

# Submission to the 2022 State Budget

November 2021

ECIA VIC/TAS is the peak body for early childhood intervention in Victoria and Tasmania. We represent over 600 professionals and organisations providing specialised support and services for infants and young children with disability and/or developmental delay to promote development, well-being and community participation. Our vision is for young children of all abilities to fully participate in family and community life.

ECIA VIC/TAS members are ECI professionals working in community organisations, disability services, specialist ECI organisations, children's services, and government departments – all of which reflect the diverse ways in which services are provided to young children and their families.

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## Introduction

ECIA VIC/TAS welcomes the opportunity to contribute to the Victorian Governments deliberations on the 2022 Budget. ECIA VIC/TAS acknowledges the Victorian State Government for their ongoing commitment to quality services for children with disability and/or developmental delay and their families. With ongoing support and goodwill from the sector, ECIA VIC/TAS is in a strong position to work with government to ensure that best practice is strengthened across the state of Victoria.

With the appointment of the Minister for Early Childhood 12 months ago, and a clear commitment to inclusion through the recent Disability Inclusion Support Improvement Project, now is the time to strengthen the legislation, policy, leadership, and services for young children with developmental disabilities and their families.

This Budget submission proposes measures and program improvements in six key areas that can further the work proposed in the States Government’s Early Childhood Reform Plan to:

*“... aspire to be among the best in the world. Over the next 10 years, we will establish a world-class early childhood system that is responsive to children’s needs, welcoming to all families, and supportive of all parents and carers”.<sup>1</sup>*

## Our Recommendations

ECIA VIC/TAS provides recommendations that aim to ensure that every child and family has access to high quality, equitable and inclusive early childhood services.

<b>Recommendation 1</b>	<b>Develop a comprehensive policy framework</b>
<b>Recommendation 2</b>	<b>Reinvigorate and strengthen an integrated early childhood system</b>
<b>Recommendation 3</b>	<b>Support referral pathways and invest in a second-tier level of services.</b>
<b>Recommendation 4</b>	<b>Invest in implementation of inclusive practices and programs</b>
<b>Recommendation 5</b>	<b>Invest in building the specialist early childhood workforce</b>
<b>Recommendation 6</b>	<b>Invest in children with disability and/or developmental delay experiencing disadvantage</b>

<sup>1</sup> Department of Education and Training (2016). *Early Childhood Consultation Paper*. Retrieved from: <https://www.education.vic.gov.au/Documents/about/educationstate/ec-reform-plan.pdf>

## Recommendation 1: Develop a comprehensive policy framework.

- Develop a policy framework regarding how the needs of young children with developmental disabilities and their families can be met.
- Strengthen mechanisms for clear communication, planning and policy development with a focus on young children with disability and/or developmental disability between federal and state governments.

Currently, neither the Department of Education and Training (DET) nor the National Disability Insurance Scheme (NDIS) have articulated an overall policy regarding how the needs of young children with developmental disabilities and their families can be met. This is critical given the necessary interaction between the two systems.

Policy must include a focus on an integrated service system with:

- strong governance,
- adequate resources,
- data that can inform program improvements,
- quality standards, accountability, and improvement; and
- a ready and capable workforce that can deliver high quality inclusive services within the context of wider early childhood frameworks and policies.

## Recommendation 2: Reinvigorate and strengthen an integrated early childhood system.

- Coordinated information, supports, data, referral pathways and resources between local, state/territory, and federally funded universal and specialist providers, aligned with the State Disability Plan and Victorian Disability Act, and the National Disability Strategy.
- Enlist expertise within the sector to establish a taskforce or expert advisory group to lead and support mechanisms for monitoring and responding to issues related to children with developmental disability and/or delay and their families.

There has been considerable disruption to the early childhood service system in Victoria since the introduction of the NDIS.

The transfer of Early Childhood Intervention (ECI) services to the NDIS has involved moving the sector from its previous state government early childhood (EC) policy base to the federal disability sector. The impact is that ECI is no longer embedded within mainstream EC services and there is a worrying disconnect between sectors. This is extremely disappointing given the significant work that had previously been undertaken to develop an integrated service system by the Victorian Government.

Coordinated information, supports, data, referral pathways and resources between local, state and territory and federally funded mainstream and specialist providers is critical to supporting inclusion and participation for young children. A coordinated approach requires urgent attention. This work

should align with the Victorian Disability Act, and the Victorian State Disability Plan that is currently under development. The 2020-2030 National Disability Strategy also provides an important focus for development.

