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Quality Systems in Australian Children's Services

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Introduction

Thank you for your invitation to participate in this important conference. I am honoured by your invitation and your welcome.

In this presentation I will provide you with an overview of the Quality Systems that have been implemented to improve quality practices in Australian Children's Services. I intend to show how these systems work and report to you on the successes evident in the last 8 years.

Australia is the first country in the world to develop national child care quality improvement and assurance systems, that are initiated, funded and supported by Government. These are the Quality Improvement and Accreditation System (QIAS) for long day care centres and Family Day Care Quality Assurance (FDCQA) for family day care schemes.

Before I begin, let me briefly explain the two service types in question.

Long day care centres in Australia provide formal care for children from 0-5 years of age. The centres operate for a minimum of eight hours each day. Some centres operate longer hours or provide for the needs of particular workers, eg shift workers.

Family day care schemes in Australia provide care for children aged 0-12 in a carer's home. A local administrative coordination unit recruits and resources carers, and organises the placement of children with carers.

History/Purpose

I would like to start by sharing with you the impetus behind the introduction of the Quality Systems in Australia.

Changes in utilisation of, and attitudes towards child care in Australia have been significant over the last 20 years. In the early nineteen-eighties “child care was widely viewed as a worthwhile way to amuse children for a few hours per week while introducing them to the routines they would encounter at school, where the real learning would begin.” (*Putting Children First: Quality Improvement and Accreditation System Handbook*, 1993, Foreword).

A number of factors set the stage for a change of attitude towards child care.

First of all, there has been an increase in the understanding of the significance of the early years in a child’s life. Recent research on brain development has shown that positive quality child care enhances children's development and plays an important role in reducing criminal activity and poor health in later life. It is now widely accepted that we learn more in the first five years of life than in any other five-year period.

Much recent research and debate in the USA and now in Australia supports the belief that quality child care nurtures healthy brain development.

Research in the USA has found that:

“In the early years, children’s brains form twice as many synapses (brain connections) as they will eventually need. If these synapses are used repeatedly in a child’s day-to-day life, they are reinforced and become part of the brain’s permanent circuitry. If they are not used repeatedly, or often enough, they are eliminated. In this way, experience plays a crucial role in “wiring” a young child’s brain.” (p17. Rethinking the Brain: New Insights into Early Development, R. Shore, 1997).

The role of early childhood professionals in ‘wiring’ a child’s brain is significant - and it must be done with positive interactions and activities appropriate to the child’s level of development.

Research has also shown that quality child care contributes to successful later learning.

An example of this research is the Carolina Abecedarian Project, conducted in the US from 1972 to 1985. It was an experimental study of early childhood education intervention - for children and their low-income families. This included high-quality, full day child care for preschoolers. The program focused on language development and preliteracy learning.

The study found that:

- Young children's development in high quality preschool programs had positive effects on intellectual development and academic achievement.
- At the age of 12, participating children had IQ scores that averaged 5.3 points higher than a comparison group of non-participants.
- At age 15, compared to the comparison group, participants showed higher achievement test scores and had 50 percent fewer special education placements.

Linked to this, the research also shows that quality child care reduces the costs to the community - monetary and otherwise, of crime.

In the US, the Federal Government has incorporated early childhood programs into its crime prevention strategies. Australia has also recognised the link between early childhood developmental learning and crime prevention, as evident in the *Pathways to Prevention* report by the Australian National Crime Prevention Authority (1999).

The **second** important impetus for these Quality Systems is that

the number of Australian children being cared for outside their homes has greatly increased with the growth in the number of families in which both parents are working or, in the case of sole parents, where the parent is working.

Statistics show that almost half of all Australian women with children 0-4 years are in paid employment. (Department of Family and Community Services (1999).

Almost three hundred thousand Australian children aged nought to five are currently attending long day child care in Australia. (Department of Family and Community Services (1999). Over one hundred thousand children are currently cared for in family day care (Centrelink, September 2000 – unpublished).

Many Australian children are cared for across several settings in their early years of development. For example, some children may attend family day care three days a week and long day care on the other two days. Many children will move from long day care to outside of school hours care. Families of children in all service types need an assurance that their children are being cared for in a quality environment. Staff in those services need recognition also for the excellent work they do. Thus it is crucial that quality assurance be extended across all children's service types.

