CEO’s Message

‘Best practice’ is a phrase we hear quite often these days, across many sectors. It is synonymous with methods or techniques that produce the best outcomes and results.

Understanding what best practice is in the context of early childhood intervention, and supporting the sector to deliver excellent, equitable and high quality early intervention, centred upon best practice, has always been the resolute focus of Early Childhood Intervention Australia (ECIA).

For decades now, across Australia, ECIA has been at the forefront of advocacy of best practice in early childhood intervention. In 2016, with the roll out of the National Disability Insurance Scheme, ECIA produced the National Guidelines - Best Practice in Early Childhood Intervention after nationwide consultation and review of the literature on what constitutes best practice in the Australian context.

At its core, best practice in early childhood intervention means working in partnership with parents, families and significant others to enhance their knowledge, skills and supports to best meet the needs of the child, optimise the child’s learning and development, and ultimately the child’s ability to participate in family and community life.

It was enormously heartening that our work on best practice formed the basis of the development of the National Disability Insurance Agency’s’ Early Childhood Early Intervention’ (ECEI) design and approach, currently rolling out nationwide. The principles of the ECEI design and approach are grounded in family centredness, cultural sensitivity, inclusion in natural environments, collaborative team work with a focus on capacity building that is linked to evidence, standards, accountability, and outcomes. The intention of the framework is to provide families with young children the access to the best practice support for maximum developmental outcomes.

Over the past year, with funding from the National Disability Insurance Agency (NDIA), ECIA took on the task of investigating and documenting ‘best practice’ in
early childhood intervention across Australia. Our challenge was to deliver a succinct set of recommendations for the NDIA, and stakeholders across the country, which elevate the early childhood intervention sector to a benchmark level of delivery, steeped in best practice.

During the course of the project distinct global themes emerged. We have addressed these themes with a defined set of recommendations which we have organised into four (4) key principle focus areas - the child; parents/carers and families; Early Childhood Partners; and Early Childhood Practitioners.

The project has highlighted the need to develop a longer term strategy, beyond transition, to ensure that the full potential of the ECEI design and approach is delivered by the NDIA. For this reason the report advocates that a ten (10) year evaluation horizon be adopted by the NDIA to best enable the success of the ECEI best practice framework.

ECIA are pleased to deliver this Best Practice in Early Childhood Intervention report, which contains our recommendations to support early childhood intervention change and growth. We look forward to working, hand-in-hand, with the NDIA, government, Early Childhood Partners and service providers to realise a vision where best practice is no longer aspiration, but is the heartbeat of early childhood intervention in Australia.

YVONNE KEANE
CHIEF EXECUTIVE OFFICER
EARLY CHILDHOOD INTERVENTION AUSTRALIA
The Best Practice Project

Early Childhood Intervention Australia (ECIA) has been funded by the National Disability Insurance Agency (NDIA) to undertake the Best Practice in Early Childhood Intervention Project (project).

The project, which was carried out over a one-year timeframe, focused on supporting the implementation of nationally consistent best practice guidelines in early childhood intervention in the provision of supports to children 0-6 years as participants of the scheme, and to children who may receive supports through Early Childhood Early Intervention (ECEI) partners.

The overall purpose of the project was to:

- Contribute to the achievement of consistent best practice approaches in ECEI through the facilitation of knowledge transfer and shared understanding;
- Assist the NDIA in participant readiness for children 0-6 years by leveraging off ECIA networks and membership; and
- Provide the NDIA, through a partnering arrangement, opportunities to manage change and resolve emerging issues.
About ECIA

Early Childhood Intervention Australia has been established to build capacity, resilience and strength across the Early Childhood Intervention (ECI) sector so that it is enabled to deliver the very best outcomes for children with a disability and/or developmental delay - and ultimately deliver the enhanced social and economic impact for government.

Vision

To provide national leadership, driving excellence and innovation in early childhood intervention for children with a disability and/or developmental delay, their families and communities.

Purpose

To inform and strengthen national policy, consumer and community understanding and professional practice in early childhood intervention, ensuring best outcomes for young children with a disability and/or developmental delay and their families.

Background

ECIA is the voice of the early childhood sector, nationally. As the peak body for early childhood intervention professionals, we represent our members at a state, territory and national level in advocating for the rights of young children with disability and/or developmental delay, and their families, to have access to high-quality early childhood intervention services and supports. We support professionals working in the field of early childhood intervention through the provision of relevant, contemporary information and resources, along with professional development opportunities to ensure the delivery of optimised outcomes through best practice.

ECIA enjoys a highly collaborative relationship with the NDIA and other relevant government departments and agencies as we work together to build capacity, improve services and deliver life-changing outcomes.

Over the last twelve (12) months, ECIA has transitioned from a federated state/territory based organisation consisting of four (4) member Chapters, into a national single entity company limited by guarantee.
What we do

ENABLE OUTCOMES
Our professional development programs are designed to enable life-changing outcomes for children with a disability and/or developmental delay, and their families.

LEADERSHIP
We are the leaders in Best Practice for Early Childhood Intervention and authors of the National Guidelines - Best Practice in Early Childhood Intervention.

CAPACITY BUILDING
We work with members, stakeholders and government to build resilience and grow capacity across the Early Childhood Intervention sector.

RESEARCH & POLICY
We undertake research that impacts policy and practice. We partner with highly respected organisations, institutes and universities.

TOOLS & RESOURCES
We produce evidence-based resources and digital toolkits that are accessible nationally to the Early Childhood Intervention workforce.

INNOVATE
We work across the sector to find evidenced and innovative new ways to enable service providers to achieve optimised outcomes through best practice.

COLLABORATE
We work collaboratively across sectors to lead change, cohesion and alignment to leverage greater outcomes and impact for Early Childhood Intervention.

ISSUE RESOLUTION
We provide a valuable circuit breaker between government and the sector, working to identify, communicate and resolve issues as they emerge.

ADVOCACY
We provide a voice for the Early Childhood Intervention sector by advocating critical issues and ideas to government and decision makers on their behalf.

ECIA is the only national peak body and advocacy group for Early Childhood Intervention. In this capacity, we work closely with the NDIA to enable the success of its Early Childhood Early Intervention (ECEI) design and approach for children aged 0-6 years. The framework of the NDIA’s ECEI design and approach has been built upon ECIA’s Best Practice Guidelines in order to ensure best long-term outcomes.
Best Practice in Early Childhood Intervention

Best practice is a procedure that has been shown by research and experience to produce optimal results and that is established or proposed as a standard suitable for widespread adoption.