### **Recommendation 3: Support referral pathways and invest in a second tier of services for children with developmental concerns.**

- Conduct a review of supports and services currently available to Victorian families of young children with developmental concerns, delay, or disability.
- Investigate, develop, implement, and invest in a state-based second-tier level of support.

#### **3.1 Referral pathways**

One of the consequences of the disruption to the early childhood service system in Victoria since the introduction of the NDIS is that families who have concerns about their children's development do not have a clear pathway towards appropriate services and supports. Furthermore, service providers remain confused about referrals. As a consequence, children are not receiving ECI supports in a timely and responsive way and families are lurching from one provider to another trying to find the supports they need. The NDIS has acknowledged that "Children and families need to be more consistently supported through the right pathways" in Improvement Area No. 4 of the recent ECEI Reset Project Consultation Report.<sup>2</sup> However, it is not clear what role the NDIS is playing in addressing this issue, other than the current focus on strengthening the pathway for access decisions for children younger than 7, under section 25 in the NDIS Act.<sup>3</sup> The Victorian state government clearly has a role to play.

#### **3.2 Second-tier services**

Access decisions with clear referral pathways for the NDIS should be prompt and straightforward. Early supports for children with developmental concerns who are not eligible for the NDIS must also be prompt and straightforward. ECIA VIC/TAS is concerned that this is currently not the case, primarily due to what is referred to in sectors such as mental health, justice, and housing as the 'missing middle' or 'second-tier' services.

In the past, Community Health (CH) played a significant role in providing this 'second-tier' level of support by positioning itself between universal child and family services and intensive supports. CH services typically had multi-disciplinary teams of allied health practitioners who provided therapeutic supports for children with developmental concerns in individual and group programs. ECIA VIC/TAS members now report unprecedented numbers of referrals for children with developmental concerns who are not eligible for the NDIS, and extensive wait lists at CH. Some CH centres are reporting that they are no longer keeping a wait list due to the demand.

The 2020 ECEI Reset Project Consultation Report indicated that EC Partners would provide short-term early interventions (STEI) for children with developmental concerns. More recently, the NDIS indicated that boosting EC Partner capacity will take more time and coordination to get right and is flagged as work being undertaken over the next 2 years.<sup>4</sup> Furthermore, the increased provision of

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<sup>2</sup> NDIA (2020). *ECEI Reset Project Consultation Report*.

<sup>3</sup> NDIS (2021). *How we're improving the way we support young children and their families*.

<sup>4</sup> NDIS (2021). *How we're improving the way we support young children and their families*.

STEI by EC Partners does not appear to address the interface with universal services. It remains unclear what role the EC Partners will play with their proposed STEIs and what other approaches should support this at a local or state level. This leaves Victorian children with developmental concerns and their families without prompt and straightforward access to second-tier services.

## Recommendation 4: Invest in implementation of inclusive practices and programs.

- Fund research to investigate the most effective way of utilising additional assistants in EC programs.
- Invest in pilot program/s that will design, implement, and evaluate alternatives to the KIS program model in line with the best available evidence.
- Provide a comprehensive professional development program for PSFOs that focuses on embedding contemporary capacity building approaches in supporting educators in inclusive practices.
- Invest in additional PSFO roles to ensure equity of access to inclusion support across the state.
- Fund ECIA VIC/TAS to further develop technical support assistance for EC and ECI sectors in evidence-based inclusive practices.
- Provide clear, consistent, and timely communication to the EC and ECI sector about the DET Disability Inclusion Program in schools.

### 4.1 Inclusive programs

The DET is to be congratulated on initiating the Disability Inclusion Support Improvement (DISIP) Project that aims to identify potential reform opportunities. The DISIP project is a welcome recognition that early inclusive experiences establish a trajectory for children's further participation in school and community life. It is important that the foundations of inclusive programs and practices are well established in the early years.

In order to build a solid foundation, ongoing investment is required to support implementation of inclusive practices and programs in EC education programs in line with the best available evidence. This investment should be proportionate to the Victorian Governments' commitment in 2020 of \$1.6 billion Disability Inclusion funding, to support students with disability in government schools.<sup>5</sup>

Some of the issues that we urge the DET to consider in the DISP Project can be addressed by reinvigorating an integrated early childhood system and developing the workforce discussed in other areas of this paper. In addition, consideration should also be given to refreshing the current programs designed to support children's inclusion in kindergarten in line with current research.

