

**Mallee Track Health and Community Service – Proposal for Early Years Multi Purpose Service
(MPS)**

**An innovative, universal, whole of government approach to integration and vulnerability in the
Early Years –‘THE MISSING MIDDLE’**

<u>Contents</u>	Page number
Introduction	3
What is the missing middle?	4
The original intent of Multi Purpose Services	5
Early Years MPS program objectives	8
Early Years MPS Service principles	9
Potential scoping of needs based funds	10
The MPS model objective, principles and scoping in	
Early Years in the location of Ouyen – an example	12
Partnering arrangements in the Mallee – achieving The Education State	19
Schedule 1	20
Schedule 2 – Proposed scoping of needs based funds for Early Years MPS	22
Attachment, references and further reading list	26

Introduction

This innovative place based proposal for the delivery of universal early years services in a rural context has been prepared by Mallee Track Health and Community Services (MTHCS) and aims to address the issues of vulnerability, integration and the 'missing middle' with a focus on the delivery of early years services within a rural context. 'The missing middle' definition and principle applied in this context is the rural context where market failure is common – based on the current distribution funding models preferred by a range of funders.

MTHCS has followed, with interest, a range of data in relation to children and families within the organisations' designated catchment. This data has included Census data, SEIFA profiles, AEDC data, My Schools data and NAPLAN results (Refer attachments 1). Based on our analysis of this data there are outcomes on a range of measures for children and families that indicate that the divide for children and families living in the catchment is widening between their regional and metropolitan counterparts.

MTHCS' is keen to implement a universal needs and place based approach to improving outcomes for families and children where market failure is present. It is also based on the common theme which the community commonly provides feedback to our organisation – that is, the community desires for local services to be delivered by local people for local people.

This proposal addresses the tensions within the system caused by existing policy and funding approaches, which from a service user viewpoint are seen as inadequate, siloed and which - over time – are unsustainable for the funder. Our organisation is seeking to address market failure - a local, place based solution with less reliance on any central government planning or intervention.

This proposal does not seek for new funds into the catchment – but does seek to consider a 'binding' of funds dedicated within a specified catchment – as is currently undertaken in the aged care context where Multi Purpose Services (MPS) operate. MPS were established 20 years ago to address market failure issues in the aged care context.

This proposal also recognises the economic imperative in the broader rationalist environment. As policy makers and governments look for ways to achieve better economies and value for money – this proposal has substantial economic benefits at a range of levels. An MPS which extends further than the aged care scope will provide employment for local people, ensures services are delivered locally, contributes to the economic sustainability of a rural catchment and region. An MPS model which extends more broadly than aged care has the ability to address market failure in the rural context.

This proposal is an innovative opportunity to deliver an integrated and universal model of service which – we believe - has the capability of improving outcomes for vulnerable children and families within a rural context.

This proposal is innovative within the rural context – with a particular focus on 'place', universality, joined up government and integration in an effort to address vulnerability, market failure and the 'missing middle'.

What is the 'missing middle'?

The Department of Health and Ageing, through the National Framework Universal Child and Family Health Services (<http://www.health.gov.au/internet/publications/publishing.nsf/Content/nat-frame-ucfhs-html>), outlines the core services that all Australian children and families should receive at no financial cost to themselves, regardless of where they live, and how and where they access their health care.

The concept of 'missing middle' is an emerging concept – particularly within the mental health arena. (Refer to further reading list). The concept of the 'missing middle' within the Early Years sector, and the application of this concept means:

- Services for children and families funded by state and commonwealth governments have been designed on a 'hub and spoke model'. This model has not allowed for universal investment in primary services – meaning that for children and families seeking assistance there are limited alternatives between Maternal and Child Health and Child Protection or statutory services – more particularly in a rural context.
- These range of services reflect the financial demarcation between the commonwealth government, which pays for primary early years services, and the states and territories which manage service delivery in early years.
- The commonwealth government has been investing in primary services for early years – through a range of initiatives addressing broader issues of vulnerability. One would anticipate that this spending, over time, has increased.
- Local government also has an investment in the infrastructure associated with service delivery of service types such as kindergarten and maternal and child health which adds further confusion for service users
- In relation to service delivery, all levels of government costs have increased but the rate of access to services in the rural context has not necessarily translated into more or improved quality of service. Families will often refer to the term "the revolving door", when they are required to navigate a range of providers and programs to 'get what they need'. Families are then left to navigate systems – be they primary, secondary or tertiary - with little or no ongoing community support

This middle ground (services where there is market failure and a lack of universality) of child and family support, from a user perspective, is missing in Australia's approach – particularly in the rural context – for vulnerable children and families.

There is a much greater role for integration of the range of programs which, over many years, have been spread across a range of providers who have built specialisation in the provision of psycho-social support is needed.

To address the 'missing middle' within a rural and place based context this requires a much greater involvement from, and investment in, trans-disciplinary child and family services, programs and practitioners. These transdisciplinary services would comprise of social workers, psychologists, peer workers, occupational therapists, nurses, kindergarten teachers, early childhood

educators, Family Service workers and allied health assistants operating under a model of delegation with the relevant allied health professional. There is strong research and evidence, particularly in the field of disability in relation to the effectiveness of a transdisciplinary and key worker approach in delivering outcomes for children and families. This model is actively promoted by the National Disability Insurance Scheme and has been endorsed by the commonwealth. (Refer to further reading list).

These services provide assessment, treatment, case management and support services to children and families. They could also have a capacity to assist in responding to crises – when the child and family needs them. This type of response, in the rural context, is not currently achievable in the way the system is structured and funded.

Peer workers and allied health assistants would be an additional element to the model, ensuring that scarce and valuable professional staff can work to the top of their practice.

