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Professionals & researchers in early childhood intervention

Thriving Kids/NDIS Redesign
PRECI Discussion Paper
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Introduction

This paper has been prepared by Professionals and Researchers in Early Childhood Intervention (PRECI), the peak body for practitioners and researchers working in the field of Early Childhood Intervention (ECI) in Australia. PRECI is an Australian research-to-practice organisation focused on positive outcomes for young children with developmental concerns, delay or disability, and their families.

In a previous discussion paper (PRECI, 2024), we discussed the proposal made by the Independent Review of the NDIS (Department of Prime Minister & Cabinet, 2023) to develop a system of foundational supports for young children with developmental delay and disability. The paper described key considerations for designing the new system and identified a number of issues that needed to be addressed in planning foundational supports.

The present paper provides an update on the key developments that have occurred over the past 12 months, explores the issues that now need to be addressed, and offers recommendations for designing and implementing a coordinated and streamlined support pathway/system for children under 9 years of age with developmental concerns, delay or disability and their families.

Thriving Kids/NDIS Redesign

PRECI Discussion Paper - February 2026

Background

This section summarises the main current policy developments relating to young children with developmental concerns, delay or disability and their families. These include the reform of the NDIS early years system, the Thriving Kids initiative, the National Best Practice Framework for Early Childhood Intervention, reviews of inclusion support, and an inquiry into improving the quality of care services.

NDIS reform

As originally conceived by the Productivity Commission (2011), the NDIS was intended to be the third tier of a three-tiered system and would cater for those with significant care and support needs. It was meant to be complemented by a second tier of services catering for those with lower-level or shorter-term support needs. These were to be provided by all governments.

This did not happen. When the NDIS was introduced, most states and territories rolled their funding into the federal bucket and withdrew from providing services for children with developmental delay or disability. This left the NDIS as the primary and often only pathway for families seeking developmental support, leading to levels of demand well beyond original forecasts, particularly for children. As a result, the scheme is costing more than intended and government has signalled the need for the scheme to return to its original charter – to support those with significant and permanent disability – and to (re-)establish a second tier of community-based foundational supports and services to cater for children with developmental delay requiring less support or with emerging needs (as a second tier) . This was recommended by the NDIS Review and endorsed by others (eg. Bennett et al., 2025).

In addition to the general issues facing the NDIS, there are some specific problems with the NDIS approach to supporting young children (Arefadib & Moore, 2019; Gavidia-Payne et al., 2024; Moore et al., 2019).

- The NDIS is based on an adult disability service model that is not well suited to the needs of young children and families.
- Particularly in the early stages, many parents are not well-equipped to make key decisions about what services they need.
- The NDIS is a market-based system and its introduction has been extremely disruptive to the ECI service sector, threatening the economic viability of many long-standing established ECI services and leading to an influx of providers who have little experience or training.

- The NDIS funding system has compromised best practice by failing to provide protected funding lines for key aspects of best practice, including home-based services, parent/family well-being programs, and collaborative teamwork.

- As a result, many providers have offered clinic–based services focused on child developmental skills rather than capacity-building services in environments where children live, play and learn, such as their home, ECEC and recreation settings.

- Accessing the NDIS is not equitable and has proven to be more difficult for certain groups than others – disadvantaged families, non-English speaking families, Aboriginal and Torres Strait islander peoples and families in rural and remote areas.

- The market-based approach has not led to an even spread of services across socioeconomic and geographical areas – fewer services are available in rural and remote areas.

- Difficulties accessing the scheme have led to an increase in the average age at which children start to receive ECI support. This is highly undesirable: support needs to start as early as possible

- Extended wait times have meant that, instead of being able to choose the service that suits them best, many families have to accept whichever provider has capacity. This undermines the scheme's goal of enabling informed choice and control for families.

In short, the NDIS is a text-book illustration of how a funding and service system can undermine best practice, with adverse effects for children's learning, development and wellbeing and for family capabilities. Many services and practitioners have managed to maintain best practice despite the conditions under which they are operating, but it is neither easy nor profitable. In the reform of the NDIS, these systemic problems need to be addressed – we need to design a system that promotes and supports best practice, not the opposite.

The NDIS Review made a number of recommendations to address the problems with the NDIS early years system:

- *Investment in developmental and disability-specific supports outside the NDIS*. The first of the NDIS review's 26 recommendations was for 'the establishment of a separate tier of disability services, to be called 'foundational supports', sitting outside the NDIS and accessible to many more people with disability. This was to be part of a continuum of mainstream, foundational and specialist supports to address the needs of all children with disability or developmental concerns. These foundational supports were to be delivered by states and territories.
- *The development of a new NDIS early intervention pathway*. The National Disability Insurance Agency (NDIA) is currently reviewing the NDIS pathway and eligibility criteria. This is to determine who is likely to benefit from the specialist support and whose needs could be appropriately met through the reformed foundational supports system.

- *Improved accessible and inclusive mainstream supports*.

We note that these recommendations do not address all of the problems with the NDIS identified above.

Thriving Kids initiative

In August, the Minister for the Department of Health, Disability and Ageing announced a new program called Thriving Kids to support children with developmental delay and autism, and their families. Thriving Kids would focus on identifying developmental concerns earlier and establishing a national system of supports for children under 9 years of age with mild to moderate developmental delay and autism – and their families. Children with permanent and significant disability would continue to be supported through the NDIS.

At the request of Minister Butler, a Parliamentary Inquiry into the Thriving Kids Initiative was conducted by the House of Representatives Standing Committee on Health, Aged Care and Disability. The Committee held a number of public hearings and received nearly 500 submissions. Its report, submitted to the Minister in December 2025, contained 16 recommendations (House of Representatives Standing Committee on Health, Aged Care and Disability, 2025). These include: establishing a Thriving Kids Advisory Council to advise Federal, State and Territory governments, and disability ministers on the implementation of the Thriving Kids initiative; and establishing an Inspector-General of the National Disability Insurance Scheme.

A Thriving Kids Advisory Group was also established, co-chaired by Minister Butler and Professor Frank Oberklaid, with the task of providing expert advice to the Minister on program design and implementation arrangements.

The final report of the Thriving Kids Advisory Group was released in February this year. The report proposes a comprehensive national model for Thriving Kids, to be considered by state and territory governments when designing and implementing Thriving Kids services.

From our perspective, there are many positive features of the proposed national model:

- The model does not set up a separate disability service system as it might have done, but locates the services in mainstream settings
- Parents no longer have a funding allocation that they are responsible for, which is an improvement on NDIS model
- No requirement for diagnosis, which will make access to support much quicker
- Focus on the needs of families as well as children
- Uses a strength-based approach and seeks to build the skills of parents / families
- Early identification and prompt access to services (via multiple entry points)

- Having multiple ways of identifying potential delays
- The focus on enabling workforce development

There are also many issues still to determined, many of which are discussed later in this paper.

