JOHN TAINTON (CERT.T., B.A., B.ED.ST., M.ED.AD.)
CHAIRPERSON, NATIONAL CHILDCARE ACCREDITATION COUNCIL

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CHILD CARE QUALITY ASSURANCE IN AUSTRALIA

Abstract:

This presentation identifies the main features of the National Childcare Quality Assurance (QA) systems that operate in Australia for centre-based long day care, family day care and outside school hours care services (7,936 services in all). Particular emphasis will be placed on the five step quality assurance process leading to accreditation and the measures taken to ensure that the system operates at very high levels of validity and reliability. There will be a brief overview of lessons gained from eleven year's experience with QA for child care services; of challenges now faced by the National Childcare Accreditation Council; and of the rewards and benefits for participating child care services.

1. Background and context

Statistics show that almost half of all Australian women with children 0-4 years are in paid employment[1] and that some three hundred thousand Australian children aged nought to five attend long day child care in Australia.[2]

Australian families requiring care for their children have a range of child care options including long day care centers, family day care schemes, outside school hours care services, in-home care and occasional care.

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

During 1994, a national *Quality Improvement and Accreditation System* (QIAS) was introduced into long day child care centers throughout Australia – designed to link the achievement of national standards of quality in child care centers to the payment of Commonwealth Child Care Benefit funding for families using those services.[3] This initiative resulted in Australia being the first country in the world to implement a national, compulsory, quality assurance system for center-based child care services. The body established to administer the QIAS is the National Childcare Accreditation Council Inc. (NCAC) and it in turn is accountable to the Commonwealth Minister responsible for family and community services.

In 1998, a review of the QIAS and its initial 52 *Principles* of quality care was undertaken by the Commonwealth Child Care Advisory Council (CCCAC).[4] The review involved an extensive process of consultation (CCCAC Report, 1999). As part of this process, CCCAC engaged the Australian Council for Educational Research (ACER) to evaluate the QIAS as a means of rating child care centers, with a focus on investigating the observed subjectivity and overlapping nature of some of the system's original 52 *Principles* of quality care. This work entailed a psychometric validation of the *Principles* based on related responses from 3,702 child care centers throughout Australia (Holmes-Smith, 1998).

In brief, the review raised the needs to:
- make the QIAS fairer, less subjective and more easily understood by child care center staff and families;
- simplify the quality assurance processes; and
- develop quality assurance measurement instruments that contribute to the reliability and validity of decisions affecting the accreditation of long day child care centers.

Since the 1998 review of the QIAS which marked an important shift in the approach to quality assurance taken by NCAC, quality assurance systems have also been introduced for family day care and outside school hours care services. At 1 April 2005, there were 4,707 long day care centers, 319 family day care schemes, and 2,910 outside school hours care services registered with the NCAC for participation in quality assurance. In all, the NCAC presently administers quality assurance systems for 7,936 child care services across Australia.

2. Overview

This paper outlines the present role of the NCAC; provides some insights gained from eleven years' experience in administering child care quality assurance systems; describes the main features of present quality assurance systems for child care services in Australia; highlights challenges faced by the NCAC in administering these quality assurance systems; and presents the author's views on the rewards experienced by participating child care services.

3. Role of NCAC

The National Childcare Accreditation Council (NCAC) administers Quality Assurance (QA) systems for the following three child care sectors that are eligible to receive Child Care Benefit funding from the Australian government:
- Family Day Care Quality Assurance (FDCQA) for family day care schemes
- Outside School Hours Care Quality Assurance (OSHCQA) for outside school hours care services
- The Quality Improvement and Accreditation System (QIAS) for long day care centres.

The broad objective of the NCAC's quality assurance systems is to ensure that children in child care in Australia have stimulating, positive experiences and interactions that nurture all aspects of their development. This is consistent with the NCAC's motto : 'Putting Children First'.

The fundamental role of NCAC is to manage the processes by which standards of quality care are kept consistent with current research, theory and best practice and applied in child care services. NCAC aims to support and improve the quality of care provided by Australian child care services, and to assist families to make informed decisions when choosing quality child care.

