should have similar to

early – any other degree where there are electives that you can choose. So a person who has done certificate III should be able to choose electives of working in OOSH. May be able to choose electives to work and run play groups outside and community play groups. May be able to choose to do electives to work in a community health setting with young children. That makes the profession more professional because people are now provided with pathways rather than just, this is it. And there is no other scope. And the thing is, they’ve done 18 months now. They’ve moved from 12 to 18 months, and I can tell you, the majority of them extend their 18 months. They don’t finish in that 18 months.

MR STOKIE: Yes.

MS KUMAR: And that has not shifted their weight. It has not shifted their professional capacity in any way or the way they are seen outside. It’s still exactly the same so what is the point of making something from 12 months to 18 months.

MR STOKIE: Yes. You touched on a point that’s really important to us, which is around – well, the high enrolment rates but the very high dropout rates. And I just wondered if you wanted to expand a little bit more on that and where have you seen it work well? It sounded like your experience in – I think it was Dubbo, you said, but ‑ ‑ ‑

MS KUMAR: Yes. Bourke.

MR STOKIE: ‑ ‑ ‑ you know, you go out four times a year rather than other services that might only visit once. But what is it that would be helpful for us to think about, in terms of supporting and encouraging greater levels of completion?

MS KUMAR: Look – and that is a conversation that I’m currently trying to work towards because people want face-to-face when it comes to certain things. Right. They don’t get that kind of support because they’re all working all the time.

MR STOKIE: Yes.

MS KUMAR: While people say can the centre director mentor them, can the education leader mentor them, they don’t have the time. They already have a full time work and they can’t actually do that. So you’re coming off, you’re choosing a pathway in certificate III for a reason, right, because you don’t – you have a stigma or you’re not confident about moving straight to a university and you’re choosing this pathway. So we need to provide sufficient support for these people in order for them to be able to complete it. We also need to embrace technology. There’s all of these generative AI but we haven’t embraced the technology, well, because we just don’t have the funds to invest in it to find out what technologies are good, how should use them, because we should be able to allow our students to submit assessments as they could talk through the assessments.

They can video the assessments. They should be able to capture their work in many different ways, not necessarily the traditional form of – I’m not saying no writing and learning but we should be able to engage with those students in many, many different ways. And to do that there’s already equity issues that are in IT and technology and we need to think about that for the people who are using it as well as for their providers like us. To be able to provide that to our students. So, yes, and that would ‑ ‑ ‑

MS BRENNAN: So those issues that you’re laying out there are common across VET. They’re not specific to ECEC and student ‑ ‑ ‑

MS KUMAR: That’s right, yes.

MS BRENNAN: Yes, okay.

MS KUMAR: Yes. But ECEC are doing most of the course online compared to a VET course, you know. Some of the VET courses where you will have to go in to actually do it.

MS BRENNAN: Yes.

MR STOKIE: Do you think the students who are involved in, say, a bachelor, primary or early years degree, at what point in that degree do you think they’ve got the equivalent training of a certificate III? You know, for instance, could a first year automatically be deemed to be equivalent and, therefore, not have to do a certificate III to become – to work in outside school hours care or work in early childhood education and care? Or is it after second year? Because by the time they’ve hit third year, quite probably they are because they’re a teacher. And they would have hit the required – so I’m just wondering if there’s this sort of escalation. I’m very keen on how do we tap into the potential workforce without undermining quality but without having the regulatory constraints that seem to be there around – that we have at the moment?

MS KUMAR: So just ..... because prior to this role I was the CEO at Early Start at University of Wollongong ‑ ‑ ‑

MR STOKIE: Right. Well, there you go. Well done.

MS KUMAR: ‑ ‑ ‑ and in that role – all I can say is, we don’t have enough teachers let alone ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ get the teachers to fill these qualifications. So we need them to stick to those courses, finish those courses and have – and go back into work into the community. What we need is to create more pathways for people to do the certificate III and diploma courses.

MR STOKIE: Sure.

MS KUMAR: And easier pathways for them to be able to see that they can achieve it. At the moment, people feel like it’s a longer course, it’s a complicated course and, therefore, they’re just dropping out.

MR STOKIE: Right. Okay. I had another question but I don’t want to dominate it ‑ ‑ ‑

MS BRENNAN: Keep going.