Best practice in early childhood intervention is documented in the National Guidelines - Best Practice in Early Childhood Intervention (Feb 2016). The NDIA commissioned ECIA to develop the guidelines as they recognised the need to establish clear guidance about what constitutes best practice in early childhood intervention that applies to large and small providers, not-for-profits, for-profits and sole traders across Australia.

Four (4) quality areas containing eight (8) key best practices form the basis of the guidelines:

**Family**

Family centred and strengths based practice and culturally responsive practice. Recognising the central role family plays in a child’s life, all families are encouraged to be included and contribute to a child’s learning and development.

**Inclusion**

Inclusive practice and engaging the child in natural environments. All children, regardless of needs, have the right to participate fully in all aspects of life. Therefore, children should be included in natural learning environments such as daily routines, at home, and in the community.

**Teamwork**

Collaborative teamwork and capacity building practice. Professionals and families work together as a collaborative team to build the knowledge, skills and abilities of the individuals who will spend the most time with the child.

**Universal Principles**

Evidence and outcome based approaches. Early childhood intervention practitioners provide services that are grounded in research and clinical reasoning.
The purpose of the guidelines is to provide a framework for universal and equitable high quality early childhood intervention, based on best practice, for children with disability and/or developmental delay.

The NDIA and ECIA use the National Guidelines - Best Practice in Early Childhood Intervention as the foundation document for implementing a nationally consistent approach to the best practice delivery of early intervention service and supports to children aged 0-6 years with disability and/or developmental delay.

The development of the guidelines by ECIA formed the basis of the development of the NDIA’s ECEI design and approach that is currently rolling out across the country. ECEI is intended to provide families with young children the access to the best practice support for maximum developmental outcomes.

Two (2) years on from the launch of the guidelines, ECIA in collaboration with the NDIA, have undertaken this Best Practice in Early Childhood Intervention Project to explore in some detail across the country, what best practice currently looks like, check in with what service providers consider their practice to look like, and to develop resources along with recommendations for future change and growth.

Implementation of nationally consistent best practice guidelines provides opportunities to be world leaders in early childhood intervention. Adoption of the guidelines by all levels of government and the sector will ensure that families are able to provide children with disability and/or developmental delay with experiences and opportunities to build on their strengths and participate meaningfully in the environments of choice and the community. It will also provide the chance to transform early intervention services and the greater workforce, increase knowledge and skills, and tailor supports to meet the needs of the child.

When best practice principles and approaches are adopted in the delivery of early intervention, children have optimum opportunities for learning and development, and an increased ability to meaningfully participate in family and community life.
Background

In early 2016, the National Disability Insurance Scheme (NDIS) formulated the ECEI design and approach and funded the development of the National Guidelines - Best Practice in Early Childhood Intervention. The NDIS ECEI design and approach recognises that each child will have a unique ECEI journey, and is designed to assist all children with disability and/or developmental delay and their families achieve better long-term outcomes through accessing support services in their local community, regardless of their diagnosis.

In support of the latest developments across the early childhood intervention sector, ECIA and the National Disability Insurance Agency (NDIA) are committed to supporting families, service providers, EC Partners and the broader early childhood intervention sector with valuable information on best practice, service capacity and capability across Australia.

Consistent with the goal of establishing an evidence based model for best practice, the NDIA commissioned ECIA to develop best practice guidelines for early childhood intervention. ECIA published the National Guidelines - Best Practice in Early Childhood Intervention in February 2016.

With the progressive rollout of the ECEI design and approach by the NDIA, there has been, and continues to be, a need for significant transitional change management support and capacity building in the early childhood intervention sector.

In March 2017 the NDIA approved grant funding under the Community Inclusion and Capacity Development program for ECIA to conduct the Best Practice in Early Childhood Intervention Project. Community Inclusion and Capacity Development grants aim to support community and individual readiness for transition to the NDIS through capacity building projects.

The ECIA Best Practice project, which was implemented over a one-year timeframe, focused on supporting the implementation of nationally consistent best practice guidelines in provision of supports to children 0-6 years as participants of the scheme, and to children who may receive supports through EC Partners.
To achieve its overall purpose (refer to page 5), the project:

- Mapped early childhood intervention services available to work with children with disability and/or developmental delay, and their families and carers across Australia;
- Performed a search of relevant policy documentation, literature, service directories (including through NDIS, allied health membership groups, government agencies) and web-based service profiles;
- Conducted two online surveys and a series of interviews to gather information on services and the emerging key issues impacting on their capacity to implement the ECEI design and approach and National Guidelines - Best Practice in Early Childhood Intervention;
- Facilitated round table consultations in each state and territory with key stakeholders from the early childhood intervention sector to raise awareness of the ECEI design and approach and the National Guidelines - Best Practice in Early Childhood Intervention;
- Identified strengths, weaknesses and opportunities to build on existing knowledge and experience in early childhood intervention; and
- Conducted a series of best practice training forums and developed an online training program.

The project deliverables includes a Best Practice in Early Childhood Intervention Project report, a service mapping situation analysis and a program of online e-learning modules.

The project was managed to an Activity Work Plan approved by the NDIA, which detailed the project deliverables with timeframes and measures of success, risk management, stakeholder engagement and evaluation of project outcomes.

Project management reports were provided to the NDIA in line with the funding agreement timeline, which reported the progress status of each area of the project against the Activity Work Plan. These reports were discussed and approved at regular reference group meetings.
Project Governance Structure

Oversight of the ECIA Best Practice Project was provided by the ECIA National Council.

The three (3) components of the project: service mapping; stakeholder engagement; and the online e-learning program was managed by a Senior Project Manager with the support of a project team.