4. Insights from Experience

Experience in implementing and administering the three current child care quality assurance systems highlights four essential aspects of these systems:
- Standards that focus on *process*;
- Standards that are *valid*;
- Accreditation decisions that are *reliable and valid*; and
- An emphasis on *continuing quality improvement*.

4.1 Focus on Process
In the child care sectors, State and Territory governments have responsibility for legislating and administering licensing arrangements. Such licensing has tended to focus predominantly on *structural* or input dimensions of quality child care, e.g., specification of facilities, staff qualifications, group sizes, and child-staff ratios. Such aspects are overt and have typically been enforced with an inspection-compliance regime. The Commonwealth sponsored quality assurance systems complement and build on licensing by focusing predominantly on the *process* or practice dimensions of quality child care, e.g., interactions with children and families; educational programs; health and hygiene practices; and relevant management practices.

This approach is not only convenient, in that it recognises and complements existing licensing arrangements, but also consistent with the current *process* focus that is considered best practice in quality assurance systems.

For example, it has allowed the NCAC's quality assurance standards to be written in such a way that they require child care services to have policies, procedures and practices in nominated areas while avoiding the dilemma of holding the NCAC up as the foremost authority in all these areas. Rather, the onus is placed on services to ensure that their policies, practices and procedures are informed by recognised authorities in the various areas specified in the quality assurance standards, e.g., authorities specialising in child health, child safety, and child learning and development. Thus, the focus is on ensuring that child care services have systems in place to access current information on high quality practices and that services use such information to inform their policies, procedures and practices.

4.2 Valid Standards
The construct validity of the NCAC's standards documents has been achieved by engaging panels of experts in their development and periodic review. This helps

ensure that standards are informed by current research and theory. The face validity of the standards has been achieved by opening draft standards documents to extensive consultation within the child care field. Finally, the measurement validity of the standards has been tested using confirmatory factor analysis. This rigorous process has resulted in the development of standards documents that can explain some 99.8% of the variance and covariance in measurement data. These documents specify standards at three levels of generality:

- Quality Areas;
- Principles that define these quality areas; and
- Indicators of practice for each Principle that allow interpretation of four levels of performance - Unsatisfactory, Satisfactory, Good Quality, High Quality.

4.3 Reliable and Valid Decisions

Unless performance of child care services is assessed reliably, accreditation decisions cannot be valid despite efforts to establish valid standards. Reliability is achieved by using measurement techniques designed to minimise measurement error. The NCAC has engaged the Australian Council for Educational Research (ACER) to assist in this regard. This has ensured that measurement instruments used by NCAC are consistent with current psychometric theory and practice. Data are gathered from a variety of sources to ensure that various perspectives are taken into account and proportionally weighted regression coefficients are calculated for all Principles to identify the reliability with which each Principle contributes to its respective Quality Area. These weightings are then applied within the mathematical protocol used to calculate a composite quality profile (Figure 1) that combines all sources of data gathered for each service. The stability of these profiles means that they can be used to make reliable and valid accreditation decisions. Also they are easily understood by stakeholders – families, management, staff and carers.
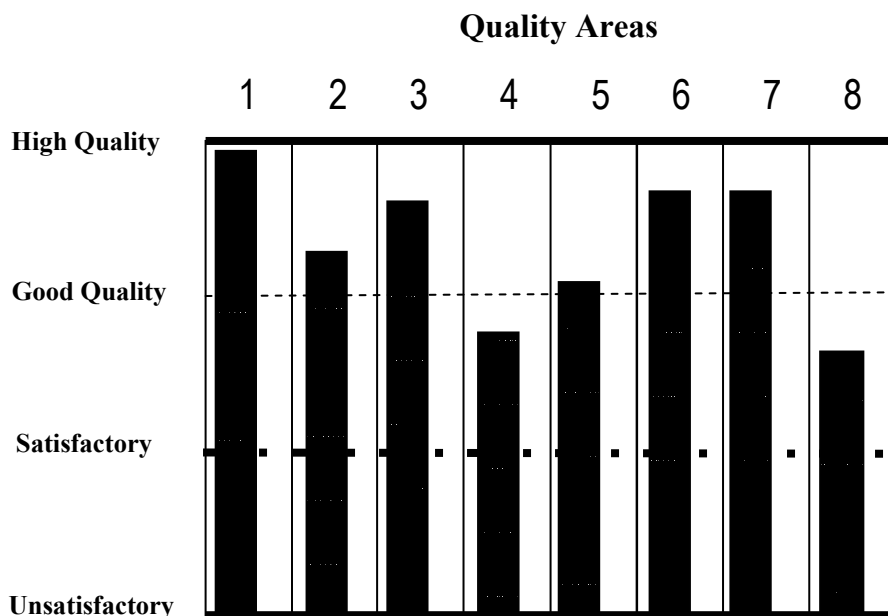

