

I am an Early Childhood Teacher and Educational Leader in a Centre Based Long Day Care Service that operates a Kindergarten (Pre-school) program in an isolated location. For many years we have supported many complex additional needs children's (38 in the past 4 years alone) participation in our educational programs at great cost both in monetary outlay and educator wellbeing. My core function is the education and care for 22 children daily in a Kindergarten program, and yet 40% of my time each week is utilised undertaking those tough conversations with parents on their child's developmental status, researching and sourcing intervention pathways, co-ordinating and connecting families with these pathways, and then receiving 225 observation questionnaires from Government Child Health departments for my completion to assist their health professional in their assessment of the child's status. When I am not doing this for children within my own age cohort, I am mentoring, coaching and supporting less experienced Diploma or studying Diploma Educators in this process for younger children attending educational programs at our service. Government Child health and family support services to children and families are limited to our location and attend on an adhoc basis, with no attendance to our location between now, September 2020 and March 2020 (6 months already), however we are still receiving and identifying children with complex needs.

I am utilising personal contacts to assist me in finding assessment and therapy pathways, and now have 12 out of 22 kindergarten children (55%) of my daily class, either now diagnosed or under diagnosis for complex additional needs e.g. ADHD/ASD/Global Delay/PTSD/Sensory Processing. This does not even include those identified requiring Speech and/or Occupational Therapy. While we are achieving some successes in assisting our 4 and 5 year olds gain access to early intervention, this is not the case for our 2 and 3 year olds. One of the Educators that I support works a single educator model with 5 x 2-3 year olds in her care, and 3 of these children have been identified with additional needs and 2 of these 3 children with major development 'Red Flags'. We can find no one to assist us with assessing these younger children, not public nor private health professionals. The Educator, without eligible documentation is unable to apply for Federal Government IDFM support for herself and the children in her care. Another Educator I support in our Pre-Kindy program has 10 children in her care each day, 30% identified with additional needs in this environment already and although 1 child has finally started progressing through our failed child health system, it has taken **9 months** for our service to receive an eligible document from a Government Health Practitioner to enable the Educator to compile and lodge an IDFM support application (IS Professionals are not yet even allowed to visit our service) for assistance in this already challenging 3 – 4 year old Pre-kindy learning environment. Our isolated location struggles to recruit, train and retain good Educators, because of the challenging task we face everyday. **We want to assist as many of our children as well possibly can, however how can we do this, when the support systems that all levels of Government are supposed to provide to our children, their families and to us as frontline Educators, are not being made available to our location. Additionally, at what % of additional needs children am I no longer a Kindergarten Teacher, but a Special Education Teacher and when and how does an isolated Centre Based Long Day Care Service receive Special Education Unit status and one hopes a more effective level of support?** Government support systems that have failed to adequately support our Early childhood and Care sector (in our location) include:

Department of Education ECEC; Qld Child Health; NDIS ECEI; IDFM; Inclusion Support; State Government MP; Federal Government MP; Private Health Network (PHN); Medicare; Services Australia.

**failed government funded systems, designed by urban bureaucrats that may have never visited an isolated, rural or remote location, are not working, and are not supporting our ECEC sector to enable us to support our disability sector. ECEC is amongst the lowest paid qualified workforces in**

**Australia, so our Educators are not in the sector for the low wages and extremely challenging working conditions, we are in our sector because we want to achieve better outcomes for our communities children. Fix the system failures!**