Governments have agreed to invest $4 billion to deliver Thriving Kids. The Commonwealth is providing $2 billion, with $2 billion matched by states and territories. $1.4 billion of the Commonwealth's contribution will go directly to support states and territories.

Agreements between the Australian Government and each state and territory government will set out how governments will deliver Thriving Kids in each state and territory. These agreements are expected to be finalised in February 2026. The first state services will be available from 1 October 2026. Services will be progressively scaled and established, with full rollout of services by 1 January 2028.

National Best Practice Framework for Early Childhood Intervention

In September, the new *National Best Practice Framework in Early Childhood Intervention* (ECI Framework) was released (Department of Health, Disability and Ageing, 2025; Imms et al., 2024; Moore et al., 2025). The ECI Framework was developed as part of Australia's Disability Strategy 2021-2031 (Targeted Action Plan 2.4). It also fulfils the recommendations of the Independent Review of the National Disability Insurance Scheme (Department of Prime Minister & Cabinet, 2023).

The ECI Framework was developed by a consortium led by the University of Melbourne and including Murdoch Children's Research Institute (MCRI), PRECI, Secretariat of National Aboriginal and Islander Child Care (SNAICC), Children and Youth with Disability Australia (CYDA), and Advocating for Children with Disability (ACD).

The ECI Framework is intended for use by all those involved with young children with developmental concerns, delay or disability and their families. This means that it is applicable to the new Thriving Kids system as well as universal supports and NDIS-funded services. The Thriving Kids Advisory Group's report recognises that the ECI Framework offers guidance to practitioners on how to apply best practice principles and help families understand what quality services look like. It also acknowledges that the Thriving Kids service principles should align with and complement those of the ECI Framework. (However, six of the principles that underpin the ECI Framework - rights-based, relationship-based, ecologically-based, diversity affirming, participation, and community-focused - are not included in the list of overarching service principles identified in the proposed Thriving Kids model. Full alignment with the ECI Framework will require that these principles be incorporated into the model.) The ECI Framework's decision-making guide is recommended as a useful resource that provides guidance about collaborative decision-making in early childhood intervention.

Although the development of the ECI Framework was commissioned by the Department of Social Services, ongoing responsibility for its implementation has

been transferred to the Department of Health, Disability and Ageing. As yet, there is no funding or strategy to support the dissemination and implementation of the ECI Framework, nor any mechanism or process to ensure that the ECI Framework remains up-to-date and that new resources are developed to meet the needs of all those it involves.

Inclusion support services

Children learn, grow, and develop most effectively when they can participate in meaningful activities within their everyday environments. This is why a major focus of ECI best practice is to promote the inclusion and meaningful participation of young children with developmental concerns, delay or disability in everyday home, community and ECEC / school settings.

ECEC / school settings currently lack the systemic supports, funding models and training frameworks required to enable inclusive practice at scale, and are experiencing problems in catering for the full spectrum of children's needs. As a result, children with developmental concerns, delay or disability may not always receive the level of support needed to participate meaningfully.

Many ECEC and school services struggle to meet the needs of children with developmental and learning needs. This leads to children being excluded or encouraged to use other services. Partly this is a resourcing issue – not having enough inclusion staff or specialist support to know how to meet the children's needs. It is also a training issue – educators lack knowledge of developmental disability and of ways to support children with developmental concerns or disability to learn and participate with their peers.

However, at a more fundamental level, it is a curriculum challenge – even when the relevant curricula such as the Early Years Learning Framework (EYLF) are intended to apply to all children, including those with developmental concerns, delay or disability, they do not provide sufficient practical guidance on how to do so. Few ECEC and school settings have developed multi-tiered systems of support to meet the needs of all children effectively. These involve the provision of universal services for everyone, with additional levels of support added progressively as needs increase.

The need for improved accessible and inclusive mainstream supports was identified by the NDIS review. Other reviews that have or are currently addressing this issue include

- *Review of Inclusion Support Program* (Department of Education, 2023)

  The review found that the program met its objectives when supports offered were delivered and accessed as intended, and that stakeholders were supportive of the program, and its objectives and intent. However, the review identified resources were not directed towards activities that have the greatest impact. It has suggested improvements to increase inclusion.

- *Inquiry into Universal Early Childhood Education and Care* (Productivity Commission, 2024).

This inquiry report outlines what a universal ECEC system would look like, and the significant reforms necessary to achieve it. These reforms tackle issues that affect ECEC availability, inclusion, affordability, quality and equity. The report's recommendations aim to remove barriers to ECEC access and support better outcomes for children and families.

- ACECQA *Inclusive Capability Project (2025-26)*
  https://www.acecqa.gov.au/resources/projects/inclusivecapability

  Funded by the Department of Education, this project is developing an Inclusive Practices Framework, a professional development resource that will strengthen the capability of services to embed inclusive practices and better support children and families experiencing barriers to access and participation.

- Autism CRC *National Guidance for best practice in inclusive education for autistic students*
  https://www.autismcrc.com.au/national-guidance-inclusive-education

  The National Guidance is intended for teachers, educators, school leaders, medical and allied health professionals such as occupational therapists, psychologists and speech therapists. The aim is to help those who work in mainstream schools understand how to best support positive social, emotional and academic outcomes for autistic children and youth.

The Thriving Kids initiative is one of a number of reviews that are responding to a general recognition that the early years service system is no longer effectively meeting the needs of all young children and their families. The particular problem that the Thriving Kids initiative is addressing relates to the excessive demand being placed on NDIS services and the need to provide a viable high-quality alternative for children with developmental concerns, delay or disability. However, the reviews listed above reflect broader concerns about the early years service system, including both the capacity and the capability of ECEC programs to support all children effectively.

There is also a growing recognition that the wider early years ecosystem – the social and material conditions under which families are raising young children – is also no longer meeting the needs of all young children and their families effectively. This is important because these conditions have a greater impact on child and family outcomes than do the services they receive (Centre on the Developing Child, 2025; Moore, 2024; National Scientific Council on the Developing Child, 2023). The current system does not guarantee all families timely access to the material basics and social support they need to raise their children as they (and we) would wish, and needs to be reconfigured in order to do so.

While the pressing need at the moment is to design the new Thriving Kids / NDIS system, the longer-term need to reconfigure the early years ecosystem must be kept in mind. Unless the general conditions under which families are raising young children are addressed, the Thriving Kids / NDIS reform will never be fully successful in ensuring all young children with developmental concerns, delay or disability and their families thrive.

