Are you an individual or making a submission on behalf of an organisation?

Organisation

Organisation name

Early Childhood Intervention Australia Vic/Tas (ECIA VIC/TAS)

Is your organisation....?

- A peak-body

1. Does the new vision reflect what we all want for children and families?

Yes, we believe this current reform does take a significant step towards the reduction of fragmented and siloed service delivery. At present our disjointed service systems mean families need to repeatedly share their story, or provided evidence of need each time they need to be afforded access. An emphasis on integrated services is welcomed. However, the mere co-location of services, of combining of funding packages does not guarantee collaborative approaches. Funding must cover the 'glue' that allows service providers to work together, with the family to provide true wrap around supports. This new approach may also bring greater flexibility to enable providers to respond to local needs in innovative and timely ways and give them the ability to respond to specific needs and plan for longer term innovations.
This proposal aligns well with the newly released National Framework Best Practice for Early Childhood Intervention and the National Early Years Strategy 2024-2034.

2. Are the two main outcomes what we should be working towards for children and families? Why/Why not? - Outcome 1: Parents and caregivers are empowered to raise healthy, resilient children - Outcome 2: Children are supported to grow into healthy, resilient adults.

The two main outcomes recognise the importance of children in the context of their family and that if we want to see children thriving, we must be aiming for thriving families. Recognising parent/carer/kin as a child's first teacher, we must be supporting them to understand their child's developmental needs as they change over time. If we are aiming to raise resilient children we must also examine the context they are living in, and ensure that the ecology will support them to develop skills that are resilient.
As child and family needs change, so too must the supports provided. They must

be able to flex and respond, be able to step up and step back as goals and priorities change.

Of consideration will need to be the workforce that will equally be able to flex and respond to changing child and family needs.

What is perhaps missing from these outcomes is the importance of community. We must recognise the impacts positive and negative that a community can have on a family's ability to thrive. As an organisation that promotes meaningful participation of children and families in their communities, we see and hear of the successes and the failures. Families report on their efforts to participate in their communities, only to be excluded when their child doesn't fit the mold or learns differently.

3. Will a single national program provide more flexibility for your organisation?

We are currently not funded to deliver programs under this model. However, we are in support of increased flexibility, that allows programs to respond to changing needs of families. This flexibility must also support sustainability of the workforce and guarantee meaningful work on an ongoing basis.

4. Does the service or activity you deliver fit within one of the three funding streams? Do these streams reflect what children and families in your community need now – and what they might need in the future?

We currently don't deliver under the DSS funding streams. However, current and previous projects that we have completed would fit neatly into Stream 2 Prevention and early Intervention. The projects as they created targeted resources, for parents/caregivers/families to support inclusion, health and wellbeing. Our projects are always co-designed with families to ensure lived experience perspectives and efficacy of what we develop.

The resources created are freely available to both families and practitioners with a wide national reach and regular downloads. They are both 'grab and go' style and also able to be customised to particular cohorts and communities.

Our members are all delivering services that fall into Streams 2 and 3 given 41% of children in out of home care have a disability.

The National Framework Best Practice in Early Childhood Intervention guides the Early Childhood intervention sector's practice, at the same time supporting the building of family capacity building, through parent education, combined with maximising child development across all developmental domains.

5. Are there other changes we could make to the program to help your organisation or community overcome current challenges?

ECIA VIC/TAS consider our service systems are siloed and fragmented. Families are currently being asked to share their story multiple times as they attempt to access supports and service systems. Each time a parent/carer has to share their child's history, challenges or diagnosis journey, it can remind them of the pathway they thought they would be on, and now are perhaps not.

A move to commissioning partnerships that are place-based or support a hybrid model when there are workforce shortages, would reduce the competitive tendering process and could instead facilitate collaboration.

Where practicable the creation of either a physical or virtual hub, or combination of both, with a variety of services could increase flexibility in service delivery and funding. Looking at models such as Our Place, where all services for children including ECEC and school are working together encourages families to engage and stay with services. Their strong, interconnected governance models promote authentic integration and wrap around services for families.

The Key Worker model in ECI is a good example of the development of a team around a family, comprising components from health, education and family services all working with the family in a considered and consistent manner. To enable this to work effectively, funding to spend time establishing teams, and giving them the opportunities to develop working relationships is needed. This should be beyond a regular meeting schedule and instead allow for all forms of communication with flexible timing.

6. Do you agree that the four priorities listed on Page 4 are right areas for investment to improve outcomes for children and families?