In defining the ‘missing middle’ using the early years and rural lens the key differentiating factor is that the responsibilities for early years support for children and families falls between federal, state and local governments. ***Nobody currently ‘owns’ or has responsibility for early years services and the missing middle.***

This proposal seeks to address who ‘owns’ or has responsibility for early years services – in a parallel way which is currently achieved through the MPS model and approach to aged care. As a parallel, this model proposes that ownership is achieved through a tripartite agreement between state, commonwealth and the community - with a specified boundary. A unique addition and extension to this proposed model which see the potential inclusion of local government. A model of this nature would demonstrate joined up government at all levels partnering with the community. This model is already demonstrated as extremely effective within the aged care context.

A range of audit reports from the respective state and commonwealth auditor general offices is provided in the further reading list at the bottom of this proposal which details the structural tensions within the system with existing policy and funding approaches or ‘the missing middle’ in the Early Years context.

The original intent of Multi Purpose Services

The original Multi-Purpose Service Program (which focusses on aged care) is the outcome of a joint Commonwealth-State taskforce which was established by the Australian Health Ministers’ Conference in March 1991.

The principle behind the funding of a MPS is striking in its simplicity. Basically, Multi-Purpose Services pools funds in an area where there is market failure. An Early Years MPS would adopt a parallel approach.

By way of demonstrating the methodology which MTHCS already has in place for aged care the following information is provided as context:

- The Commonwealth provides a flexible care subsidy for 50 flexible high care places, 35 flexible low care places and 5 flexible community care places determined in accordance with

the Health Services Act 1998, the Approved Provider's eligibility for Flexible Care Subsidy for the Sites under section 50-1 of the Act and Calculated in accordance the method specified under section 52-1 of the Act (Commonwealth's Contribution). The Commonwealth's Contribution will be pooled with the State's Contribution in accordance with 15.20 (2) of the Principles to provide a mix of health care services which reflect the needs of the Mallee Track community and the Sea Lake/Buloke Shire (North) communities.

- The State's contribution is per annum and is broken down into program areas such as Acute Health, Aged Care, Home and Community Care (HACC) and Primary Health. A scope of services is identified within the funding agreement – but the funds are pooled to enable the MPS (Community) to determine the best service mix to deliver the range of aged care, health and community services they need, but which are unable to be sustained separately. The service types within the current model include Population health, Allied Health (physiotherapy, Podiatry, Occupational therapy), mental health support, Community development, Youth support, social support programs and HACC services such as District Nursing, Home care, personal care, delivered meals, Planned Activity Groups, home based respite and volunteer coordination.
- The money pooled between state and commonwealth is provided to MTHCS as the local community controlled Multi-Purpose Service body. MTHCS then allocates those funds according to community needs to meet aged care and health needs. The funding provided is based on the amount standard programs would allocate to a community. This tripartite agreement demands compliance with a range of reporting and accountability reporting measures to ensure appropriate allocation and acquittal of pooled funds. MTHCS, as an MPS, is also subject to industry standard quality and financial reporting requirements.

Applying the methodology from the aged care sector with the lens of a potential Early Years MPS context, the parallel model would see the Commonwealth and State contribute funding to for all Early Childhood and Family style services and program in the designated catchment area.

Universality would be the key feature. This figure would be added to by funds from service users in programs such as long day care and kindergarten (an income stream from the community). The final agreed figure would take into account all Child and Family Services as detailed at schedule 1. That money would then be provided to the local community controlled MPS which allocates these funds according to community need to meet child and Family needs. The funding provided is based on the amount standard programs would allocate to a community.

A unique feature of this proposed model is the addition of local government. This would require a local analysis of potential infrastructure contribution, together with a ratepayer contribution for services where this already occurs to support services such as Maternal and Child Health.

The proposed Early Years MPS model is an ideal opportunity for innovation, universality and 'joined up government' – partnering with the community to address issues associated with market failure.

Pooled funding within the aged care model has had a number of major benefits (refer to further reading list). These have included:

- Increased Aged Care funding. A nursing home of less than twenty beds is not likely to be viable. Small hostels are also limited in the extent of their services. This means that many

small communities do not have residential aged care services. Instead people in those towns either have to move to the regional centre or stay in their local hospital. Under Multi-Purpose Services the Commonwealth can determine the number of aged care places which a community needs and the average funding which those places would attract and contribute that amount to the funding pool. In this way the overall amount of funding for the community can increase.

- Provision of service can be more flexible. The demand for services will fluctuate from time to time. In larger communities this is not such a concern. If only ten people need a nursing home in one area, twenty people might have those needs elsewhere. The next year the reverse may be true. Overall, thirty nursing home beds will suffice. Multi-Purpose Services allow the flexible use of residential care to adapt to variable demand - a particular room may be used by someone receiving nursing home care one month, hostel care the next, and be used by people recovering from acute services after that. Multi-Purpose Services funding also allows communities to use funds to increase community-based services to reduce the need for residential care. In effect, the MPS approach allows rural communities to trial the delivery of nursing home services at home and in intermixed residential care settings. This is an approach that we are beginning to develop in metropolitan areas as well.
- Another important benefit is that for small communities, the standard accountability requirements for program funds often impose a heavy burden upon a small service because the time involved does not decline in proportion to the smaller number of clients. MTHCS as a MPS is subject to one set of accountability requirements for the whole service, set at a minimum level to ensure suitable monitoring of the project and minimum administrative burden.

Based on feedback provided by key funders who have reviewed our proposal to date, the language of pooled funding which was used at the time of MPS inception will be changed to needs based as this better reflects the policy preferences of the current funding climate. This is also reflective of the preferred funding models for services such as schools where equity based funding has flowed to improve outcomes for students.