Care services

Another relevant policy initiative is the Inquiry into Delivering Quality Care More Effectively, commissioned by the Treasurer and conducted by the Productivity Commission. The care services considered by this Inquiry included aged care, NDIS services, and early childhood education and care services. In its final report, the Productivity Commission (2025) proposed reforms in three areas to strengthen connections across sectors and reduce siloed decision-making, improving care quality, making services more efficient and boosting productivity:

- First, the Australian Government should pursue greater alignment in regulating quality and safety across care sectors by implementing cross-sectoral provider registration and audits for aged care, veterans' care and National Disability Insurance Scheme services.
- Second, governments should embed collaborative commissioning – the practice of organisations working in partnership to plan, procure and evaluate services for their communities.
- Finally, Australia needs a new approach to investment in prevention and early intervention, through a National Prevention and Early Intervention Framework.

Collectively, these reforms are expected to improve outcomes for children and families by reducing fragmentation between ECEC, health, and NDIS systems, enabling earlier and more coordinated access to supports, and strengthening continuity of care, while also supporting frontline services through clearer governance, shared accountability, and more efficient use of resources.

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We have taken the findings and recommendations of these various inquiries and reviews into account in formulating our own recommendations for designing and implementing an integrated universal / Thriving Kids / NDIS service system, as laid out below.

Designing and implementing an integrated universal / Thriving Kids / NDIS service system

This section addresses key issues to be addressed in designing and implementing an integrated universal Thriving Kids and NDIS services system. We have made recommendations for each key issue whenever we see a clear course of action.

Thriving Kids target group

In the Thriving Kids Advisory Group report, the program is described as being targeted to children who have developmental delay and/or autism with low to moderate needs. Other forms of developmental disability are not mentioned. The focus on children with autism was prompted by the high number of children diagnosed with autism receiving NDIS services. However, the NDIS does not only cater for children with autism, and neither should the Thriving Kids system. It should

cater for all children with developmental concerns, delay or disability, regardless of diagnosis or level of developmental concern or delay. This needs to be clarified.

Recommendation 1. ***DHDA should formally confirm that the Thriving Kids system will cater for all children with developmental concerns, delay or disability, regardless of their diagnosis.***

Early identification and support

It is crucial that children who show signs of developmental concerns be identified and provided with high-quality support as early as possible. It is equally important that families who are experiencing challenges in meeting the needs of their children and family be identified early and given access to appropriate support services. This is recognised in the Thriving Kids Advisory Group report. One of the four 'pillars' on which the proposed Thriving Kids model is based is raising awareness and early identification of children with developmental issues.

Following the introduction of the NDIS, the age at which children were identified and support provided has risen, a highly undesirable development. There are various reasons why this has occurred:

- The NDIS system can be difficult to access for some parents which leads to delays in them receiving services or not applying at all.
- Professionals do not always take parental concerns seriously enough, and delay recommending access to services until they are convinced that the concerns are real.
- There is no consistent monitoring so, if the family does not see that there is an issue with their child's development, then it may not be picked up until they attend preschool or school.
- There are few or no services for children with developmental concerns or milder developmental problems – the very problem that Thriving Kids is seeking to address.

It is vital that the new service system become much more responsive to emerging child and family concerns. Parental concerns need to be taken seriously and access to the appropriate support services provided promptly.

To ensure the service system becomes more responsive, several conditions need to be met. These include ensuring universal service providers have a good knowledge of child development and the signs of developmental delay or disability. Screening tools can help identify children who need additional support.

However, the most important conditions are the relationships that parents have with the service system and with other parents. It can be challenging for parents to share concerns about their child's development or their own ability to meet the child's needs. They are more likely to do so within a trusting relationship, either with another parent or a professional. It is for this reason that one of the core principles in the ECI Framework is that services should be relationship-based. The effectiveness of support provided by practitioners depends as much upon the quality of the

relationship they establish with families as it does on the practical guidance they provide.

Recommendation 2. ***In designing the Thriving Kids system, a high priority should be to consider how to reach and engage every parent, and to link them into a knowledgeable, skilled and integrated system of universal and other services.***

Equally important is ensuring that every family is linked with other parents and that all families have a positive support network of peers. While some families will have their own family or other support network, many will not and would benefit greatly from the opportunity to become part of a social network of their peers. No parent should be left to parent on their own.

Recommendation 3. ***In establishing the Thriving Kids service system, it is important to build a system that provides opportunities for families to connect with other families in easily accessible, family-friendly settings*****.**

The need for a multi-tiered system of child / family support

Multi-tiered systems of support – otherwise known as progressive universalism or proportionate universalism – are frequently recommended as a key feature of effective service systems (e.g., The Marmot Review, 2010). These involve the provision of universal services for everyone, with additional levels of support added progressively as needs increase.

The NDIS Review recommended that supports provided outside the NDIS should include extra levels of support in addition to universal services

- *mainstream supports* (including early identification of children with developmental concerns, and inclusive education), and
- *foundational supports* (including expanded supports for children with emerging developmental concerns, delay or disability, and relevant programs and services).

Two levels of foundational supports were proposed:

- *general supports*, available to all children with developmental concerns, delay or disability and their families and carers. These supports include navigation support and information and capacity building for individuals, families and communities.
- *targeted supports*, primarily for those children and their families who are not eligible for an individualised budget through the NDIS and are in most need of additional support. These supports include home and community care-type supports, aids and equipment, and early childhood supports.

The model proposed by the Thriving Kids Advisory Group is described as a stepped model of support with two levels of support for children with low or moderate support needs: *best-practice universal parenting supports and information* and *best-practice targeted supports*. The universal parenting supports seek to equip parents with knowledge and skills to support their child's development while building secure attachments and connecting families with peers, while the targeted supports are

intended for children and families where children need more (or different) supports than the Thriving Kids Universal Parenting Support and information offering. Children with significant and permanent disability will be eligible for NDIS support.

The relationship between the universal services that are available to all children and families and these three tiers is not specified in this model, and the labelling of the first of the Thriving Kids tiers – universal parenting supports and information – is likely to be confusing. Are these supports truly universal, available to all parents, or intended for those whose children have developmental concerns? Unless this is clarified (or the tier renamed), there will be a risk that the proposed universal parenting support programs will get taken over by the parenting equivalent of the 'worried well' – parents whose children do not have developmental problems but who would like them to have access to any additional supports available.

We suggest that the universal, Thriving Kids and NDIS services should be seen as a single multi-tiered system, with four tiers:

- Tier 1: universal services for all children and families
- Tier 2: enhanced universal supports for children with developmental concerns
- Tier 3: targeted supports for children with ongoing developmental / functional challenges
- Tier 4: NDIS funding for children with life-long disabilities and significant care needs

More details of these tiers can be found in the Appendix.

Recommendation 4. ***Universal, Thriving Kids and NDIS services should be seen as a single multi-tiered system, with four tiers.***

Recommendation 5. ***Since the Thriving Kids / NDIS system should form a multi-tiered system of support, it is essential that the Thriving Kids team collaborate with the NDIA to design a seamless pathway through the service system.***

These tiers should not be seen as separate service systems but as additional levels of support. Children and families receiving Tier 3 and 4 supports should still be able to access all other levels of support as needed, and not be expected to have all their needs met through any single level of support.