The Early childhood intervention sector has decades of evidence and experience indicating that identifying children and family needs early, and working to respond to them, through building capacity will contribute to breaking cycles of disadvantage. Two key reports released this year, The Cost of Late Intervention by The Front project and the State of Australia's Children by UNICEF, ARACY and Minderoo, demonstrate the impacts of not investing early.

Through our work supporting the design of Thriving Kids, intervening early is a common theme. The current 'wait and see or wait and fail,' approaches are not supporting families early enough. The above mentioned reports all point to the need to intervene earlier than we currently are.

The second priority again links to the ECI service sector and the needs of children and families. A good Key Worker following the Best Practice framework can be looking holistically at the needs of the family and linking them to services and at the same time providing a coordinating or navigational function.

It should be noted that co-location of services does not lead to integration and collaboration. What is required here is the commitment to work together on agreed family identified priorities in a coordinated way, where information is shared with all. This is the 'glue' that supports authentic integration of services. Funding for all to participate in this form of collaboration, the glue is essential, and should be available to all streams.

The experiences of family and community combined with evidence-based approaches demonstrate the difference between creating evidence-based approaches and evidence-informed approaches. Listening to community needs and identifying community strengths and capacity is vital. this can allow communities input into design and functioning of programs, leading to greater ownership and engagement from them.

The ACCO communities demonstrate many useful examples of holistic approaches to supporting family and community needs. In order to grow and sustain these models, there must be guaranteed ongoing funding to build and sustain the workforce and associated infrastructure. ACCOs must be afforded opportunities for self-determination at all times.

7. Are there any other priorities or issues you think the department should be focusing on?

The current cost of living pressures are impacting family stability and contributing to increasing levels of vulnerability which must be addressed and prioritised. If a family are worried about where they are going to live and what they will be eating, how are the going to engage in any kind therapeutic or early intervention work. Government must address the growing gap between the' have-and-have nots'.

At present there are significant reforms occurring in many sectors impacting children and families; NDIS, Thriving Kids, Education and Child safety. Each of these sectors report ongoing workforce challenges. ECIA VIC/TAS represents quality providers delivering across all these sectors. We hear firsthand the costs being borne by providers who are committed to building sustainable workforces for the betterment of families. A comprehensive workforce plan that brings all these sectors together is needed to look at training, pathways and longterm retention of workers. Whilst we have a workforce shortage in these sectors we also have a workforce retention challenge as well.

8. Do the proposed focus areas – like supporting families at risk of child protection involvement and young parents match the needs or priorities of your service?

ECIA VIC/TAS represent members from across the country working every day with children and families. For the past 40 years ECIA VIC/TAS has worked with it's membership providers to understand the changing needs of families and the systemic issues occurring. Members report on the challenges of long waitlists for programs they typically refer to within both universal and specialised services.

In response we have created resources for families to support parenting skills, understanding child development, recognising quality services, and mental health. Recognising the need for all sectors to work together to support families we created resources to support practitioners in understanding families, and parental stress, health and mental wellbeing.

The early childhood intervention sector plays a significant role in supporting children and families at risk. Working in family homes they see firsthand the current supports there, and are able to link families to wider supports within the community as needed. They make notifications and work collaboratively with child protection teams to support capacity building, family reunification and child development. Yet they are not part of the Child Information Sharing Scheme, when they could be.

Drawing on family-centered approaches, the ECI sector can work closely with all parent/carers in an integrated way, responding to their unique needs. They are not a crisis response sector, but are often put in that space, due to the trusted relationships developed over time. Working in homes and communities means their interventions are tailored to the family structure and culture.

9. Are there other groups in your community, or different approaches, that you think the department should consider to better support family wellbeing?

It is essential that each family's culture, beliefs and way of being, be respected and celebrated. The ECI sector work with incredible diversity and tailor supports to meet families where they are. This requires leaders and practitioners being abreast of current and emerging research to support practices. Upskilling in areas such as working with first nations families, newly arrived and multilingual families, neuro-affirming and trauma affirming practices are essential. An ongoing commitment to ensuring teams are working in best practice approaches takes time and funding. This must be built into all funding streams to ensure the workforce is able to deliver services in culturally appropriate, respectful ways utlisting the latest research and

practices. Recognising the intersectionality of all these areas is vital with each child and family being unique.

Families have often sought out the advice and support of peers, and it is pleasing to see that recognition for peer-led approaches is becoming more common. It is vital that Peer-led approaches must be seen as part of the wrap around workforce and as such funded to do the important work they do. At present there is an over reliance on the volunteer workforce, such as peer-led workers, who provide significant support to families that is often unseen.

10. What are other effective ways, beyond co-location, that you've seen work well to connect and coordinate services for families?

