

# Family Day Care and the National Quality Framework: Issues in Improving Quality of Service

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Family child care, or family day care (FDC), as it is known in Australia, is an important early childhood education and care (ECEC) option, as it offers unique services compared with other ECEC services such as greater flexibility, wider children's age range (0-12 years old) and differential operation procedures. In Australia, however, a new National Quality Framework (NQF) is in the process of being implemented in Australia. This will affect all ECEC services, including FDCs, through the application of National Quality Standards (NQS). How will FDCs respond to the major changes ensuing from introducing the NQF and NQS? We argue that there are several factors impacting on the quality of provision by FDCs over the longer term. These include workforce qualifications, carer-child interactions, systemic implementation processes and measures of quality. This paper will discuss the impact of NQF and NQS on FDC and will address issues where no specific quality improvement strategy is applied.

Key words : family day care, national quality framework, quality improvement

## Introduction

Home-based childcare was the dominant type of care for young children in Australia until the late 1960s (Robertson, 1984). However, at that time, and particularly the early 1970s, witnessed an expansion of the female

workforce as societal values changed and the female baby-boomers joined the workforce, necessitating a changed approach to childcare. Centre-based and some forms of home-based childcare grew rapidly reflecting these family structural changes in Australia, a phenomenon also evidenced in most developed western countries. Perhaps the most significant change may have been the demand for labour that saw women, including mothers of young children, participate increasingly in the workforce. Other factors contributed to the increasing demand for and ability of women to participate in the workforce

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including higher levels of education and the strong Australian economy which pushed up prices for the goods and services families require, particularly housing and education, which required women to seek more paid employment.

Another major structural change emerged in the 1970s that reflected the career expectations and aspirations of women. Women in this period became more career-oriented, independent and sought greater financial security than previous generations. The arrival of children, therefore, required increasing levels of supportive services to enable women's careers to be maintained. Similarly, changing family structures in modern Australia society, combined with limited extended family intergenerational support structures (such as grandparents supporting full-time working parents through home childcare), has meant that families are faced with the need for non-parental childcare alternatives. As well, some families prefer their children to attend non-parental childcare as a way of socialising them with other children from a younger age and exposing them to broader educative and social experiences.

A key consequence of these social changes was the increased demand for places in non-parental childcare both in centre-based and home-based care. To meet this during the 1970s and 80s, Australian governments developed appropriate regulations and funding models for mostly non-parental centre-based care. More slowly regulations included home-based care, or Family

Day Care (FDC) as it is now known in Australia. By the turn of the century the number of children in Long Day Care (LDC) was growing rapidly reflecting demand for longer hours of childcare. This trend has continued with LDCs but by contrast the numbers of FDCs has declined (see Table 1, p. 51). Further, the trend has been that FDCs have remained popular in the rural areas of Australia, relative to the growth of LDCs (see Table 2, p. 52).

This paper reviews developments in Early Childhood Education and Care (ECEC) in Australia with a focus on FDC in the context of the recently developed NQF and NQS. It examines FDC in relation to other forms of ECEC and identifies that the FDC model is more popular in regional areas of Australia. It raises issues about the FDC workforce and issues for the FDC approach with the application of the new NQS. To understand these issues and development this paper has reviewed the recent government developments including the NQS, reviewed appropriate literature and undertaken secondary data analysis of relevant information.

## **Background of FDC in Australia**

An accurate picture of FDC operations at national level is difficult to find, as FDC is a state and territory responsibility, like the United States. Consequently there has not been a nationally consistent recording system until recently. It is also difficult to find accurate information

on FDC operations due to the involvement of non-governmental arrangements (e.g., non-profit community groups, religious and charitable organisations), where reporting of information has been typically inconsistent. The earliest national evidence available from the literature was that by the 1976-77 a total of 114 Family Day Care schemes operated nationally and by June 1999, a total of 360 FDC schemes operated nationally (Wise & Sanson, 2003), an increase of more than double in twenty years.