The role of the Project Reference Group was to collaborate, inform and guide the Best Practice Project and provide expert advice, contextual knowledge and expertise relating the project objectives.
ECIA Best Practice Project Team

Dr John Toussaint, Senior Project Manager
Wendy Mason, Project Manager
Kayleen Lenzo, Project Manager

ECIA Head Office Team

Yvonne Keane - Chief Executive Officer
Enis Jusufspahic - National Manager Sector Development
Kris Murphy - National Manager Design and Marketing
Nicole Walker - National Manager Membership and Professional Development

Service Mapping Consultants - Health Outcomes International (HOI)

Lilian Lazarevic - Managing Director/Project Director
Andrew McAlindon - Senior Manager/Project Manager
Dr Samantha Battams - Director, Research & Evaluation/Project Manager
Natalie Arthur - Senior Consultant
Kelly Batsiokis - Senior Consultant
Vanessa Heading - Senior Consultant

Online Training Module Consultants

Sue Davies - Project Manager
Denise Luscombe - Consultant Physiotherapist - Dept of Communities, WA
Noah’s Ark Training Team: Lou Ambrosy; Brooke Serpell; Alison Webster

Project Reference Group

Trish Hanna - Chair, ECIA National Board
Christine McClelland - Director, Early Childhood Early Intervention Team, NDIA
Dr Tim Moore - Senior Fellow, Murdoch Children’s Research Institute
Denise Luscombe - Consultant Physiotherapist - Dept of Communities, WA
Rowena Wilkinson - Principal, ECI Service, Dept of Education, TAS
Linda Williams - Executive Manager, Novita Children’s Services
Catherine Olsson - Chair, Allied Health Professionals Australia
Judy Kynaston - General Manager, National Projects, Early Childhood Australia
“The project highlights the need to develop a longer term strategy beyond transition, with a ten year horizon, to ensure that the full potential of the NDIS ECEI design and approach is delivered by the NDIA”
Executive Summary

The Early Childhood Early Intervention (ECEI) design and approach is an important strategy through which the NDIS is working towards a nationally consistent approach for children 0-6 years with disability and/or developmental delay. In the past, early childhood intervention was delivered and funded in a wide variety of ways in each state and territory with some approaches being more inclusive and community-based than others.

The ECEI design and approach is based on internationally recognised best practice principles. Early investment in children and their families has an ethical and economic foundation. National variation in early childhood intervention service provision along with practical issues arising out of scheme implementation will influence the introduction of the ECEI design and approach. Therefore, it is too early to judge.

The collection of robust data will build an understanding of the effectiveness of the ECEI design and approach in the long term. Of particular importance will be the evidence gathered by the NDIA short form questionnaire which measures progress against the lifespan outcomes framework. This framework addresses the areas of making choices, increasing independence, inclusion in family and community life, and access to specialist supports. This data, along with patterns of usage, package size, and exit from the scheme will provide a more comprehensive analysis of the effectiveness of the ECEI design and approach.

The ECEI design and approach is underpinned by a partner strategy and market response that embraces best practices and is the mechanism to further promote evidence-based approaches for children in this age group. These approaches are aimed at ensuring the early NDIS investment delivers a maximum return for children and their families, and for the lifetime care and support costs who through the ECEI design and approach receive quality early childhood intervention.

To this end, the ECEI design and approach aligns with the evidence based National Guidelines - Best Practice in Early Childhood Intervention which outline eight (8) principles in the four (4) quality areas of Family, Inclusion, Team Work and Universal Principles. All these quality areas are key foundation pieces of the ECEI design.
For some children, it will be immediately clear that they meet eligibility criteria for access into the NDIS. For others, the ECEI design and approach will ensure that they and their families will have early access to supports, connections to the community and services for a short or medium time. This will allow sufficient time to determine what is the best need for the child and their family and if indeed the child should access the NDIS as an individually funded participant.

Through the transition period, the ECEI design and approach has struggled to deliver many key aspects to its fullest potential. Some key aspects of the strategy, to ensure a successful commissioning, have been rushed and implemented in an inconsistent manner and methodology. Supporting the ECEI design and approach adequately, paying attention to key design features and promoting collaboration between NDIA and EC Partners will ensure that families and community have the confidence that children will get the help they require without the need to prematurely push for access into the NDIS. This is best for children and their families while also being an important insurance principle which supports NDIS sustainability.

With the progressive rollout of the NDIS, the NDIA identified the need for significant transitional change management support and capacity building in the early childhood intervention market and a sound mechanism to hear the concerns of families, stakeholders and the sector through this period.

This report is a summary of the Best Practice Project. The report summarises and synthesis ECIA’s National Service Mapping Project Final Report (HOI, 2018), the feedback from national round table discussions and feedback from the national training events undertaken, all activity accepted as part of this project to provide this single report. The overall goal of the project was to assist in the implementation of nationally consistent best practice guidelines in the provision of supports to children 0-6 years as participants of the scheme and to children who may receive supports through the EC Partners implementing the ECEI design and approach.

While the project has met the initial aims as stipulated, it also highlights the need to develop a longer term strategy beyond transition, with a ten (10) year horizon, to ensure the full potential of the NDIS ECEI design and approach is delivered.
Quantitative Findings

A detailed desktop analysis and online survey identified in total, 5,176 early childhood intervention services/providers across Australia, of which 6,344 service locations (head offices and service outlets) were able to be geocoded, mapped and presented in this report. Over 50% of services are single therapy providers.

There has been an immense increase of registered providers under the NDIS for services to young children 0-6 years. Most do not identify with or engage with early childhood intervention, as they are more health/medical related type services. The highest area of growth has been in therapy/clinical services for children and young people. The services have been mapped by NDIS region, with information about disability estimates in each region. These can be found at atlasesaustralia.com.au/ecia/atlas

506 responses were received to the online surveys (454 as part of service mapping and 52 providing feedback on the round table consultation questions). This represents less than 10% of registered providers of early childhood services under the NDIS.

42 stakeholder interviews were conducted, with leading early childhood intervention organisations and individuals. Common feedback themes included concern about a shifting away from early childhood intervention evidence informed practice to a medical model; the rapid pace of NDIS.
implementation and the poor state of readiness of EC Partners; early childhood intervention sector custodian transition and the fracturing of the link to early childhood education and care; and, NDIS pre-planning and planning process and market signalling through the price guide as to what the NDIS values most, medical models of therapy over early childhood intervention.

384 professionals, representing 264 agencies and government departments participated in ten (10) round tables across jurisdictions.

Feedback indicated strong support for the ECEI design and approach and the need to maintain standards for early childhood intervention. Predominantly, professionals have indicated a strong desire to maintain the elements of services they see to be working well. Of prime importance is working in partnership with families and ensuring that services are child and family focused.