- a) Kindergarten Inclusion Support Program

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<sup>5</sup> Victorian Government. (2020). *Disability Inclusion*.  
ABN: 61 830 423 920 | ACN: 617 517 423

The Kindergarten Inclusion Support (KIS) program is designed to allow children with disabilities, high support needs and/or complex medical needs to be engaged and participate in all aspects of kindergarten life on the same basis as their peers.

- The KIS support can include staff training, minor building modifications, access to specialist expertise and additional staffing.<sup>6</sup> In most instances, services employ staff, in the form of an additional assistant. Research in the past decade has raised questions about the effectiveness of this model of support for school children with disability.<sup>7</sup> To the best of our knowledge, research has not been conducted in early childhood services on the effectiveness of this model. There is a compelling argument for the Victorian state government to better understand the outcomes of this model of service delivery for preschool children. This might take the form of research to investigate the most effective way of utilising additional assistants in EC programs, and/or investing in pilot programs that design, implement, and evaluate alternatives to the KIS program in line with the best available evidence.
- A contemporary approach to supporting children's inclusion is strength-based. Currently, the application process for KIS funding is based on an outdated model that requires families and educators to focus on the child's deficits. This deficit-based funding model requires urgent attention. The current approach DET is implementing with the Disability Inclusion Profile in schools may provide some guidance towards a strengths-based approach that supports an understanding of a child's needs and a focus on preparing for educational adjustments.
- Contemporary approaches to inclusion focus on capacity-building – for the child, family and early childhood education team. The KIS program claims to “support early childhood teachers to build their capacity to develop and implement an inclusive program.”<sup>8</sup> However, the funding is based on an individual child, not service-wide support of inclusive practices. The DET needs to better understand the outcomes of this model of service delivery for children and educators and review the model accordingly.

#### b) Pre School Field Officer Program

The Pre School Field Officer (PSFO) role has changed over the past decade in line with current literature on the best ways to enhance educators' capacity and confidence to provide an inclusive program that is responsive to the needs of all children. This has essentially meant a shift from providing support directly to children with a disability/developmental delay, to capacity building supports for educators such as coaching, modelling, and providing information, resources and planning supports. This significant shift in approach requires investment in professional development for PSFOs to ensure they have the skills, knowledge, and confidence to work with

<sup>6</sup> Department of Education Website. *Kindergarten Inclusion for children with disabilities*.

<https://www.education.vic.gov.au/childhood/professionals/needs/Pages/kinderinclusion.aspx>

<sup>7</sup> Webster, R & Blatchford, P. (2020). Rethinking the use of teacher aides. In Graham, L. (Ed.). *Inclusive education for the 21st century: Theory, policy, and practice*. Routledge.

<sup>8</sup> DET website (2021) <https://www.education.vic.gov.au/childhood/professionals/needs/Pages/kinderinclusion.aspx>

educators within this coaching framework. This should interact with the development of a workforce plan and capability framework to support the integration of PSFOs with the broader specialist teacher workforce. Systematic support and professional development for PSFOs should also include a coordinated approach across the state to ensure comprehensive and consistent supports. ECIA VIC/TAS is well positioned to provide this coordination function.

Furthermore, it appears that there is ongoing inequity in the PSFO program. We understand that population growth has not resulted in additional funding for recruiting new PSFOs in recent years. This inequity needs to be addressed to ensure all early childhood educators have access to the PSFO program in order to support the inclusion of pre-school children with a developmental disability.

## 4.2 Consultation supports for ECEC

### Case study

*Toni has been teaching in a rural kindergarten for a decade and enjoys a strong and supportive relationship with the PSFO. When Ali commenced at kindergarten, Toni contacted the PSFO for support with his participation in the program. Toni was advised that she needed to seek inclusion support from Ali's NDIS provider, in accordance with DET funding guidelines. Toni contacted each of the private therapists. The occupational therapist only provided services at the clinic. The speech therapist could come to the kindergarten, but only to provide 1:1 therapeutic support which involved withdrawing Ali from his peers and the kindergarten program. The physiotherapist was able to come to the kindergarten to address his equipment needs in 6-8 weeks.*