### *Defining FDC in Australia*

In Australia, according to the Department of Education, Employment and Workplace Relations (DEEWR):

FDC services support and administer a network of FDC carers who provide flexible care and developmental activities generally in their own homes for other people's children. To assist with this, each FDC service receives operational support funding from Australian Government. Both not-for-profit and for-profit FDC services providers may operate a FDC service (DEEWR, 2011a, p. 7, 2011e, p. 10).

Similarly, Family Day Care Australia, the national peak body of FDC in Australia stated (2011),

- Children are nurtured and cared for in the homes of approved family day care educators who are resourced, supported and monitored by a coordination unit. This network of educators, coordination unit and families is collectively referred to

as a Family Day Care 'scheme'. Family Day Care schemes operate within a framework of local, government, community-based services or privately.

- Family Day Care's core business is caring for young children but it also provides care through to school age offering families the flexibility of having all their children cared for in one home. Care is offered during standard hours, before and after school, during school holidays, overnight and weekends (p. 1).

In Australia most FDC is home-based, however, in a limited number of cases FDC can operate in a venue other than the carer's home (usually a community venue). Moreover, in Australia, there is another type of ECEC service called In Home Care (IHC), similar to FDC, but where the IHC is subsidized by the Australian Government to provide professional care in the child's own home. Only a limited number of IHCs are available nationally, such as where a child is identified as experiencing difficulties adjusting to other forms of ECEC services. For example, if a particular child has a severe illness or disability and only home care is appropriate for the child then an IHC may be funded (DEEWR, 2011c).

### *What is an FDC Scheme and How Does It Work?*

A key feature of FDC functioning is that individual FDCs operate within a higher level administrative and support unit. An FDC scheme is a network of

carers, supported by FDC coordination units and sponsored by either local government or non-governmental agencies. The scheme is responsible for effective management including 'recruiting, training; supporting carers; monitoring care provision, and providing advice, support and information for parents' (DEEWR, 2011d). In addition, FDC schemes have responsibility for assisting administration of the payment of the Child Care Benefit (CCB), which is Commonwealth Government funding to assist families with the cost of childcare.

Consequently in Australia FDC schemes operate at two tiers (1) coordination units and (2) residences where children are cared for by a carer/educator. A *coordination unit* is a group of qualified and experienced childcare professionals who administer the FDC scheme. The *residence* is where a carer looks after children in his/her own home. FDC schemes are often responsible for monitoring a number of FDC residences in their local areas to ensure effective operation, quality and improvement of care in each residence.

### ***Regulatory Climate***

Australian ECEC is a multi-layered (across state/territory and commonwealth governments), complex system (i.e., overlapping responsibility between departments within different governments (for providing, funding and regulating childcare. Licensing and regulations for FDC vary in each state in Australia, like Canada and the US, so that there has

not been a consistent national historical standard until the implementation of the new National Quality Standard in 2012. FDCs were subject to state and territory regulatory frameworks until the end of 2011 and the Australian Commonwealth Government quality accreditation system linked to cost of care subsidy (i.e., CCB). The system is called the Family Day Care Quality Assurance (FDCQA), administered by the National Childcare Accreditation Council (NCAC) since 2001. Although the FDCQA system concluded at the end of 2011, it has become increasingly important over the past decade in demonstrating elements of quality.

As a measure of quality the FDCQA consisted of six quality areas - (1) Interactions, (2) Physical environment, (3) Children's experiences, learning and development, (4) Health, hygiene, nutrition, safety and wellbeing, (5) Carers and coordination unit staff, and (6) Management and administration. Although the FDCQA was not compulsory, participation in the FDCQA was required if a FDC scheme was to access funds from the CCB. Given the 'power' of CCB to help parents with the cost of childcare, participation in FDCQA was high. As at July 2010, 324 FDC schemes were registered with the NCAC to participate in FDCQA and almost universal participation (94%) was reached. Of these 76% of FDC schemes achieved 'High Quality' in all six quality areas (NCAC, 2010). This suggests that Australian FDC is of high quality, however, the dependence on this measure of quality is risky, as

there are a number of limitations on the system (Ishimine, 2009; Ishimine, Tayler, & Thorpe, 2009; Fenech, Sumsion, & Goodfellow, 2007). The problem here is that the Commonwealth funding is dependent on the quality outcomes. Further the linkage between Commonwealth funding and quality outcomes is poorly understood in Australia (Wise & Sanson, 2003), and using the FDCQA system in this way has attracted criticism (Fenech et al., 2007).