The **third** reason for developing these Quality Systems is that the

average amount of time an individual child spends in care has grown. A child can spend up to 12,500 hours in child care before starting school, (based on attendance of 50 hours per week for 5 years): that's only 500 hours less than the child will spend in lessons during the whole 13 years of schooling.

The growth in our knowledge about young children, the numbers of those children in care and the amount of time they spend in care have all combined to throw the issue of the quality of that care into sharp focus.

These factors were significant enough to arouse interest in the provision of quality child care as opposed to quantity of places which was the significant factor as the demand for places far exceeded the number of places. From this focus on quality developed the interest in quality improvement and accreditation, which came from within the child care field and gained support from the political sphere.

The National Childcare Accreditation Council (NCAC) was established in 1993 to administer the Quality Improvement and Accreditation System (QIAS) for long day care. In July 2001 NCAC commenced the administration of Family Day Care Quality Assurance (FDCQA).

Review of the QIAS

I would like to talk briefly about the review of the Quality Improvement and Accreditation System (QIAS). As I have said, the NCAC began administering the QIAS on 1 January 1994. During the first six years of operation, some 4,200 centres progressed through the quality improvement and accreditation process a number of times. Many centres cycled through the System three or four times.

By 1998, the processes of the QIAS had become familiar to most centres and it became time to evaluate and refine the System. The Commonwealth Child Care Advisory Council (CCCAC) was appointed in March 1998 by the Federal Minister for Community Services. One of the responsibilities of the CCCAC was to conduct a review of the QIAS. The CCCAC consulted a broad range of individuals and organisations within the Australian early childhood profession, including service providers, parents, child care centre staff, peak organisations, QIAS Reviewers and Moderators, early childhood training institutions and resource agencies for comments and suggestions regarding improvements and refinements to the QIAS.

The Australian Council for Educational Research (ACER), was commissioned to undertake psychometric analysis of the 52 Principles (QIAS, 1993). This analysis showed that the 52 Principles had not been measuring 52 independent aspects of quality. The analysis instead identified 10 overarching factors that now form the structure of the revised QIAS.

In March 2000 the CCCAC submitted its recommendations to the Minister for Family and Community Services. In November 2000, the Minister announced the revised QIAS and instructed the NCAC to begin administering the revised QIAS by 2002.

Over the course of 2001 NCAC developed the publications and processes for the QIAS and the first long day care centres submitted *Self-study Reports* under the revised QIAS in March 2002.

Link to Funding

The original Australian QIAS was largely based on the American National Academy for the Education of Young Children (NAEYC) Accreditation System. One of the fundamental differences between the two systems is the link to funding.

In Australia, families on low and middle incomes receive help from the Commonwealth Government with child care fees. Child Care Benefit is paid directly to parents accessing care in services participating in the Quality Systems administered by NCAC. Due to the link to funding, all family day care schemes and long day care centres that offer Child Care Benefit to parents are registered and participating in the Quality Systems.

So while participation in the Quality Systems is not “compulsory” for services, due to the fact that most parents need to offset the cost of child care with government assistance, most services need to participate in the quality systems in order to remain viable.

What are the Quality Systems?

The aim of the Quality Systems is to ensure that children in long day care and family day care receive positive, stimulating experiences and interactions that foster all aspects of their development. This is done by measuring the factors that determine quality to gauge the standard of care and education that actually exists in a particular service.

What then are those factors that determine quality?

The Quality Systems define quality as positive outcomes for children's learning and development. A quality child care service:

- Has a clear philosophy and goals, agreed between the staff, carers, management and the families, which guide all activities at the service.
- Appreciates, respects and fosters the individuality and the interdependence of all children, including children from diverse backgrounds and children who have additional needs.
- Considers the appropriateness of all experiences and activities affecting the children in relation to their development.
- Encourages families to become involved in the service and fosters the relationship between staff, carers and families so that they can support one another in their complementary roles.

These determining aspects of quality are broken down into Quality Areas/Quality Elements and sub divided into Principles covering four main areas:

- Interactions and communications between staff, carers children and families
- Programs for day-to-day experiences and activities for children
- Nutrition, health, safety and child protection
- Service management and staff development

Services become accredited for a period of 2.5 years if they receive a composite rating of *Satisfactory* or higher in all Quality Areas/Quality Elements.