The potential for needs based funding within an early years context would have similar benefits as already demonstrated within the aged care model. Additionally, MTHCS would see that this model has the potential to extend and deliver other benefits such as:

- Increased efficiencies for Early Years funding. An Early Years service (such as Maternal and Child Health) is not likely to be viable when delivered from a bigger 'hub' resulting in poorer developmental outcomes for children. Early Years services already present within the catchment are also limited in the extent of their services. This means that many children and families within small communities do not have ready access to services at the time it is required. Rather, it is delivered at the time that the contracted provider can queue demand. As a result people in the catchment either have to move to the regional centre or accept the level of service available within the current system. Under an MPS model the partners determine the service mix which a community needs based on population planning methods and the average funding which those services would attract and contribute that amount to the funding pool. In this way, the overall amount of funding for the community can increase as there is reduced overall cost to government expenditure.

- Multi-Purpose Services funding allows communities to use funds to increase community-based services to reduce the need for secondary and tertiary service involvement. In effect, the MPS approach allows rural communities to trial the delivery of a range of services at home and in intermixed early childhood education and care settings.

Early Years MPS program objectives

The objectives of the MTHCS MPS model as stated in MTHCS current service agreement are:

- Improved access to a mix of health and aged care services that meet community needs;
- More innovative, flexible and integrated service delivery;
- Flexible use of funding and/or resource infrastructure within integrated service planning;
- Improved quality of care for clients; and
- Improved cost-effectiveness and long term viability of services.

The objectives of an Early Years Multi-Purpose Service Program mirror and parallel the aspirations of the aged care model. This would be as simple as replacing the terminology of Early Years where the term aged care currently appears. As such, the objective of an MPS with an Early Years focus would have the following objectives:

- Improved access to a mix of Early Years services that meet community needs;
- More innovative, flexible and integrated service delivery;
- Flexible use of funding and/or resource infrastructure within integrated service planning;
- Improved quality of care for children and families; and
- Improved cost-effectiveness and long term viability of services.

This service type and model would be lead to:

- a better, more appropriate mix of services to meet the needs of children and families within the designated catchment;
- improved quality of service access and delivery for children and families of the local community; and
- provision of Early Years services in a cost effective and co-ordinated manner.

Early Years MPS Service principles

The service principles of the current MTHCS MPS model for Aged Care as stated in our current service agreement are:

- All users or potential users of the service will have equitable access to services
- All users or potential users of the service will be provided with information on the operation of the service and assistance available from the service;
- Aged and Community Services will be provided in a way that is consistent with the Charter of Resident's Rights and Responsibilities or the Charter of Residents' Rights and Responsibilities for Community Care, depending on the context in which the Services are delivered
- Services will be provided in a way that is culturally appropriate and recognises the rights, dignity and independence of service users;
- Consultation with the local community on health and aged care needs will be undertaken on an ongoing basis; and
- The service will be managed and services delivered in a way that demonstrates a commitment to the National Quality Improvement Framework for Multipurpose Services, and continuous quality improvement through participation in an externally recognised quality improvement cycle for the full range of services provided.

The Principles of an Early Years Multi-Purpose Service Program mirror and parallel the aspirations of the aged care model. This would be as simple as replacing the terminology of Early Years where the term aged care currently appears. As such, the principles of an MPS with an Early Years focus would be as follows:

- All users or potential users of the service will have equitable access to services
- All users or potential users of the service will be provided with information on the operation of the service and assistance available from the service;
- Early Years Services will be provided in a way that is consistent with the Charter of Children's Rights and Responsibilities (or nominated charter), depending on the context in which the Services are delivered
- Services will be provided in a way that is culturally appropriate and recognises the rights, dignity and independence of service users;
- Consultation with the local community on Early Years needs will be undertaken on an ongoing basis; and
- The service will be managed and services delivered in a way that demonstrates a commitment to the National Quality Framework for early Years services (or nominated framework) and continuous quality improvement through participation in an externally recognised quality improvement cycle for the full range of services provided.

Potential scoping of needs based funds

The information below gives a 'sketch' of the service types that could be considered 'in scope' for an Early Years MPS. This is based on our current funding and service agreement for aged care – and which is available for review on request. This is also referenced in the reading list at the bottom of this proposal. The tables as indicated below are parallel to those which appear in our funding and service agreement. For the purposes of this proposal, no set amounts of funding or contribution are specified – the tables are included as a way of demonstrating the modelling.

The scoping of needs based funds in the aged care context specifies specifically within our current funding and service agreement that: "The Commonwealth's contribution will be needs based with the State's contribution to provide a mix of Early Years services which reflects the needs of the Mallee Track community, the Sea Lake/Buloke Shire (North) community and the Manangatang/Swan Hill Shire (Far West) communities." (Refer to copy of schedule 1 below) An early years MPS would require the same measure of specification to ensure the 'bounding' of the MPS – reflective of the commitment of joined up government and the community 'owning' Early Years services.

As discussed earlier in this proposal, this model has a unique angle to our current experience as an MPS where a contribution would also be required by local government within the designated catchment area – but would only be considered where a service is currently 'topped up' by a ratepayer contribution or further consideration may need to be made in relation to infrastructure where Early Years Services are operated from that are currently owned by local government. In this case, MTHCS currently operates across 4 local government areas – Mildura Rural City Council, Swan Hill Rural City Council, Buloke Shire and Yarriambiack Shire.

Based on our current experience as an MPS in the aged care sector we have applied to following questions and 'decision-making tree' when considering what Early Years services could potentially be in scope and supported for delivery by a local workforce. This has been based on our experience in the aged care sector. Considerations when attempting to identify what may be included for pooling of funds in an Early Years MPS model are:

- Is there a need, however small, in the catchment for a particular service? If so, is the service size so small that it is not viable as a stand-alone entity? Would integration of the workforce or service type with other service types within the designated catchment enable viability?
- What are the population planning principles which confirm a need, however small or large, for a service type?
- Does the service present an opportunity for investing or training a local workforce with a particular set of skills – generalist or specialist?
- Where the service is identified as 'specialist' by the funder and unable to be viable without size, can technology and the principle of delegation of scope of practice (refer to further reading at the end of this proposal list) play a part to allow for investment in the local workforce?
- Is a particular qualification required to deliver the service type? If so, does any such person exist within the current workforce with the qualification to deliver the service? If not, can a person within the current workforce undertake training to be able to deliver the service?