Despite the growth demands in non-parental care, early childhood education and care sectors in Australia are categorized as disorganised and offer a 'patchwork of services' in states and territories (Elliott, 2006, p. 2), use inconsistent terminology, experience a mixture of funding and regulations further complicated by overlapping commonwealth and state jurisdictions (OECD, 2001), especially funding models and licensing issues. To solve the "patchwork" problems, a new National Quality Framework was introduced in 2008 and a National Quality Standard implemented from January 2012. The new NQF and NQS in the context of FDC will be discussed in a later section.

### *Differences Between FDC and Centre-based Childcare*

Family Day Care is an approved approach to childcare and a part of a range of ECEC services in Australia, though it is seen as a unique entity. According to earlier definitions three major features distinguish FDC from Long Day Care (centre-based childcare

in Australia) - (a) flexibility of time, (b) able to cater for children from birth to 12 years of age, and (c) operated by a FDC scheme. Moreover, a FDC service can include a carer's own child or children and therefore the carer can simultaneously fulfil the roles of mother as well as educator of other children.

What are the attractions for parents to choose a FDC rather than other ECEC services? Flexibility plays a key factor in parental decisions, especially for shift workers and others requiring flexibility due to work conditions (e.g., nurses, doctors, taxi drivers & mining fieldworkers). As FDC is the only regulated childcare that can operate 24 hours a day, seven days a week in the carer's own home, and cater for children from birth to 12 years old usually offered in a mixed-age group setting, it has significant appeal to these work fields. Another attraction of FDC is that it is more 'natural' enabling all siblings to be cared for in the same place without segregation by age. For example, for families with many children, perhaps including a baby and school aged children, it may be an advantage to have them all cared for in the same place at the same time in a family context. In addition, Wise and Sanson (2003) identified that families from diverse cultural backgrounds often preferred FDC settings rather than centre-based childcare, which often dominated by a single culture.

### *FDC Demographics in Australia*

Recent data reveals (see Table 1), there are 105,380 children attending Family Day Care (FDC) and In Home Care (IHC) nationally, about a 12% proportion of all ECEC services as of June 2009 (DEEWR, 2011c). Meanwhile over 60% of all children attended approved Long Day Care (LDC) services at the same time (DEEWR, 2011c). Consequently when compared with LDC services, FDC constitutes a relatively small, though significant, proportion of all childcare services.

The number of FDC schemes has fallen slightly from 408 in September, 2005 (DEEWR, 2010a) to 389 in June, 2010 (DEEWR, 2011c) with overall numbers of children, given the nature of FDCs, likely to have similarly declined. By contrast, the pattern is different for LDCs as the number of centres has increased significantly by 24.8% from 4,751 in September, 2005 (DEEWR, 2010a) to 5,930 in June, 2010 (DEEWR, 2011c). The declining number of FDCs reflects the increasing domination of large corporate LDC markets in Australia, particularly in the major cities. This also reflects a difference in lifestyle between city and rural areas where the former is more dominated by women needing to work, and for longer hours, and thereby requiring the services of LDCs. By contrast corporate LDCs are less commonly located in rural areas where a tradition of FDCs, reflecting rural lifestyle, is well established. However, we will need to monitor the trends to see if this pattern in the

movement of FDC numbers is maintained over time.