These factors that determine quality build on the things that are 'contributors' to quality.

The contributors to quality create an environment in which good quality care can be provided. They include:

- the number of staff and their level of training;
- the size of the play area; and,
- the equipment provided for children's play and development.

These important contributors / or foundations to quality are set down and monitored by Australia's eight State and Territory governments.

How do the Systems Work?

Both the Family Day Care Quality Assurance (FDCQA) and Quality Improvement and Accreditation System (QIAS) operate on a 5 step system. The steps are:

- Step 1: Registration
- Step 2: Self-study
- Step 3: External review
- Step 4: Recommendation by Moderators
- Step 5: Decision by NCAC

Before I explain each of these steps I need to emphasise that this is a system based on self-assessment, validated by peer review.

Step 1:Registration

New Services are required to register with the NCAC before their application for Child Care Benefit will be considered by the Commonwealth Government. When a service changes ownership the new owner must complete a change of ownership registration. Registration and participation in the Quality Systems is necessary for a service to continue to offer Child Care Benefit.

Step 2: Self-study and Continuing Improvement

The self-study process provides the service with the opportunity to undertake a thorough analysis of all practices and procedures, to identify strengths and weaknesses and to formulate plans for improvement. The more honest the analysis, the better, as it provides a true picture of the current situation. This forms the basis for decision making, in regard to strategies for improvement, and later review by an independent Validator.

Each Service is required to implement systematic processes for continuing quality improvement. Each service can determine how this will best be achieved but all services must demonstrate that:

- a) they have on-going quality improvement processes
- b) these processes are informed by regular self-evaluation against the standards outlined in the Quality Areas/Quality Elements of each system.

Each Service is required to submit a *Self-study Report* to the NCAC at the specified time every 2.5 years. In the *Self-study Report* the service will need to provide a rating for each Principle and a *Continuing Improvement Plan* for Each Quality Area/Element.

The Commonwealth Government funds a range of agencies to assist services participating in the Quality Systems. This may be in relation to self-study and continuing improvement and the delivery of quality services. These agencies provide a range of services including telephone information, visits to centres, training courses, bookshops and lending resource.

Step 3: Validation

A peer validator selected and trained by the NCAC, visits the service to validate its quality practices. Wherever possible, NCAC uses the preferred specialist knowledge areas indicated by the service in its *Self-study Report* when allocating a validator to visit the service.

Prior to the visit taking place, the validator and the service have an opportunity to advise NCAC where a conflict of interest involving the validator selection may exist. When a validator is selected, NCAC will send to the service *Validation Surveys* which must be completed by the management, director, coordination unit staff, carers and families during the few weeks prior to the visit.

Depending on the size of the service, the validator will spend anywhere from one day in a small long day care service with up to and including 29 licensed places in regular use, to five days in a family day care schemes with over 301 equivalent full time places.

The validator does not make the accreditation decision. The validator completes a *Validation Report* based on observations of the service and its documentation against quality indicators outlined in the *QIAS Source Book* or *FDCQA Quality Practices Guide*. At the conclusion of the Validation Visit the validator collects the *Validation Surveys* and returns them to the NCAC together with the *Validation Report*.

Following the Validation Visit the service may complete a Validation Evaluation Form and return it to NCAC. This form allows the service to provide feedback to NCAC on the validation visit and to raise any concerns or issues for consideration by NCAC.

Step 4: Moderation

The process of Moderation helps to ensure that all services participating in the Quality Systems are treated consistently on a national basis. Moderators assess the quality of the service's practice, guided by information in the service's *Self-study Report*, the service's *Validation Surveys* and the *Validation Report*. Moderators also consider information from the service's *Validation Evaluation Form*, when available.

Moderators look at each service as a whole, identifying patterns of quality care within the service. Moderators write a *Continuing Improvement Guide* for the service which focuses on quality improvement based on trends in the Quality Areas/Elements. The *Continuing / Improvement Guide* is based on a *Composite Quality Profile (Profile)* (Refer to Appendix 1) of the service compiled from information in the *service's Self-study Report*, *Validation Surveys*, the *Validation Report* and the Moderation ratings. The Profile shows a composite of these various views of service performance across the 10 Quality Areas / 6 Quality Elements using protocols developed for the NCAC by the Australian Council of Educational Research.