The needs of children and families commonly vary over time, so the level of support will also vary. There will be times when more intensive support is needed and other times when less frequent support is required. The system needs to allow parents to move easily between levels of support, or tap in and out of the same level of support, as the child and family needs wax and wane over time.

It is vital that the Thriving Kids funding and support system and that of the NDIS be integrated and grounded on common principles so that transitions from one level to another are as seamless as possible.

Recommendation 6. ***The system should be flexible and allow for parents to move easily between levels of support as the child and family needs wax and wane over time.***

Supports and services for families of young children with developmental concerns, delay or disability should be located in settings that the families know and trust. The model proposed by the Thriving Kids Advisory Group suggests that support should be provided in the environments where the children, live, learn and play. The Thriving Kids system should not duplicate or replace relevant forms of support that already exist in the community.

Recommendation 7. ***Thriving Kids and ECI services should be embedded in mainstream services and settings that parents know and trust.***

Thriving Kids will include a range of services to meet the needs of families with diverse needs and circumstances. Where these services are located is an important consideration. Locating services in integrated child and family hubs is an example of one way of ensuring that services are easier for parents to access as well as facilitating the integration of services (Moore, 2021; Honisett et al., 2023; National Child & Family Hubs Network, 2025; Social Ventures Australia, 2025). The Thriving Kids Advisory Group report recognises the potential of child and family hubs to enable additional supports to be embedded in universal settings, and recommends that Government should lead a national program, working with state and territory governments, to strengthen the capability and quality of all hubs. Where there are gaps, it is recommended that Primary Health Networks commission the establishment of new hubs.

Recommendation 8. ***Ways of co-locating and integrating mainstream and other services across sectors should be trialled and evaluated to establish what works best in different localities.***

Family support needs

One of the core principles underpinning the ECI Framework is that services and supports should be ecologically based, that is, they should take account of the conditions under which families are living and be part of an integrated service system capable of addressing any challenges families are facing. The families that the Thriving Kids system is seeking to help will often face challenges beyond those related to their child's development. When families face multiple challenges, they are less able to provide their children with the conditions the children need to thrive. The core care conditions that children, parents/caregivers and families need in order to thrive are well known (ARACY, 2014; Moore, 2024).

Recommendation 9. ***The development of the Thriving Kids system should take into account the need to ensure that families have the social and material conditions they need to thrive.***

Some of the core conditions that families need, especially those relating to housing, finances and local environments, are beyond the scope of what ECI services can provide. To ensure that these broader needs are addressed, ECI providers need to be part of, and easily connect to, a wider set of services that can address them. This

is in line with one of the ECI Framework's key underlying principles - that services should be ecologically-based.

Recommendation 10. ***The Thriving Kids / NDIS system should be ecologically-based and incorporate mechanisms to ensure integrated support for families of young children that spans sectors and addresses the conditions under which parents are raising young children.***

Helping families make decisions and choices

For parents to make informed decisions about what services and supports would be most appropriate for their child and family, they need to be clear about their own goals and outcomes, understand what best practice looks like, know what services are available, and where to find them.

Information about best practice and available services can come from a variety of sources, including reliable websites, parent advocacy organisations, universal service providers, or dedicated navigator positions as recommended by the NDIS Review. The proposed Navigator roles are to identify, link, coordinate, and build. Navigators would not be responsible for determining eligibility for any level or tier of service, or for helping parents think through what outcomes they would like for their child and family, and what form of support would best help them achieve these outcomes.

One question to be considered is whether service navigation needs a separate role (eg. a Navigator) or can it be done by those within the continuum of services (eg. mainstream service providers such as GPs, MCHN, child and family hubs, local child development centres or private practices). If the pathway through the continuum is clear enough and widely understood, then it may not need a designated person or role to perform this task.

Another option is to commission peer-led organisations to provide information and system navigation support through peer navigators for families who require support – parents with personal experience of the system and trained in supporting other parents. Families could access a peer worker and receive help navigating the service system at any time. They could jump in and out as their information needs changed over time. Independent, reputable, online/phone or face-to-face peer support organisations such as *Kiind* in Western Australia, *Belongside Families* in New South Wales and *Advocating for Children with Disability* in Victoria already provide such services and have evidence of their efficacy.

Recommendation 11. ***Ways in which parent-led organisations can help parents be clear about the outcomes they want and what services will best help them achieve these outcomes should be trialled and evaluated.***

Helping parents find the services they need is different from helping them be clear about what is most important for them and their child, and what outcomes they would like to see. One of the key principles underpinning the ECI Framework is that services should be *outcomes-focused*, that is, guided by the outcomes that families want for their child and family. Helping parents choose the service and their preferred

form of support should be guided by an outcomes-based approach, so that the key decisions the family makes are based on their priorities, not on what providers think is best. The Decision-Making Guide in the ECI Framework is designed to help parents and professionals clarify what outcomes the parents want and what is best for their child and family (Moore et al., 2025).

The Guide involves a series of steps, with decisions about family priorities and preferred outcomes *preceding* those about what service is needed and how intensive it should be. This is the reverse of what currently happens: under the present NDIS arrangements, funding levels and service choices are often made before parents are clear about what they really want or need. This can lead to parents seeking more services than they or their child need or inappropriate forms of support.

The Thriving Kids system needs to develop and include a process for helping parents determine their priorities and preferred outcomes before they consider the form and intensity of the services they need. A key question to be resolved is who is best placed to partner with families to help them identify their priorities and outcomes.

Recommendation 12. ***A partnership-based decision-making process (such as the one in the ECI Framework) should be introduced to help ensure that families are clear about the outcomes they want for their child and family and fully informed about the pros and cons of the service options open to them.***

Recommendation 13. ***Helping parents articulate what their priorities and preferred outcomes are should come before any decisions about the nature and intensity of the services they receive*****.**

There are effective programs already available that help families think about their short- and long-term priorities and goals, and what they can do now to achieve these goals (e.g., *Now and Next, ENVISAGE* and *We Care)*. Such programs could play an important role as part of the pathway, and should be explored further.

Another key principle underpinning the ECI Framework is that services should use a *strengths-based* approach. The decision-making process should reflect this principle: it should help families recognise strengths they already possess and new capabilities they could develop that would enable them to meet their child and family needs without needing external help.

Recommendation 14. ***The process used to decide what supports and services parents want and need should use a strengths-based approach that recognises and builds on child, parental and family strengths.***

Building children's voice and agency

One of the key principles underpinning the ECI Framework is that services should be child-centred. This principle recognises the right of every child to participate in, and contribute to, the environments in which they live, learn and play. The Thriving Kids / NDIS system caters for children under 9 years of age, a time when children become increasingly capable of expressing their own views, and should be increasingly

involved in decisions that affect their lives as they grow. This applies to all children, but is particularly important for children with disability as they are less likely to be included in decisions about what goals they want to achieve, the help they need and what form it should take.