MS GROPP: You go.

MR STOKIE: Okay. I’m on a roll now. We’ve heard a lot of discussion, particularly coming out of the disability – the NDIS review, about the – whether the current training is sufficient for educators and teachers with a view that, potentially, there might be the alternative pathway through ECEC and, therefore, maybe a higher expectation on educators and teachers. And whilst that comes with its own challenges, and I don’t wish to sort of make light of – it’s an already stretched sector, from a training point of view, do you think that the education capacity – educational focus on children with additional needs or development delays, etcetera, is sufficient? Or is it at a base level for all children, not for those children that have additional needs?

MS KUMAR: Look, there’s only so much you can train people in it because each child who comes into your service comes with very complex needs.

MR STOKIE: Sure.

MS KUMAR: And they come with – and, therefore, they come with a group of ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ health professionals who are going to inform how we provide care for those particular children.

MR STOKIE: Yes.

MS KUMAR: So you will have had have had some training, in terms of how to work with these providers, how to support children, thinking about equity, thinking about the rights of the child, all of those kinds of things. But I think that could be more generalised. But taking that point further, again, if people see that they can work in an NDIS scheme delivering – I’m not saying – we don’t have enough workforce already so I don’t want to give away people, but I think the most important thing is for people to see that this pathway can lead to many pathways.

MR STOKIE: Sure. Okay. My last question there, if that’s okay, relates to, I suppose, recognising life skills. So we had heard, particularly, when we were in Northern Territory around the training requirements that may not necessarily be in languages that – and I’m speaking particularly here around Aboriginal and Torres Strait Islander peoples but – so language elements in the RTO for the certificate III but also recognising what are traditional ways of learning within Aboriginal communities and how does our system of qualification requirements acknowledge the existing and historical capability and skill which may not be necessarily couched in the same language. It may not be couched in the same way. But, in fact, they’re often delivering play based, visually based, artistic based community based learning that is, in fact, the – to me, what I can see, is the core of early childhood education and care. But ‑ ‑ ‑

MS KUMAR: Look, I totally agree. So it’s a bit of a manage in two things in one. We do – we are a highly regulated sector ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ and, therefore, we need to understand what we manage the risk, manage the regulations and all of that. At the same time, we shouldn’t lose our sight around all of these more important things about cultural learning and practices.

MR STOKIE: Yes.

MS KUMAR: So the best example I can give you is what we do at the Deadly Connections at Bourke. 10 per cent of the students that we train are from Aboriginal and Torres Strait Islander background.

MR STOKIE: Yes.

MS KUMAR: That Deadly Connection program that I’m talking about, the majority of them are aided Aboriginal students ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ or students who are working in an Aboriginal owned or operated ‑ ‑ ‑

MR STOKIE: Yes.

MS KUMAR: ‑ ‑ ‑ service. Now, they are all the students who are finishing on time.

MR STOKIE: Yes.

MS KUMAR: And the reason for that is because we’re doing it in partnership with the community.

MR STOKIE: Right.

MS KUMAR: So, yes, there is a course. We go down over there. The community together works out and they come together. The community provides us with a place where we are going to run the program.

MR STOKIE: .....

MS KUMAR: It requires a little bit more investment of a different type and pilots like that would be far more useful rather than saying it’s $12,000, it’s the same way of running, go and run it to everybody.

MR STOKIE: Yes.

MS BRENNAN: Yes.

MS KUMAR: And you get another 800 more if you go to regional communities.

MR STOKIE: Yes.

MS BRENNAN: There is ..... connected to community.

MS KUMAR: That’s right.

MR STOKIE: Yes.

MS KUMAR: And we have to go back and understand what that community – and by doing that, we also provide employment in the community. Those people in the community know those children and families a lot better and, hopefully, we can retain them in those communities.

MR STOKIE: Yes.

MS KUMAR: Otherwise, we get and train these people and often they move away from those communities.

MR STOKIE: Yes.

MS KUMAR: So we’ve got to think about that as a strategy.

MR STOKIE: It’s a very good example.

MS BRENNAN: Yes.

MR STOKIE: So thank you. And we want more of that.

MS BRENNAN: Yes.

MR STOKIE: So ‑ ‑ ‑

MS BRENNAN: It is, indeed. Yes.