119 practitioners representing 77 agencies attended training sessions in Alice Springs, Brisbane, Darwin and Tasmania. The main findings being:

- a poor understanding and awareness of the principles and research that underpin the National Guidelines - Best Practice in Early Childhood Intervention;
- practitioner feedback that indicated organisational gravitas to activity-based models of business aligned to the NDIS price guide, with no regard to the guidelines, as being a major obstacle for them to overcome in implementing the best practice approach; and
- variability in commitment to key practice understanding, capability and implementation.

Five (5) online learning modules based on the National Guidelines - Best Practice in Early Childhood Intervention. These online modules are currently available through the ECIA national online platform.
Key Numbers

5,176 ECI PROVIDERS IDENTIFIED, GEOCODED AND MAPPED
50% ECI PROVIDERS ARE SINGLE THERAPY PROVIDERS
42 STAKEHOLDER INTERVIEWS CONDUCTED

506 ONLINE SURVEY RESPONSES RECEIVED
384 PROFESSIONALS PARTICIPATED IN TEN ROUND TABLES
264 AGENCIES REPRESENTED AT TEN ROUND TABLES

119 PRACTITIONERS ATTENDED TRAINING NATIONWIDE
77 AGENCIES ATTENDED TRAINING NATIONWIDE
5 ONLINE TRAINING MODULES DEVELOPED
Qualitative Findings

The project assisted the implementation of nationally consistent best practice standards in the provision of supports to children 0-6 years with disability and/or developmental delay. While this will have resulted nationally in a higher awareness of the NDIS ECEI design and approach and National Guidelines - Best Practice in Early Childhood Intervention, there was very little evidence of agencies and/or practitioners embedding the features of best practice into everyday practice.

The National Guidelines - Best Practice in Early Childhood Intervention comprise a broad set of universal principles and the identification of four (4) quality areas underpinned by eight (8) key Best Practices in Early Childhood Intervention. It was identified in all project activities that there will need to be stronger incentives, policy levers and quality measures (outcomes measures) that encourage services and practitioners to appropriately and successfully give effect to the National Guidelines for Best Practice in Early Childhood Intervention.

Early childhood intervention is the means of providing specialised support and services for infants and young children with a disability and/or developmental delay and relies on a child and family centred approach and strong partnerships between parents and service providers. Feedback from all activity in the project indicated very little acknowledgment of this. The understanding and use of early childhood intervention best practice approaches were thin, best practice approaches were often quickly abandoned as the “service market” delivered a package under the NDIS focused on billable hours as articulated in the price guide and participant plan. Across Australia there was little or no focus on evidence informed best practice.
In the period of time the project was undertaken, there was consistent feedback from all stakeholders that a “one size fits all” method was being imposed at the local level with little room for flexibility and innovation. Not all organisations/health/community were aware of the overarching strategy and intent of the ECEI design and approach and there was considerable confusion around the role of the partner and the key worker. Balancing flexibility and consistency in practices is key to the ECEI design and approach, as is supporting and implementing best practice in local contexts and environments. Through the course of the project, some stakeholders began to appreciate the synergies and opportunities to meet local needs. However, it was felt that this was not well supported in the implementation.

Complex change requires a consistent communication and support strategy that is actively and strongly led. Feedback through the project was mixed regarding encouragement for agencies to leverage opportunities to get the best outcomes for children and families. The feedback indicated more specialist service delivery, with no dedicated plan to increase the communities understanding of best practice in early childhood intervention and to manage expectations. The project exposed the tension between a market acting in ways that were not always in the best interest of the child or family or in embedding best practice, but more about the rules imposed by the administering body. Often best family centred approaches or best practice was forgone through the need to attract market share through more easily marketable services for parents, whose child was easier to provide services to.

Both early childhood intervention services and mainstream sectors have important roles in addressing the needs of children with disability and/or developmental delay and their families. Through the project, stakeholders expressed a concern that this balance was not right. The investment in capacity and capability building in all early childhood services (development, care and education) was not well focused on or connected. While some examples of contribution by the NDIS to improving collaboration between the sectors (particularly disability, education, health
and private care) were apparent, they were the exception rather than the norm. Future partner emphasis should continue to focus on building the capacity of all early childhood mainstream sectors and creating incentives and opportunities for working together at national, jurisdictional and regional levels.

The ECEI design and approach is providing many partner agencies, market providers and practitioners with their first exposure to working in a capacity building model through the guidelines, while for others it has allowed them to further understand and build on their existing capability. The project highlighted a willingness to embrace this best practice approach. Long term, this will have lasting impacts in terms of helping to reorient agencies and services and ensuring the financial sustainability of the NDIS.

The project clearly highlighted the need for ongoing expansion of the strategies to support the ECEI design and approach. Feedback highlighted the need for increased information on evidence and practical application for the early childhood intervention plan. Many stakeholders want to share their learnings to add to the evidence base, however, they feel less able or motivated to do this under the NDIS. It was also recognised that often planners and practitioners have had little to draw upon in relation to the planning they do for some children. There is a need to systematically build and share relevant evidence to maximise the effectiveness of early intervention strategies to support targeted investment in the future.

Some early childhood intervention providers and early childhood services indicated that they have commenced important changes in their services yet have not been able to embed these changes into everyday practices. The project reinforced the need for all stakeholders to be encouraged and supported to take a systematic approach to early intervention and work together to achieve service coordination as part of best practice. Currently, agencies struggle to collect and document essential information necessary to know whether their activities are having an impact on children and their families. More needs to be done to support agencies to develop the capability to collect the information necessary for ongoing monitoring and continuous quality improvement.
The NDIS has introduced a range of new workforce demands. Feedback through the project indicated skills, competencies and experience required for the roles both in the NDIA, community partners and the market is placing significant pressure on a finite set of human resources.

Many allied health professionals and educational trained people coming to the NDIS service provision environment, while having base training in their chosen profession, have a variable understanding of early childhood intervention. Strategies are now required to ensure the sustainability and safeguarding of workforce capabilities and competencies and that training is of high quality and tailored to the ECEI design and approach to deliver the NDIS.
Other Notable Feedback

Feedback through the project from many stakeholders found a decline in collaborative practice in early childhood intervention and an increase in competitive behaviour between services as a general response to the implementation of the NDIS. Stakeholders indicated this resulted in confusion for families, a fracturing of the whole of family supports and delays and difficulty for children in receiving the services/interventions they require in a timely way.

There is a substantial body of evidence in both literature and in previous reform agendas to indicate that partnerships provide the base from which:

- new initiatives and change can be successfully implemented; and
- services coordinated are best coordinated across sectors.