One of the unintended consequences of the NDIS is the significant disruption and decline in capacity building supports for EC educators to provide inclusive education programs. In the past, because of the strong links between ECI and EC, who were administered within the same state government department, ECI therapists had a solid understanding of the kindergarten learning environment and EC frameworks such as the Victoria Early Years Learning and Development Framework (VEYLDF).<sup>9</sup>

Now, with a rise in NDIS funded therapists working in clinics, rather than providing holistic team-based supports across natural environments, we are experiencing a worrying disconnect. EC educators now increasingly report limited, inconsistent or poor interactions with ECI therapists who are not required to be aware of either the VEYLDF or the ECIA National Guidelines.<sup>10</sup> Positive interactions are primarily due to existing relationships with state funded ECI services that continue to provide a Key Worker model of service across natural environments.

This issue has been exacerbated by the dramatic reduction in early childhood special education teachers working in ECI, who have expertise in these areas, due to the significant barriers of the

<sup>9</sup> DET (2016). *Victoria Early Years Learning and Development Framework (VEYLDF)*.

<sup>10</sup> Early Childhood Intervention Australia. (2016). *National guidelines: Best practice in early childhood intervention*.

NDIS guidelines. Furthermore, if a child is supported by NDIS funded ECI, kindergarten teachers are advised by DET to seek inclusion support from the NDIS provider, not the Pre School Field Officer.<sup>11</sup>

The DET 'school readiness' funding provides educators with access to funding for supports, including allied health professionals who can work in collaboration with educators and families, with the goal of improving outcomes for children. Consultancy is also available through the Kindergarten Inclusion Support (KIS) program. However, these programs are not filling the gap. EC educators indicate that they have reduced consultancy supports to enhance children's functional skill development, work as part of a 'team around the child', provide inclusive education programs, and support transitions to school. Local level coordination and collaboration has deteriorated. This does not align with the Australian and State Governments agreement on 'Principles to determine the responsibilities of the NDIS and other service systems', that states:

*"The NDIS and the systems providing early childhood supports will work closely together at the local level to plan and coordinate streamlined services for individuals requiring both disability services and early childhood supports recognising that both inputs may be required at the same time or that there is a need to ensure a smooth transition from one to the other."*  
(p10)<sup>12</sup>

These issues mean that EC educators no longer have the consultancy support from ECI professionals that they had previously enjoyed and relied upon when ECI was provided through state government. This situation needs to be managed as a matter of urgency in order to support children's inclusion in high quality programs.

### 4.3 Transition supports

The DET has invested in the Disability Inclusion Program to increase support for students with disabilities. This includes a new approach with the support of a funded facilitator to help schools and families identify the student's strengths and needs and educational adjustments.<sup>13</sup> This strengths-based approach is a welcome initiative.

Given the interaction between early childhood services, ECI and primary schools, particularly in relation to transition arrangements, it's crucial that clear, consistent, and timely information is provided to the EC and ECI sector to enable them to support the new program. This has not been the case to date. EC and ECI services in Bayside Peninsula, Barwon, and Loddon-Campaspe (2021 rollout regions) have not had sufficient information, or engagement in the new approach to feel confident in sharing information with families, or in being necessary partners in the transition process.

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<sup>11</sup> Department of Education Website. *Pre School Field Officer Program*.

<https://www.education.vic.gov.au/childhood/professionals/needs/Pages/psfo.aspx>

<sup>12</sup> Council of Australian Governments (2015). *Principles to determine the responsibilities of the NDIS and other service systems*.

<sup>13</sup> Disability Inclusion Program (2020).

<https://www.education.vic.gov.au/school/teachers/learningneeds/Pages/disability-inclusion.aspx>

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## Recommendation 5: Invest in building the specialist early childhood workforce.

- Build on the DETs 'Working Together to Build Victoria's Early Childhood Education Workforce' paper to develop a Victorian ECI workforce strategy.
- Fund ECIA VIC/TAS to develop a 'Specialist teachers (early childhood) capability framework'.
- Work with the NDIS to address the barriers to early childhood special education teachers' provision of ECI services.
- Fund ECIA VIC/TAS to develop a framework for allied health assistants working in ECI.