Figure 1: Sample Composite Quality Profile

4.4 Continuing Quality Improvement
The NCAC quality assurance systems promote continuing quality improvement in several ways:
- The standards documents (Quality Practices Guides) help services engage in an on-going process of self-study and improvement of practices;
- The 2½ year cycle of Validation means that child care services need to maintain a regular process of evaluation and improvement;
- The NCAC ensures that services receive regular updates on current resources;
- Services receive direct and tailored advice from NCAC Moderators on ways to improve quality; and
- Quality trends mapped from the NCAC database are used to guide and advocate for timely professional development opportunities for the field.

5. Main Features of Child Care QA Systems

Main features of NCAC's quality assurance systems are discussed under the following headings:
- Philosophical orientation;
- The cyclical five step process;
- Scope of data used in quality assurance of child care services; and
- NCAC's role in documenting standards and communicating with services and key stakeholders.

5.1 Philosophical Orientation
NCAC has a strong commitment to 'putting children first'. Other beliefs that underpin this vision and shape the character of the child care quality assurance systems in Australia include:
- Accreditation is just one dimension of a quality assurance process and is not the ultimate 'end-in-itself' – a more important 'end' is a commitment to continuing quality improvement;
- Quality assurance systems can effectively promote improvement of practices through a focus on self-evaluation and continuing improvement – this approach is somewhat different from the compliance model that typically accompanies licensing regimes;
- Quality assurance systems should focus primarily on process – structural aspects of quality are probably better left to a compliance-based licensing approach;
- Quality assurance systems and processes should be as transparent as possible – this contributes to a free flow of information and feedback which can inform self-evaluation and continuing improvement; and
- Opportunities for continuing professional development are essential for a quality assurance system to operate effectively.

5.2 The Cyclical Five Step Process
All of NCAC's quality assurance systems operate on a cyclical five step process which contributes predictability and motivation for participating child care services as well as assisting NCAC in its planning and budgeting:

- *Registration* – Services pay an annual registration fee to NCAC. In return they receive an initial supply of relevant NCAC publications and an on-going flow of communications to assist them to implement the quality assurance processes. There is no additional charge for NCAC's role in subsequent steps of the process.
- *Self-study and quality improvement* – Child care services have 2½ years to engage in a self-study and quality improvement process using the relevant NCAC Quality Practices Guide as a benchmark. At the end of each 2½ year period, they are required to submit a Self-study Report to the NCAC using a standardised format.
- *Validation by peers* – When a Self-study Report is received by NCAC, this acts as a trigger for NCAC to arrange for a peer Validator to visit the service and complete a Validation Report. Validators are drawn from similar services; are trained by NCAC to perform Validation visits; and are remunerated for their work on behalf of NCAC. The information gleaned from the Validator's visit is supplemented by survey data collected from a variety of stakeholders immediately prior to the Validation visit.
- *Moderation by an expert panel* – Moderators must meet demanding academic standards and be currently involved in relevant aspects of the child care field. They are trained by the NCAC to use high level analytical skills to perform the task of scrutinising all information about child care services collected from all other perspectives. Having done so, Moderators cast a 'vote' based on their perception of standards at a service as revealed by all other data. This 'vote' is used to moderate the accreditation decision for a service, thus enhancing consistency and reliability of decision making. Moderators also write a brief report focusing on the service's strengths and weaknesses and offering practical advice on ways to further improve quality.
- *Accreditation decision and review processes* – All data collected on a service are combined using standardised protocols to produce a Composite Quality Profile (Refer example in Figure 1). To be accredited, a service must achieve a 'Satisfactory" or higher standard in all Quality Areas. If a service is dissatisfied with its Profile, an application for review of the Accreditation decision may be lodged with an independent body, the Accreditation Decisions Review Committee. This Committee reviews all information held by the NCAC along with submissions lodged by the service and formulates a recommendation on the service's request for consideration and determination by the NCAC Board.