- Does the service type allow for delegation of scope of practice – or potential for development of the delegation of scope of practice?
- Does a service type already exist within the designated catchment? If so, would integration of another service within the designated catchment contribute to the viability of the service and workforce?
- Is there a direct economic benefit to the funder by including the program or service in the scoping of needs based funds? Does it reduce items such as travel and other overheads which are currently incurred by the funder in the current funding models? If so, does it allow for more services to be delivered locally and for better value for the funder?
- Is there an economic benefit to the catchment by investing in the local workforce through integration of the service? That is, does it create a job which did not otherwise exist? Does it create a job for a local person who will spend their money in the local economy – resulting, indirectly, in sustainability of the community over time?
- Is there a direct benefit to children and families in the catchment by having better and more direct access to services rather than having to rely on the service deliverer to queue demand? Can wait times for services and program be reduced for children and families?
- Can issues of vulnerability and delivering service ‘in place’ be addressed earlier by using a tool such as the continuum of need or Best Interests Case Practice Model (refer to further reading list) to determine and map service demand and type for potential inclusion in the MPS model?
- Does MTHCS already have an existing funding and service agreement with the funder of the program type? If so, are all the requirements for acquittal, service reporting and quality being met for programs which are currently being delivered by MTHCS?
- What might be the extra service reporting and compliance requirements to be place on MTHCS as a result of including the program or service type in the scoping of needs based funds? If no extra requirements are required, service type may be considered. If extra requirements are to be met, can MTHCS as the MPS reasonably meet the requirements?

As the factors are identified, these will be linked to the service objective and principles leading to a starting point of service types which could be considered. If a direct link to improving developmental outcomes for children is able to be identified as a result of access to an integrated service at the earliest point, then the program has been considered in the scoping of needs based funds.

The list of potential services as listed in this document is not intended to be exhaustive. As our experience has shown in the aged care context, this scope has grown and changed over time as the needs in the community have changed. However, the questions in regards to service scoping and workforce capacity have, largely, remained the same.

The MPS model objective, principles and scoping in Early Years in the location of Ouyen – an example

The following information is taken from a capital works application provided to the State government to support an integrated, MPS style of service for the community of Ouyen. This project has been earmarked for funding in the current capital works round. This provides an example of how individual streams of funding are currently coming into the community – and the interrelated nature of the model currently in existence.

Project description

This project proposed to extend the building at the Mallee Minors Childcare Centre - Ouyen. This will include:

- Extension of the building with an addition of a reception/multipurpose area to accommodate the establishment of a 3 and 4 year old kindergarten program as well as Occasional Care at the service. The reception/multipurpose area will be able to accommodate the traffic requirements of extra children attending the centre, together with the capacity to accommodate the local playgroup as an integrated model with long day care and kindergarten.

Services that will be delivered from the Mallee Minors Childcare Centre – Ouyen will be Kindergarten (3 and 4 year old), Long Day Care, Occasional Care and supported playgroup.

This project will refurbish the existing environment and improve the quality of the learning environment to enable all Early Childhood Education and Care (ECEC) services operating – current and planned - from the premises.

Access and participation

Mallee Minors Childcare Centre – Ouyen is located in the southern part of the Mildura Rural City council. Ouyen is a commercial centre for regional grain and lamb producers in the Mallee. It is situated on the crossroads of the Calder Highway (Melbourne-Mildura) and the Mallee Highway (Sydney-Adelaide). The closest major centres are Mildura 110 kms to the north, Swan Hill 150 kms to the east, Bendigo 300 kms and Melbourne 440 kms to the south.

Mallee Minors Childcare Service – Ouyen - is a two room facility which offers a long day care service. Long Day Care services are offered over 5 days a week and up to 9 hours per day.

Mallee Minors Childcare Centre is one of two Early Childhood Education and Care (ECEC) services in the Ouyen community. The closest location of neighbouring ECEC services are at Manangatang and Underbool. Manangatang and Underbool are located 100km round trip respectively if families are unable to access an ECEC service (long day care or kindergarten) at the either of the services located in Ouyen.

This proposed project will assist with meeting potential unmet demand for additional kindergarten places in the community of Ouyen. Ouyen currently has a stand alone pre-school which is licensed to accommodate up to 27 children. With the planned onset of new staffing ratios for services under National Law at the start of 2016, the ability of the Ouyen Preschool to accommodate enrolments over 22 will impact on service viability. As a result, this will require the introduction of a demand management strategy at the Ouyen Preschool. The demand management strategy may require the 'capping' of places offered at the kindergarten, potentially resulting in children (particularly those identified as vulnerable) missing out on a funded year of kindergarten. If a child is a 'late enrolment' in the stand alone kindergarten service after the commencement of the kindergarten year, their ability to access the program may not be able to be accommodated at the Ouyen Preschool due to licensed places already being filled with prior enrolments at the service.

This proposed project will allow for Mallee Minors Childcare Services – Ouyen - as the local long day care provider to offer additional kindergarten places to ensure that children within the local community are not 'displaced' due to viability concerns of the stand alone preschool.

Demand for kindergarten places in the community of Ouyen is stable – with years where demand can be higher or lower depending on birth rates and population movement over time. The Population analysis of the Mildura Rural City Council means that the Ouyen Preschool will continue to be classified as a rural service – but in specific years of high demand, will be placed under viability stress if required to staff at higher levels when put into the 'just over' bracket as far as child : staffing ratios are concerned.