Step 5: Accreditation Decision

The Accreditation Decision is the final step in the Quality Systems. To be accredited, a service must achieve a rating of *Satisfactory* or higher in all 10 Quality Areas / 6 Quality Elements on the *Composite Quality Profile*.

Accredited services are required to prominently display in the service *the Certificate of Accreditation*. Services are also provided with a second certificate showing the service's *Composite Quality Profile* and the names of service staff who participated in the QIAS/FDCQA process. This certificate is for display at the discretion of the service.

An accredited service is required to continue its self-study and continuing improvement cycle (see Step 2 above) until its next *Self-study Report* is due for submission. The accreditation period is 2.5 years between submission of *Self-study Reports*.

Services that do not meet the standards required for accreditation are required to submit another *Self-study Report* six months from the date of the NCAC Decision.

Provisional accreditation may be granted in instances where accreditation requirements can be met by minor adjustments. Provisionally accredited services are required to verify corrective action within three months, otherwise they will be registered as 'not accredited' and will be required to submit another *Self-study Report* within a further three months. Provisional accreditation may be offered by NCAC, services cannot apply for provisional accreditation. A service which is offered provisional accreditation and which adequately verifies corrective action within three months will have an accreditation period of 2.5 years between submission of *Self-study Reports*.

Achievements of the Quality Systems – Measuring Success

The fact that Australia has funded and supported Quality System has brought a number of benefits to the early childhood industry:

- ◆ Community awareness of the work and worth of the childcare profession has been raised
- ◆ Many resources are now much more accessible on a national basis due to interstate networking and sharing of ideas
- ◆ There has been a national exchange of ideas relating to good practice which means that a child care service on one side of the country can now benefit from the experience of a service on the other side of the country - a lot of duplication of effort has been eliminated and good practice has been enhanced.

- ◆ Agencies outside the early childhood field are now targeting child care services and adapting their resources, kits, information and so on to the needs of children's services. This is particularly evident in the health and safety area where a number of resources are now produced targeting child care services such as the publications: *Caring for Children, Plan It, Staying Healthy in Child Care*.
- ◆ Corporate sponsorship has also been gained by child health educators for the development of national health, safety and nutrition information for service staff and parents, directly related to the QIAS Quality Areas/FDCQA Quality Elements. This is being developed by the Centre for Community Child Health.

Response from the Community

- ◆ Parents and community members can use the NCAC hotline to call for the names of accredited services in their area or to make inquiries or comments about the Quality Systems. The majority of community related calls NCAC receives are from parents and these calls are steadily increasing. Most of the parents who contact NCAC are positive about the Quality Systems and appreciate them as a guide for choosing quality child care.

Since the QIAS commenced in 1994, the quality of care provided by services - as measured by the QIAS - has improved dramatically.

Between 1995 and 1999, over 90% of services that had worked through the QIAS at least twice, maintained or improved quality practices. (Refer to Appendix 2)

This huge improvement in quality is a testament to the dedicated and committed professionals who work in child care services.

What does it take to administer the Quality Systems?

Although the QIAS and FDCQA may appear straightforward, it is certainly a challenge to administer them.

Australia currently has just over 4,100 long day care centres and 329 family day care schemes.

The Quality Systems are based on peer review, where early childhood professionals working in child care are trained by NCAC to undertake a review of service practice. NCAC continually trains Validators and Moderators and requires approximately 500 Validators and 40 Moderators across the country to undertake about 1,800 Validation Visits and Moderation sessions each year.

Validators

Validators are qualified and experienced early childhood professionals with recent experience in a long day care/ family day care service.

To be a Validator an applicant must firstly, meet the selection criteria set by NCAC. Secondly, the applicant must undertake a 5 day training program and thirdly, they must successfully attain the required standard of competency as measured by assessment at the conclusion of the training program. Validators are required to undertake at least 10 days of Validation Visits each year. They are provided with regular support and performance feedback. To keep them up to date with changes or current issues an NCAC *Validator Bulletin* is published regularly and Validators attend annual refresher training courses.