Recommendation 15. ***Whatever form the Thriving Kids / NDIS decision-making process takes, it should be designed to progressively incorporate children's views as they grow.***

This should be guided by a clear conception of how children develop voice and agency over the course of their lives – what we can reasonably expect of children at different stages of development and how they can be involved in decision-making. At this stage, we do not have a developmental framework that maps this evolution of agency in children as they grow or that describes how children of different ages and levels of functioning can be meaningfully involved in decisions about their lives. Developing such a framework should be a priority.

Recommendation 16. ***A framework that charts the evolution of children's agency and decision-making should be developed*****.**

Relationship and helping skills

One of the key principles underpinning the ECI Framework is that services should be relationship-based. Helping children and parents make key decisions about priorities, outcomes and services requires sophisticated relationship and helping skills on the part of ECI practitioners and others. An important consideration in developing the Thriving Kids / NDIS system is how to ensure that those involved with young children with developmental concerns, delay or disability have the necessary relationship skills to engage effectively with children and parents, support their decision-making, and build their capabilities.

Recommendation 17. ***All practitioners and services involved in Thriving Kids services should have the opportunity to receive training in the key helping and relationship skills needed to work effectively with parents of young children with developmental concerns, delay or disability.***

Supporting children in ECEC and school settings

One of the key principles underpinning the ECI Framework is participation, meaning that children should be fully, meaningfully and actively involved in all activities and situations of daily life. This includes the early childhood services that all children attend. As already noted, concerns about the early years service system have prompted a series of reviews of the capacity of ECEC programs to support all children effectively. Given the importance of meaningful inclusion in mainstream ECEC services for children with developmental concerns, delay or disability, it is important that the Thriving Kids system and inclusion support services be closely linked.

Recommendation 18. ***The Thriving Kids system should be developed in conjunction with current reviews of the ECEC sector, with the aim of***

developing a system that integrates support to children and families (through the Thriving Kids and NDIS system) with the support to children and educators in the ECEC and school systems.

As we have argued, the Thriving Kids / NDIS system needs to be designed as a multi-tiered system of support (MTSS). ECEC and school settings also need multi-tiered systems of support if they are to meet the needs of all children – including those with developmental concerns, delay or disability – more effectively.

Specific forms of MTSS can be applied at both ECEC (eg. Pyramid Model) and school levels. The driving idea behind these MTSS programs should be to meet the needs of *all* children more effectively, including those with developmental problems.

Recommendation 19. ***Further trialling and implementation of multi-tiered systems of support in ECEC and school settings should be undertaken.***

Thriving Kids / NDIS pathway

The NDIS Review recommended creating a continuum of support for children and families. This will involve articulating clearly what each level offers and how they connect with one another. A pathway that guides families through these services needs to be described. Parents should be able to move back and forth between tiers as their needs wax and wane. Journey maps or case scenarios illustrating the pathway would assist with clarification of the children for whom each level best suits as well as the opportunities available throughout the pathway.

The NDIA is currently reviewing the pathway to the NDIS. This work should be extended to map out the earlier stages in the pathway, beginning with universal-level services.

Recommendation 20. ***Since the Thriving Kids / NDIS system should form a multi-tiered system of support, it is essential that the Thriving Kids initiative and the NDIA collaborate in designing a seamless pathway through the service system.***

Recommendation 21. ***The pathway through the continuum of services should clearly specify who is responsible at each stage for helping the family determine their priorities and preferred outcomes, and choose the form and level of services.***

As already noted, an important stage in the pathway for parents is to help them think about their goals and needs and the outcomes they want for the child, themselves, and the family as a whole. Determining parental priorities and preferred outcomes needs to occur *before* decisions are made about the form and intensity of the services they need.

There should not be a single pathway that everyone must follow, but several routes by which families may reach the support they need. A degree of redundancy should be built into the system. When a child and family need Tier 3 or NDIS-funded support, they should be able to go straight to that level without progressing through the other service levels. However, neither Tier 3 nor NDIS ECI support will be able to

meet all the child and family needs, so they should still be able to access and use relevant universal services and Tier 2 supports.

Determining eligibility

Access to Tier 2 (enhanced universal services) should be based on concerns raised by parents or others, and should not involve any formal eligibility requirement or cost to parents.

Access to Tiers 3 and 4 should be based on the child's functional capabilities, care needs, and resource needs of the family. The NDIA is still determining new eligibility criteria for NDIS funding. Collaboration between the Thriving Kids initiative and the NDIA in designing the new eligibility criteria and determination process is essential.

The focus should be on the child's functional capabilities and the family's capacity to meet the child and family needs, not the child's diagnosis or the severity of the child's disability. Terms such as 'mild', 'moderate' and 'severe' are imprecise and contestable and should not be used. Alternative strength-based ways of describing child and family functioning should be adopted.

Guidance on ways of assessing children's functional capabilities is also needed. Although the ECI Framework contains a wide range of practice resources, it does not yet provide specific guidance on best practice in assessing children's functional capabilities.,

Recommendation 22. As *part of ongoing support for the development of the ECI Framework, detailed guidance on best practice approaches to assessing children's functional needs should be developed.*

Promoting best practice

The ECI Framework is a major development with profound implications for the design of the new Thriving Kids / NDIS system. It is meant to apply to all those involved with children with developmental concerns, delay or disability and their families. This includes those providing Thriving Kids services. It is important that all providers become familiar with and be able to deliver services that are consistent with this Framework.

It is also important that Framework not be regarded as a set of practices to be added on once the new system has been developed. As recommended by the Best Practice in Early Childhood Intervention Consortium (Imms et al., 2025), the Framework and related products should be used as the foundational resource for the development of the Thriving Kids service system itself, not just as a guide to actual service delivery. As we have seen, the NDIS is an example of how a badly designed system can undermine best practice. To guard against this happening again, the Framework's principles should be used as a template to check whether the service system designs being considered are compatible with the Framework and promote best practice.

The new Thriving Kids / NDIS service system and funding arrangements should be designed to promote and facilitate best practice. The current NDIS funding process

fails to support best practice as described in the ECI Framework. The failure to have dedicated funding lines for key elements of best practice (such as home or community visits, collaborative teamwork support, planning meetings, attendance at specialist appointments) has led to a preference for child-directed therapy services in clinical settings rather than family-directed support in home- and community-based settings.

Recommendation 23. ***The ECI Framework and related products are used as the foundational practice resource for the development of the Thriving Kids service system, with the Framework's principles being used as a template to check whether the service system designs being considered are compatible with the Framework and promote best practice.***

To ensure the ECI Framework is understood and applied by all those to whom it applies, three actions are needed:

- First, there needs to be a funded strategy to ensure that the ECI Framework is effectively disseminated to, and implemented by, all those who are involved with young children with developmental concerns, delay or disability and their families.