The project feedback highlighted that the implementation of the NDIS to date had clearly demonstrated that committed leadership, and strong organisational support and capacity to build linkages and partnerships, are key critical enablers to best practice early intervention. Where leaders and organisational governance had a commitment to early childhood intervention and understanding of family centred practice and a commitment to collaboration, these qualities filtered down into the day to day practices of teams. Fostering leadership throughout implementation and beyond is essential to success.

Currently, the service supply does not appear to meet service demand. Whilst available data from the project’s service mapping indicates the number of services is growing in line with the variable transition to the NDIS, growth is not matched to the specific needs of the specific disabilities or the types of interventions required to achieve best practice. More than half of registered providers are private providers, mostly allied health who are providing individual therapy, not early childhood intervention.

Both quantitative and qualitative information collected indicates that there is some duplication of assessment and planning. Many service providers indicated spending more time on assessment once a child/family had come to their service rather than actual service delivery. ECEI design and approach need to provide for services working together.
“Supporting the ECEI design and approach, paying attention to key design features and promoting collaboration between the NDIA and EC Partners, will ensure that families and community can have confidence that children will be able to obtain the help that they require.”
Jurisdictional Snapshot

Information gathered through the project indicates variable levels of understanding and adoption of best practice across each jurisdiction. Following is a summary of each jurisdiction, based on our consultations.

**Australian Capital Territory**

From 1 July 2014, the ACT commenced trial of the NDIS for children aged 0-2 years and from 1 October 2014 for children aged 2-4 years. From the first quarter of financial year 2016-17 all children aged 0-6 years were transitioned to the NDIS. Complete implementation of the ECEI design and approach occurred from May 2017 with the introduction of EACH as the Early Childhood Partner.

Prior to the roll out of the NDIS, the market for early childhood intervention services in the ACT was relatively small. In order to stimulate new entrants, the NDIA and ACT government commissioned the establishment of six (6) new NGO early childhood intervention service providers in the ACT.

Under-utilised packages emerged as the key theme throughout the consultation period. Further there is a clear need for improved NDIS literacy for families, and for greater guidance on the type and mix of services appropriate for their child. Other emerging themes were the need for clarity around the role of the Early Childhood Partner; skilling up the workforce on best practice in early childhood intervention; and challenge of implementing collaborative practices at the heart of the “team around the child” best practice principles across multiple agencies providing different services under the child’s NDIS plan.

Coordination and collaboration within agencies is strong but work needs to occur to achieve cross-agency collaboration. There was a desire to collaborate more closely with statutory government agencies with regards to children and families with more complex needs such as those from refugee backgrounds, Aboriginal and Torres Strait Islander communities and families experiencing domestic violence and homelessness.

The desktop analysis identified 130 ECI providers delivering services across 194 locations within the ACT.
Queensland

Queensland was one of the first states to implement the ECEI design and approach with EC Partners operating in six (6) regions.

The approach to transition to the NDIS in Queensland has been staged, with the first region transitioning from 1 July 2016 and the last region to transition from 1 July 2019. There was no trial site for Queensland.

The early childhood intervention sector has historically been led by the state government’s education, health and disability sectors, supported by a strong non-government and private sector. Government agencies provided state-wide specialist and mainstream services. It was government agencies who predominantly provided outreach services to rural and remote areas (rather than private providers), and preschool/kindergarten services in remote communities were more likely to be private or NGO services compared to metropolitan regions. Metropolitan and regional areas operate similarly, however the staged implementation of the NDIS and ECEI design and approach had recently impacted on how regional populations access services.

Early childhood intervention providers in Queensland, primarily from the education sector, possess a good understanding of National Guidelines - Best Practice in Early Childhood Intervention. In contrast, providers outside of the education sector report limited knowledge and sporadic adoption of best practice. Across the health sector there is a limited understanding of best practice in early childhood intervention and a continued focus on traditional medical and pediatric practice approaches.

The Queensland sector has experienced rapid growth under the NDIS resulting in high registrations of providers delivering early childhood supports. At the consultations there was consensus that the registered providers consisted of new entrants with limited experience and knowledge of best practice in early childhood intervention, and ex-government employees who have a wealth of knowledge and expertise in early childhood intervention.
Of note however, the specialist child development services provided through Queensland Health were guided by principles of practice that are not dissimilar to the Best Practice Guidelines that underpin the ECEI design and approach.

Families understanding of best practice is low. National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 997 early childhood intervention providers delivered services from 831 locations across Queensland.

**New South Wales**

New South Wales (NSW) has the largest NDIS market across Australia and commenced an ECEI pilot in the Nepean Blue Mountains in November 2015, with complete transition to the ECEI design and approach scheduled for 1 July 2018. After full NDIS implementation, the broader early childhood intervention sector will be supported by a strong non-government and private sector.

There is a broad understanding and advanced knowledge of best practice among early childhood intervention providers, however this knowledge and understanding is not necessarily translated within the support they provide. Many providers offer a wide range of services, however families choosing to access services based on convenience, could impact on the adoption of family-centered practice. Mainstream providers and Early Childhood Partners understand the changes to the sector based on the ECEI design and approach, however there is variation in knowledge of the best practice principles, and how these can be adopted practically.

The NSW early childhood intervention sector has experienced a significant increase in demand for services which has in turn caused competition for skilled experienced early childhood intervention staff. Many early
childhood intervention services are recruiting recent graduates who require specialist training on how to work with families in the best practice approach. Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 1,167 early childhood intervention providers delivered from 1,981 locations across NSW.

**Northern Territory**

The NDIS rollout in the Northern Territory (NT) commenced with the Barkly region (Tennant Creek) in July 2014 for people up to the age of 65 living in the region. The rollout continued in the Barkly region from 1 July 2016. In January 2017, the rollout was extended to the East Arnhem region (and also included Darwin supported accommodation services). In July 2017, the rollout commenced in the Darwin remote and Katherine regions, and also included Alice Springs supported accommodation services. In July 2018 the final stage of the rollout commenced for the Darwin Urban, Central Australia and Alice Springs regions.

Providers in the NT have a mixed understanding and implementation of the early childhood intervention best practice guidelines and ECEI design and approach. Key themes centre around thin markets outside of metropolitan centres; vast numbers of vulnerable children living remotely and very remotely; limited provider networks in remote and very remote communities; large distances that providers are required to travel.