### 5.1 Attraction, retention, and quality improvement

#### Case study

*Libby recently graduated as an Occupational Therapist. She was discouraged from applying for a role in an ECI team by her lecturer due to the complexity of the role. Libby hadn't completed a paediatrician placement in her undergraduate training, but had enjoyed her semester on paediatrics, so applied for a local position.*

*The ECI service had not recruited new graduates in the past, but with growing client wait lists and a diminishing number of applicants, the service developed a 'new grad program' for the team of four recruits. The service utilised online learning on best practice in ECI and provided intensive supervision, mentoring and peer coaching for her 6-month probationary period. Libby was in family homes providing NDIS funded therapeutic services within a week of commencing. After one year in the ECI service Libby accepted a new position in a local paediatric clinic.*

The ECI sector is currently experiencing unprecedented workforce pressures. There is a chronic shortage of specialist early childhood teachers and paediatric allied health practitioners with the skills, knowledge, and experience to work effectively with young children with disability and/or developmental delay and their families. The workforce shortage has led to increasing wait lists for ECI services for Victorian children, with families reporting 9-12 month wait for services after they have received an NDIS Plan.

Workforce pressures are being addressed for the broader disability workforce through the Joint Standing Committee on the NDIS Workforce Interim Report but do not address ECI.<sup>14</sup> They are also being addressed by the Victorian State Government for the early childhood sector through the recent 'Working Together to Build Victoria's Early Childhood Education Workforce'.<sup>15</sup> However, there appears to be no attention to the issue for the ECI sector.

A sector-wide workforce strategy needs to be developed as a matter of urgency. This would see the Victorian Government working with the NDIA, the ECI sector, universities, TAFEs, and peak bodies to develop a plan that would be responsive to the future needs of the sector. An ECI workforce

<sup>14</sup> Australian Government (2020). *Joint Standing Committee on the National Disability Insurance Scheme NDIS Workforce Interim Report*.

<sup>15</sup> DET (2021). *Working Together to Build Victoria's Early Childhood Education Workforce*.

strategy must address attraction, retention, and quality improvement through the need for a comprehensive range of options across pre-service, in-service, and postgraduate training. This should include professional learning in best practice in ECI, based on the ECIA National Guidelines for Best Practice in Early Childhood Intervention.<sup>16</sup> ECIA VIC/TAS has also developed Best Practice in ECI professional development modules that could be utilised and further developed.

In recognition of broader early childhood workforce issues, the Victorian government has engaged a supplier to design and deliver 'Early Childhood Teacher End-to-End Career Supports and Early Years Learning Networks'. This initiative is a welcome approach to attracting and retaining teachers and educators with a continued focus on the development of high-quality practice for existing and new educators in the profession. A similar approach for ECI professionals, including Pre School Field Officers (PSFOs), is worth exploring. Similarly, some of the DETs Disability Inclusion Program initiatives to help build knowledge and skills in inclusive education across the school system are worth considering for the ECI sector, including coaching, professional learning, evidence-based guidance and resources and scholarships for ECI professionals.

### 5.2 Early childhood specialist education teachers

There are particular issues for early childhood specialist education teachers working in ECI whose positions have been made redundant in many services due to the significant barriers of the NDIS guidelines. This is a worrying trend given the critical role early childhood specialist teachers have in their work with children, families, and educators.

The Department of Health and Human Services (DHHS) has recently released the 'Allied health capability framework: disability and complex support needs'.<sup>17</sup> This is a welcome framework and could be utilised as a template for a complimentary capability framework for specialist teachers. This could focus on those working in the early childhood field (e.g., ECI, PSFOs, Community Health...) or be broadened to include specialist teachers working with school-aged children with disability. A 'Specialist teachers (early childhood) capability framework' would be one way of developing the skills and knowledge of specialist teachers and provide a unifying and consistent framework for all those working in the field.

### 5.2 Allied health assistants

One of the implications of the workforce shortage, along with changes brought about by the introduction of the NDIS, is the increasing involvement of Allied Health Assistants (AHAs) in ECI. AHAs work under the supervision of allied health therapists to assist with activities that support the child's therapy goals. The Department of Health and Human Services (DHHS) has developed a 'Supervision and delegation framework for allied health assistants and the support workforce in

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<sup>16</sup> Early Childhood Intervention Australia (2015). *ECIA National Guidelines for Best Practice Early Childhood Intervention*.

<sup>17</sup> Department of Health and Human Services (2020). *Allied health capability framework: disability and complex support needs*. Retrieved from: <https://www2.health.vic.gov.au/health-workforce/allied-health-workforce/ahcf-disability-complex-support-needs>

disability'<sup>18</sup> but it doesn't address the specific needs of AHAs working with young children with developmental delay and/or disability.