Working as a Validator for the NCAC is a big commitment not only for the Validator, but also the Validator's child care service. There are benefits such as professional development, particularly in the areas of observation and communication, and development of a deep understanding of quality improvement and quality practices. However, it is difficult for Validators to be away from their own services even though they are replaced by relief staff. They may also need to travel and be away from their own families.

Moderators

Moderators are qualified professionals with considerable experience in the early childhood field. They have recent experience in long day care/family day care service delivery and/or in delivery of pre and post service training or in research.

To be a Moderator an applicant must firstly meet the selection criteria set by NCAC. Secondly, the applicant must undertake a 3 day training program and thirdly, they must successfully attain the required competency standards.

Moderators are required to undertake five, 2 day Moderation Sessions each year. They are provided with regular support and performance feedback to keep them up to date with changes or current issues an NCAC *Moderator Newsletter* is published regularly and annual refresher training is provided.

The Tyranny of Distance

Another difficulty we face is a very Australian problem – **the vast distances**.

To ensure there is no conflict of interest, we require that the Validator and Service have no connection. When scheduling a validation visit for a rural or isolated service, we may find that our nearest eligible Validator, who does not pose a conflict of interest, is located hundreds or even thousands of kilometres away. When organising validation visits in States such as Queensland and Western Australia our staff feel like travel agents and geography teachers, judging distance and organising itineraries. It is especially difficult in the Northern Territory where distance, combined with a small population – with just over 50 child care services in the whole of the NT, usually mean flying in a Validator from a neighbouring State. Even within States the distances can be huge – to send a Validator from Brisbane to a service in Bamaga - both in Queensland - is a 5,000 kilometre round-trip!

Future Directions

Now that the QIAS has been in operation in Australia for almost 8 years, and there is a new FDQCA, it is vitally important that quality assurance and accreditation are extended to other children's service types. Families of children in all service types need an assurance that their children are being cared for in a quality environment. Staff in those services also need recognition for the excellent work they do.

Further, many, many Australian children are cared for across several settings in their early years of development. In fact some children may attend family day care three days a week and long day care on the other two days. Many children will move from long day care to outside of school hours care. It is crucial then that quality assurance is implemented across all service types.

The Commonwealth government has indicated that it will extend quality assurance to outside of school hours care. This is a move wholeheartedly supported by NCAC. A working party is currently working on quality assurance models for outside of school hours care.

Several States and Territories in Australia have implemented quality programs, including checklists for preschool services. Most recently the State Government in New South Wales has completed a pilot of the QIAS in selected preschools across the State.

Conclusion

As educators and advocates for children, I feel that we should be justly proud of the quality of care and education we provide for children and our efforts to improve quality. I am proud of the quality standards in Australian children's services.

I would encourage you to continue to strive for continuous quality improvement – as quality improvement is a journey not a single destination.

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Appendix 2

QIAS Progress statistics

History of Progress of All Centres in the Quality Improvement and Accreditation System 1995- 2001

	June 1995	June 1996	June 1997	June 1998	June 1999	June 2000	June 2001	Nov 2001
Accredited with 1 year between reviews	95 (37.9%)	544 (42.2%)	1162 (37.8%)	801 (22.4%)	572 (15%)	463 (12%)	427 (11%)	449 (11%)
Accredited with 2 years between reviews	43 (17.1%)	140 (10.9%)	322 (10.4%)	361 (10%)	235 (6%)	188 (5%)	165 (4%)	164 (4%)
Accredited with 3 years between reviews	97 (38.7%)	436 (33.9%)	1315 (42.7%)	2142 (60%)	2777 (72%)	2,979 (77%)	3,138 (80%)	3,197 (82%)
Not Accredited	16 (6.4%)	168 (13.0%)	283 (9.2%)	272 (7.6%)	269 (7.0%)	233 (6%)	184 (5%)	103 (3%)
Total No. of Centres through the 5 Steps	251 (100%)	1288 (100%)	3082 (100%)	3576 (100%)	3853 (100%)	3,863 (100%)	3,914 (100%)	3,911 (100%)
In Self-study, in Review, in Moderation or awaiting Council Decision	3340	2658	1052	672	290	167	145	167
TOTAL CENTRES	3591	3946	4134	4248	4143	4,030	4,058	4,080

1994 - 2 SSR's submitted by June 94, **2503** (81%) centres registered