The NT has a small early childhood intervention sector, which represents the relatively small population spread over a large geographical area. Local providers knew their community’s needs, which service models were feasible, and acknowledged that access to all disciplines was not a feature of the NT early childhood intervention sector.
Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 152 early childhood intervention providers delivered from 193 locations across the NT.

**South Australia**

South Australia (SA) was the nominated NDIS trial site for 0-13 years in Australia from 2013, which provided a range of learnings for other jurisdictions. Transition to the NDIS for ages 0-6 years has been completed. In November 2018, Kudos Services, Australia’s first Public Service Mutual, was announced as the EC Partner for the state.

Most providers in SA have a good awareness and understanding of best practice guidelines and the ECEI design and approach, however a majority are yet to formally implement the principles. Evidence suggests that providers require further support to implement best practice principles through service delivery.

Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The sector is represented by a larger number of private providers, and organisations with diverse service offerings. Service providers report that they are challenged by a range of workforce and resourcing issues under the NDIS model, and they acknowledge the benefits of collaboration despite the competitive environment.

The desktop analysis identified 455 early childhood intervention providers delivered from 939 locations across SA.
**Tasmania**

The NDIS is in transition in Tasmania, and is being rolled out by age group, and not region, in contrast to the other geographically larger jurisdictions. NDIS funding became available in Tasmania for children aged 4-11 years from 1 January 2017. Children aged from 0-3 years have accessed NDIS funding from 1 July 2018. Full NDIS transition is expected to be complete by 1 July 2019.

Adoption of best practice has been low, although providers acknowledged that demonstrating competence in best practice is important in maintaining service quality standards and meeting the early childhood intervention needs of children and families responsively. Established service networks offer an opportunity to promote clear messages around service quality and best practice. These service networks can aid and enable service coordination across the state.

Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 540 early childhood intervention providers delivered from 590 locations across Tasmania.

**Victoria**

In Victoria the NDIS was trialled in Barwon in the local government areas of the City of Greater Geelong, Colac Otway Shire, Surfcoast Shire and the Borough of Queenscliffe between 1 July 2013 and 30 June 2015. The full NDIS was rolled out regionally from 1 July 2016 and is currently in a state of transition. The full NDIS roll out will be complete on 1 January 2019 and includes the 0-6 years cohort.

The Victorian early childhood intervention sector broadly supported the ECEI design and approach including through the adoption of family-centred practice which has been a feature of service delivery for around 30 years.
Stakeholders considered that service providers understood the best practice principles broadly, but that the adoption of best practice across the service delivery sector was variable and still emerging, with different approaches, interpretations, and experiences across different providers. Whilst there is a strong understanding and growing adoption of early childhood intervention best practice across the education sector, there is concern that allied health professionals, such as Pediatricians, continue to apply a medicalised model because knowledge of best practice is limited.

Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 717 early childhood intervention providers delivered from 867 locations across Victoria.

Western Australia

The Western Australian (WA) Government and Commonwealth Government signed a Bilateral Agreement for a nationally consistent but locally delivered NDIS in WA on 31 January 2017, which was scheduled for full roll-out by 30 June 2019. This was superseded by a new Bilateral Agreement on 12 December 2017 to deliver the national NDIS model in WA. From 1 July 2018, the NDIA will assume responsibility for the delivery of the NDIS in WA.

Although the understanding of best practice is apparent in WA, implementation has been varied and lacking consistency. Some providers believed they were implementing best practice, until additional training and information highlighted otherwise.

A mix of traditional and best practice approaches continue to be implemented across the broader early childhood intervention sector.
Families understanding of best practice is low. The National Guidelines - Best Practice in Early Childhood Intervention have made best practice accessible, however not all families have access or the capacity to interpret how they can apply it through decision-making and supporting their child at home.

The desktop analysis identified 578 early childhood intervention providers delivered from 579 locations across WA.

**Number of early childhood intervention services by jurisdiction**

- **NT**: 3%
- **SA**: 10%
- **WA**: 12%
- **Qld**: 21%
- **Tas**: 11%
- **NSW**: 25%
- **ACT**: 3%
- **VIC**: 15%

Note: not all early childhood intervention service locations were able to be geocoded. 440 services were reported as location ‘not recorded’ or ‘unknown’.
"The purpose of the recommendations is to provide a consistent framework for universal and equitable high quality early childhood intervention, based on best practice, for children with disability and/or developmental delay anywhere in Australia"
Recommendation Overview

To realise the objective of supporting the implementation of nationally consistent best practice approach in the provision of the NDIA’s ECEI framework, the project has identified a number of key recommendations. Further, the project has highlighted the need to take a long-term view to implement and evaluate the ECEI design and approach to ensure that the vision of ECEI is realised.

The recommendations and actions outlined in this report are underpinned by four (4) key principles that focus on:

- the child
- parents/carers and families
- Early Childhood Partners
- Early Childhood Practitioners

Across all jurisdictions a set of global themes emerged which have been organised into recommendations across the four (4) key principle areas. The common themes that emerged in each state and territory consistently clustered around:

- leadership and strategic planning
- workforce development
- partnerships and collaboration
- strengthening the early childhood intervention sector
- service coordination
- systems and technology
- innovation and research

The recommendations and actions contained within this report acknowledge that current practices in early childhood intervention in Australia vary across and within states and territories. The purpose of the recommendations is to provide a consistent framework for universal and equitable high quality early childhood intervention, based on best practice, for children with disability and/or developmental delay whether they attend government, non-government, large, small, sole non-profit service providers or private providers, anywhere in Australia.
A ten year horizon

Principles for ECEI design and approach in the NDIS for Australia

The ECEI design and approach pays attention to, and respects, the key systemic principles that underpin the NDIS:

- fairness by way of equal rights;
- facilitation and choice in exercising rights;
- inclusion through removal of obstacles; and
- access and participation.

These principles underline the policy intention of governments and organisations that represent Australians living with a disability.

In the early childhood area this approach requires the NDIA to think of supports to very young children and their families as an investment in the future of Australia and Australians.

Frequently throughout the project we received feedback that the early childhood intervention sector felt the NDIS focused too greatly on the adult NDIS participants and not on the needs of very young children and their families.

This report provides an insight into the willingness of many sector organisational, practice and professional leaders to foster an environment that enables the delivery of the vision as articulated in the original release of the ECEI design and approach.