The Majority of FDC schemes ( $n_1=327$ ) are concentrated in the eastern states (i.e.,  $n_{QLD}=112$ ,  $n_{NSW}=112$  &  $n_{VIC}=103$ ), so that only a small number of schemes ( $n_2=62$ ) are operated in other states (i.e.,  $n_{SA}=14$ ,  $n_{WA}=24$  &  $n_{TAS}=13$ ) and territories (i.e.,  $n_{NT}=5$  &  $n_{ACT}=6$ ) (DEEWR, 2011c). The trend of LDCs is similar as it reflects the national population distribution.

Australia, despite its image, is one of the most highly urbanized populations in the world with very high levels of metropolitan primacy of over 60% (i.e. more than six out of ten Australians live in the six metropolitan capital cities). The number of children using FDCs by region (see Table 2) shows a different pattern, where more than half (54%) of the children attend FDCs in major cities of Australia and 46% attend in regional and remote areas. By contrast, 72% of children attended LDCs in the major Australian cities while 28% attended regional and remote areas (DEEWR, 2011c).

So even though the population of children attending FDCs is smaller than LDCs, there is more active participation in FDCs in regional and remote Australia when compared with LDC services. This situation reflects a substantive difference in lifestyle between city and rural lifestyle in Australia. Urban areas in Australia are characterized by high levels of home ownership yet also some of the highest house prices in the world. In turn this requires most families to have two incomes to support large

Table 1

*Number of children attending LDC and FDC/IHC and number of services*

	September quarter 2005	June quarter 2010	Changes in percentage
Number of children attending services			
LDC	461,626	528,140	14.4
FDC and IHC	Data not available	105,380	n/a
Number of services/ schemes			
LDC	4,751	5,930	24.8
FDC and IHC	408	389	-4.7

*Note.* From "State of child care in Australia" (DEEWR, 2010a) & "Child care update" (DEEWR, 2011c)

mortgages. Similarly, urban areas are characterized by higher levels of female employment, often associated with female career aspirations, with consequential need for long hours of child care. FDCs tend not to meet this need adequately and over the past decade Australian cities have witnessed the rapid rise of large, and corporate, LDCs.

Similarly, the high percentage of children attending LDCs in the major cities reflects the nature of city life and higher demand for professional services as compared with rural areas. Further, the numbers of children attending FDCs in major cities and rural Australia are similar unlike the population distribution across these areas.

Participation in FDCs may be understood for many reasons including a lack of LDC provisions in regional and remote areas, family preference for FDC rather than LDC services or families in regional and remote areas needing flexible hour care (e.g., weekends, evening/overnight care, holiday care) due to work circumstances (e.g., mining operating 24/7). For many reasons FDC is more convenient for people in regional

and remote areas reflecting relatively higher numbers than in cities (see Table 2). Further research is needed to identify the specific reasons for these choices, as there are potential policy implications directed to prevent disadvantages for families and children living in regional and remote areas of Australia.

The average weekly hours for children using FDC is approximately 20 hours, which is less hours than the LDC average (26 hours/week) and this figure has been consistent over time (DEEWR, 2011c).

### *Workforce in FDC*

The level of staff qualifications in ECEC varies widely in Australia as it does internationally. There are many different types and levels of institutions in Australia that offer ECEC-related qualifications such as TAFE (technical and further education), post-secondary colleges (non-degree), as well as universities at both undergraduate and post-graduate levels. For qualification at a bachelor degree level, a person is required to pass either three or four years of university education. Alternatively qualifications at the

Table 2

*Number of children using ECEC services by region, June quarter 2010*

ECEC services	Major cities of Australia	Regional and remote Australia
LDC	381,470 (72%)	148,610 (28%)
FDC and IHC	57,020 (54%)	48,650 (46%)

*Note.* As children might use more than one service type in more than one region, therefore the total number was not equal the Table 1. From "Child care update" (DEEWR, 2011c).

Advanced Diploma/Diploma and/or Certificate III in ECEC-related qualifications are usually taken at TAEF or college levels of education.