The current facility at Mallee Minors Childcare Centre – Ouyen was not built for its current purpose. The site is an old VicRoads depot which was modified for the purposes of Early Childhood Education and Care and is now owned by Mallee Track Health and Community Service (MTHCS). Over time, and with the extension of the long day care service, the building limits the quality of what can now be offered in the children's program due to its original design limitations.

The anticipated building extensions will significantly refurbish and improve the quality of the learning and operational environment – including the ability to accommodate higher traffic requirements for the introduction of an integrated kindergarten program with the long day care service. The proposed project will enable a potential new kindergarten program to be offered in years where the 'overflow' from the stand alone pre-school cannot be accommodated due to viability considerations. The extension of the building will include the addition of a reception/multipurpose area to accommodate the potential establishment of a 3 and 4 year old kindergarten program as well as occasional care at the service. The reception/multipurpose area will be able to accommodate the traffic requirements of extra children attending the centre, together with the capacity to accommodate the local playgroup as an integrated model with long day care and kindergarten.

MTHCS currently operates integrated models of kindergarten and long day care at two other sites within the MRCC municipality – Underbool and Murrayville. The models have been effective in addressing the viability and demand management concerns within the rural context. The offering of an integrated kindergarten and long day care program in Ouyen will assure the viability of the stand alone preschool in the community whilst ensuring equity and access for all children eligible for a funded kindergarten place.

Vulnerability and disadvantage

MTHCS has undertaken a comprehensive data analysis of the Ouyen community, including data such as the most recent Census and Australian Early Developmental Index (now known as the AEDC). Based on this analysis the community of Ouyen is experiencing the high levels of disadvantage and sits in the 2nd decile of disadvantage – the most disadvantaged 20% of State Suburbs in Victoria. The AEDC data for the community of Ouyen presented the following themes:

- North West Mallee children through the 2012 AEDI data were assessed as more developmentally vulnerable than their LGA, State and national counterparts in three of five possible AEDI domains.
- In the domain of Social Competence 15.6% of North West Mallee children were developmentally vulnerable compared to their LGA (10.5%), state (8.1%) and national (9.3%) counterparts.
- In the domain of Emotional Maturity 9.4% of North West Mallee children were developmentally vulnerable compared to their LGA (7.8%), state (7.2%) and national (7.6%) counterparts.
- In the domain of Communication Skills and General Knowledge 12.5% of North West Mallee children were developmentally vulnerable compared to their LGA (10.3%), state (8.0%) and national (9.0%) counterparts.

Anecdotal analysis of kindergarten enrolments in the Ouyen community in 2014 and 2015 indicate that over those calendar years there have been a total of 5 Early Start enrolments at the service. Early Start enrolments are children who are able to be identified by the service director, or self-identified by the family, where children are:

- Known to Child Protection of Family Services/Child FIRST
- Identify as Aboriginal and/or Torres Strait Islander

The data known about the Ouyen community together with the known Early Start enrolments at the stand alone kindergarten service indicates that there are a number of families accessing the two ECEC services in the community where there are key indicators of disadvantage, vulnerability and developmental trauma.

The ability of the Mallee Minors Childcare Service to offer more places and a different style of program will allow for vulnerable and disadvantaged families in the community choice and access to ECEC services (including a funded kindergarten program) from an earlier stage.

The potential proposed integrated nature of the service means that the structured kindergarten program is offered within the LDC setting. This has the potential to address barriers experienced by vulnerable families such as:

- requirements for 'shuffling' between kinder and a LDC service – if a full day of ECEC is preferred. Vulnerable families often experience difficulties with transport (particularly in Ouyen where no public transport is available) and getting their child to an ECEC program – whether that be kinder or LDC;
- improving the quality of the program (including developmental outcomes) for children as there will be consistency of planning and educator's as opposed to the child/family having to 'move' between ECEC services in the community
- Transport to and from the potential integrated kinder and LDC service is offered at a nominal charge – increasing the accessibility for children and families
- A seamless experience for the child and family due to the integrated nature of the program. This means the child and family is less readily identifiable as 'vulnerable' or 'different'
- The child and family will only required to engage with one ECEC service – rather than 2. This reduces the requirement to 'tell their story' more than once – but allows for consistency in addressing developmental goals and outcomes for the child. This also have the flow on effect of the family having to develop a relationship with one service, rather than two, within the local community

MTHCS has undertaken a small action research evaluation of the developmental outcomes as a result of the integrated nature of the ECEC program which is offered in neighbouring communities of Underbool and Murrayville. This action research has confirmed that the developmental outcomes for children accessing the integrated programs are the same as children accessing a stand-alone kindergarten program. The feedback from the local school is that the children attending the integrated program are 'ready to learn' on arrival at school and after participating in the integrated program.

Mallee Minors Childcare Centre – Ouyen – is a Budget Based Funded (BBF) service. The presence of a BBF long day care service in Ouyen is significant. BBF programs are located in rural and remote communities where the market may not otherwise support the viable operation of a private provider of early childhood services. Services funded under the BBF programme are not generally approved to administer CCB on behalf of families, and families using these services are not eligible to receive CCB or Child Care Rebate (CCR) to assist them with the cost of their fees. Fee policies vary across services depending on the profile of the local community. In the case of the long day care service located at Ouyen, families utilising the service pay a 'gap fee' to use the service. The existence of a BBF service in Ouyen is recognition at a Commonwealth level of the existence of vulnerability in the Ouyen community – and subsequently, their support to the developmental outcomes for children in a community where such an ECEC service would not otherwise be viable.

The existing BBF service offers a pick up and drop off service around the community of Ouyen for children and families wishing to access the service. This service is provided at a nominal charge to families. This has assisted the ECEC to engage vulnerable and disadvantaged families and this service will continue to be offered.