The original release document stated in the introduction of the ECEI design and approach that:

"The National Disability Insurance Agency (NDIA) has worked with a range of leading Australian early childhood intervention practitioners and researchers to design an Early Childhood Early Intervention (ECEI) approach. This approach will help identify the type and level of early intervention support each child needs to achieve their best outcomes."
This approach was widely applauded by both the sector and families who felt the trial of the NDIS had been both difficult and not strongly focused on the early childhood years. In response to this the NDIA undertook work to redesign the NDIS for Australians aged 0-6 years with disability and/or developmental delay to acknowledge the unique characteristics of the age cohort in the NDIS. The initial document describing the approach informed us that:

"The NDIS ECEI approach will help all children with developmental delay or disability and their families to achieve better long-term outcomes through support services in their local community, regardless of diagnosis. The NDIA will source experienced early childhood intervention service providers to work with it as access partners to ensure the NDIS supports all children as early as possible. To become an access partner, service providers will need to demonstrate strong clinical expertise and utilise best-practice approaches. The NDIA will closely monitor service provider performance and outcomes to ensure all children receive the appropriate quality and level of support.

Initially, families will meet with an access partner to discuss their needs. The access partner will draw on their specialised early childhood knowledge to determine appropriate supports for the child and family, including information, emotional support and specialised early intervention supports. With an emphasis on inclusion, each child will be supported in a range of mainstream settings, such as preschool, play group and other early childhood settings. This gives them an increased opportunity to learn and develop positive social relationships. Supports will be delivered through a family-centred approach, which builds on family and carer strengths in order to improve the child’s developmental trajectory and overall quality of life."

The project highlights the need to develop a longer term strategy beyond transition, with a ten (10) year horizon, to ensure that the full potential of the ECEI design and approach is delivered by the NDIA. It is vital that this potential is not lost or compromised through a hurried, or less than optimal implementation. For this reason, the report has noted underlying key principles that should guide the recommendations and actions beyond the project activity.
Underpinning Principles

A practical vision for early childhood intervention in Australia through the NDIS

Early childhood intervention services are a cornerstone of everyday life for many Australian families who have a child with disability and/or developmental delay.

In today’s society, early childhood intervention has a crucial role to play in supporting child development and facilitating inclusion for all children in the early childhood education and care systems, ensuring families are afforded the opportunity of greater workforce participation and economic engagement.

Despite considerable attention, investment in early childhood intervention and significant advances in recent decades, Australia’s early childhood intervention services remain fragmented and confused. They continue to be shaped by divisions between health/clinical approaches and educational/capacity building approaches between child/family centred models and centre based program models and compromised by Commonwealth, State and Territory Government policy and program gaps in early education and care.

As a result, many families find it difficult to access the services they need and want. Systemic and market driven inefficiencies mean that the NDIS early childhood investment fails to reap the full benefits of significant outlay in early intervention. The potential of high quality early childhood intervention services to improve outcomes for vulnerable and disadvantaged children remains in the main unrealised.

This report proposes a renewed effort to the ECEI design and approach in Australia through the NDIS that better harnesses the current mix of partners and providers (new and emerging) and to safeguard investment to meet the needs of children and families.

This approach seeks to utilise the unique capabilities of the NDIA to align incentives for participants and market providers with the public policy objectives of the NDIS more effectively.
Four Key Principles

We propose four (4) key principles that should underpin the future development and improvement of ECEI implementation and delivery in Australia. The recommendations that follow hold true to these principles.

1. The interests of the child are paramount. While the needs of families and market providers must be considered - and all have a place in this discussion - recognising that the interests of the child are paramount, provides a common focus for the aforementioned competing considerations, and rightly prioritises the inherent agency decisions and value of children and the investment approach of the NDIS.

2. Parents/carers/families have the primary role in their child's development. Parents are the first and most important carers and educators of their children. The role of NDIS/ECEI and ECI services is to support and complement parents, rather than replace them. The ECEI design and approach recognises this however, the implementation is not well designed to ensure that parents can access early childhood intervention through the early care and education system when and where they need it as they balance the care of their children with their decisions to participate in the workforce. Amongst other things, this implies that the system should be easy to navigate, and that transitions and discontinuities between services should be minimised for both parents and children.
3. EC Partner services must be of a high standard, grounded in best practice, and should be universally accessible for those who need them. The potential for good best practice, EC Partner services to improve early childhood outcomes, most importantly for disadvantaged children, means that high quality EC Partner services must be equitably welcoming to all Australian families with a child with disability and/or developmental delay - regardless of where they live or their personal circumstances.

4. All early childhood intervention services should be of high quality, and operate from a best practice perspective, to support optimal developmental outcomes. The evidence continues to demonstrate that the quality of early childhood intervention services matters. While they may appear more costly, good quality early childhood intervention services generate significant and lasting benefits for children and families.

It is a fundamental expectation that early childhood intervention services are of high quality, grounded in best practice, and that funding is available to support this.
Recommendations by Principle

To support optimisation of the ECEI design and approach, the project has crafted a series of national recommendations across the four (4) key principle areas.

The child:

- The NDIA should finalise and implement the pathway improvements consistent with original ECEI design and approach. Current variations through transition and substandard implementation is leading to an increase in poor outcomes for children aged 0-6 years.

- The NDIA, as a matter of urgency, develop an Outcomes Framework for children and families to better capture the short and medium-term benefits of the ECEI investment. The prime purpose of the Outcomes Framework would be to ensure that evidence-informed plans, grounded in best practice, are better understood by participants of the NDIS. This framework should capture the key functional and inclusion improvements and key information from families and/or carers as to their key roles. Further, the framework would help inform the NDIA in improving its signalling and information flow to the market of what types of early childhood services, participants of the scheme will be purchasing.

- The NDIA must improve operational policy/information on what is evidence-based interventions. Currently families receive plans that are not easy to interpret or understand. While the plan lists the clinical inputs (therapies) required it does not describe what evidence-informed and family centered best practice is or looks like.

- The NDIA/EC Partners must develop plans that position inclusion as the starting and end point. Research and evidence clearly indicate the positive effect that inclusion has upon a child’s development and their functional improvement. Plans should link both to the outcomes and standards of practice required through the ECEI investment.