Table 3 below was retrieved from the national ECEC workforce census data conducted during a particular reference week between June to July 2010 using a self-report questionnaire method mostly on-line. The response rate in FDC was very high - 95.8% from the selected schemes and 91.4% from selected staff. The results then used weighted data to represent estimated in-scope population of operating services for the reference week. A total of 13,575 staff were employed in a paid contact role nationally in FDC at that time.

DEEWR defined ECEC-related qualifications as early childhood teaching, primary teaching, other teaching, child care nursing (including mother craft nursing) other human welfare studies, behavioural science and other early childhood education and care related qualifications (2011d).

Table 3 presents the highest level of ECEC-related qualifications of paid contact staff in LDCs, FDCs and IHCs. It clearly demonstrates that FDCs have the least qualified paid contract workforce in the field. Paid contact workforce means staff members paid and working

as primary or other contact work with children. Volunteers or pre-service practice and primary chef are not included in the data.

Table 3 shows that only 4.5% of staff had a bachelor degree or above in FDCs. Even LDCs, where 60% of Australian children attend (DEEWR, 2011c), have less than 10% of staff holding a degree. These figures are a remarkably low rate when compared with other school sectors, such as primary and secondary education, where entry qualification has been the bachelor degree for some time. In FDCs, however, currently there is no formal qualification requirement for FDC providers when hiring staff. Furthermore, the financial disincentives for FDC providers to recruit higher qualified staff mean that very few are employed. In addition, even if some staff do hold qualifications, only just more than half of staff in FDCs and IHCs hold ECEC-related qualifications. While the percentage of degree holders does not transform directly to quality of FDC, research over the last two decades (e.g., Burchinal, Howes, & Kontos, 2002; Raikes, Raikes, & Wilcox, 2005) has consistently found that the qualification/level of education, regardless whether ECEC-related or not, is an important



Table 3.

*Highest level of ECEC-related qualifications of paid contact staff by service type – percentage.*

ECEC-related qualifications	LDC	FDC	IHC
Bachelor degree and above	9.4%	4.5%	6.3%
Advanced Diploma/ Diploma	31.9%	16.0%	13.4%
Certificate III/ IV	35.2%	36.0%	25.6%
Below Certificate III	1.8%	3.4%	4.7%
Total staff with an ECEC-related qualifications	78.3%	59.9%	50.1%
Total staff without an ECEC-related qualifications	21.7%	40.1%	49.9%

*Note.* Totals are weighted data, therefore they may not equal the sum of components. From “2010 National early childhood education and care workforce census” (DEEWR, 2011d).

variable predicting higher quality as measured by established measurements (i.e., Family Day Care Rating Scale: FDCRS).

### **National Quality Framework (NQF) Policy Implementation in Australia**

In recent years, Australia has experienced a major cultural shift in the provision of Early Childhood Education and Care (ECEC). Since the election of a federal Labor government in late 2007, quality reform in ECEC, as part of *The Education Revolution* (Council of Australian Governments: COAG, 2009), has been of high national priority. From that time the federal government’s commitment is arguably the most significant ECEC national policy initiative in Australian history. This commitment means the Australian Government, in partnership with all six state and two territory governments, ensures that all Australian children will have access to the best possible quality start in their life. The action has been progressing through

the introduction of a National Quality Framework (NQF), agreed to by the COAG in 2009.

The NQF represents a major reform in ECEC services, designed to deliver high quality ECEC programs for all children. The NQF consists of three parts – the introduction of a new National Quality Standard (NQS), the implementation of a national quality assessment and rating system and third, the implementation of the Early Years Learning Framework (EYLF). The EYLF has been implemented progressively from July 2010, with formal implementation of NQS and national quality assessment and rating system commencing the 1st of January 2012. DEEWR (2011b) has stated that “the National Quality Framework will require all providers to improve services in the areas that impact on a child’s development and safety and to provide families with quality information to help them make informed choices about services” (at their website). Even though the NQS and the national quality assessment and rating system were implemented from

early 2012, an all-encompassing system will take several years to achieve to meet the NQS criteria (e.g., staff-child ratio, staff qualifications requirements).