Integration of services

The Mallee Minors Childcare Service - Ouyen currently offers a long day care service. The Ouyen Pre-school also operating within the community offers a stand alone preschool program. Mallee Track Health and Community Service (MTHCS) is the approved provider and licensee for both ECEC services. This has allowed for an integrated style of demand management and planning in relation to ECEC services in the community.

With the onset of new staffing ratios for services under National Law at the start of 2016, the ability of the Ouyen Preschool to accommodate enrolments over 22 will impact on service viability. As a result, this will require the introduction of a demand management strategy at the Ouyen Preschool. The demand management strategy may require the 'capping' of places offered at the kindergarten, potentially resulting in children (particularly those identified as vulnerable) missing out on a funded year of kindergarten. If a child is a 'late enrolment' in the kindergarten service after the commencement of the kindergarten year, their ability to access the program may not be able to be accommodated at the Ouyen Preschool due to licensed places already being filled with prior enrolments at the service.

This proposed project will allow for Mallee Minors as the local long day care provider to offer additional kindergarten places to ensure that children within the local community are not 'displaced' due to viability concerns of the stand alone preschool.

The introduction of an integrated kindergarten program at the long day care service will balance the viability and demand management issues for both services – whilst ensuring no child (vulnerable or otherwise) misses the opportunity of a funded kindergarten program.

MTHCS has operated an integrated program of kindergarten and long day care at neighbouring sites – Underbool and Murrayville. This model has been in operation since 2012.

The proposed project will allow for MTHCS to extend the offering of ECEC services to the Ouyen community and may include the offering of a 3 year old program over the course of a whole year. 3 Year old kindergarten is currently only offered at the stand alone preschool for 2 ½ hours for the final 10 week term.

The addition of a reception area and multipurpose space at the Mallee Minors Childcare Service – Ouyen - will allow the potential for other visiting early childhood services to the community to consult with children and families at the service. Visiting early childhood services to the community currently use consult spaces at other locations (not within ECEC services) within the community which are less child and family friendly. Any visiting service which comes on site to observe children, is limited to a small consult space within the non-licensed space. This space is small and less than ideal for the purposes of assessment with children and families.

The reception area and multipurpose space has the potential to accommodate the following visiting services and ECEC services in the Ouyen community who may be seeking a suitable space to operate or undertake consults with children and families. Potential services include:

- Maternal and Child Health

- Pre-school Field Officer
- Family Services and ChildFIRST
- Early Childhood Intervention Service
- Noah's Ark
- Mallee Family Care – any funded family and child service
- Allied health services including speech pathology and occupational therapy
- RFDS mobile programs and services such as mobile dentistry
- Ouyen Playgroup
- Learning Library

Mallee Minors Childcare – Ouyen has recently been successful in securing further additional places to extend the service offering to include occasional care. The service model for this is still being development in preparation for delivery. This will add value to the proposed suite of services being able to be offered at the one site.

Other potential services which could be developed and delivered following the completion of this capital works project may include:

- Parenting groups or programs
- Supported playgroup (if identified as a need in the local community)
- Visiting counselling services
- Community meeting spaces
- Adult Education programs – including the delivery of accredited training in Early Childhood Education and Care. This has potential to be supported by our partnership with our current RTO who is training our workforce.

Connection or co-location with government schools

The proposed project will not be co-located with a government school. However, both ECEC services in the community of Ouyen have strong connections with the Ouyen P-12 College. This has included peer support for children who have accessed the Early Start program and have subsequently transitioned into the mainstream education system.

The Ouyen Preschool has a comprehensive transition program and, due to the rural nature of the community, has the ability to work closely with children, families and staff at the Ouyen P-12 College. The establishment of a kindergarten program at the Mallee Minors Childcare Care Service will require the establishment of a transition program for children who will attend the Ouyen P-12

College. The long day care service has existing partnerships with the Ouyen P-12 College which will support the establishment of a transition program. The partnership with the college includes:

- Offering of school based apprenticeships in Early Years to students at Ouyen P-12 College
- Hosting of students on work experience
- Offering of community projects for students at the college to complete at the long day care service. This has included interactions with children and staff at the service.
- Students undertaking observations visits to the long day care service to support their curriculum requirements in relation to health and human development

Children who attend the Mallee Minors Childcare Service and who access the integrated nature of the ECEC program will have this experience paralleled at the Ouyen P-12 College where classes are integrated to assure the viability of the educational facility.

At the time of preparing this application, information from the MRCC Municipal Early Years Plan was unable to be included. The draft plan was available at the end of 2015 for community comment. Subsequent changes as a result of the consultations are currently being made and the plan is currently awaiting endorsement of council prior to release to the broader community.

Partnering arrangements in the Mallee – achieving The Education State

MTHCS has progressed partnering arrangements within the Mallee area to work with other providers who are located in place. A formal partnering agreement has been ratified by Robinvale District Health Service (RDHS) – our neighbouring MPS. This has meant the addition of a broader boundary whilst staying true to the principle of needs based funds (which is an MPS principle). The goals of this agreement are:

- To work with all levels of government and public sector to place respective services as the preferred deliverer and provider of services within the specified boundaries
- To provide a cost effective option to any government or public sector funded provider for the provision of services to the communities within which we work within aforementioned boundaries
- To extend the scope of the budget based/block funding model more broadly than aged care and to include any state, commonwealth or local government funded service which is delivered within the specified (joint) boundary of this agreement
- To identify all service currently funded provided within the boundary and to operate the agreement according to the principles of the agreement

A full copy of the agreement is available on request.