- Second, there needs to be a funded entity to ensure regular updating of the Framework, trialling the development of new resources.

- Third, there needs to be a quality assurance mechanism to ensure that those funded to provide ECI and related services and supports are doing so in a way that is *consistent with the Framework.*

Recommendation 24. ***To ensure the ECI Framework is understood and implemented by all those to whom it applies, there should be (a) a funded strategy to ensure that the ECI Framework is effectively disseminated and implemented, (b) a funded entity to ensure regular updating of the Framework and development of new resources, and (c) a quality assurance mechanism to ensure that those funded to provide ECI and related services and supports are doing so in a way that is consistent with the Framework.***

ECI teams

Dedicated ECI services and practitioners are key providers of specialist child and family support at Tier 3 and Tier 4 (NDIS) levels. They may also provide support to Tier 2 programs and staff, and as support to mainstream service providers and community settings (Tier 1).

To meet the varying needs of children and families, ECI services often require a range of professionals from different disciplines. Under the NDIS, this range has narrowed, with therapy services provided by speech pathologist, physiotherapists and occupational therapists often being preferred. Two professional groups that have been affected by this change are early childhood special educators and social workers. At least in some States and Territories, there has been a significant drop in the numbers of these professionals employed by ECI services. This is regrettable as

both disciplines have specific skills and perspectives that add significantly to the depth and efficacy of ECI services. Where this has occurred, it should be addressed.

Recommendation 25: ***Both Thriving Kids and NDIS services should ensure that children and families have access to a full range of ECI professionals as needed.***

The Advisory Group report recommends a Key Worker approach 'to build capacity for children and families using both single and collaborative teamwork approaches.' In ECI best practice, the term *key worker* is reserved for an ECI practitioner working as the lead on behalf of a team, not to single practitioners working with families on their own. The different usages need to be resolved so there is a consistent understanding of the role.

Recommendation 26: ***Further clarification of the role of Key Worker should be provided to ensure consistency with ECI best practice.***

ECI workforce

As acknowledged in the Thriving Kids Advisory Group report, the delivery of effective, best practice support to children with developmental concerns, delay or disability depends upon the availability of a knowledgeable, skilled and integrated workforce. Currently, there are several workforce challenges to address: a shortfall in the number of ECI providers available, the uneven distribution of ECI providers (resulting in ECI 'deserts' in some areas), and the variability in the quality of pre-service training and in-service support for ECI providers. All of these threaten both the availability and the quality of the ECI support that children and families receive.

Recommendation 27. ***A long-term ECI workforce strategy should be developed to ensure the ongoing availability of appropriately trained ECI providers to children and families wherever they live and whatever their background and circumstances.***

Under the current NDIS, providers of ECI services are not required to be registered and there is no oversight of the services they are providing. While there are many ECI providers who are currently unregistered yet providing best practice, the absence of any oversight runs the risk of fraud, over-servicing and poor practice. The House of Representatives Standing Committee (2025) recommends compulsory provider registration to ensure the integrity, equity, and effectiveness of ECI services. The Productivity Commission (2025) notes that these integrity problems occur in other care sectors, and recommends that there should be greater alignment in regulating quality and safety across care sectors through cross-sectoral provider registration and audits.

Recommendation 28. ***Providers of Thriving Kids and NDIS ECI services should be required to be registered, and a streamlined ECI registration process should be developed.***

Funding services

Key questions for the Thriving Kids service system are who should provide them and who should fund them? The current market-based system has not succeeded in ensuring a range of service options in every location or for every group within the population. A more appropriate strategy is to commission services and organisations to provide support in specific areas, as recommended by the House of Representatives Standing Committee (2025).

However, commissioning services should not be done in a blanket fashion but on the basis of identified local needs and conditions. The most important of these is to establish that there are no viable services already operating in the area in question, which have already established relationships with families. To avoid wasteful duplication, families and services should be consulted first as to what form of additional support is required.

The form of commissioning chosen must be fit for purpose. Instead of traditional transactional contracts that rely on rigid terms, competition, and punitive measures, the Thriving Kids initiative needs collaborative commissioning that prioritises trust, collaboration, and shared goals between service providers and commissioners (Considine et al., 2024; Feeley, 2021; Productivity Commission, 2025). Examples of such approaches include Formal Relational Contracting (Considine et al., 2024) and Ethical Commissioning (Garrod, 2025; Healthcare Improvement Scotland, 2024). Such commissioning models are more in line with the principles underpinning the ECI Framework.

Recommendation 29. ***Organisations that deliver evidence-based services and supports should be commissioned to provide Thriving Kids services in areas where ECI services are in limited supply, and where local families and services confirm the need for additional services.***

Commissioning appears to flout one of the key principles of the NDIS: participant choice and control. Under the NDIS, choice and control take the form of money being allocated to participants to buy the service they most need and prefer. This works for adults but places an unfair burden on families just starting out on their journey and has undermined best practice in ECI. The result is that parents of young children lack the conditions needed to make optimal choices for their children and families.

Parental choice and control remain important principles that but need to take a different form for families of young children. Rather than having a choice of service provider or control over the funding, parents need to be able to choose what goals to focus on, what strategies to use, what outcomes to pursue for their children and their family, what particular form of support works best for them etc. These key informed choices are more important for positive child and family outcomes than the choices afforded through the NDIS.

These choices are built into the ECI Framework which is based on parental goals and seeks to promote parental capabilities and decision-making. If all services and supports implement the principles of the ECI Framework, parents will have greater choice and control over key matters than they do under the NDIS.

Co-designing and trialling the new Thriving Kids / NDIS system

The stated intent is to use codesign in developing the Thriving Kids system. Involving parents in the design of the new service system will make it more likely to be acceptable to parents and used by them. The House of Representatives Standing Committee (2025) recommends that this co-design process also involve recognised organisations and peak bodies with an established history in providing services and support for children with developmental disabilities, as well as individuals with lived experience of disability or care of persons with disability, First Nations, and culturally and linguistically diverse backgrounds. However, this will take more time than has been allowed. Further time for co-design should be built into the evaluation stages following the initial establishment of the system.

Recommendation 30. ***Time for co-design with parents and other stakeholders should be built into the evaluation stages following the Thriving Kids system's initial establishment.***

As we cannot know beforehand what form or forms of Thriving Kids services and supports will work best – what form they should take, who should provide them, how they should be funded, which option will work best – it will be important to trial different options and evaluate them.