A challenge to the NQF is its implementation in all ECEC services (including, long day care, family day care, outside school hours care & preschool or kindergarten) across all states and territories in Australia. This is the first attempt to unify into one national regulatory system all ECEC services in all state and territory governments. With the intention of minimizing administrative processes for ECEC services and increasing cost-effectiveness through a national regulatory framework the NQF seeks to improve quality through a number of actions:

- Improved staff-child ratios to ensure each child gets more individual care and attention
- New staff qualification requirements to ensure staff have the skills to help children learn and develop
- A new quality rating system to ensure Australian families have access to transparent information relating to the quality of early childhood education and care services
- The establishment of a new national body to ensure early childhood education and care is of a high quality (DEEWR, 2011b).

A key feature for improving the quality of the ECEC experience nationally is the introduction of a national quality assessment and rating system, an innovative system that differs from the

Quality Rating and Improvement Systems (QRIS) in the US. The Australian system is a compulsory requirement for all licensed/regulated ECEC services at the national level, whereas the QRIS in the US is voluntary participation and the system varies by state (Zellman & Perlman, 2008). By contrast, none of the OECD countries had a compulsory national system at that time (OECD, 2006). The Australian system includes a national quality rating of seven key quality areas of ECEC:

- Educational program and practice,
- Children's health and safety, physical environment,
- Staffing arrangement,
- Relationships with children,
- Collaborative partnerships with families and communities,
- Leadership and service management.

The new system was implemented from early 2012 with a new set of Education and Care Services National Regulations. The regulations have been developed over the last few years through partnerships between DEEWR and state and territory governments producing a draft form available online for the public to see the links between quality assessment and rating system and national regulation to open to the public before actual implementation.

The quality assessment and rating system is also linked with the recently implemented Early Years Learning Framework (EYLF), especially the first quality area - (1) Educational program and practice. To understand the NQF holistically we need to see the links

with the National Quality Standard, quality assessment and rating system and Early Years Learning Framework. These three are closely linked each other, which is clearly different from accreditation system (i.e., FDCQA) by the National Childcare Accreditation Council (NCAC). As the term NQF involves an entire policy change, and the term NQS is the actual standard, the paper from now on discusses more specifically implementing the NQS.

### **Issues in Improving FDC Quality Under National Quality Standards (NQS)**

The NQS were applied across all ECEC services - preschool (kindergarten), LDC centers, Outside School Hours Care (OSHC), and FDC - from January 2012. This means all FDCs, a substantively different form of ECEC, have to comply with the same regulations and the quality rating system as other ECEC services despite being originally created under a different set of standards. The NQS is designed to provide a positive impact - better education and care systems but also more regulated, less administration (e.g., paper-work) and importantly improving quality. These are intended in the case of FDCs as very positive outcomes for everyone - children, families, carers, scheme manager and/ or unit coordinator. However, there will be a number of challenges over the early years of implementing the NQS with potentially negative consequences if

they are not addressed early. The NQS will be implemented over several years providing opportunities for ECECs, especially FDCs, to meet the required standards particularly staff-child ratios and staff qualifications.

#### ***Measuring Quality: Observation Visits***

A first concern is that, for FDCs, the approval to operate and the application of the quality assessment and rating system will be at scheme level with few observations at individual residence level. This is only the case for FDCs, not for LDCs, OSHCs and preschools (kindergarten). This is the same method as with the NCAC accreditation system and is a major weakness of that approach. As an FDC scheme can operate with a number of residences, achieving improvement and maintaining quality in all residences can be a complex, problematic process. Furthermore, this approach works on the assumption that observing at the scheme level will transform all at the residence level. However, measuring quality without specific observation visits to individual residences can produce only a superficial judgment of FDC quality. Furthermore, as the scheme selects the residence to be observed, not the quality authority, the outcomes are likely to be even more skewed. How will the scheme select a residence without bias?