This five step process is complemented by a unit within the Department of Family and Community Services which assists in follow-through with services that are deemed not to be making satisfactory progress with the NCAC's quality assurance processes.

5.3 Scope of data used in quality assurance of child care services
In summary, data are drawn from various sources to provide specific perspectives on a service's performance:
- Self-study – involves management, staff, carers and families
- Surveys – children, families, directors, staff and carers
- Validation Report – compiled by an independent peer Reviewer
- Moderation Report – compiled from an analysis of all other perspectives.

The broad scope of this data enhances the reliability and validity of accreditation decisions and also provides child care services with regular feedback from a variety of perspectives to inform their own self-study and quality improvement processes.

5.4 NCAC's role in documenting standards and communicating with key stakeholders. Because views on quality standards are constantly changing as a result of emergent developments in evidence-based thinking, theorising and practice, it has been seen as necessary for the NCAC to play a pivotal role in ensuring that Quality Practices Guides maintain currency and acceptance by the field. In recent years, this has been achieved by monitoring feedback about standards on a continuing basis and by undertaking a major consultation and review of standards each 2½ year cycle. This process and other important NCAC processes are aided by maintaining regular liaison with key stakeholders. Indeed, effective communication between and with all stakeholders has been critical for successful implementation of the child care quality assurance systems.

6. Challenges Faced by NCAC

Major challenges faced by NCAC at present may be summarised as follows:
- Growth and rapid change in the child care sectors;
- Pressures from some sections of the community for NCAC to move from a professional development orientation to a compliance orientation;
- Ensuring that quality trends data generated by NCAC is used more effectively in guiding professional development opportunities for managers, carers and staff;
- Maintaining a balanced partnership approach with government, child care services, managers of services, relevant professional associations, universities and training organisations;
- Fostering the development of strategic alliances and allied services required to further enhance the quality of child care in Australia; and
- Coping with international interest in our quality assurance systems.

7. Rewards for Participants

There is clear evidence in NCAC records that the quality of child care in Australia has improved considerably over the past decade. This would appear to be a very worthwhile outcome for which much credit must be accorded to the quality assurance systems operated by NCAC and the commitment of child care services in working within the

quality improvement framework provided by these systems. In this light, it seems reasonable to summarise the rewards for participants as follows:

- *Extrinsic*:
  - Approval for enrolled families to qualify for Child Care Benefit payments;
  - Use of the service's Composite Quality Profile and Accreditation Certificate for promotional purposes;
- *Intrinsic*:
  - Satisfaction from professional development; and
  - Satisfaction from contributing to and working in a high quality service.

8. Conclusion

It is the experience of NCAC that a major pathway to quality improvement will be characterised by:
- Strategies that help and motivate stakeholders to improve their specialised knowledge and skills;
- Openness to continuing inquiry and learning;
- Willingness to share learning with colleagues;
- Respect for the views of others; and
- Ethics and practices fitting of all vocations trusted with the nurture, care and education of children …

In essence, the way forward must be professional in orientation.

[1.] Department of Family and Community Services (1999).
[2.] Department of Family and Community Services (1999).
[3.] This was an initiative of the then Commonwealth Department of Health and Family Services. For related documentation associated with this initiative, see NCAC (1993, 1994a,b).
[4.] The Commonwealth Child Care Advisory Council (CCCAC) was established within the Department of Health and Family Services on 10 March 1998 by the then Minister for Family Services, the Hon. Warwick Smith.