MR STOKIE: ‑ ‑ ‑ I’m done with my questions but I’m done there.

MS GROPP: No, I think that’s very – no, that’s really interesting. Thank you.

MS BRENNAN: Gosh, you covered a lot of ground .....

MS GROPP: There is one. I mean, because you said that the changes in the course requirements have really led to this drop off in – do you think that’s the only reason that’s driving that dropout rate?

MS KUMAR: No. I think the other thing is also, of course, of ages.

MS GROPP: Yes.

MS KUMAR: They’re – all the other sectors are really driving, you know – they’re providing more. By the time three years are finished they may all started the same way when they start their first year training but by the time the three years come, most of the other ‑ ‑ ‑

MS GROPP: The gaps has widened.

MS KUMAR: ‑ ‑ ‑ they’re old, you know, whereas over here – so – and with the – which is a great thing. Women in STEM has become a really important thing. So you see a lot more women now applying into STEM jobs, which is great. And STEM qualifications, which is great. But we are a predominately 93 per cent, or more, driven women workforce. So our challenges become enormous.

MS BRENNAN: Did you, in your time at Wollongong, what was your experience with male students? Were they coming in, were they staying?

MS KUMAR: They were coming in and they were staying but they get picked up really, really quickly.

MS BRENNAN: Yes.

MS KUMAR: Because there’s far few male students, the opportunities that they get are far more ‑ ‑ ‑

MS BRENNAN: And were they going off to schools?

MS KUMAR: Mostly.

MS BRENNAN: Yes.

MS KUMAR: Yes, mostly. The only other thing I wanted to say, whether the Commission can do something about it, is why not make it that the corporations that are actually – like, for instance, if you take the Illawarra and the South Coast, you have Blue Scope, which is going to expand because of the hydrogen investment. Or why not make it that they have to have a partnership to actually deliver the early children education spaces because that is the basic need for every child, let alone everyone else to get to work, and why is that partnership not being incentivised in anymore. And how can we do that, would be something that I would think about. Because after early childhood ‑ ‑ ‑

MR STOKIE: So have you given thought to how you would want to give effect to that? Make that work?

MS KUMAR: Look, I think, when a proposal like that comes and there is government investment in the proposal like that, that that should be a part of the requirement in that proposal that how are they going to support the workforce.

MS BRENNAN: Yes. As we used to have in urban development ‑ ‑ ‑

MS KUMAR: Yes.

MS BRENNAN: ‑ ‑ ‑ in New South Wales, a requirement for ‑ ‑ ‑

MS KUMAR: Yes.

MR STOKIE: As a part of the planning process .....

MS BRENNAN: ‑ ‑ ‑ developers, had to .....

MS KUMAR: That’s right. Part of the planning should have. Because we’re going to have – the ports are going to grow, the hydrogen investment is going to come and then we’re going to have all other things that are happening, except the rest left – gets left behind. And we’re talking about an area where the socio-economic is one of the lowest in the country.

MS BRENNAN: Well, thank you, Anita. You’ve got a wonderful ‑ ‑ ‑

MS KUMAR: Yes.

MS BRENNAN: ‑ ‑ ‑ range of issues to us and very vivid examples that I think will stay with us. Thank you so much ‑ ‑ ‑

MS KUMAR: That’s okay.

MS BRENNAN: ‑ ‑ ‑ for taking the trouble to come and speak with us, and for your submission and – yes, we very much value your engagement.

MS KUMAR: Thank you.

MS BRENNAN: Thank you.

MS GROPP: Thank you.

MS KUMAR: Thank you so much.

MS BRENNAN: And nice to see you. I know Anita from way back.

MR STOKIE: Right.

MS BRENNAN: Another life, really.

MS KUMAR: Yes.

MS BRENNAN: Gosh. Now, that brings our proceedings to an end. But, yes, before we formally do that, I would like to see if anybody online or in the room has a question that they would like to ask or a comment that they would like to make on any aspect of today’s proceedings? Well, I think that we can assume that there are not going to be any further comments at this point. So I will adjourn today’s proceedings and we will resume tomorrow in Sydney. So thank you all very much.

MATTER ADJOURNED at 5.18 pm UNTIL TUESDAY, 27 FEBRUARY 2024