Will the new NQS really measure FDC quality or does it measure how the scheme 'monitors' quality in each residence by assuming all residences are the same? These two questions are

quite different – the first question is a validity issue related to measuring quality and the second question is an evaluation of how the NQS is operating in FDC schemes. Indeed, the second question is not really about a measuring quality.

To solve the problem, a more complex system needs to develop, for example a system that is able to capture real quality information from all residences. Or at least random sampling of residences by the authority, rather than selected by the scheme itself, to avoid potential bias.

### *Workforce: Qualification and Quality of Staff-child Interaction*

The NQS has set a nationally agreed standard for staff qualifications designed to improve ECEC services. However, as seen in Table 3, FDCs have the lowest level of staff qualifications of all ECECs. This presents a major challenge to FDCs particularly as they come from a culture where care, rather than academic qualifications, has predominated. Cognizant of this, the NQS goals are expected to be achieved slowly by 2016 (DEEWR, 2009). Although there is time for FDCs to adjust their staff qualification standards, this would require a major cultural shift in FDCs given the current level of staff qualifications (see Table 3).

Research on the association between high qualifications and higher process quality, in turn reflected in enhanced children's cognitive outcomes, is mixed. Some indicates a positive correlation (Cost, Quality and Child Outcomes Study Team, 1995; Doherty, Forer, Lero,

Goelman, & LaGrange, 2006). However, other research shows improving qualifications do not necessarily improve teaching quality, or child outcomes (Early, Maxwell, Burchina, Alva, Bender, Bryant, et al., 2007; Whitehurst, 2002). The latter research showed that qualification requirements (structural quality) has significant but minimal impact on children's outcomes when compared with process quality (e.g., teacher-child interaction) and does not necessarily predict positive or improved child outcomes. This means that despite employing a carer with high qualifications, FDC staff will still be required to demonstrate high quality teacher-child interactions. Conventional wisdom suggests that in order to improve teacher-child interactions, staff will need to experience appropriate professional development.

Assuming that FDC staff will want to, or are able to, upgrade their qualifications is problematic. The NQS is not only administrative changes, but also an improvement of staff quality, requiring a transition from a traditional carer-approach to a more goal oriented educational approach. This will require a major mental shift in caregiver's mindsets across a variety of ECEC settings, including FDC. How will this function in FDCs? What is the incentive for carers to take further study to upgrade their qualifications? Then, what is the incentive for carers to improve the quality of their interaction with children?

A specific strategy will need to be established to ensure that FDCs address

the issue of qualifications and quality of staff-child interactions. We know that forms of professional development are an effective way to address the issue however, what we do not know is that how much and what kind of professional development works for FDCs specifically. The everyday routine of FDCs can be quite isolated as often only one carer attends the children, even though the FDC scheme may monitor a residence quite regularly. Consequently individual FDC carers will have less opportunity to develop a sharing network with other carers. This is potentially a serious problem for FDCs as a collegial network is very helpful in gathering professional information to share their knowledge acquired from professional development and more importantly to learn each other.

### *Implementation Process*

The successful implementation of NQS is an important issue to address especially for FDC as it is a unique ECEC setting. For example, as usually only one carer attends a residence there needs to be a specific strategy to implement NQS within FDCs. This should function not only at scheme level, but also at individual residence level. Effective implementation to influence professional practice requires not only a top-down approach, but also a bottom-up approach that focuses on the local level (Fullan, 2000; Miles, 1998).

At the moment, the NQS is being implemented through a top-down approach, though research has demonstrated this is

unlikely to entirely successful. Related evidence suggests there needs to be a bottom-up approach from the beginning (Miles, 1998; Fullan, 2000), so that NQS will spread earlier to practice and is likely to be more accurate. Meanwhile, with a top-down approach the new policy will be filtered through multiple layers starting with the federal government, state/territory governments, and FDC schemes to finally reach practitioners in FDC residences. The multi-layered process will increase the risk of misinterpretation of NQS without knowing if it is accurate. To overcome potential distortion and to ensure greater engagement of practitioners, we need a specific strategy for implementing NQS in FDCs.