The sector requires a clear framework that specifies the scope of duties, qualifications, competencies, delegations, reporting and supervisory requirements of AHAs working in ECI. The framework should also attend to training requirements and ongoing supports for AHAs in ECI.

## Recommendation 6: Invest in children with disability/developmental delay experiencing disadvantage.

- Increase the unit costs of CoS packages in order to provide a more equitable program.
- Work with the NDIS to determine whether young children (0-3 years) are getting prompt access to appropriate services and support.
- Develop an approach to learn from the sector about the needs of children with a developmental disability, families, educators and ECI practitioners as a result of the pandemic and provide a flexible and responsive approach to ensuring children are getting the support they need when they need it and are actively included and participating in EC services.
- Learn from the 2021 'Family group transition program' for children who are developmentally vulnerable and invest in a scale-up program for 2022.

### 6.1 Continuity of Support (CoS)

#### Case study

**Child 1:** *Tito received residency status at 1 year of age. Following ongoing concerns about his development, Tito was diagnosed with quadriplegic cerebral palsy at 16 months. Two months later he was deemed to meet eligibility requirements for the NDIS and was provided with an \$18,000 capacity building support package. This provided access to all his assistive technology needs and weekly support from a Key Worker at home, consultancy to childcare and telehealth.*

**Child 2:** *Ayaan was reviewed by the Maternal and Child Health Nurse at 2 years of age. Following concerns about his motor and language development he was referred to the local Community Health Centre. The therapists made an immediate referral to the Early Childhood Partner. As Ayaan did not meet residency status, he was ineligible for the NDIS and was referred to the DET. At 3 years of age, CoS funding was approved and shortly after he was given a diagnosis of quadriplegic cerebral palsy. After some months on a wait list, Ayaan and his family had access to a Key Worker (1 visit per fortnight) and was utilising second hand ill-fitting equipment as funding had not yet been approved.*

<sup>18</sup> DHHS (2018). *Supervision and delegation framework for allied health assistants and the support workforce in disability.*

Providing support for children with developmental delay and/or disability who do not meet the NDIS Residency Access requirements remains a critical issue. ECIA VIC/TAS understands from members that ECI services are experiencing difficulty in providing timely high-quality capacity-building programs for this group of children and families. Our members indicate there are wait lists for placements and services are increasingly reluctant to provide CoS support, due to:

- Workforce shortages
- Increased service demand
- Discrepancy in unit cost for CoS (\$8,709) and average NDIS annualised committed support for Victorian 0–6-year-olds (\$25,000)
- Rises in staff costs that have not been met by an increase in funding (e.g., superannuation contributions, Award increases...)

This inequity in funding does not meet family or community expectations and must be addressed as a matter of urgency by increasing unit costs.

## 6.2 Young children (0-3 years old)

The ECI sector has been reporting for some time that the number of very young children with a disability/developmental delay aged 0-3 years receiving a service in Victoria has reduced significantly. It is not immediately clear why this is occurring and appears to fluctuate over time. This decrease in referrals for infants and toddlers since the NDIS was introduced has significant implications for the learning, development and wellbeing of children and the early support required by families. The way in which the NDIA releases data does not make it transparent about what age children are entering the Scheme. This issue requires urgent attention to ensure children's prompt access to appropriate services and supports.

## 6.3 COVID-19

As we navigate the ongoing uncertainty brought on by the COVID-19 pandemic, it is more important than ever to understand the impact on young children with disability and/or developmental delay and their families and provide appropriate supports. Community restrictions and lockdowns have presented many challenges for children, families, EC educators and ECI practitioners alike.

ECIA VIC/TAS recommends that the Victorian Government work with regional staff and the sector to better understand the impact on young children with developmental disability and their families and provide suitable resources and guidance to professionals and families. Learning from the sector would enable a flexible and responsive approach to ensure children are actively included and participating in EC services.

The Victorian Government is currently providing a package of critical supports for families and kindergarten services in response to disrupted learning experienced during the pandemic. This includes funding for the 'Family Group Transition Program' that aims to provide support for children experiencing vulnerability to transition to school. The first stage is being implemented in 2021. This small-scale pilot provides an opportunity to learn from the approach and make any necessary modifications in order to scale-up the program across Victoria in 2022.