- The NDIA/Commonwealth Government should work with all State and Territory Governments to develop agreement between Health and Early
Education/Preschool to adopt evidence-informed best practice to ensure children with disability and/or developmental delay are well supported in all aspects of the child’s life consistent with the principles of the best practice guidelines. This must include agreement to collaborate with all professionals and the family in a key worker model.

**The parent/carer/family:**

- The NDIA should provide stronger induction for family and carers to what the NDIS is and what it will deliver. This should include information on best practice, what it is and what its benefits are, and be easily accessible through family and carer capacity building programs, as well as through the EC Partners. Activities such as parent-to-parent, therapy connect and programs that are pioneering family-centered support, grounded in best practice, should be rolled out as a matter of priority to ensure the NDIS delivers the best outcomes for the child and family.

- The NDIA should promote self-advocacy in the ECEI environment. Starting participants and their family and carers on the right journey to self advocate for inclusion from a very young age will ensure an emerging population profile, participant or not, who are more able to navigate and access mainstream services.

- The NDIA/DSS should develop an early intervention family and carers statement, policy and guidance strategy. This should include information on a wide range of family centred, best practice supports, and be designed to include local mainstream and specialist supports. EC Partners are able to provide these local connections within their communities.

- The NDIA should develop a joint strategy with Health that focuses on delivering families relevant, streamlined, easy to understand and up to date information. The capacity of families and communities to understand and navigate the NDIS is compromised by a lack of clear information and complicated systems. There is a need for best practice, family inclusive
language and literacy support strategies. This effort should be sustained for a five (5) year period.

- The NDIA should develop strategies to stimulate parent-to-parent support mechanisms to drive an understanding of best practice, and to enhance outcomes for the child. Research shows that families value the support they receive from other families who are in the same situation. However, most families prioritise the needs of their child over the value of connecting with other families. Peer groups are an effective mechanism to promote connection amongst families, share information, influence greater understanding of best practice and foster positive visions for the future.

The Early Childhood Partner:

- The EC Partner focus requires rebalancing, to ensure a strong focus on capacity building of mainstream services and communities. The ECEI design and approach relies on a robust mainstream service system for all children regardless of whether they are NDIS participants or not. However, this is most critical for children who will not be eligible for an individual package as their experience of ECEI will be short, medium or long-term and access to mainstream supports are a critical referral pathway from ECEI.

- The EC Partner role must be fundamentally underpinned by, and promote, best practice and inclusion. Currently, the capacity of the mainstream sector is variable and adjustments will be needed over time for mainstream services to understand the ECEI design and approach and respond appropriately to the needs of children and their families. Ultimately, families and community need confidence that young children will be welcomed and supported in their local communities.

- The NDIA needs to support EC Partners to build capacity and scalability. The NDIA should put in place strong strategic guidance and support to EC Partners to fast track the maturity of the partner to deliver the full potential of the ECEI design and approach.
• The NDIA should facilitate and nurture the vision of the ECEI design and approach of a nationally networked collective of EC Partners, lead by the EC Partners. The benefit of sharing information, practice and knowledge will assist the learning and organisational development of individual EC Partners and provide strong intelligence and feedback to the NDIA.

• The NDIA should ensure all EC Partners are trained and knowledgeable in best practice early childhood intervention. This should include a strong, long-term training and development plan that clearly focuses on partner capability and safeguards the NDIS from poor partner performance.

**Early Childhood Intervention Practitioners:**

• The NDIA should work closely with the Quality and Safeguards Commission to ensure the early childhood intervention market is well supported to embrace and implement best practice early childhood intervention. This should include formation of a working group to develop recommendations for the NDIS on key design, to ensure the investment the NDIS makes in ECEI has the best chance of providing a return on that investment.

• The NDIA and Governments must reinvigorate sector readiness. The findings of this project clearly indicate that readiness is far from optimal and requires significant attention. The NDIA should encourage and signal to Governments that further work and analysis is required through improved monitoring and market feedback mechanisms.

• The NDIA should develop mechanisms other than the price guide to signal to the market as to what good early childhood intervention looks like. The findings of this project clearly indicate that market offerings have been significantly influenced by the price guide.

• The NDIA/DSS should develop a strategy and plan to continue to develop the market knowledge, understanding and capacity to deliver best practice early childhood intervention. Of significant focus should be working to a capacity building model rather than to a clinical/health model of service.
Evaluate and Monitor

Implementing and developing the ECEI design and approach

The ECEI design and approach is based on internationally recognised best practice principles. Early investment in children and their families has an ethical and economic foundation. National variation in early childhood intervention service provision, along with practical issues arising out of scheme implementation, will influence the introduction of the ECEI design and approach. Therefore, it is important to continue to monitor the effectiveness of the ECEI design and approach.

The NDIA should develop a robust data collection methodology beyond participants that receive a reasonable and necessary plan. This will build an understanding of the effectiveness of the approach in the long term. This can be leveraged from the evidence gathered by the NDIA short form questionnaire to measure progress against the lifespan outcomes framework.

This framework focuses on the areas of making choices; increasing independence; inclusion in family and community life; and access to specialist supports. It is critical to evaluating the long term success of the ECEI design and approach, that this data collection is expanded to all children supported through the ECEI design and approach.
Conclusion

A pathway to successful outcomes for children with a disability and/or developmental delay

The NDIA’s ECEI framework was designed upon a foundations of best practice in early childhood intervention. A fully realised ECEI vision will result in optimised outcomes for children aged 0-6 years with a disability and/or developmental delay.

While there is willingness from the sector to embrace best practice, the report highlights that there is still a considerable body of work to undertake before we can be confident that equitable and consistent early childhood intervention is delivered nationally, at a benchmarked level, using a best practice framework.

This report has documented a series of recommendations, centred around four (4) key principles, that ECIA believes will best ensure the long term success of the ECEI design and approach.

Underpinning these recommendations is the identified need to develop a ten (10) year evaluation horizon, reaching beyond the transition process, to ensure that the full potential of the ECEI design and approach is delivered.

The challenge is great, but together - working to a clear strategic pathway - we have the opportunity to deliver on the vision of the NDIS for early childhood intervention.

Our collective success on this journey will indelibly change the lives of children with disability and/or developmental delay, and that of their families.
To download a copy of ECIA’s 'National Guidelines - Best Practice in Early Childhood Intervention' go to tinyurl.com/y8hp6muf
“The challenge is great, but together - working to a clear strategic pathway - we have the opportunity to deliver on the vision of the NDIS for early childhood intervention”