### *Unintended Consequences*

The NQS is intended to produce several positive outcomes such as improving ECEC quality, building a national system and providing more regulated FDCs. However, there is an unintended outcome that potentially will have serious consequences. This important issue is the potential risk arising from increased costs to FDCs from the implementation of the NQS. When qualification standards increase, who will cover the cost of increased staff wages? If FDCs increase fees, will parents be prepared to pay more for FDC or who will subsidize the incremental on-going costs? Or if FDCs retain current salary levels, where is the incentive for carers to upgrade their qualifications?

The issue here is not only salary, but

also the status of the FDC carer as a more professional occupation rather than being seen as an unskilled or semi-skilled worker. This is a matter of recognition, not only a money issue, yet all these issues remain unaddressed.

What is needed is a clear plan from the government about the cost of childcare and the professionalization of the workforce. All families should be able to afford quality care regardless their financial background. While the federal government appears to be supportive, as seen in the NQS, in practice it may produce unintended consequences as there are some practical consequences that appear left behind in the shadow of this massive operation.

### *Dearth of Research*

There is a dearth of empirical Australian research in the field of Family Day Care. All the above issues need to be addressed based through a larger base of sound research evidence, though currently such a research base does not exist. There is an urgent need for quality research, particularly large-scale longitudinal studies on FDCs, to inform policy and address long-term outcomes.

Internationally, while there is little research available that specifically addresses issues of Family Day Care, there is more research evidence in FDCs when compared with Australia. For example, a major recent research study available from the Erikson Institute (Bromer, Van Maitsma, Daley, & Modigliani, 2009) studied Family Child Care network quality in Chicago.

They found that networks or organizational activities that offer continuous support and professional development to carers were a successful strategy to improving FDC quality.

Furthermore, several international studies consistently showed that children who come from low-income family backgrounds are more likely to receive low quality FDC (Bromer, et al., 2009; Kontos, Howes, Shinn, & Galinsky, 1995). The results have important policy implications for addressing the needs of disadvantaged children. Australia, however, lacks research evidence that indicates there is a gap between affluent and disadvantaged families in the quality of care that children receive. Given differences in FDC functioning with similar countries (e.g., US and Canada) there is an urgent need to conduct significant research addressing issues of quality specifically in an Australian FDC context.

### **Conclusion**

In recent years, quality in ECEC has become a significant government policy issue in the Australian education system. Since late 2007 the Australian Government, together with the state and territory governments, have devised a consensus policy to actively address issues of quality across all forms of ECEC. However, the focus has been mainly directed to centre-based services, such as preschools (kindergarten) and Long Day Care centres with FDCs

largely left in the shadow. From January 2012, all FDCs are fully included within the National Quality Framework together with other ECEC services though existing FDCs will have several years to comply with the NQS. This is a major change aimed to produce positive outcomes, particularly improving the quality of the ECEC experience for children.

However, the paper has identified the need for a specific strategy for FDCs, one carefully devised, otherwise the NQF impact on FDCs will not maximize its impact as planned. Key to that policy will be considering ways to appropriately measure quality in FDCs, effective preparation of staff for FDCs, engaging effectively within the NQS implementation process, avoiding unintended consequences and encouraging substantial research on FDCs with appropriate funding. However, it is highly likely that such a strategy will focus on building collegial networks, conducting individual FDC site inspections and providing incentives for the improvement of staff qualifications. The highly problematic element to this strategy is the undetermined source of funding for the activities. Applying the new National Quality Framework is an excellent opportunity to address quality in FDCs, however, it needs to be driven by a research base that is well-funded and able to address issues relating to the complexity of enhancing quality in FDCs.

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