The Education State policy platform requires all schools to work towards:

- Integrated, mutually reinforcing systemic reforms
- Consistency in reform effort ('staying the course')
- An evidence-informed, system-wide approach to school improvement
- Addressing disadvantage and need
- Strong system capability and support and services for schools
- Developing the capacity of the school workforce
- Rigorous implementation and monitoring
- A focus on improved student learning outcomes, and what needs to occur in the classroom

MTHCS has met with the principal of the Ouyen P12 College to present the MPS concept as a way of advancing the Education priorities in relation to the Education State. As a result of these meetings, Ouyen P12 College have presented the concept of the needs based MPS model to other schools within the catchment who have indicated strong support for this concept – and have invited further discussion as a way of progressing our shared aspirations of joined up government services that are boundary based with a focus on the needs of children and families.

We are anticipating further discussions with respective school councils and principals to confirm the commitment.

Schedule 1

The following schedule appears in MTHCS current funding and service agreement as it pertains to aged care. It reads as follows:

The Commonwealth, State and local government will provide funding to MTHCS under the MPS program. The MPS program involves the pooling of agreed Commonwealth and State funding to provide a range of health, aged care and community services to targeted communities. The objective of this pooled funding arrangement is to ensure small rural and remote communities have access to a range of Early Years services they need, but which are unable to be sustained separately.

The pooled funding is to be used for the provision of the following services from the Ouyen site to the communities of Murrayville, Cowangie, Underbool, Walpeup, Ouyen, Torrita, Hattah, Tempy, Speed, Turriff, Patchewollock, Sea Lake, Nandaly, Berriwillock, Culgoa and Manangatang.

Community Services

Population Health

Physiotherapy

Podiatry

Occupational Therapy

Mental Health Support

Men's health program

Youth support

Community Development support

Social Support Program

Aged and Community Care

Flexible High Care places

Flexible Low care places

Residential respite

Home and Community care type services including Community nursing, District Nursing, Home Care, Personal Care, delivered meals, Planned activity groups, Home based respite, high and Low Care (provided in client's home) and volunteer coordination

Acute Services

Acute care

Accident and Emergency

General Medical

Asthma Clinic

Wound clinic

Slow stream rehabilitation

Palliative care

Medical Imaging

Pathology collection

Annual Budget (as it appears in the current MPS agreement)

Income streams	Annual budget
State contribution (not including HACC)	Details available on request
Commonwealth's contribution	Details available on request
HACC (Commonwealth and State contribution)	Details available on request
Other income (e.g. client fees)	Details available on request

Schedule 2 – Proposed scoping of needs based funds for Early Years MPS

Under this proposal, MTHCS would seek to have a schedule of a similar nature which reflects service types across Early Years services. The following terminology and scoping for services within the catchment has been duplicated from our aged care template using the Early Years lens - are is provided below for consideration:

The Commonwealth, State and local government will provide funding to MTHCS under the MPS program. The MPS program involves the pooling of agreed Commonwealth, State and local government funding to provide a range of Early Years services to targeted communities. The objective of this needs based funding arrangement is to ensure small rural and remote communities have access to a range of Early Years services they need, but which are unable to be sustained separately.

The needs based funding is to be used for the provision of the following services from the Ouyen site to the communities of Murrayville, Cowangie, Underbool, Walpeup, Ouyen, Torrita, Hattah, Tempy, Speed, Turriff, Patchewollock, Sea Lake, Nandaly, Berriwillock, Culgoa and Manangatang.

Please note the addition of a reference to local government which is not present in the MPS agreement for aged care.

Please note that MTHCS is also has funding and service agreements in place for delivery of some service types listed in scope for potential for needs based funding.

Commonwealth contribution – scoping of needs based funds for Early Years MPS

Program	Amount
Universal Early Years Services and programs	To be determined
Centre based services	MTHCS currently has a funding and service agreement for some service types
Communities for Children – various funding streams into all LGA areas covered by the MPS	To be determined
Other	To be determined

NOTE : Refer to Schedule 2

State contribution – scoping of needs based funds for Early Years MPS

Program	Amount
Breastfeeding support	To be determined
Pre—parenting support	To be determined
Disability services	To be determined
Child protection and family violence services	MTHCS currently has a funding and service agreement for some service types
‘Specialist’ services	To be determined

Universal Early Years Services and programs	To be determined
Centre based Services	MTHCS currently has a funding and service agreement for some service types
Perinatal emotional health and wellbeing	To be determined
Immunisation, health and dental care	To be determined
Governance, safety, quality and risk programs	MTHCS currently has a funding and service agreement for some service types
Navigator Pilot project funds	To be determined
Early Childhood Development consult role funds – linked with ChildFIRST and Family Services	To be determined
'Small Talk' project funds – currently distributed through Local Government	To be determined
Access to Early Learning project funds – currently distributed through CSO in Mildura	To be determined
Other	To be determined

NOTE : refer to schedule 2

Local government contribution – scoping of needs based funds for Early Years MPS

Program	Amount
Ratepayer % for MCH	To be determined
Ratepayer % for immunisation clinics	To be determined
Perinatal emotional health and wellbeing	To be determined
Capital items where Early Years services are operated from	To be determined
Kindergarten Operational Assistance Funding – small grants	To be determined
Central Enrolment system funding	To be determined
Other	To be determined

NOTE : Refer to Schedule 2

Community contribution – scoping of needs based funds for Early Years MPS

Program	Amount
Fees for service use – long day care	MTHCS currently has systems in place for fee for service where there are funded service types
Fees for service use – kindergarten program	MTHCS currently has systems in place for fee for service where there are funded service types
Other – to be identified	To be determined

Universal Early Years services and programs

- Best Start
- Achievement program
- Family support program (counselling) – commonwealth
- Regional Family Dispute Resolution service – commonwealth

- Specialised Family Violence program - Commonwealth
- Family Mental Health Support Services - Commonwealth
- Gamblers Help services
- Homelessness services
- Financial counselling services
- Community legal services
- Post separation cooperative parenting program
- Child contact service
- Regional Family Dispute resolution program
- Playgroups – including facilitated/supported models. Includes ‘small talk’ project funds
- Access to Early Learning project
- Navigator pilot project funds