The National Framework Best Practice Early Childhood Intervention contains a fundamental principle dedicated to teamwork. There are many and varied ways to construct a team; geographically, co-located, multidisciplinary or transdisciplinary. At the heart is the commitment to collaboration and connection to support outcomes for children and families. Some teams are physically co-located but many are not, instead comprised of practitioners coming together to plan and share information, strategies and resources. They come from all areas including health, education, and disability. Our current funding models, make it difficult for some contributors to fund the 'glue' to participate in these kinds of collaboration, despite knowing the longterm benefits. Funding must support innovative ways to create wrap around teams that are beyond co-location and bricks and mortar.

In the disability landscape models such as the use of allied health assistants on the ground to deliver services in rural and remote areas, can boost the local workforce and fill vital service gaps. Allied health assistants must be supervised and mentored by experienced practitioners with funding to cover the time needed for items such as program development, supervision, case discussion and coaching.

ECI Key workers assist families to navigate our complex service systems and ensure families are accessing all possible services and benefits. For example they are ensuring families know of benefits through Centerlink and Medicare and enrollment in education settings. These roles provide oportunties for families to ask questions, to hear information more than once, to receive it in ways that work for them. Additionally, these roles are vital when there are any large-scale system reforms as they are able to filter information to families in a way they are able to understand and retain.

Relationships often form the backbone of successful working partnerships. An example here is ECI sector working closely with the ECEC sector to share knowledge and build the capability and capacity of the ECEC workforce. Whilst an ECI practitioner may attend an ECEC service for one child, their work to support the ECEC team on inclusion and accommodations for a child with developmental delay/disability, has downstream benefit over many years.

11. What would you highlight in a grant application to demonstrate a service is connected to the community it serves? What should applicants be assessed on?

Applicants should be assessed on their ability to evidence outcomes for families and the ways in which they facilited these outcomes. This is very different to the measuring of outputs in hours of service, dollars or targets. Instead measuring outcomes speaks to family priorities with measures at the commencement, during engagement and once the family moves out of service. The notion of dosage in not applicable here. There is no magic dosage for families given they possess individualised needs. Factors such as frequency and intensity can provide some understanding of the level of engagement and support a family may need and how this changes over time.

12. Beyond locational disadvantage, what other factors should the department consider to make sure funding reflects the needs of communities?

The rapidly growing corridors of metropolitain or built up areas are creating communities where there is minimal infrastructure and poor design. This in turn is contributing to increasing poverty and disadvantage. Lack of access to transport, secure internet for digital services and education options all reduce family autonomy and their ability to participate in their communities. The recent NDIS changes to funding travel highlight the need for services to be delivered where families are, in order to reduce the inequities present. A family with no car, or limited ability to pay for fuel, is not able to regularly take a child to a clinic for services however close they may be.

Governments could also consider strategies to improve access to ECI or allied health services to reduce wait times and realise their principle of intervening early. Our understanding of neuroplasticity and importance of the first 2000 days of a child's life, indicates the need for equitable access to services for all families.

Factors such as poverty, housing instability and the cost of living must be considered in designing and funding programs. AEDC data indicates the growing

levels of vulnerability Australian children are exhibiting, requiring government to respond differently and set children and families up for success.

13. What's the best way for organisations to show in grant applications, that their service is genuinely meeting the needs of the community?

Organisations must demonstrate in grant applications that their service is genuinely meeting community needs. Furthermore they musts demonstrate that their service model is underpinned by evidence-based and evidence-informed approaches, showing how practice aligns with proven methods. They should present data that substantiates changes over time, highlighting measurable outcomes and trends that reflect real impact. Strong applications also include indicators that whole-of-family functioning is improving, rather than focusing on isolated issues, to demonstrate holistic benefit. Effective organisations show responsiveness as needs evolve, describing how feedback, monitoring, and co-design mechanisms shape ongoing service refinement. Finally, demonstrating value for money—through efficient use of resources, prevention of higher-cost interventions, and strong return on investment—helps confirm that the service provides meaningful, sustainable benefit to the community.

14. How could the grant process be designed to support and increase the number of ACCOs delivering services to children and families?

The grant process could better support and increase the number of ACCOs delivering services to children and families by ensuring explicit recognition of ACCO leadership and their central role in administering funds, including flexible funding arrangements that respect Aboriginal community governance. Grants should include dedicated funding for workforce development, enabling ACCOs to build, retain, and grow a skilled local workforce. A strong process would also focus on the removal of systemic barriers that currently limit ACCO participation, such as complex compliance requirements, short funding cycles, and inflexible reporting frameworks. Prioritising ACCO-designed initiatives ensures communities are driving the solutions that best meet their needs. The grant process should encourage genuine partnerships with non-ACCO services, structured to enable meaningful transfer of skills, roles, and knowledge to ACCOs over time, strengthening long-term community-controlled service delivery

15. What else should be built into the program design to help improve outcomes for Aboriginal and Torres Strait Islander children and families?