Recommendation 31. ***There should be a systematic process of trialling and monitoring different Thriving Kids models and processes and their outcomes to establish what are the key features of the most successful ones.***

Concluding comments

The Thriving Kids initiative represents a rare opportunity to redesign the system of supports for young children and families to better meet their needs. We recommend that Thriving Kids be firmly anchored in the ECI Framework, backed by a sustainable workforce strategy, integrated across sectors, and built on shared accountability and genuine co-design.

APPENDIX

MULTI-TIERED THRIVING KIDS / NDIS SERVICE SYSTEM

Tier	Title	Target group	Services	Providers
1	Universal services	All children	• General health services • Maternal and child health services • Child care and preschool services • Parent information resources • Paediatric and allied health services • Child and family hubs	• GPs • MCH services • ECEC services • Raising Children Network • Paediatricians and allied health providers • Various auspices
2	Enhanced universal services (general foundational supports)	Children with developmental concerns Parents with concerns about meeting their children's needs	• Parenting programs • Facilitated playgroups • Specialist support services • Parenting information services • Peer support for families	• Community-based child and family organisations • Community-based child development centres • Sleep clinics • Raising Children Network • Parent support and advocacy organisations • ECEC services
3	Specialist (ECI) services and supports (targeted foundational supports)	Children with conditions with known developmental implications Children with ongoing developmental concerns, delay or disability	• Individualised home-based and community-based support for children and families • Inclusion support for ECEC and community settings • Peer support for families	• ECI practitioners, services and teams • ECI practitioners, services and teams, and inclusion support services • Parent support and advocacy organisations

				• ECEC services
4	NDIS services and supports	Children with severe and life-long disabilities and high care needs	• Individualised home-based and community-based support for children and families • Disability and medical care services • Inclusion support for ECEC and community settings • Peer support for families	• ECI practitioners, services and teams • Disability support services • ECI practitioners, services and teams, and inclusion support services • Parent support and advocacy organisations • ECEC services

Enhanced universal services / general foundational supports

- *What are the eligibility criteria for general foundational supports?* Any parent with a concern about their child's development can access these supports without a diagnosis for the child and free of charge.
- *What form should these supports take?* Group-based programs such as facilitated playgroups, parenting programs etc. Parents should have a choice of options so they can find the one that best meets their needs and preferences.
- *Who provides these supports?* Locally-based family support services …
- *How should these be funded?* Services should be commissioned to provide these supports in local areas.
- *Where should these supports be provided?* Preferably in the same settings as universal services. Integrated child and family services / hubs may offer

Specialist (ECI) services and supports / targeted foundational supports

- *What are the eligibility criteria for general foundational supports?* (a) Any child and family for whom the general foundational supports have not been sufficient to improve child functioning or build family capabilities. (b) Any child who has demonstrated functional delays, with or without a diagnosis, that are not severe enough to be eligible for NDIS support.
- *What form should these supports take?* Individualised home-based child and family ECI services
- *Who provides these supports?* Locally-based ECI services commissioned to provide supports to children with ongoing developmental challenges
- *How should these be funded?* Services should be commissioned to provide these supports in local areas.
- *Where should these supports be provided?* In the child's natural learning environments (home, ECEC and community settings)

References

ARACY (2014). **The Nest Action Agenda: Improving the wellbeing of Australia's children and youth while growing our GDP by over 7% (2nd Ed.).** Canberra, ACT: Australian Research Alliance for Children and Youth. http://www.aracy.org.au/documents/item/182

Arefadib, N. and Moore, T.G. (2019). **Realising the Potential: Early Childhood Intervention under the NDIS. Prepared for the Victorian Department of Education and Training.** Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute. DOI: 10.25374/MCRI.9761510

Australian Government (2024). **Early Years Strategy 2024-2034.** Canberra, ACT: Department of Social Services. https://www.dss.gov.au/families-and-children-programs-services/early-years-strategy

Australian Government and Department of Education (2022). **Belonging, being and becoming: the early years learning framework for Australia (V2.0).** Canberra, ACT: Australian Government Department of Education for the Ministerial Council. https://www.acecqa.gov.au/sites/default/files/2023-01/EYLF-2022-V2.0.pdf

Bennett, S., Jessurun, M. and Orban, H. (2025). **Saving the NDIS: How to rebalance disability services to get better results.** Carlton, Victoria: Grattan Institute. https://grattan.edu.au/report/saving-the-ndis/

Centre on the Developing Child (2025). **What Surrounds Us Shapes Us: An Expanded Story of Early Childhood Development.** Cambridge, Massachusetts: Centre on the Developing Child, Harvard University. https://developingchild.harvard.edu/key-concepts/what-surrounds-us-shapes-us/

Considine, M., Bonyhady, B., Olney, S., and Deane, K. (2024). **Formal Relational Contracts and the Commissioning of Complex Public Services.** Parkville, Victoria: University of Melbourne. https://doi.org/10.26188/28544528.v1

Department of Education (2023). **Review of the Inclusion Support Program – Final Report.** Prepared by Deloitte Access Economics. Canberra, ACT: Department of Education. https://www.education.gov.au/early-childhood/resources/inclusion-support-program-review-final-report

Department of Health and Ageing (2011). **National Framework for Universal Child and Family Health Services.** Canberra, ACT: Department of Health and Ageing. https://www.health.gov.au/sites/default/files/2023-01/national-framework-for-universal-child-and-family-health-services.pdf

Department of the Prime Minister and Cabinet (2023). **Working together to deliver the NDIS - Independent Review into the National Disability Insurance Scheme: Final Report.** Canberra, ACT: Commonwealth of Australia. https://www.ndisreview.gov.au/resources/reports/working-together-deliver-ndis

Feeley, D. (2021). **Independent Review of Adult Social Care in Scotland**. Edinburgh: Scottish Government. https://www.gov.scot/publications/independent-review-adult-social-care-scotland/documents/

Garrod, C. (2025). **Ethical Commissioning Support for Commissioners - Key issues and learning report.** Glasgow, Scotland: IRISS (Institute for Research and Innovation in Social Services). https://www.iriss.org.uk/sites/default/files/2025-05/iriss-support-for-commissioners-learning_report_march_2025.pdf

Gavidia-Payne, S., Rossell, R., Bull, K. and Forster, J. (2024). The changing narrative of early childhood intervention in Australia: Service providers' perspectives on the implementation of the National Disability Insurance Scheme. **Children and Youth Services Review, 157**, 107375. https://doi.org/10.1016/j.childyouth.2023.107375

Healthcare Improvement Scotland (2024). **Transformational Change through Ethical Commissioning: Change ideas on supporting widespread adoption of Ethical Commissioning across health and social care**. Edinburgh and Glasgow, Scotland: Healthcare Improvement Scotland. https://www.hisengage.scot/media/2633/20240712-transformational-change-through-ethical-commissioning-his-change-ideas-v012.pdf