Breastfeeding support

- Lactation consultation
- Domiciliary care
- Maternal and Child Health (Including enhanced)
- Infant feeding program

Pre-parenting support

- Pre-natal support classes
- Family Planning advice and support

Disability services

- Inclusion Support packages and facilitator function (Long day care)
- Kindergarten Inclusion Support Packages and facilitator function (kindergarten)
- Pre-school Field Officer
- Early Childhood Intervention services – tagged for inclusion in NDIS
- Carer support services – state and commonwealth

Child protection and family violence services

- Child FIRST – assessment and intake
- Family Services – including the full suite of Family Preservation, Integrated Family Services, Stronger Families, Cradle to Kinder, kinship care, parenting skills development services (PASDA), home based care – and others!
- Early Childhood Development consult role

‘Specialist’ services

- Domestic Violence services
- Sexual Assault services
- Early Childhood Intervention services
- Drug and alcohol services

- Child and Youth Mental Health Services (CYMHS)
- Homelessness support services

Centre based services

- Kindergarten – top up provided by Commonwealth for delivery of 15 hours. 10.5 hours funded by state
- Budget based funded long day care
- Family Day care (potential for in venue service delivery)
- Occasional Care

Perinatal Emotional Health and Wellbeing

- Maternal and Child Health (including Enhanced MCH)
- Perinatal Emotional Health Program

Immunisation, health and dental care

- Immunisation clinics
- School support services – OT, psychology, social work, speech pathology, physiotherapy
- Public dental service – including Smiles for Miles and Health promotion

Governance, safety, quality and risk management for Early Year Programs

- Early Years Management (formerly known as Kindergarten cluster management)
- Kindergarten central enrolment
- Kindergarten Operational Assistance funding – through local government

Attachment, references and further reading list

Early Years Profiles in the Mallee Track catchment – Ouyen, Underbool, Murrayville, Manangatang and Sea Lake. Sample for the community of Ouyen is attached to this proposal – please request copies for other communities if required.

The missing middle - <http://theconversation.com/from-asylums-to-gp-clinics-the-missing-middle-in-mental-health-care-46345>

Transdisciplinary practice and the NDIS - Please google “NDIS - Individualised transdisciplinary services for children with disability” to download the information sheet

MTHCS – Multipurpose Service Program funding and service agreement – available on request

Benefits of MPS approach – please google the following papers for download as they are not able to be included as weblinks. They are also available from MTHCS on request:

- The Multi-Purpose Service Initiative As An Example Of Flexible Service Provision – 3rd National Rural Health Conference 1995
- Suitability of the Multi-Purpose Service Model for Rural and Remote Communities of Australia (Anderson and Malone)
- The voice of public healthcare - ISSUES paper – 2009 - Multi-purpose Services
- National Rural Health alliance - POLICY PROPOSAL - EXPANDING AND STRENGTHENING THE MULTI-PURPOSE SERVICE PROGRAM

Principles of delegation of scope of practice -

https://www2.health.vic.gov.au/getfile/?sc_itemid=%7B86648C96-7C39-409F-A66D-BA910EABE61E%7D&title=Supervision%20and%20delegation%20framework%20for%20allied%20health%20assistants

Continuum of need – <https://czone.eastsussex.gov.uk/continuum>

Best Interests Case Practice Model - <http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/reports-publications/best-interests-case-practice-model-summary-guide>

Audit reports which detail system tensions – the missing middle

Department of Education and Training: Strategic planning -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2015-16/20151021-det-planning.aspx

Early Childhood Development Services: Access and Quality -

http://www.audit.vic.gov.au/reports_and_publications/reports_by_year/2010-11/20110525_early_childhood.aspx

Early Intervention Services for Vulnerable Children and Families -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2014-15/20150527-early-intervention.aspx

Programs for Students with Special Learning Needs -

http://www.audit.vic.gov.au/reports_and_publications/reports_published_in_2012-13/2012-13/20120829-special-learning-need.aspx

Local Government: 2014–15 Audit Snapshot -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2015-16/20151125-local-government.aspx

Shared Services in Local Government -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2013-14/20140528-shared-services.aspx

Asset Management and Maintenance by Councils -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2013-14/20140219-asset-management.aspx

Organisational Sustainability of Small Councils -

http://www.audit.vic.gov.au/reports_and_publications/reports_published_in_2012-13/2012-13/20130612-small-councils.aspx

Implementation of the Strengthening Community Organisations Action Plan -

http://www.audit.vic.gov.au/reports_and_publications/latest_reports/2013-14/20131016-community-action-plan.aspx

Carer Support Programs -

http://www.audit.vic.gov.au/reports_and_publications/reports_published_in_2012-13/2012-13/20120815-carers.aspx

Administration of Communities for Children under the Family Support Program -

<http://www.anao.gov.au/Publications/Audit-Reports/2012-2013/Family-Support-Program-Communities-for-Children/Audit-summary>

Improving Access to Child Care—the Community Support Program -

<http://www.anao.gov.au/Publications/Audit-Reports/2012-2013/Child-Care/Audit-brochure>

National Partnership Agreement on Remote Service Delivery -

<http://www.anao.gov.au/Publications/Audit-Reports/2011-2012/National-Partnership-Agreement-on-Remote-Service-Delivery/Audit-brochure> - transferrable principles for rural and remote areas

Indigenous Early Childhood Development. New Directions: Mothers and Babies Services -

<http://www.anao.gov.au/Publications/Audit-Reports/2011-2012/Indigenous-Early-Childhood-Development-New-Directions-Mothers-and-Babies-Services/Audit-brochure> - transferrable principles for rural and remote areas