To improve outcomes for Aboriginal and Torres Strait Islander children and families, program design should embed a recognition that each community requires a

different approach, with initiatives shaped around local priorities, cultural knowledge, and community-defined goals. Central to this is a commitment to self-determination, ensuring Aboriginal and Torres Strait Islander communities have authority, leadership, and decision-making power over the programs that affect them. Programs should also be built around flexible models that can adapt as needs change, ensuring services remain responsive and relevant through continuous community input. Additionally, program design must reflect an understanding of the time required to build, establish, and strengthen programs, allowing for genuine relationship-building, trust, and sustainable long-term impact.

16. What types of data would help your organisation better understand its impact and continuously improve its services?

Our current approach to evaluating the effectiveness of what we do combines data with stories and direct feedback. We seek to see the holistic picture by looking both at what each data sources tells us, and then an overall picture as they are combined.

We would seek to expand the ways in which we capture, report and analysis the data we collect, to delved deeper into looking at trends and themes.
We value the voice of lived experience and build this into the ways in which we work. Increasingly we are looking to incorporate child voice into this dialogue.

17. What kinds of data or information would be most valuable for you to share, to show how your service is positively impacting children and families?

See above.

18. If your organisation currently reports in the Data Exchange (DEX), what SCORE Circumstances domain is most relevant to the service you deliver?

Our organisation does not report through DEX.

19. What kinds of templates or guidance would help you prepare strong case studies that show the impact of your service?

To prepare strong case studies that effectively show the impact of a service, it would be helpful to have templates that allow demonstration of pre- and post-measures, enabling clear illustration of change over time. Case studies should also include vignettes that support the data and personalise outcomes, highlighting the lived experiences and real benefits for children and families. Some

standardisation across sectors would assist in identifying consistent trends and themes, making comparisons and broader insights possible. Finally, it is important that templates provide a clear link to the outcome measures, ensuring that each case study directly reflects the program's objectives and demonstrated impact.

20. What does a relational contracting approach mean to you in practice? What criteria would you like to see included in a relational contract?

Relational contracting values and recognises the work organisations have already contributed in supporting families. Relational contracting could be able to strengthen existing relationships with DSS but we would hope it will also allow for the creation of new relationships where there is evidence of alignment with DSS objectives and a proven track record of project delivery.

A longer term approach to funding, to allow organisations the time to build long term relationships with families is essential. Without this organisations face uncertainties around workforce and sustainability. We recently heard an example of a hub juggling 15 different grant based contracts with varying funding streams and amounts in order to patchwork together wrap around services for families. This approach is not sustainable in the long term.
We would like to see funding contracts for 5 years in order to support long term change to family and communities. In some cases for new initiatives this may take longer and there could be an option to cover this.

21. What's the best way for the department to decide which organisations should be offered a relational contract?

The department must evaluate all applications equitably and allow space for existing organisations and new entries. A focus on creating productive partnerships that leverage off organisational skills sets and specialties that will enable families in the services to access when and how they need them should be considered. What we hear from families is the need for 'joined-up' systems that wrap around them. Where there are warm referrals made based on existing relationships. Families are seeking to trust in organisations and will look to the department for confirmation of this trust.

Organisations need to be able to demonstrate outcomes and a solid evidence base to their programs. Long-standing community connections and relationships should be valued for the work already done and a possible indicator of how the work could progress. Flexible service models that adapt to changing needs over time are beneficial. Organisations that demonstrate an authentic commitment to

continuous improvement and evaluation of all they are doing from quality and outcomes perspective are beneficial.

22. Is your organisation interested in a relational contracting approach? Why/why not?

ECIA VIC/TAS is very interested in the relational contacting approach. We are experienced in working in partnership with other organisations, members and lived experience cohorts, to respond to the needs of families. We have a demonstrated history of ensuring that we co-design our projects with a cross section of lived experience participants. We work closely with universities, supporting student placements as our commitment to workforce development.

We have delivered projects funded by a range of bodies including the state and commonwealth, and our long history in the sector means we have considerable strength and resources to draw upon. Our national footprint enables us to tap into a wide variety of geographical, cultural and demographic communities, and to reflect all we learn from our engagements in the work we do.

We evaluate the impact of our programs, and projects through data analysis and feedback from users.