Honisett, S., Cahill, R., Callard, N., Eapen, V., Eastwood, J., Goodhue, R., Graham, C., Heery, L., Hiscock, H., Hodgins, M., Hollonds, A., Jose, K., Newcomb, D., O'Loughlin, G., Ostojic, K., Sydenham, E., Tayton, S., Woolfenden, S. and Goldfeld S. (2023). **Child and family hubs: an important 'front door' for equitable support for families across Australia.** National Child and Family Hubs Network. https://doi.org/10.25374/MCRI.22031951

House of Representatives Standing Committee on Health, Aged Care and Disability (2025). **No child left behind: Report into the Thriving Kids initiative.** Canberra, ACT: Parliament of Australia. https://www.aph.gov.au/Parliamentary_Business/Committees/House/Health_Aged_Care_and_Disability/ThrivingKidsinitiative/Report_into_the_Thriving_Kids_initiative

Imms, C., Bonyhady, B., Moore, T., D'Aprano A., Young, G., Kakoscke-Moore, S., Deane, K., Luscombe, D. & Dimmock, K. (2025). **Thriving Kids: An opportunity for best practice to become standard practice for children with developmental concerns and their families in Australia.** Best Practice in Early Childhood Intervention Consortium.

Imms, C., Moore T., Bull, K., Gavidia-Payne, S., Lami, F., Wilson, M., Allen, L. & Knight S. (2024). **Review of best practice in early childhood intervention: Desktop review report.** Funded by and provided to the Commonwealth of Australia's Department of Social Services. Melbourne, Victoria: The University of Melbourne. https://healthy-trajectories.com.au/wp-content/uploads/2025/08/ECI-Desktop-Review-Full-Report.pdf

Johnson, E. (2025). The NDIA is changing how it pays for disability supports. What does that mean for rural communities? **The Conversation**, 27 June. https://theconversation.com/the-ndia-is-changing-how-it-pays-for-disability-supports-what-does-that-mean-for-rural-communities-259148

Johnson, E. (2021). An exploration of person-centred allied health supports with rural and remote families in the context of the rollout of the National Disability Insurance Scheme in Australia. PH.D. thesis, University of Sydney, NSW. https://hdl.handle.net/2123/27208

The Marmot Review (2010). **Fair Society, Healthy Lives: Strategic review of health inequalities in England post-2010.** London, UK: Global Health Equity Group, Department of Epidemiology and Public Health, University College London. http://www.marmot-review.org.uk/

Moore, T.G. (2021). **Developing holistic integrated early learning services for young children and families experiencing socio-economic vulnerability.** Prepared for Social Ventures Australia. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute, The Royal Children's Hospital. https://doi.org/10.25374/MCRI.14593890

Moore, T.G. (2024). **Core Care Conditions for Children and Families: Implications for policy and practice**. CCCH Working Paper No. 6. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute. https://doi.org/10.25374/MCRI.26065597

Moore, T.G., Forster, J. and Bull, K. (2019). Supporting parental choice: the impact of a funding model. In S. Acar, H. Hix-Small and T. McLaughlin (Eds.), **International Perspectives on Early Intervention.** Young Exceptional Children Monograph Series No. 18. Arlington, Virginia: Division of Early Childhood, Council for Exceptional Children.

Moore, T., Imms, C., Luscombe, D., SNAICC authors, Bonyhady, B, Dimmock, K., Deane, K, D'Aprano, A., & Kakoschke-Moore, S. (2025). **National Best Practice Framework for Early Childhood Intervention.** The University of Melbourne. Commissioned by the Commonwealth of Australia's Department of Social Services. https://www.health.gov.au/resources/collections/national-best-practice-framework-for-early-childhood-intervention

Moore, T., Luscombe, D., Gavidia-Payne, S., Bull, K., Bhopti, A., Bonyhady, B., D'Aprano, A., Dimmock, K., & Imms, C. (2025). **Decision-Making Guide for the National Best Practice Framework for Early Childhood Intervention.** The University of Melbourne. Commissioned by the Commonwealth of Australia's Department of Social Services. https://www.health.gov.au/resources/publications/the-national-best-practice-framework-for-early-childhood-intervention-decision-making-guide

National Best Practice Framework for Early Childhood Intervention (2025). Department of Health, Disability and Ageing. https://www.health.gov.au/our-work/national-best-practice-framework-for-early-childhood-intervention

National Child & Family Hubs Network (2025). **Harnessing Hubs to Realise the Vision of Thriving Kids**. Parkville, Victoria: National Child & Family Hubs Network, Murdoch Children's Research Institute. https://www.childandfamilyhubs.org.au/media/fcfmb4vl/ncf-hn_thriving-kids-brief_da4.pdf

National Scientific Council on the Developing Child (2023). **Place Matters: The Environment We Create Shapes the Foundations of Healthy Development.** NSCDC Working Paper No. 16. Cambridge, Massachusetts: Centre on the Developing Child, Harvard University. https://harvardcenter.wpenginepowered.com/wp-content/uploads/2023/03/HCDC_WP16_R2A.pdf

Productivity Commission (2011). **Disability Care and Support. Productivity Commission Inquiry Support: Overview and Recommendations.** Melbourne, Victoria: Productivity Commission. http://www.pc.gov.au/__data/assets/pdf_file/0014/111272/disability-support-overview-booklet.pdf

Productivity Commission (2024). **A path to universal early childhood education and care, Inquiry report no. 106, Vol. 1.** Canberra, ACT: Productivity Commission. https://www.pc.gov.au/inquiries-and-research/childhood/report/

Productivity Commission (2025). **Delivering quality care more efficiently.** Inquiry report no. 112. Canberra, ACT: Productivity Commission. https://assets.pc.gov.au/2025-12/quality-care.pdf

PRECI (2024). **Foundational supports for young children with developmental concerns, delays or disability, and their families: Discussion Paper.** Professionals and Researchers in Early Childhood Intervention (PRECI). https://www.preci.org.au/wp-content/uploads/2024/08/PRECI-Foundational-supports-discussion-paper.pdf

Social Ventures Australia (2025). **The impact of Early Childhood Hubs: evidence summary.** Melbourne, Victoria: Social Ventures Australia. https://www.socialventures.org.au/wp-content/uploads/2025/10/Impact-of-ECHs_evidence-summary_17-Oct25.pdf

Thriving Kids Advisory Group (2025). **Thriving Kids Advisory Group Final Report.** Canberra, ACT: Department of Health, Disability and Ageing. https://www.health.gov.au/resources/publications/thriving-kids-advisory-group-final-report

Woolcock, K., Gregg, J. and Groth, A. (2025). **Policy alignment for place-based solutions for better health outcomes in rural and remote communities.** Deeble Institute Perspective Brief 34. Deakin, ACT: Australian Healthcare and Hospitals Association. https://ahha.asn.au/resource/policy-alignment-for-place-based-solutions-for-better-health-outcomes-in-rural-and-remote-communities/

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